



UNIVERSITY OF NEW ENGLAND
PHYSICIAN ASSISTANT PROGRAM

Policy & Procedure Manual

Effective Date June 1, 2015

A. Program Probation Policy

B. Policy #2015 -1

C. The University of New England Physician Assistant Program reserves the right to place any matriculated student on Program Probation. Program Probation is an internal policy utilized to facilitate the monitoring of students with academic and/or concerns regarding behavior. Probationary status implies the student is being monitored regarding either their academic progress or for behavioral/professional concerns.

The length of the probationary status is determined on a case-by-case basis and criteria for removal of the probationary status will be discussed with the student at time of initial placement on probation.

This action may be initiated by any faculty member and must be approved by the Program Director.

Students placed on probationary status are not eligible for participation in extra-curricular activities requiring a time commitment that may distract them from effectively managing the issues

precipitating placement on probationary status. Placement on program probation does not impact, in anyway, other probationary status within the University of New England.

D. Replaces or modifies Policy or Procedure: None

E. Annotations: None

F. References: None



**UNIVERSITY OF NEW ENGLAND
PHYSICIAN ASSISTANT PROGRAM**

Policy & Procedure Manual

Effective Date May 28, 2015

- A. Program Response to Student in Crisis Program Policy
- B. Policy #2015 -01
- C. The University of New England Physician Assistant Program will respond to self report of a student in crises or report of peer and/or university or community official in the following manner:
 - 1. Immediately make contact with the student.
 - 2. Arrange for two members of the faculty, or a faculty member and the program director to meet personally with the student as soon as possible.
 - 3. In cases involving threat to life or health of student, activation of community emergency services will occur.
 - 4. For cases in which there is no immediate threat to life or health of student, a faculty member will contact counseling services to arrange immediate assistance for the student and accompany the student to the counseling center. Faculty members will not participate in the counseling session unless asked specifically by the student to do so.

5. When appropriate, and with the student's permission, a peer will be identified to assist in support of the student.
6. Any action taken will be documented and placed in student file.
7. The UNE PA Program maintains a cell-phone with a faculty member at all times to be used for student crisis. The definition of a crisis is reviewed yearly with students.

D. Replaces or modifies Policy or Procedure: None

E. Annotations: None

F. References: None

UNE Physician Assistant Policy & Procedures for Didactic Exam Remediation August 2015

Purpose

The purpose of this protocol is to establish a clearly defined route of remediation for students to achieve a minimal score of seventy percent correct on any examination taken during the didactic year of the physician assistant program.

Background

Through analysis of student performance in previous cohorts it was determined that course failure was preceded by multiple exam failures throughout the semester. Although the program had established course remediation, no remediation existed for exam failure. Given the modular structure of courses within the curriculum, this led to the student having no opportunity to remediate content close to the time the content was delivered and correct deficiencies in fund of knowledge prior to suffering the cumulative effect of knowledge deficiency.

It is the goal of this remediation policy and procedure to provide the student with the opportunity to remediate content deficiencies in the immediate post module period, allowing progression through semester without deficit.

Exam Remediation Requirements

Upon receiving notification of exam failure by the Academic Coordinator the student is required to review his/her exam. The course coordinator or assigned lecturer will also review exam and determine topic areas of content requiring remediation. The student is responsible for reviewing the identified deficient topics either independently, or with the assistance of a Student Academic Success Center tutor. After review of the content, the student will meet with the course coordinator or assigned lecturer and another faculty member to proceed with an oral examination on the content.

Students must successfully complete seventy-five percent of the oral examination to be considered successfully remediated. Oral examinations may be composed of a minimal of four exam questions and up to as many questions as deemed necessary by the course coordinator.

A record of the remediation is entered into the student's file, secured in the Physician Assistant office.

Failure to achieve a minimal passing score of seventy-five percent correct on the oral examination will result in referral of the student to the Student Development Committee for review.

The exam remediation must occur prior to the next modular exam, or the next exam in any given course, with appropriate exceptions as determined by the course coordinator.

The initial examination grade remains the exam grade of record and is entered into the calculation for the final course grade.

Appeals:

Students may appeal the content of the oral examinations only. If the student feels as though the content identified by the course coordinator as needing remediation is inaccurate or that the oral questions used for reexamination were not appropriate a written appeal for review may be submitted to the program director within forty-eight hours of notification of exam failure.



**UNIVERSITY OF NEW ENGLAND
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Effective Date November 1, 2015

**A. Request for Clinical Rotation Site Development Submitted by Students
Program Policy**

B. Policy #2015 -3

1. The University of New England Physician Assistant Program allows students to submit a request for site development. The following apply to such requests.
 - a. The request must be made via standard form.
 - b. The form must contain accurate, up to date contact information in order to proceed through processing.
 - c. The site for which the student is requesting development must return all required program and University of New England documents before the deadline announced to students in November of each didactic year.
 - d. Failure of the requesting student to supply accurate information on the request for site development or failure of the site in development to return all completed documentation prior to

established deadline will negate the opportunity for submitting student to have a rotation assigned at that site.

