

# Policy - Supervised Clinical Practice

**Origin Date:** January 14, 2014

**Last Evaluated:** April 2019

**Responsible Party:** Program Director

**Minimum Review Frequency:** Annually

**Approving Body:** Principal Faculty

**DPAS Associated Forms:**

- Institution/Facility Affiliation Agreement
- Expectations for Supervised Clinical Practice Experiences
- Practice Profile
- Preceptor Profile
- Clinical Site Visit
- Follow up Site/Preceptor Evaluation
- Mid-rotation Evaluation
- Mid-rotation Evaluation of Preceptor/Clinical Site
- Student Evaluation of Preceptor/Clinical Site
- Clinical Performance Evaluation
- Student Clinical Practice Passport

**ARC-PA Associated Standards:**

- **A1.02** - There must be written and signed agreements between the PA program and/or sponsoring institution and the clinical affiliates used for supervised clinical practice experiences that define the responsibilities of each party related to the education program for students.  
*ANNOTATION: Agreements typically specify whose policies govern and document student access to educational resources and clinical experiences. While one agreement between the sponsoring institution and clinical entity to cover multiple professional disciplines is acceptable, these agreements include specific notations acknowledging the terms of participation between the PA program and clinical entity.*
- **A1.03g** - The sponsoring institution is responsible for addressing appropriate security and safety measures for PA students and faculty in all locations where instruction occurs.
- **A1.11** - The sponsoring institution must support the program in securing clinical sites and preceptors in sufficient numbers for program-required clinical practice experiences.
- **A2.16** - All instructional faculty serving as supervised clinical practice experience preceptors must hold a valid license that allows them to practice at the clinical site.
- **A2.17** - In each location to which a student is assigned for supervised clinical practice experiences, there must be an instructional faculty member designated by the program to assess and supervise the student's progress in achieving learning outcomes.  
*ANNOTATION: The program is expected to inform students at each location which instructional faculty member is serving in this role for the location and how to contact this faculty member.*

- **A3.03** - Students must not be required to provide or solicit clinical sites and preceptors for program required rotations.  
*ANNOTATION: The coordination of clinical practice experiences involves identifying, contracting and evaluating sites and preceptors for suitability as a required or elective rotation experience. Students may make suggestions to principal faculty for sites and preceptors, but are not required to do so. Student-suggested sites and preceptors are to be reviewed, evaluated, and approved for educational suitability by the program.*
- **B1.10** - The program should orient instructional faculty to the specific learning outcomes it requires of students.  
*ANNOTATION: Program and principal faculty need to work collaboratively with instructional faculty in designing courses with appropriate learning outcomes and student assessment tools that reflect the learning outcomes expected of students.*
- **B3.01** - PA students must be clearly identified in the clinical setting to distinguish them from physicians, medical students and other health profession students and graduates.
- **B3.02** - Supervised clinical practice experiences must enable students to meet program expectations and acquire the competencies needed for clinical PA practice.  
*ANNOTATION: It is anticipated that the program expectations of students will address the types of patient encounters essential to preparing them for entry into practice. It is required that at a minimum these will include preventive, emergent, acute, and chronic patient encounters.*
- **B3.05** - Instructional faculty for the supervised clinical practice portion of the educational program must consist primarily of practicing physicians and PAs.
- **B3.06** - Supervised clinical practice experiences should occur with:
  - (a) physicians who are specialty board certified in their area of instruction,
  - (b) PAs teamed with physicians who are specialty board certified in their area of instruction or
  - (c) other licensed health care providers experienced in their area of instruction.
- **B3.07** - Supervised clinical practice experiences should occur with preceptors practicing in the following disciplines: family medicine, internal medicine, general surgery, pediatrics, ob/gyn, and behavioral and mental health care.  
*ANNOTATION: PA education requires a breadth of supervised clinical practice experiences to help students appreciate the differences in approach to patients taken by those with varying specialty education and experience. SCPE used for required rotations are expected to address the fundamental principles of the above disciplines as they relate to the clinical care of patients. Subspecialists serving as preceptors might, by advanced training or current practice, be too specialty focused to provide the fundamental principles for required rotations in the above disciplines. Reliance on subspecialists as preceptors for required rotations in the above disciplines is contrary to the intent of this standard.*
- **C4.01** - The program must define, maintain and document effective processes for the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences to ensure that sites and preceptors meet program defined expectations for learning outcomes and performance evaluation measures.  
*ANNOTATION: An effective process or processes involves the program establishing criteria by which to initially evaluate new sites and preceptors as well as those that have an ongoing relationship with the program. The process(es) will focus on the established criteria and fit the individual program.*
- **C4.02** - The program must document that each clinical site provides the student access to physical facilities, patient populations and supervision necessary to fulfill program expectations of the clinical experience.  
*ANNOTATION: Site evaluation involves program faculty monitoring the sites used for supervised clinical practice experiences, and modifying them as necessary, to ensure the expected learning outcomes will be met by each student by program completion. It is expected that faculty document that differences in clinical settings do not impede the overall accomplishment of expected learning outcomes. Documentation shows that preceptors are providing observation and supervision of student performance while on supervised clinical practice experiences and that they are providing feedback and mentoring to students.*

