



# Family & Community Medicine UNIVERSITY OF TORONTO

## Physician Assistant Professional Degree Program

### 3ScPA Clinical Handbook

2019-2020

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### **IMPORTANT LINKS**

1. CAPAs national standard of practice (CanMEDS-PA) [https://capa-acam.ca/about-pas\\_trashed/canmeds-pa/](https://capa-acam.ca/about-pas_trashed/canmeds-pa/)
2. What to do if a student experiences an injury in a clinical setting - flowchart <http://www.md.utoronto.ca/workplace-injury-and-health-care-access>

3. Students on Unpaid Work Placement Accident Form  
<http://paconsortium.ca/forms>
  
4. ACE INA Accident Form, <http://www.oise.utoronto.ca/aphd/UserFiles/File/ACE%20INA%20Accident%20Report%20From.pdf>
  
5. Office of Health Professions Student Affairs, Faculty of Medicine, University of Toronto <https://md.utoronto.ca/OHPSA>

## A Message to Our Preceptors and A Message to Our Learners

Dear Preceptor,

Thank you for being part of the education continuum as a Physician Assistant Preceptor. There is no greater honour than having students enter into the healthcare workforce knowing that you were, in a large part, responsible for their clinical education and mentorship. With this comes added responsibility, not only for the medical education of the student but that they adopt the appropriate attitudes and professional demeanour expected of a Physician Assistant.

The competencies expected of the PA learners as articulated in the Canadian Association of Physician Assistants CanMEDS-PA, formally the Scope of Practice and National Competency Profile, available as a separate document [here](#) and is referenced in this handbook.

Learners are assessed in a variety of ways, including your summative assessment in the clinical field as a preceptor. In addition, learners are expected to participate in formative assessments throughout their clinical placements, as well as knowledge-based assessments in standardized formats. The combination of multiple assessments in a variety of settings are an integral part of our program's philosophy, in order to ensure the PA learners meet the competencies expected of them. Early and frequent formative assessments are integral to the early recognition of students in difficulty, and allow the opportunity for the BScPA program to assist the PA learners to address these difficulties and meet the expected standards. Your cooperation and ongoing communication with the BScPA program team is appreciated in advance, as we work collaboratively towards the education of our future PA healthcare providers.

As you go through the Clinical Handbook, you will see we have incorporated our overall educational strategies, and other supporting information that will be useful for you and your PA learner during the clinical placement time you spend together. We welcome your input and feedback throughout the clinical year, as you assist us in fulfilling the mandate of the PA program for continual self-improvement and meeting the evolving needs of healthcare.

Thank you, preceptors, for your support and expertise in the education of our future Physician Assistants.

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Dear PA Learners,

This handbook will provide you and your preceptor with the information you require during your clinical placements, from the logistics to the required competencies. Use this handbook and the links provided to access the material that will assist you and your preceptor so that you can make the most of the education experience before you. The practical training you will receive is a precious gift as patients, their families, and the entire healthcare team welcome you into their lives as a trainee. Respect this privilege and remember that even as a trainee, you represent the PA profession in your actions and successes. Strive to balance the obligations you carry - your academic responsibilities, your own families and friends and yourselves.

It is your responsibility to become familiar with the procedures, processes, and expectations of you while in clinical placements. You are also expected to take an active role in ensuring the timely completion of your assessments and your clinical logs, all of which are required in order to complete the BScPA Program.

Thank you, learners, for your active role in assisting in the healthcare delivery for Ontarians, and for your dedication to the PA Profession.

Sincerely,

Britton Sprules CCPA  
Clinical Course Director

## Contact Information – BScPA Program

### NOSM Offices

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Teena McLaren	Clinical Placement Coordinator	Physician Assistant Program c/o Northern Ontario School of Medicine 935 Ramsey Lake Rd, Sudbury, ON P3E 2C6	<a href="mailto:clinical.pa@nosm.ca">clinical.pa@nosm.ca</a>	Phone: (705) 662-7197 Fax: (705) 675-4858

### For additional assistance, you may contact the Toronto office:

Physician Assistant Professional Degree Program  
University of Toronto  
Faculty of Medicine  
Department of Family and Community Medicine  
263 McCaul Street, 3rd floor  
Toronto, ON, M5T 1W7  
[Physician.Assistant@utoronto.ca](mailto:Physician.Assistant@utoronto.ca)  
Tel: 416-946-7173  
<https://www.paconsortium.ca/>

## The Physician Assistant Profession

### *Definition and Role*

Physician Assistants (PAs) are academically prepared and highly skilled health care professionals who provide a broad range of medical services. PAs work across the spectrum of medical care, including surgical, medical and primary care. PAs are trained as generalists, and develop their clinical specialty expertise in their work environment under their supervising physician.

