Appendix

SKMC Policy for the Clinical Supervision of Medical Students

Purpose
This policy statement has been developed to assist clinicians at Sidney Kimmel Medical College (SKMC) at Thomas Jefferson University and its affiliated hospitals in the supervision of medical students. In its efforts to ensure effective learning, professionalism, and quality patient care, SKMC has developed the following policy statement with the goal of providing guidance for faculty physicians and residents when supervising medical students in clinical learning contexts. To this effect, the following statement defines the graded supervision of medical students by faculty physicians in clinical environments at all sites where medical students rotate and/or participate in learning activities throughout all four years of medical training.

The Clinical Learning Environment
In its effort to uphold the ethical standards and professional values of the medical profession, the Thomas Jefferson University community is committed to bringing the core values outlined by the American Medical Association (i.e., advocacy, leadership, excellence, and integrity) to its clinical learning environments for undergraduate medical student education. Appropriate, adequate, graded, and progressive faculty supervision in clinical learning environments at SKMC and its affiliated sites will provide for the efficacious guidance, observation, and assessment of students’ clinical activities.

It is the responsibility of the supervising faculty member to ensure policy standards are followed for all students participating in clinical rotations. It is also expected that supervising faculty will provide for a learning environment that is free from mistreatment, including, but not limited to, exploitation of the power differential in the faculty-student relationship; intimidation; harassment (i.e., physical, emotional, or sexual); embarrassment; and humiliation.

Supervision: Definition and Roles
Medical students participating in patient care must be supervised at all times. It is understood that the primary supervising physician will be an attending physician employed by Thomas Jefferson University (TJU) or a volunteer/affiliated/community attending physician provider with a SKMC faculty or adjunct faculty appointment, practicing within the scope of his/her discipline as delineated by the credentialing body of the physician’s respective clinical site and/or department. Faculty supervising medical students will have their credentials verified by the Office of Faculty Records of SKMC at the time of their initial faculty appointment.

During instances in which a medical student is participating in a clinical setting where resident/fellow physicians or other healthcare professionals are actively involved in medical student education, it is the responsibility of the supervising faculty physician to assure all personnel are appropriately prepared for their roles for teaching and supervision of medical students within the scope of their practices. When the attending physician is not physically present in the clinical area, the responsibility for supervising
medical students will be delegated to the appropriately-prepared resident/fellow physician at the discretion of the primary attending physician.

It is expected that supervising physicians will be involved in the education of medical students. Supervising faculty will set a model of professionalism, collegiality, compassion, and quality cost-conscious care; demonstrate an ethical approach to patient care and health delivery; maintain professional relationships with medical students and all members of the clinical team; and uphold the SKMC Code of Professional Conduct.

Clinical supervision is designed to foster progressive responsibility. Supervision will be based on the medical student’s level of training, demonstrated competence, and the objectives for the clinical experience.

**Supervision During Clinical Experiences**

The amount of supervision required for each medical student will vary according to the circumstance of each clinical encounter, and will be commensurate with the level of training, education, and experience of the student that is involved with the patient’s care. Course directors and clerkship directors will provide specific guidance for each clinical experience, including the student’s level of responsibility and scope of approved activities and procedures that are permitted and/or expected during the rotation. Faculty and clinical preceptors will have SKMC Competencies, rotation-/experience-specific objectives, supervisory recommendations, and access to educational resources, including assessment instruments. Resources will be emailed to faculty prior to the start of the medical student’s clinical experience, and will also be available remotely on New Innovations.

To facilitate student education, supervising physicians are expected to provide opportunities for students to demonstrate ownership for patient care responsibilities; these opportunities may be in the form of taking patient histories; performing complete and/or focused physical examinations; reporting and entering findings in the patient’s medical record with the explicit approval of the patient’s supervising attending physician. The supervising physician will be responsible for reviewing student documentation, countersigning progress notes, and providing constructive feedback.

Supervising physicians, faculty or residents, must provide medical students with regular, periodic, timely, and specific [reinforcing and/or redirecting] feedback. The clerkship or course director will be expeditiously contacted if there is concern for any potential academic and/or professional gaps in student performance. Should there be any concern regarding clinical, administrative, professional, educational, or safety issues during their rotation, students will be encouraged to immediately contact the supervising physician, clerkship/course director, or Dean for Student Affairs.

**Graded Responsibility of Medical Students**

Clinical supervision of medical students is designed to foster progressive responsibility across the four years of training.

- **MS-1 and MS-2 Students:** In the clinical setting, first- and second-year medical students will be directly supervised with the supervising physician present or with the supervising physician immediately available. Under the direct supervision of the supervising physician, first- and second-year students may participate in history taking, physical examinations, critical data analysis and disposition, and may have access to the medical record.

- **MS-3 and MS-4 Students:** Third- and fourth-year medical students will be directly supervised with the supervising physician available. Students may participate in the care and management of patients, including procedures (discussed below), under the auspices/direct supervision of the supervising physician at all times with patient permission. Findings may be noted in the medical record by third- and fourth-year medical students only with the approval of the patient’s supervising physi-
It is the responsibility of the supervising physician to review medical student documentation, and provide feedback for educational purposes. Clinical interventions are never to be executed by medical students without a supervising physician's awareness and permission.

**Procedural Supervision**

Medical student participation in invasive and non-invasive procedures requires direct supervision by the supervising attending physician or credentialed resident physician at all times of the procedure. The supervising physician must have the privileges and authorization to perform the procedure being supervised. According to standard protocol, patient consent must be obtained prior to the procedure. In addition, assisting in procedures may only be performed when the supervising attending physician agrees that the student has achieved the required level of competence, maturity, and responsibility to perform the procedure. Occasionally, the student may perform first-assistant duties when judged competent by the attending physician, and permission is granted by the patient.

**Faculty Recusal from the Supervisory Role**

A SKMC faculty physician who provides medical and/or psychiatric care, psychological counseling, or other sensitive health services to a medical student must recuse himself/herself from the supervisory role. In such cases, the faculty physician must have no involvement in assessing or evaluating the medical student’s academic performance, or participate in decisions regarding his/her promotion and/or graduation. Medical student privacy is to be preserved at all times.

The faculty physician and the medical student are advised to immediately contact the appropriate clerkship/course director and/or Dean for Student Affairs should the potential for this conflict of interest arise.