## Background and Purpose

The Supervised Clinical Practice Experience (SCPE) portion of the PA curriculum is designed to provide meaningful direct patient care experiences working in a variety of clinical practice environments that allow students an opportunity to apply the extensive knowledge base developed during the didactic year. This will ensure an optimal clinical education experience for HPU PA students, ultimately preparing them for certification and professional practice. The purpose of this policy is to articulate the boundaries with which students may participate in the process of establishing supervised clinical practice experiences and define program expectations and processes for advancement to, recruitment of, and evaluation and approval of clinical sites and preceptors.

## Policy Statement

### **In compliance with the ARC-PA standards, High Point University Department of Physician Assistant Studies:**

- Requires a formal affiliation agreement be established with any clinical site or preceptor involved in providing a SCPE for students enrolled in the program.
- Does not require students to provide or solicit clinical sites or preceptors and does not require students to coordinate clinical sites and preceptors for program required SCPEs.
- Permits students to submit requests to develop new sites to the Director of Clinical Education, who then determines the appropriateness of developing the site.
- Coordinates all activities associated with clinical practice experiences including identifying, contacting, initial and ongoing evaluation of the suitability of, and student placement with clinical sites and preceptors.

## Supervised Clinical Practice

### **1. Requirements for Student Progression to Clinical Phase**

- Successful completion of all didactic courses as described in the “Requirements for Progression” section of the “Academic Performance, Professionalism, and Progression” policy.
- Successful completion of the Introduction to Clinical Education course.
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- Completion and successful passing of drug screening and background checks when required by clinical sites. Any associated fees will be incurred directly by the student.
- Proof of updated immunizations, which includes repeat TST (PPD) or Quantiferon test prior to the start of clinical rotations and annual influenza vaccination.
- Successful completion of Basic Life Support (BLS) for Healthcare Providers course with current certification.
- Successful completion of Advanced Cardiovascular Life Support (ACLS) course with current certification.
- Signed Health Information Release form by student allowing High Point University Department of Physician Assistant Studies to maintain and release the following information to clinical rotation sites: immunizations, TB screening status, drug screening, background check, and BLS/ACLS certification
- Proof of Health Insurance coverage.
- Proof of Professional Liability Insurance: This is provided by High Point University and will cover students on University business (e.g. clinical education assignments). This will not cover

students while employed or working external to the clinical rotation sites.

## 2. Clinical Rotation Scheduling

- All students will be scheduled to complete seven mandatory “core” rotations and two elective rotations, all rotations being five (5) weeks in length, in order to meet program experiential learning expectations as defined in the SCPE Patient Exposure Policy. Students will be allowed to participate in two elective rotations to pursue further training in key areas of interest or may be program-assigned to remediate their area(s) of limited exposure to required experiences. The core rotations include:
  - 1) Family Medicine
  - 2) Inpatient Medicine
  - 3) Emergency Medicine
  - 4) General Surgery
  - 5) Pediatrics
  - 6) Women’s Health
  - 7) Behavioral Medicine
- Students are allowed to submit requests for specific clinical sites and/or preceptors. However, while every attempt is made to accommodate student requests, rotation assignment is done by and at the sole discretion of the Clinical Coordinator and/or Director of Clinical Education subject to approval and availability of the Preceptor/Clinical Site.
- Students are not allowed to request or participate in a rotation at a clinical site associated with a family member, friend or any other person who may be influenced by factors other than clinical performance of the student.
- Students may be required to attend rotations at sites outside of the Piedmont Triad area, and are responsible for arranging lodging for all out-of-town rotations and all expenses associated with meals, transportation and parking.