PAs are physician extenders, not independent practitioners; they work with a degree of autonomy, negotiated and agreed on by the supervising physician and the PA. PAs can work in any clinical setting to extend physician services. PAs complement existing services and aid in improving patient access to health care. A relationship with a supervising physician is essential to the role of the PA.

The role of the PA is unique among healthcare providers in that PAs are not autonomous practitioners; the supervising physician determines what services and/or procedures the PA is permitted to carry out as delegated acts.

Although there are established competencies and a defined scope of practice for PAs in Canada, the role of the PA is specifically determined by the scope of practice of the supervising physician and the physician/PA relationship. The exact role and responsibilities of the practicing PA must be clearly defined, and may change over time as the physician/PA relationship evolves.

## **Physician Assistant Education**

### ***BScPA Program Overview***

The **Bachelor of Science Physician Assistant degree (BScPA)** is a full-time professional, second-entry undergraduate degree program based in the Department of Family and Community Medicine (DFCM) in the Faculty of Medicine at the University of Toronto (U of T).

The BScPA program is delivered in collaboration with Northern Ontario School of Medicine (NOSM) and The Michener Institute for Applied Health Sciences (Michener). The three institutions have formed the Consortium of PA Education (Consortium), collaboratively contributing in the development, administration and delivery of the U of T degree.

The BScPA is a unique professional degree program that affords students the ability to study in their home community via a distance and distributed learning modality. Web based learning is combined with face-to-face residential components throughout the 24-month program. The first 12 months are academically focussed, with didactic courses and simulations. The second 12-months are the clinical year, comprised of clinical placements in various disciplines with an emphasis on a generalist approach to medicine. These clinical placements provide the PA learners with practical, real-world experiences which are aligned with the clinical objectives, as outlined in this manual. The clinical rotation objectives are based on the Canadian Association of Physician Assistants Scope of Practice and National Competency Profile.

The Consortium offers students a balance in academic and clinical orientation, extensive access to healthcare relevant resources and a curriculum delivery model that maximizes rural training and geographic accessibility throughout Ontario. The program's intention is to equip graduates with the competencies necessary to establish the foundation for a sustainable Canadian Physician Assistant profession.

For additional information about the BScPA Program, including our mission, vision, guiding principles and academic overview, please visit our program website: [www.PAconsortium.ca](http://www.PAconsortium.ca)

## **Health and Safety**

The University of Toronto is committed to the promotion of the health, safety and well-being of all members of the University community, to the provision of a safe and healthy work and study environment, and to the prevention of occupational injuries and illnesses. For further information, please review the document found at: <http://www.governingcouncil.utoronto.ca/policies/healthsa.htm>

## **Clinical Placement Agreements**

Many existing clinical placement sites in Ontario already have clinical placement Affiliation Agreements with the University of Toronto, NOSM or Michener. If such agreement is not in place, a clinical placement site will be asked to complete the Clinical Placement Agreement prior to a PA starting a clinical training.

## **Comprehensive General Liability**

Registered students of the U of T BScPA program are covered under the U of T comprehensive general liability insurance policy against legal liability, including medical malpractice liability, arising out of the performance of their student clinical duties while in Canada.

## **Workplace Safety Insurance Board (WSIB)**

Students of health sciences programs as identified by their university or college are eligible for Workplace Safety Insurance Board (WSIB) coverage of claims while on unpaid placements as required by their program of study. Private insurance will be provided should the unpaid placement required by their program of study take place with an employer who is not covered by WSIB.

The Ministry of Training, Colleges and Universities (MTCU) ensures that students on work placements receive WSIB for placement employers who have WSIB coverage and private insurance for employers who are not covered by WSIB for injuries or disease incurred while fulfilling the requirements of their placement.

