

Original Approval Date: April 13, 2015  
 Most Recent Approval Date: June 7, 2021  
 Most Recent Editorial Date: February 13, 2023  
 Approximate Review Date: February 2025

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## Supervision of PGME Students on Clinical Rotations Policy

<b>Office of Accountability:</b>	Faculty of Medicine & Dentistry (FoMD)
<b>Office of Administrative Responsibility:</b>	Postgraduate Medical Education (PGME)
<b>Approver:</b>	Postgraduate Medical Education Committee
<b>Classification:</b>	Teaching and Learning
<b>Scope:</b>	Compliance with this policy extends to all members of the PGME community.

### Overview

In compliance with the General Standards of Accreditation for Institutions with Residency Programs as set by the Canadian Residency Accreditation Consortium (CanRAC), there must be effective central policies or guidelines regarding supervision that consider discipline- and program-specific contexts, and allow for program-specific additions and/or variations, as appropriate.

Specific CanERA Institutional Accreditation standards include the following:

- 4.1.1.1 There are effective central policies or guidelines regarding supervision that consider discipline- and program-specific contexts, and allow for program-specific additions and/or variations, as appropriate.
- 4.1.1.2 Residency programs are supported to identify and remediate inadequate supervision.
- 4.1.1.3 Teachers, PGME students, and learning site staff (e.g., site coordinators, site directors) are aware of the process to report concerns regarding PGME student supervision.

### Purpose

This policy applies to all PGME students (residents, fellows, diplomates) overseen by the Office of Postgraduate Medical Education (PGME) in the Faculty of Medicine & Dentistry (herein referred as FOMD) at the University of Alberta. This policy governs faculty's supervision of PGME students on clinical rotations and learning experiences.



## **POLICY**

### **1. RESPONSIBILITIES OF THE PGME OFFICE**

- a. The PGME office encourages programs to develop program-specific guidelines.
- b. The PGME office works with the Department Chair, the Associate Dean of Faculty Development, and others as required to provide support to programs to identify and remediate inadequate supervision.
- c. The PGME office works with the Department Chair, the Associate Dean of Faculty Development, and others as required to provide and/or facilitate educational materials, support and faculty development to programs and supervisors where there is an identified need regarding the implementation of this policy.

### **2. RESPONSIBILITIES OF THE DIVISION/DEPARTMENT AND PROGRAM (all referred to as program below)**

- a. The program is encouraged to develop program-specific guidelines on PGME student supervision.
- b. The program must ensure that the number, credentials, competencies, and scope of practice of supervisors are adequate to provide the breadth and depth of the discipline, including required workplace based teaching, assessment, and feedback to PGME students.
- c. The program must ensure that the number, credentials, competencies, and scope of practice of the teachers are sufficient to supervise PGME students in all training environments, including when PGME students on-call and when providing care to patients or service, as part of the training program, outside of a learning site.
- d. The program must ensure that all physicians who have direct supervision of PGME students in required clinical learning experiences have a faculty appointment (clinical or academic) in the FOMD.
- e. The program must provide regular written feedback to supervisors of their teaching and supervising roles.
- f. The program must provide or facilitate faculty development on teaching that is relevant and accessible on a regular basis.
- g. If an issue pertaining to supervision or a supervisor arises, the program must have a process to address the issue.
  - i. This may include faculty development or remedial training for the supervisor or suspension of the supervisory role.
  - ii. The PGME Dean should be consulted prior to considering suspension of a supervisory role.

### **3. RESPONSIBILITIES OF THE SUPERVISOR**

- a. The supervisor must be aware of the learning objectives of the PGME student for the duration of their supervisor-trainee relationship.
- b. The supervisor must ensure that PGME students understand their roles and responsibilities at the beginning of each rotation/learning experience.
- c. The supervisor must ensure that patients are informed of a PGME student's medical trainee status.
- d. The supervisor must ensure that a PGME student is aware of all the patients/cases/tasks delegated to them.