## 3. Student Orientation to Clinical Experiential Learning – Policies

- Identification as students in clinical settings:
  - Students will **ALWAYS** introduce themselves to patients, patient family members and clinical site staff by stating their full name and position/title – “*physician assistant student.*”
  - Students will wear a short white lab coat emblazoned with the High Point University Department of Physician Assistant Studies logo during all assigned rotation activities unless wearing the coat is inappropriate based upon the activity being performed (e.g. operating room) or at the discretion of the Preceptor.
  - Students will wear the High Point University Department of Physician Assistant Studies student identification name badge whenever they are participating in PA professional activities (e.g. health fairs, community service opportunities, etc.) and particularly whenever they are in a health care facility, clinic or physician office in their official capacity as a student of the PA program. If a clinical education site requires a different type of ID badge, the designated badge will be worn as directed by the clinical site but must include clear identification of the “student” role.
- Dress code: Students will dress and present themselves in a professional and appropriate manner for the clinical rotation to which they are assigned. Students should discuss the appropriate dress code with the assigned preceptor or clinical site coordinator. In situations where the rotation or preceptor mandates no specific dress code, students will dress according to the High Point University Department of Physician Assistant Studies dress code defined in the HPU DPAS Dress Code Policy and included in the Student Handbook.

- **Required Documentation:** It is the students' responsibility to complete the documentation required for each SCPE and return to the Clinical Education Specialist **NO LESS THAN 10 DAYS PRIOR TO THE START DATE**. Failure to complete and return the required documentation related to each SCPE may result in the student **NOT** being allowed to participate in that SCPE and thus, delaying their date of graduation.
- **Student Attendance on Clinical Rotations:** Students are required to be present at the clinical site a minimum of 150 clinical hours for each rotation. More hours may be required by individual clinical sites and preceptors, but should not exceed 80 hours per week. Please refer to the Student Attendance, Participation and Inclement Weather Policy within the Student Handbook for further detail regarding attendance expectations for clinical rotations.

#### 4. **Learning outcomes**

- The program-defined learning outcomes serve as the culminating learning outcomes that must be demonstrated with formal assessment activities during or upon completion of the supervised clinical practice experiences. Each individual rotation has rotation specific learning objectives that must be satisfactorily demonstrated during or upon completion of that rotation. Refer to the Rotation Specific SCPE syllabi. Each clinical site is provided with a Preceptor Handbook which includes the Rotation specific syllabi as well as Program Policies and Procedures to help guide student learning and support the attainment of program expectations and learning outcomes by students.

#### 5. **Assessment**

- Assessment of Supervised Clinical Practice Experiences includes the following:
  - End-of-Rotation Examinations:
    - PAEA Specialty Subject Exam at conclusion of Core SCPEs
  - Rotation Specific Assignment/Assessment
  - Completion and submission of all clinical data, via the EXXAT system, including, but not limited to:
    - Patient demographics
    - Patient clinical information
    - Clinical activity time logs
  - Submission of End of Rotation Clinical Performance Evaluation, Clinical Site/Preceptor Evaluations and Mid-Rotation Evaluations for each SCPE.

Refer to Rotation specific syllabi for full details of assessment for the SCPEs.

#### 6. **Monitoring of Student Progress**

- As defined in the SCPE Rotation Specific syllabi, students are required to complete specific rotation course requirements including logging of ALL clinical practice experiences and submission of rotation-related written assignments. Refer to the Student Clinical Rotation Manual for further detail regarding expectations for student logging on SCPEs.
- The program-designated clinical team member will be responsible for monitoring student submission/completion of these requirements and progress toward achieving the program-defined SCPE experiences.
- The designated SCPE preceptor and the clinical faculty will also monitor student conduct and professionalism throughout the rotation. If a preceptor reports issues with student conduct, then the student will need to meet with a clinical faculty member to discuss these issues. Depending on the nature of the issue, the student may be required to present before the Student Progress Committee.

- In the event a preceptor suspects that a student is participating in a rotation under the influence of any substance that affects their clinical performance, High Point University Department of Physician Assistant Studies reserves the right to remove the student from the rotation, perform an investigation of the matter, and work with its contracted vendor to perform a drug test on the student at the student's expense. Student return to rotation will be determined pending the decision rendered by the Student Progress Committee.