The Ministry has now streamlined the WSIB claims process for all publicly-assisted colleges and universities. This will end the use of paper forms altogether. The streamlined process is as follows:

a. Training Agencies are required to have in each student file, a declaration signed by the student indicating that s/he understands that s/he has WSIB coverage while on unpaid work placements;

b. Training Agencies are required to provide a letter to Placement Employers indicating that:

Placement Employers and Training Agencies are not required to complete and sign the online *Postsecondary Student Unpaid Work Placement Workplace Insurance Claim Form* for each student in order to secure WSIB coverage;

All WSIB procedures must be followed in the event of an injury/disease; and

Training Agencies will keep a signed original of the placement letter on file and ensure that Placement Employers have a copy.

c. The Training Agency will notify the Placement Employer whenever there are any changes to the work placement.

The Student Unpaid Work Placement Workplace Insurance Claim Form, is available on the Program's website at <http://paconsortium.ca/forms>

This form only needs to be completed when submitting a claim resulting from an on-the-job injury/disease. Please note that institutions will be required to enter their MTC- issued Firm Number in order to complete the online claim form.

Guidelines and Questions and Answers can be found on the Ministry's public website at: <http://www.tcu.gov.on.ca/pepg/publications/placement.html>

### **In the event of injury while on a clinical placement – notify the BScPA Program Office as soon as possible**

Students in clinical rotations must seek medical assistance immediately at the clinical site. Depending on the severity of the incident at a non-hospital site, the student may be referred to an emergency department, a walk-in clinic or their family physician. The student must report the incident at the earliest opportunity to the Preceptor or delegate and to the Occupational Health Nurse at the clinical site, where applicable. When an accident or injury occurs at a hospital site and is non-critical, report to the Occupational Health Unit or the site-specific equivalent during office hours or the site's off-hours substitute for the Occupational Health Unit at all other times.

### **Reporting Workplace Related Accidents of Injury to the University of Toronto**

If an incident were to occur with any University of Toronto student placement, please complete an [accident report form](#) and send it to the University at [placements@utoronto.ca](mailto:placements@utoronto.ca) and [PAProgram.manager@utoronto.ca](mailto:PAProgram.manager@utoronto.ca) **as soon as** the accident occurs, as the timelines to submit workplace insurance claims are very tight

## Attendance

### Clinic Schedule and Mandatory Attendance:

Attendance during the Year 2 Clinical Rotations is mandatory. PA Learners are expected to participate in their clinical rotations according to the expectations set out by the local preceptor who is responsible for the rotation. The day to day schedule for students on clinical placements is designated by the primary preceptor throughout the assigned clinical placement which may include weekends, evenings, nights and/or being on-call. Students are expected to participate in clinical activities for **4.5 days a week** (or 9 “half-days”), not including on-call activities or academic half days.

### On-Call Protocol

- The maximum on-call frequency in all clinical rotations is one night in four
- Students must not be scheduled for call duty the evening before an examination or class
- Some rotations include an on-call requirement that extends into the evening but is not overnight, and students are expected to be back to work the following day. In these cases, the on-call period must end by 12:00 am.
- If a student is required to stay on-call beyond midnight, s/he is to be excused from all clinical and educational duties after noon the following morning

### Academic Half days

Students are expected to have **one half day a week as protected time** for their academic course work. The **fixed ½ day is- Wednesday mornings** (until noon), and this is set for synchronized academic purposes. The 4<sup>th</sup> Wed morning of each rotation is allocated for the online End Rotation Exam (ERE)

### Extenuating Circumstances

In the event a student believes they have extenuating circumstances that may require an adjustment to their typical clinical schedule, they are expected to take action in advance. This may be for ANY reason, i.e. requiring additional time for travel, adjusting the 4 day a week clinical attendance to more or less in a given rotation, etc. The student is expected to contact the University of Toronto’s Faculty of Medicine’s Office of Health Professions Student Affairs. Any adjustments may only be possible upon further discussion with the Clinical Coordinator (or designate) in advance.

### Time for Travel between Clinical Placements

When PA Learners are required to travel from one clinical placement to another, students must be excused from scheduled clinical duties on the weekend days that fall between the conclusion of one clinical placement and the commencement of the next.

## Absences

Student attendance and absence notification is outlined in the Student Handbook. All forms are available on the BScPA program website, in the Student Handbook, and in Canvas in the PA Program course shell. Students are responsible to ensure they make up any missed time in the event of a short-term absence.

