

HIGH POINT UNIVERSITY
THE PREMIER LIFE SKILLS UNIVERSITY

Master of Physician Assistant Studies

Policy - Supervised Clinical Practice

Origin Date: January 14, 2014

Last Evaluated: March 2026

Responsible Party: Program Director

Minimum Review Frequency: Annually

Approving Body: Principal Faculty

MPAS Associated Forms:

Clinical Accommodations and Reimbursement Form

Clinical Rotation Accommodations Reimbursement and Repayment Process Institution/Facility Affiliation Agreement

Institution/Facility Out-of-State Affiliation Agreement

Health Information Release Form

SCPE Expectations Form

Practice Profile

Preceptor Profile

Site-Preceptor Follow-up Evaluation Form

Mid-rotation Evaluation

Mid-rotation Evaluation of Preceptor/Clinical Site

EOR Site-Preceptor Evaluation Form

BM Clinical Performance Evaluation Form

EM Clinical Performance Evaluation Form

Elective Clinical Performance Evaluation Form

FM Clinical Performance Evaluation Form

Inpatient Clinical Performance Evaluation Form

International Elective Clinical Performance Evaluation Form

Peds Clinical Performance Evaluation Form

Surgery Clinical Performance Evaluation Form

WH Clinical Performance Evaluation Form Professionalism Evaluation

Professionalism Point Deduction Scale

Student Clinical Practice Passport

Clinical MOL and Remediation form

ARC-PA Associated Standards:

A1.01 When more than one institution is involved in the provision of academic and/or clinical education, terms are clearly described and documented in a manner signifying agreement by the involved institutions. Signed affiliation agreement(s):

- a) define the rights and responsibilities of each party related to the educational program for students

- b) specify whose policies govern the student, including if certain program policies will be superseded by those at the clinical site
 - c) include the terms of participation for the PA program students
 - d) are signed by an authorized individual(s) of each participating entity
- A1.02** The sponsoring institution is responsible for:
- e) documenting security and personal safety measures for PA students, faculty and staff in all locations where instruction occurs,
- A1.10** The sponsoring institution:
- a) secures clinical sites and preceptors sufficient in number to allow all students to meet the program's learning outcomes for supervised clinical practice experiences
 - b) ensures that clinical sites and preceptors located outside of the United States are only used for elective rotations.
- A2.16** The supervised clinical practice experience (SCPE) instructional faculty consist of any of the following:
- a) PAs who hold or have held NCCPA certification
 - b) physicians who hold or have held board certification
 - c) advanced practice nurses who hold or have held board certification
 - d) no more than 10% other clinicians who are vetted by the program as qualified
- A2.17** In each location to which a student is assigned for didactic instruction or supervised clinical practice experiences, the program:
- a) informs the student of the name and contact information of the principal or instructional faculty member designated to assess and supervise the student's progress in achieving the course learning outcomes
 - b) orients all instructional faculty to specific course learning outcomes and their assessments
- A3.01** Program policies are published, readily available, and consistently applied to all students, principal faculty, staff, and the program director regardless of their location.
- A3.03** The program publishes, makes readily available, and consistently applies a policy that PA students do not substitute for or function as:
- a) instructional faculty
 - b) clinical or administrative staff
- A3.04** The program publishes, makes readily available, and consistently applies a policy that requires PA students to be clearly identified in the clinical setting to distinguish them from other health profession students and practitioners.
- A3.05** The program publishes, makes readily available, and consistently applies policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities that would place them at risk. Those policies:
- a) address methods of prevention
 - b) address procedures for care and treatment after exposure
 - c) clearly define financial responsibility
- A3.08** The program publishes, makes readily available to current and prospective students, and consistently applies a policy stating that PA students are not required to provide or solicit clinical sites or preceptors.
- A3.09** The program publishes, makes readily available to current and prospective students, and consistently applies policies based on current CDC health professionals' recommendations and applicable state or country mandates for:
- a) minimum immunization and health screening of students
 - b) international travel (for programs offering international curricular components)
- A3.18** – Student *health records* are confidential and not accessible to or reviewed by *program faculty* or staff, except for immunization and screening results, which may be maintained and released with the student's written permission.
- B3.01** The program ensures clinical students may achieve all SCPE learning outcomes by:

- a) securing a sufficient number of qualified preceptors and clinical sites
- b) limiting telehealth/telemedicine to no more than 50% of any individual SCPE, with the exception of behavioral health
- c) ensuring that no more than 20% of the total SCPE experiences for any individual student are conducted via telehealth/telemedicine experiences
- d) requiring in-person, direct patient care for all SCPEs, except for telehealth/telemedicine in behavioral health
- e) allowing behavioral health SCPEs to consist of up to 100% telehealth/telemedicine experiences, provided that all learning outcomes are met

B3.02 The program's process clearly documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students have access to:

- a) the physical facilities needed to meet the learning outcomes for the specific SCPE
- b) patient populations needed to meet the learning outcomes of the specific SCPE
- c) supervision

B3.03 Supervised clinical practice experiences must enable all students to meet the program's learning outcomes for:

- a) preventive patient encounters
- b) acute patient encounters
- c) chronic patient encounters

B3.04 Supervised clinical practice experiences occur in the following settings:

- a) emergency department, b) inpatient, c) outpatient, d) operating room.