## 7. **Determination of Rotation Grade**

- As defined by program policy, all clinical rotations are graded on a high pass/pass/fail system. Refer to the SCPE Rotation Specific Syllabi and/or Academic Performance, Professionalism and Progression Policy for details about criteria defining requirements for a passing grade.
- The program retains full authority for determination and assignment of the student's SCPE course grade.

# Clinical Sites

## 1. **Recruitment**

- With the support of High Point University, the Department of Physician Assistant Studies assumes responsibility for the recruitment of clinical sites and preceptors in sufficient numbers for the program-mandated supervised clinical practice experience component of the curriculum.
- Students will not be required to provide preceptors or clinical sites for the program mandated clinical experiential learning component of the program.
- Students may voluntarily submit to the clinical faculty the name(s) of potential preceptors and/or clinical sites not already affiliated with High Point University Department of Physician Assistant Studies; however, there is no direct or implied guarantee on the part of the program that the student will be assigned a rotation with any requested preceptor or clinical site, including those already affiliated with the program. It is ultimately up to the Clinical Team to decide whether the preceptor and clinical site are deemed appropriate for use in Supervised Clinical Practice Experiences.

## 2. **Program Requirements**

- Clinical Sites must meet all program-defined expectations for clinical training sites (see evaluation section below)
- All clinical sites must establish a formal Affiliation Agreement with the program.

## 3. **Evaluation**

Initial:

- Completion of a Practice Profile form. This form is initiated by the clinical team in communication with a prospective clinical site representative.
- Completion of the Practice Profile form will be used to validate and verify that the clinical site has sufficient resources (work space, patient exam rooms, references, support personnel, patient encounters of the designated specialty content) to provide broad experiential learning opportunities in a safe environment in the corresponding clinical practice area (e.g. family medicine, general surgery, etc.) for which the physician assistant student will be assigned at that site.
- Clinical faculty review of the prospective clinical site's Practice Profile as one component in the evaluation of a suitable clinical training site for students to fulfill curriculum-mandated SCPEs.

Ongoing:

- Formal site visit occurs for all active clinical sites at least every 2 years. Documentation includes an assessment of the clinical site, focusing on any significant changes of/within the facility since prior evaluation and is documented on the Follow-up Clinical Site/Preceptor Evaluation form. Continued clinical site evaluation of all active clinical sites occurs on an on-going basis through review of Mid-Rotation Evaluation and Student Evaluation of Preceptor/Clinical Site Form.
- Review of Student Evaluation of the Preceptor/Clinical Site Form to ensure no ratings of “Below Average” (or worse) have been received. In the event a rating of “Below Average” or worse has been received, the program will investigate the situation to ascertain and document the suitability of continued use of the clinical site.
- Review of the number and types of patient encounters students report having at the clinical site (recorded in EXXAT) to validate the experiential learning meets defined program expectations (see SCPE Patient Exposure policy).
- Review of the numbers and types of technical/clinical skills procedure experiences students report having at the site (recorded in EXXAT) to verify students are provided opportunities to develop the program-defined technical skills as described in the SCPE Syllabi.
- Concerns with clinical sites based on ongoing site evaluations, student evaluations, review of patient encounters, and/or review of clinical procedure experiences will be cause for re-evaluation of the clinical site by the Clinical Team to determine suitability of continued use of the clinical site. The Clinical Team may consider the following actions: conducting a site visit prior to the next student experience at the site, conducting a site visit in conjunction with the next student placement, telephone and/or email contact with the preceptor and/or office manager, or removal of the clinical site from program use. Clinical Sites will be modified as necessary to ensure the expected learning outcomes will be met by each student by program completion.

#### **4. Responsibilities**

- Provide student orientation which addresses, at a minimum:
  - Use and access to local resources including facilities, computers, and internet.
  - Clinical site patient care practices including identifying which patients students are allowed to see.
  - Safety issues including exposure to hazardous materials, exposure control, and procedures to be followed in event of exposure.
  - Access to/use of patient health records and medical documentation policies and procedures.
  - Student’s schedule.
- Immediate notification of the program if/when:
  - Student behavior/performance is judged to create risk for the clinical site or its patients.
  - The site determines it will be unable to provide a previously agreed upon student rotation/clinical experience.