- i. The supervisor must determine that the PGME student is capable of dealing with the delegated patient/case load.
  - ii. The supervisor must recognize the signs of fatigue in a PGME student and intervene to ensure that the patients and cases receive safe and appropriate care, and cases/tasks appropriately managed while supporting the well-being of the PGME student.
- e. The supervisor must take into consideration a PGME student's skills and level of training when delegating a task or assignment.
- f. The supervisor must ensure that a PGME student is competent in a given procedure/case/task before delegating that procedure/case/task.
- g. When a PGME student has acquired sufficient skill and knowledge to be entrusted to perform a given procedure/task, the supervisor must be readily available to intervene should it be necessary.
- h. The faculty staff members' call schedule must be structured to provide PGME students with continuous supervision, twenty-four hours a day and seven days a week.
- i. Supervisors must be immediately available under circumstances in which urgent judgment by highly experienced staff members are typically required, as determined by the Program Director and Residency Program Committee.
- j. Supervision may be provided from an off-site location in circumstances where the quality of supervision can be maintained and when required the supervisor's physical presence can be assured within a reasonable amount of time.
- k. The supervisor must respond in a timely fashion when contacted by the PGME student and if necessary, the supervisor must be available to return to the workplace on an emergency basis.
- l. When not immediately available to assist the PGME student, the supervisor must inform the PGME student and identify a supervisor who will be available to assist in their absence.
- m. The supervisor must provide verbal and written feedback to a PGME student.
  - i. This feedback should be provided before the end of the rotation/learning experience or hand-over to another supervisor.
  - ii. When possible, feedback should be provided in person followed by the timely submission of the necessary documentation.
- n. With respect to hospital admissions, the supervisor must review a PGME student's documentation of a patient's admission, which includes the relevant history, clinical findings and the management plan.
  - i. This should be performed within 24 hours of admission or sooner if the patient's acuity warrants it.
  - ii. At least daily, the PGME student and the supervisor should review the progress and management of acutely ill patients or urgent cases, make the necessary modifications to the care plans and ensure that appropriate documentation is entered into the medical record.
- o. The supervisor should provide PGME students with support and guidance in addressing conflict, and harassment and intimidation in the learning environment.
- p. The supervisor must inform the PGME student of what to do and who to call across the spectrum of work-related situations.
- q. The supervisor must promote and model professionalism at all times.

#### **4. RESPONSIBILITIES OF THE PGME STUDENT**



- a. PGME students must strive to be cognizant of the limits of their knowledge and skills.
- b. PGME students must exercise caution and consider their experience when providing clinical care, case interpretation or task completion.
- c. PGME students must notify their supervisors of their perceived knowledge, skill and experience with delegated tasks.
- d. PGME students must specifically state any concerns they have to their supervisor if they are asked to perform tasks outside of their abilities.
- e. PGME students must keep their supervisor informed of their actions if these actions have the potential to harm patients.
- f. PGME students must inform patients of their status as medical trainees who are acting on behalf of a specific, named supervisor.
- g. PGME students must provide appropriate timely supervision of more junior trainees rotating on the same service.
  - i. In this role, PGME students must assume the responsibilities of supervisors as outlined above.
- h. PGME students must inform their supervisor when a patient's condition deteriorates, the diagnoses and/or management are in doubt or when a procedure with potential morbidity or mortality is planned.
- i. PGME students must inform the supervisor before discharging a patient from hospital care or the emergency room.
- j. In the interest of patient safety, PGME students must inform their supervisor if they are not able to care for all of the patients/caseload who have been delegated to them.
- k. PGME students must inform the residency Program Director when they believe that they have insufficient supervision and/or the supervisor is not responsive to their reasonable requests for the assistance in the care of delegated patients/cases/tasks.
- l. PGME students must complete their rotation and/or supervisor evaluation at the end of each clinical rotation.

**DEFINITIONS**

Definitions are listed in the sequence they occur in the document (i.e. not alphabetical).

Any definitions listed in the following table apply to this document only with no implied or intended institution-wide use.	
<b>Canadian Residency Accreditation Consortium (CanRAC)</b>	This consortium includes the Royal College of Physicians and Surgeons of Canada (Royal College), the College of Family Physicians of Canada (CFPC) and the Collège des médecins du Québec (CMQ).