B3.05 Supervised clinical practice experiences support the achievement of learning outcomes across the following domains:

- a) medical knowledge
- b) interpersonal skills
- c) clinical skills
- d) technical skills
- e) professional behaviors
- f) clinical reasoning and problem-solving abilities

B3.06 Preceptors for supervised clinical practice experiences enable students to meet program-defined learning outcomes for:

- a) family medicine
 - b) emergency medicine, including emergent care
 - c) internal medicine, including elderly patients
 - d) surgery, including pre-operative, intra-operative, and post-operative care
 - e) pediatrics, including care for infants, children, and adolescents
 - f) women's health, including prenatal and gynecologic care
 - g) behavioral and mental health care
- B4.01** The program conducts frequent, objective and documented evaluations of student performance to ensure students meet the program's learning outcomes for both didactic and supervised clinical practice experience components. The evaluations must:
- a) Align with what is expected and taught
 - b) Allow the program to identify and address any student deficiencies in a timely manner

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. See *Institution/Facility Affiliation Agreement* and *Institution/Facility Out-of-State Affiliation Agreement*.
- 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.
- 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 in accordance with the Student Health Policy, 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 Benchmarks and Clinical Practice Passport 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 or other program-identified deficiencies in knowledge or skill. The core rotations include:

- 1) Family Medicine
 - 2) Inpatient Medicine
 - 3) Emergency Medicine
 - 4) 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.
 - Students who choose to participate in rotations outside of the United States will be responsible for all expenses associated with the rotation. All rotations occurring outside of the United States will be considered elective rotations regardless of the medical specialty or setting.
 - The HPU Department of PA studies will assist with housing costs associated with program-mandated core rotations that occur beyond a commutable distance (typically, 50 Miles) from the University for up to \$1700 as defined in the *Clinical Rotation Accommodations Reimbursement and Payment Process form*. Students may not utilize these funds for other expenses such as travel or meals and are responsible for any housing fees that exceed the \$1700 limit or elective rotations. The definition of a commutable distance is at the discretion of the Program Chair.

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 MPAS 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, or by the date specified by the clinical site. Failure to complete and return the required documentation related to each SCPE may result in a professionalism concern and/or 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 course-specific learning outcomes that must be satisfactorily demonstrated 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 End of Rotation Exams at conclusion of Core SCPEs
 - End of Rotation Exams at conclusion of Elective SCPEs
 - Rotation Specific Assignment (Assignment guidelines and rubrics are available to students in the syllabi, the web-based student tracking system, and Blackboard courses.)
 - 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
 - Procedures/Clinical Skills logs
 - Professionalism Evaluation. See *Professionalism Evaluation* and *Professionalism Point Deduction Scale*.
 - Submission of End of Rotation Clinical Performance Evaluation, Clinical Site/Preceptor Evaluations and Mid-Rotation Evaluations for each SCPE. See *Mid-Rotation Evaluation Form*, *Mid-Rotation Student Evaluation of Site-Preceptor Form*, *EOR Site-Preceptor Evaluation Form*, *BM Clinical Performance Evaluation Form*, *EM Clinical Performance Evaluation Form*, *Elective Clinical Performance Evaluation Form*, *FM Clinical Performance Evaluation Form*, *Inpatient Clinical Performance Evaluation Form*, *International Elective Clinical Performance Evaluation Form*, *Peds Clinical Performance Evaluation Form*, *Surgery Clinical Performance Evaluation Form*, and *WH Clinical Performance Evaluation Form*

Refer to Rotation specific syllabi for full details of assessment for the SCPEs and MOL and Remediation Plans.

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 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/non-pass 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. Refer to the *Clinical MOL and Remediation form* for plans when an NP (non-pass) is obtained on any of the clinical assessments.
- 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 MPAS Program 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 or solicit 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. Initial Evaluation

- 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 (workspace, 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, 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.
- All clinical sites, including international clinical sites, undergo an initial site visit to verify accuracy of the Practice Profile and assess ability of the site to provide the students access to the physical facilities needed to meet the learning outcomes for the specific SCPE, access to patient populations needed to meet the learning outcomes of the specific SCPE and access to appropriate supervision.