## **Absence during a Clinical Rotation**

During the Clinical Phase (Year 2) of the Program, while at clinical sites, students are responsible to notify BOTH their preceptor and the Clinical Course Director regarding any and all absences. It is the responsibility of the student (and NOT the preceptor) to notify the Clinical Course Director of the student absence. As attendance is mandatory, depending on the circumstances, absences or additional professional issues may be subject to a Professional warning. See 1.2.11 'Absences during Clinical Rotations in Year 2' in the [Student Handbook](#) for further information.

## **Absences lasting up to (and including) 2 days**

A cumulative absence of up to and including 2 days requires submission of an [Absence Notification Form](#) and must be submitted to the PA program office as soon as possible and within 24 hours of the absence. Remember to advise your Clinical Preceptor and your Clinical Course Director.

## **Absences lasting 3 or more days**

A cumulative absence of more than two days due to illness requires submission of a [Verification of Student Illness or Injury](#), to be submitted to the Clinical Course Director. Remember to advise your Clinical Preceptor and your Clinical Course Director of this absence as soon as possible and within 24 hours of the start of the absence. Recurrent and/or prolonged absence, i.e. a total of more than 3 days missed in a 4-week rotation, may result in failure to meet the requirements of the PA Program. Implications may include an incomplete or failed rotation, change in academic standing, a prolongation of the PA program in order to complete the program requirements or other outcomes.

## **Absence during Class and the Year 2 Residential Blocks**

Attendance during class and the Year 2 Residential Blocks (March and June) is mandatory. See 1.1 'Regular attendance' in the [Student Handbook](#). 1.2.11 'Absences during Clinical Rotations in Year 2' in the [Student Handbook](#) for further information.

## **Anticipated Non-medical Absences and Non-urgent Illnesses**

Anticipated absences of greater **than two days'** duration during the Year 2 Clinical year, must be requested in writing to the clinical course director well in advance. It is the responsibility of the PA Learner to ensure sufficient time to coordinate the approval for the requested absence. Students should not assume the approval will be automatic and are expected not to make any plans prior to the granted approval. Students are responsible for any missed material while absent.

## **Leaves of Absences**

See 1.4 'Leaves of Absences' in the [Student Handbook](#). In the event that the leave of absence or interruption to the Academic Program occurs, the consequence may be that the registration of the PA Learner in the BScPA Program must be extended, beyond the final semester. PA Learners are responsible for any outstanding tuition that may be incurred if student registration is to be extended beyond the typical 6 semesters of the program.

## **Requests for Changes in Clinical Placements**

PA Learners have been assigned clinical rotations upon initial and follow-up consultation with individual students. Once set, the rotation schedule is not typically changed. In the event that a student believes their personal circumstances are extenuating and warrant consideration to change a rotation, a training site, or preceptor, the student must discuss their concerns with the Clinical Course Director.

## **Housing**

When not staying at home during their clinical rotations, or at a site pre-arranged by the Clinical Office, PA Learners are responsible to keep the Program office informed of their current housing by updating the Toronto Office with their local address and local phone number. If a student believes they may have extenuating circumstances that can affect the housing that is offered for a particular placement, the student must contact the Clinical Office ASAP.

## **Clinical Preceptors**

### **Roles and Expectations of Clinical Preceptors**

The clinical preceptor is a licensed physician, PA, or health care practitioner who provides daily supervision of the PA Learner on clinical placement. The role of the PA learner is very similar to that of a 3rd/4th year medical clerk, depending on where the rotation falls in during their clinical year. The supervision of the PA Learner is no different from any other medical learner. The ultimate responsibility for the patient care lies with the most responsible practitioner. No patient is to be discharged without the most responsible practitioner establishing a practitioner – patient relationship.

The clinical preceptor is required to:

1. review patient cases, including information gathered by the PA Learner (history and physical examinations, preliminary diagnosis, and treatment plans)
2. co-sign/confirm any written or verbal orders suggested by the PA Learner
3. provide the PA Learner with adequate orientation to the clinical environment including access to the EMR
4. within the first few days of the rotation, meet with the PA Learner to identify learning goals for the rotation
5. be conversant with the clinical objectives
6. provide an adequate work environment for the PA Learner e.g. clinical examination room and access to patients as required in order to meet objectives, and access to the EMR (if applicable)
7. identify learning resources/readings to support and facilitate the learning of the PA Learner, including suitable Interprofessional Education (IPE) activities
8. involve PA Learners in various procedures, ensuring that the level of student involvement corresponds to the appropriate competence level of the student
9. identify appropriate patient encounters and procedures suitable for PA Learners in accordance with the clinical objectives and CanMEDS-PA
10. communicate with PA Learners regarding the need to schedule academic protected time every week
11. provide the PA Learner with regular, ongoing feedback related to their performance in the clinical environment and with respect to how the PA Learner is progressing in terms of the objectives for the rotation
12. provide the PA Learner with structured feedback in the format of specific required student assessments:
  - a. Mid-rotation: Observation of Clinical Skills 1 (first of two)
  - b. Final Week of rotation: Observation of Clinical Skills 2 (second of two)
  - c. End-rotation: Assessment of Student Clinical Performance

### **Suggested Topics for Orienting PA Learners to the Clinical Rotation**

- Introduction to clinical, clerical, and administration staff
- Tour of facility including introduction/tour of the EMR/charting methods
- Location of student study space/library within hospital/clinic (including internet access, learning resources such as mannequins, simulators, etc.)

- Location of student lockers – to include use and location of lab coats
- Location of lounge
- Location of on-call room(s) ( if required)
- Contact information for on-call or assignment of a pager
- Review of clinic/hospital charting system and dictation system (if required)
- Review of hospital /clinic policies and procedures manual – to include codes, security codes, evacuation procedure and Occupational Health and Safety Guidelines, hospital dress code
- Review of parking availability and parking permits

## **Student Assessment**

### ***Types of Assessments***

PA Learners will be assessed by the following assessment tools during each clinical rotation:

1. Throughout Rotation:
  - a. Ongoing Feedback given on a daily basis between preceptor and PA Learner
2. Mid Rotation:
  - a. “Observation of Clinical Skills Assessment Form 1” (Formative)
    - To be completed and submitted through E\*Value by the half-way point of each rotation
3. End Rotation:
  - a. “Observation of Clinical Skills Assessment Form 2” (Formative)
    - To be completed and submitted through E\*Value during the final week of each rotation
  - a. “Assessment of Student Clinical Performance” (End Rotation Assessment) (Summative)
    - To be completed and submitted through E\*Value during the final week of the rotation
    - used to calculate the grade for the rotation
4. End Rotation Exam
  - The last Wednesday morning of each rotation will be scheduled for that rotation’s web based proctored exam. The exam will consist of 120 questions, 100 scored and 20 non-scored, multiple choice, 2 hours in duration. The exception will be the First Primary Care Rotation and Elective placements (at which time students will write their PACKRAT exam)

### ***Accessing the Assessment forms***

The “Observation of Clinical Skills Assessment Form” and the “Assessment of Student Clinical Performance” will be emailed to the preceptor from E\*Value and will also be available online [here](#) once the rotation has begun. Preceptors are expected to complete the forms on-line. Using the direct link provided via email, the preceptor will be granted access to the assessment form. The email is not to be forwarded to another supervisor as it is specifically generated for the assigned preceptor. If a different supervisor wishes to complete the assessment instead of the assigned preceptor, the supervisor must contact [clinical.pa@nosm.ca](mailto:clinical.pa@nosm.ca) to have the assessment form reassigned.

### ***Notifications and reminders to complete Assessment Forms***

Preceptors will be sent email notification from E\*Value at 4 days prior to the deadline to complete the student assessments. Reminder emails are sent at weekly intervals up to a maximum of 4 weeks. It is the responsibility of preceptors to ensure completion of the student assessments in a timely way.

### ***How Grades Are Calculated***

The “Physician Assistant Rotation Assessment Form” is converted to a numeric value for the purposes of reporting a grade in the Clinical portion of the curriculum. It is imperative that Preceptors complete the form as fully as possible; to ensure the numeric value is an accurate representation of the student’s competence in the rotation.

In order to **PASS** the rotation, PA Learners are required:

- to submit the Case Logs of patient encounters as instructed
- to achieve a minimum grade of 60% and a “Pass” on the end of rotation evaluation: “Physician Assistant Rotation Assessment Form”
- to achieve a minimum grade of 60% on the End Rotation Exam (if <60%, students are to do a Remedial Assignment. Once completed, the grade given will be a 60% = Pass)

## Requirements if a PA Learner is Below Expectations

For PA Learners who may not have demonstrated competency at the expected entry-level, or who demonstrated inconsistent competence or performed an egregious error, it is expected that the corresponding documentation will be timely, clear, and comprehensive. The concern and/or performance should be described in detail to include the area(s) of weakness or event, immediate action taken and any follow-up that has taken place. At any time when a PA learner’s competence is below expectation or of concern, the clinical preceptor is expected to contact the Clinical Course Director as soon as possible.