## **Preceptors**

### **1. Program Requirements**

- Health Care Providers: Preceptors will consist primarily of practicing Physicians and Physician Assistants in the following disciplines for the core rotations: family medicine, internal medicine, general surgery, pediatrics, women’s health, emergency medicine, and behavioral medicine. Physicians and Physician Assistants practicing in various subspecialties may be utilized for SCPE elective rotations. Other licensed health care providers experienced in their area of instruction may be designated as preceptors for supervised clinical practice experiences (SCPEs), as the Program deems necessary and appropriate.
- Licensure: Providers approved as preceptors must be licensed within the state in which they will be providing SCPEs for program students. The program will verify licensure status at the time of

initial preceptor evaluation via [www.ncmedboard.org](http://www.ncmedboard.org) or respective state medical board for out-of-state providers, and again when the certification is due to expire, to confirm license renewal as long as the provider remains an active preceptor for the Program.

- Specialty Certification: Physician preceptors should be ABMS or AOA board certified in the specialty for which they are providing SCPE for program students. Physician assistant preceptors must be supervised by physicians who are board certified in the specialty for which the physician assistant is providing SCPE for program students. The physician assistant preceptor must be board certified through NCCPA. Specialty board certification of physician preceptors or supervising physicians for PA preceptors will be confirmed by the program at the time of initial evaluation of the potential preceptor via [www.BoardCertifiedDocs.com](http://www.BoardCertifiedDocs.com) and annually when verifying state licensure as long as the provider remains an active preceptor for the program.
- Signature of Preceptors to verify they have become familiar with program-defined Supervised Clinical Practice Experience expectations and learning outcomes through review of the HPU DPAS Preceptor Handbook and Rotation syllabi provided to each preceptor prior to student experiences with that provider. Updates and revisions to the HPU DPAS Preceptor handbook and Rotation Syllabi will be provided to Preceptors as they occur in the form of an Addendum.

## 2. Evaluation

### Initial:

The Clinical Team reviews prospective site and preceptor information to establish approval of the preceptor as a Clinical Instructional Faculty member for program mandated SCPEs.

Review involves the following:

- Verification and documentation of:
  - Current licensure in the state in which the preceptor will be providing the SCPE, NCCPA certification for PAs ABMS or AOA specialty board certification for Physicians
- Completion of Preceptor Profile Form.
  - The clinical preceptor or their designee fills out the Preceptor Profile Form and submits it to the Clinical Team for review. Following review, if a prospective preceptor, and the associated site as evaluated above, is still being considered, a formal site visit occurs to the primary practice location, when located within a 50-mile radius. The Clinical Team verifies the Preceptor's clinical practice workload, types and numbers of patients seen, and preceptor understanding of program expectations and learning outcomes. Assessment of Preceptors outside of a 50-mile radius may utilize on-site, mail, email, telephone, video telecommunication or any combination of these for verification and approval of the Preceptor Profile Form.

### Ongoing:

Program expectations for learning outcomes and performance evaluation measures are provided to all clinical sites and preceptors through a process of ongoing performance reviews. Reviews incorporate adherence to program expectations with regard to student outcomes as well as informing sites and preceptors of programmatic changes related to these expectations. The following process is in place:

- All sites and preceptors are provided an updated Clinical Preceptor Handbook on an annual basis that is available electronically. Hard copies are provided as well if preferred by the clinical site or preceptor. Sites and preceptors are provided updated information if and when changes are made during the clinical year.
- Follow up preceptor and clinical site evaluations are conducted at a minimum of every two years in the following way:

- A member of the Clinical Team conducts on-site visits for sites located within a 50-mile radius of the program to monitor the on-going quality of clinical sites and maintain strong relationships with preceptors.
- Documentation of follow up site/preceptor evaluation includes any significant changes of/within the facility and any significant changes in the preceptor's practice and/or availability since prior evaluation and is included within the Follow-up Clinical Site/Preceptor Evaluation form. These visits also serve as an opportunity to address program expectations and changes thereof.
- The Clinical Team provides ongoing review of Student Evaluation of the Clinical Site/Preceptor to ensure no ratings of "Below Average" (or worse) have been received.
  - In the event a rating of "Below Average" is received, a member of the Clinical Team evaluates the reason for the rating to ascertain and document the suitability of continued use of the clinical site or preceptor.
- The Clinical Team provides ongoing review of the number and types of patient encounters students report having at the clinical site (recorded in EXXAT) to validate the experiential learning meets defined program expectations.
- The Clinical Team provides ongoing review of the numbers and types of technical/clinical skills procedure experiences students report having at the site (recorded in EXXAT) to verify students are provided opportunities to develop the program defined technical skills defined in the SCPE Syllabus.
- Concerns with clinical sites and/or preceptors based on ongoing site/preceptor evaluations, student evaluations, review of patient encounters, and/or review of clinical procedure experiences is cause for re-evaluation of the clinical site/preceptor by the Clinical Team to determine suitability of continued use of that site/preceptor. The Clinical Team may consider the following actions:
  - Conducting a site visit prior to the next student experience at the site
  - Conducting a site visit in conjunction with the next student placement
  - Telephone or email contact with the preceptor and or office manager
  - Removal of the clinical site and/or preceptor from program use.
  - Follow up Clinical Site/Preceptor Evaluations are performed every two years for all active clinical sites. These evaluations focus on changes since the last visit, safety and security, and facility adequacy to ensure a supportive learning environment. Sites are visited more frequently when specific concerns regarding a clinical site or preceptor arise. In these cases the Clinical team reviews the concern as documented in C4.01. Sites identified as having deficiencies in physical facilities or supervision are visited by a member of the Clinical Team to ensure that each concern is remediated prior to subsequent student placement. The visits are documented by completion of the Follow-up Clinical Site/Preceptor Evaluation form.

High Point University DPAS maintains open communication with students and preceptors. Students and Preceptors are encouraged to relay any concerns or issues (via telephone, e-mail, or in person) to a member of the Clinical Team promptly so that they can be addressed in a timely manner.

### **3. Preceptor Responsibilities**

- The High Point University Department of Physician Assistant Studies will designate at least one Clinical Instructional Faculty member (i.e. preceptor) at each clinical site. For each clinical practice rotation, students will be provided contact information for the designated Clinical Instructional Faculty member responsible for oversight of the student's clinical practice experience in that rotation.

- Clinical Instructional Faculty are responsible for assessment and supervision of a student's progress in achieving learning outcomes while the student is assigned to that clinical site/rotation. Specific responsibilities include assuring:
  - Student orientation to the site/rotation.
  - Opportunities for active patient care experiences.
  - Completion (and submission to the program) of the mid-rotation and end-of-rotation Clinical Performance Evaluations.
- At the beginning of each student's clinical rotation - share goals, learning objectives and outcomes for the clinical practice experience with the student in an effort to devise a plan for attainment of these.
- Provide students with opportunities to provide supervised direct patient care and clinical skills/procedural experiences.
- Provide early and frequent feedback to students regarding their clinical performance and ways they might improve their performance.
- Verify and document that students have acquired program-defined competencies needed for entry-level proficiency in clinical practice if demonstrated during the rotation through appropriate completion of the Student Clinical Practice Passport.
- Perform a mid-rotation student evaluation to provide the student with feedback concerning their performance up to that point and review progress toward fulfilling their rotation goals.
- Complete the end-of-rotation Clinical Performance Evaluation of the student and return to the program either electronically via EXXAT or in a sealed envelope with signature across the seal.

#### **4. Clinical Instructional Faculty (Preceptor) Development**

##### **Initial:**

- All preceptors are provided with electronic or printed copies of the program's Preceptor Handbook, SCPE Rotation-specific syllabi and Program Policies and Procedures to orient them to program curriculum and instructional design, student clinical practice experience expectations and program-defined learning outcomes.
- Copies of required documentation related to the student rotation are also included within the Preceptor Handbook for review/discussion.

##### **Ongoing:**

- During clinical site visits, preceptors are asked for ideas and/or suggestions for improvement of clinical practice experiences for both the preceptors and students. As these are identified, the Clinical Team compiles the information to be shared with all Clinical Instructional Faculty/Preceptors as appropriate.
- When student evaluations of a preceptor identify a specific need for improvement, the clinical faculty works with the individual preceptor to create an individualized faculty development plan to address that need.

## Documentation

Record keeping processes for the aforementioned documents/forms are described in the Program Files policy.

**Approved by:** Principal Faculty

**Modified:** February 2015, March 2016, May 2016, September 2016, April 2017, April 2018, April 2019

**Next Review:** Spring 2020