Ongoing Evaluation:

- Formal site visits occur 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 *Site-Preceptor Follow-up Evaluation Form*. Continued clinical site evaluation of all active clinical sites occurs on an ongoing basis through review of *Mid-Rotation Evaluation* and *Student Evaluation of Preceptor/Clinical Site Form*.
- Review of the *EOR Site-Preceptor Evaluation Form* to ensure no ratings of overall "Below Average" rating (or worse) have been received. In the event an overall 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 and Clinical Procedure Benchmark 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 that 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 permitted 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

- SCPE instructional faculty, also known as preceptors, will consist primarily of practicing physicians and physician assistants in the following disciplines for the core rotations: family medicine, internal medicine, surgery, pediatrics, women's health, emergency medicine, and behavioral medicine. Clinicians in various subspecialties, experienced in their area of instruction may be utilized for SCPE elective rotations. Other licensed clinicians, experienced in their area of instruction, may be designated as preceptors for supervised clinical practice experiences (SCPEs), as the Program deems necessary and appropriate according to our vetting process. Our SCPE instructional faculty will consist of no more than 10% other licensed clinicians. Our SCPE instructional faculty will have at least 2 years of experience practicing in the SCPE discipline unless Clinical Faculty approve the SCPE instructional faculty as a preceptor based on additional vetting requirements.
- Licensure: Clinicians 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 and again when the licensure is due to expire, to confirm license renewal as long as the provider remains an active preceptor for the Program.
 - Physician and Physician Assistant preceptors: Licensure will be confirmed with the respective state medical board.
 - Nurse Practitioner preceptors: Licensure will be confirmed with the respective state nursing board.
 - Clinical Pharmacist Practitioner preceptor: Two licenses are required, Pharmacist and Clinical Pharmacist Practitioner. Licensure will be confirmed with the respective state pharmacy board.
- Certification:
 - Physician Preceptors: Physician preceptors should be currently or previously ABMS or AOA board certified in the specialty for which they are providing SCPE for program students. Specialty board certification of physician preceptors will be confirmed by the program at the time of initial evaluation of the potential preceptor via www.BoardCertifiedDocs.com and annually when verifying state licensure as long as the provider remains an active preceptor for the program. Physicians with current or previous board certification in a specialty different from the SCPE but completed a residency or fellowship in the SCPE specialty may be used at the discretion of the Clinical Faculty.
 - Physician Assistant Preceptor: The physician assistant preceptor must be or have previously held board-certified through NCCPA.
 - The Nurse Practitioner and Nurse Midwife Preceptor: The Nurse Practitioner and Nurse Midwife must be or have been board certified and their certification must be aligned with

their area of practice. If they are practicing in an area different from their certification, then the specialty certification of their Supervising Physician is verified.

- Other Clinicians:
 - Clinical Pharmacist Practitioners may serve as preceptors if they meet the following standards:
 - Provide a Collaborative Practice Agreement Attestation Form that outlines the CPP collaborative practice agreement made with their supervising physician which is signed by the CPP and their supervising physician.
 - Have two active licenses: Licensed by the Board of Pharmacy as a Pharmacist and licensed by the Board of Pharmacy as a Clinical Pharmacist Practitioner.
 - Have at least one of the following: Board Certification in pharmacotherapy, board certification in their area of specialty or at least 2 year's experience in their field of practice.
- Requirement for all preceptors: Signature of Preceptors to verify they have become familiar with program-defined Supervised Clinical Practice Experience expectations and learning outcomes through the review of the HPU MPAS Preceptor Handbook and Rotation syllabi provided to each preceptor prior to student experiences with that clinician. Updates and revisions to the HPU MPAS Preceptor handbook and Rotation Syllabi will be provided to Preceptors as they occur in the form of an Addendum. See *SCPE Expectations Form*.

2. **Initial Evaluation:**

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, ANCC, AANPCB, ABSNC, NCAA, AACN, PNCB, or NCC board certifications for Nurse Practitioners, AMCB board certifications for Nurse Midwives and BOP for Clinical pharmacist practitioners.
- 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 if located within a 50-mile radius of the program. A PA Faculty member 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, or those within a 50-mile radius who have visitation restrictions in place (as seen during the COVID-19 Pandemic) may utilize on-site, mail, email, telephone, video telecommunication or any combination of these for verification and approval of the *Preceptor Profile Form*.

Ongoing Evaluation:

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 for all *active* sites:
 - A member of the Clinical Team conducts on-site visits for sites located within a 50-mile radius of the program to monitor the ongoing quality of clinical sites and maintain strong relationships with preceptors. For all sites located beyond a 50-mile radius of the program, or those within a 50-mile radius who have visitation restrictions in place (as seen during the COVID-19 Pandemic) site visits may be conducted using an alternative method including, but not limited to, phone, video, or email.
 - 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 the prior evaluation and is included within the *Site-Preceptor Follow-up 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 overall ratings of "Below Average" (or worse) have been received. See *Mid-Rotation Evaluation of Preceptor/Clinical Site* and *EOR Site-Preceptor Evaluation Form*.
 - In the event an overall 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 B3.02. 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 *Site-Preceptor Follow-up Evaluation Form*.

High Point University MPAS program 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 a 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, April 2020 (updated ARC Standards), April 2021, April 2023 (updated clarified ARC Standards), March 2024 (updated ARC Standards), March 2025, March 2026 (updated HPU logo, updated ARC standards, added/updated associated forms)

Next Review: Spring 2027