# PA Learners

## Roles and Expectations of PA Learners

PA Learners on clinical placements are reminded of their responsibilities to adhere to the University of Toronto Governing Council’s policy of the Standards of Professional Practice Behaviour and the CAPA 2015 CanMEDS-PA<sup>1</sup>.

Here are some important links related to professionalism and ethical practice:

- [Code Of Behaviour on Academic Matters](#)
- [Code of Student Conduct](#)
- [Standards of Professional Practice Behaviour for all Health Professional Students](#)
- [CAPA Code of Ethics](#)
- [Guidelines for Appropriate Use of the Internet, Electronic Networking and Other Media.](#)

## During clinical placements, students are expected to:

1. attend the clinical placement as scheduled
2. notify preceptors and clinical coordinator of any absence by email AND phone
3. maintain professional level of responsibility towards patient care
4. reflect daily on the clinical experiences, including completing the Case Log encounter logs as instructed
5. continue self-directed learning to complete the objectives for each rotation, including the use of the weekly academic protected time to complete reading in textbooks, on-line resources, published articles etc.
6. participate in on-call duties as scheduled
7. seek out guidance, mentorship, advice and help as required
8. try to resolve any perceived problems at a local level first, and communicate any unresolved issues to the Clinical Course Director
9. comply with local clinical placement policies as well those of the U of T with regards to conduct, dress and department (This may include the level of dress, wearing of jewellery and scent policies.)
10. wear identification badge at all times clearly identifying themselves as a Physician Assistant student
11. comply with local policies with respect to charting and documentation in patient records (some institutions do not authorize students to chart, while others specify time frame requiring the supervising preceptor to countersign all documentation and orders)

12. advise preceptors on the requirement for the timely completion of mid-rotation assessment and end-rotation assessments
13. communicate with preceptors regarding the need to schedule academic protected time every week as well as time for proctored tests, as required

## **Interprofessional Education (IPE)**

PA Students in their clinical year are expected to complete their requirements for the University of Toronto *Interprofessional Education (IPE) Curriculum*. The required IPE activities in the clinical year are overseen by the Clinical Course Director, with support from the Program IPE Lead.

The two core IPE requirements in the clinical year include 1) the *Centre for the Study of Pain – Interprofessional Pain Curriculum* during the March residential block and 2) the *IPE Component in a Practice Setting* which consist of three flexible activities completed longitudinally throughout the clinical rotations. More detailed information about the requirements and related deadlines can be found on Quercus in the Clinical course and in the course calendar.

In addition to the IPE curricular requirements, many clinical sites in Ontario have their own formal and informal IPE learning opportunities. While these do not meet the UofT IPE curriculum requirements, students are encouraged to participate in these opportunities to enhance their learning and networking.

Clinical preceptors receive information about the PA learners' IPE requirements in their orientation material. PA learners and preceptors should work together to identify suitable IPE activities to allow the learner to complete their requirements and to enhance the learner's experience in the rotation.

## **Logging of Clinical Encounters**

PA Learners are expected to log patient encounters as a diagnosis, procedure, or both in the Case Logs tracking tool via Qualtrics. It is recommended that students input their data on a regular basis. By mid-rotation, students should review their Case Logging progress list with their preceptor to identify any gaps in learning.

## **Student Evaluation of the Preceptor and the Rotation**

PA Learners will be sent the Preceptor Evaluation and Rotation Assessment in the final week of the rotation for timely completion. The form can be previewed directly in E\*Value.

## **Clinical Placements - Overview**

The following section of the Clinical Handbook outlines the Clinical Placements by specialty. The provided information includes a Rotation Overview, Clinical Environment, and Call Schedule.