- e. The student, by action of submitting request for site development, acknowledges that the delay mandated by having to wait on all supporting documents will diminish the number of rotation site possibilities available for student assignment, should the site fail to meet all requirements for development.
- f. Each student is limited to two requests for site development.
- g. Each request is only valid for one six-week clinical rotation.
- h. The University of New England Physician Assistant Program reserves the right to decline site development of any site that, through the development phase, is revealed to be unable to meet program established criteria that would ensure a meaningful and robust student experience.
- i. It is expected that students will submit requests for site development only for elective and selective rotations.

C. Replaces or modifies Policy or Procedure: None

D. Annotations: None

E. References: None



UNIVERSITY OF NEW ENGLAND
PHYSICIAN ASSISTANT PROGRAM

Policy & Procedure Manual

Effective Date February 12, 2016

- A. Site and Preceptor Selection Program Policy
- B. Policy #2016 -01
- C. The University of New England Physician Assistant Program strives for excellence in the provision of quality clinical site placements for our students during clinical year of the program. In support of this goal, the following measures are taken to assure a clinical site meets program qualifications:
 - 1. The facility offers a safe environment, conducive to learning.
 - a. A physical structure that offers student parking
 - b. A well-lighted parking lot
 - c. Security support if situated in a high risk area
 - d. Space for the student to access medical records and reference materials
 - e. Work space for the physician assistant student
 - 2. Adequate numbers of support staff – minimum one clerical support and one clinical support

3. Access to medical records via Electronic Health Records or paper charts
4. Supervision of physician assistant student:
 - a. A licensed physician, physician assistant or nurse practitioner must be on site at all times providing direct supervision of student
 - b. Preceptors must allow students to obtain history, perform physical examinations and development treatment plans to be orally presented to the preceptor
 - c. Under no circumstance should the student be allowed to discharge a patient from care
 - d. Students may not write prescriptions
 - e. Students may not order laboratory or diagnostic studies independently
 - f. Preceptors should assure students are afforded an adequate number of patient visits and adequate time to complete the visits
 - g. Students should be afforded the opportunity to see patients across a range of acuity consistent with the practice in which they are assigned.
5. Loss of License
 - a. Preceptors must notify program immediately if for any reason their license is suspended, revoked or if they are placed under a consent order.

- b. Students will be re-assigned to either another licensed clinician within the practice, or to a different site.

6. Format of Site Evaluation:

- a. Sites will undergo in-person evaluation every three years at minimum if the site is located in the Northeast of the United States
- b. Distant sites will undergo evaluation via Skype or similar program, again – at minimum every three years.
- c. New sites, or sites that have not been utilized in the prior three years will be evaluated via in-person visit or via Skype prior to the placement of student

D. Replaces or modifies Policy or Procedure: None

E. Annotations: None

F. References: None



UNIVERSITY OF NEW ENGLAND
PHYSICIAN ASSISTANT PROGRAM

Policy & Procedure Manual

Effective Date November 1, 2015 – Class of 2017

- A. Assignment of Students to Clinical Rotations Program Policy
- B. Policy #2015 -2
- C. The Program will assign each student to clinical rotations based on the following factors:
 - 1. Capacity of site to meet Program training and administrative criteria
 - 2. Effectiveness of student experience as determined by previous student evaluation of the rotation and Program evaluation of the site and preceptors.
 - 3. In cases involving sites requiring a high degree of academic and/or clinical skill in order to obtain full advantage of the clinical opportunity, the Program reserves the right to make assignments based on student performance in the didactic phase and/or performance in completed rotations.

The primary responsibility for student assignment lies with the Clinical Coordinator who may also consult the Associate Clinical Coordinator, Academic Coordinators and other Program faculty as necessary during the process of student assignment.

The following will have no bearing on student clinical rotation assignment:

1. Socio-economic status of the student.
2. Race/ethnicity of the student.
3. Marital Status
4. Whether or not a student is a parent.
5. Student's request for consideration regarding placement for matters other than health issues of the student or immediate family member.

Students will be allowed to submit preferences to the Clinical Coordinator in regards to geography, medical specialty and/or desire to be placed in a an area that allows the student to complete the majority of their clinical rotations within a single hospital/clinic system (POD). However, assignment to POD will be determined by lottery system to assure all interested students have an equal opportunity to receive that selection. Geographic and specialty preferences will be considered if an appropriate clinical rotation site is available. Multiple student requests for a certain geographic or medical specialty will also be assigned via a lottery system.

Each student will be given the opportunity to meet with the Clinical Coordinator once to discuss possible rotation sites. This meeting will

be documented on a student advisory form with the salient points of the discussion outlined and expected outcomes clearly defined. The form will be signed by the Clinical Coordinator and the student and entered into the student file. The Clinical Coordinator will determine on a case-by-case basis if additional meetings are warranted. If such meetings occur, the meeting must be documented on a student advisory form and signed by the student and Clinical Coordinator.

Appeals for special consideration based on personal or immediate family health issues must be made in writing to the Clinical Coordinator. The clinical coordinator will bring all appeals for special consideration to the full faculty and program director for discussion and decision.

D. Replaces or modifies Policy or Procedure: None

E. Annotations: None

F. References: None