The clinical rotations that are outlined here are:

- Primary Care
- Emergency Medicine
- General Surgery
- Internal Medicine
- Pediatrics
- Mental Health
- Women's Health (optional)
- Elective

## **Primary Care/Family Medicine**

### **Overview**

The Primary Care/Family Medicine clinical placement provides PA learners with opportunities to apply the medical theory learned during their didactic year to clinical practice by continuing to develop competence in clinical and procedural skills. The Primary Care/Family Medicine clinical practicum is arranged into up to three 4 week distinct training experiences, Primary Care A and Primary Care B. These have been scheduled for learners at the beginning and at the end of their clinical year; one placement is in Southern Ontario and one in Northern Ontario, corresponding to the PA learner's Home or Swap Training Locations.

The overall goal of the experience is for the learner to develop fundamental skills in evaluating and managing patients in the generalist family medicine setting with exposure to patients of all age ranges and a variety of medical disorders and conditions. The emphasis is on the accurate collection of patient information (histories, physical assessment and presentation of patient data for the preceptor's review), on various investigative studies and therapeutic regimens along with the education of patients regarding health risk behaviours and therapeutic regimens.

### **Clinical Environment**

The preferred setting for this placement is a primary health care centre in which the PA learner is paired with a family medicine practitioner. Opportunities for clinical learning in Family Medicine clinics, ERs, Long-term Care institutions, and outreach clinics for special populations are encouraged.

### **Work and Call Schedule**

The PA Learner is expected to work the same shift schedule as their preceptor; this may include day, evenings and weekends. The call schedule is in accordance with the clinical supervisor's own call schedule, but should be no more than 1 in 4. If the call duty goes past midnight, the PA Learner should be allowed to leave by noon the following day. If the call duty ends before midnight, the PA Learner is expected to work a normal shift the following day.

## **Emergency Medicine**

### **Overview**

The Emergency Medicine clinical placement provides PA learners with opportunities to apply the medical theory learned during their didactic year to clinical practice by continuing to develop competence in clinical and procedural skills. The overall goal of the Emergency Medicine clinical practicum experience is for the PA Learner to develop the fundamental competencies required for the evaluation and management of patients with emergent conditions in the ER setting. The intended experience is to provide in-depth exposure to conditions, illnesses and injuries sustained by children and adults that necessitate emergency care. The educational experiences should emphasize the continued development of competencies in patient assessment, diagnostic techniques and procedures essential to patient care in the emergency setting.

### **Clinical Environment**

The preferred setting for this placement is a primary or secondary level health care centre in which the PA learner is paired with an ER physician. Opportunities for clinical learning with allied health providers and alongside other healthcare learners are encouraged.

### **Work and Call Schedule**

PA Learners are expected to complete day, evening and at least one weekend shift during this placement.

## **General Surgery**

### **Overview**

The General Surgery placement provides PA learners with opportunities to apply the medical theory learned during their didactic year to clinical practice by continuing to develop competence in clinical and procedural skills. This clinical placement provides an orientation to patients of various ages with surgically manageable diseases and conditions. The emphasis of the learning experience is on the evaluation of the surgical patient, determination for surgical referral, preparation of patients for surgery, assistance during the pre-, intra- and post-operative periods and management of common, serious and life-threatening complications and conditions.

### **Clinical Environment**

The preferred setting for this placement is a primary or secondary level health care centre in which the PA learner is paired with a general surgeon and where the primary duties of the PA Learner are in assessment of new clinic patients and cases referred from the emergency department. Opportunities for clinical learning with allied health providers and alongside other healthcare learners are encouraged. A **minimum of one half-day** training with a wound care team is recommended.

### **Work and Call Schedule**

The PA Learner is expected to work the same shift schedule as their preceptor; this may include day, evenings, and weekends. The call schedule is in accordance with the clinical supervisor's own call schedule, but should be no more than 1 in 4. If the call duty goes past midnight, the PA Learner should be allowed to leave by noon the following day. If the call duty ends before midnight, the PA Learner is expected to work a normal shift the following day.

## **Internal Medicine/Hospitalist**

### **Overview**

The Internal Medicine/Hospitalist placement provides PA learners with opportunities to apply the medical theory learned during their didactic year to clinical practice by continuing to develop competence in clinical and procedural skills. The intended experience is to provide in-depth exposure to conditions and illnesses that necessitate in-patient care as well as exposure to the processes of ambulatory care in the discipline of the internal medicine (non-surgical) adult patient. The educational experiences should emphasize the continued development of competencies in patient assessment and management essential to in-patient care in both acute and long-term care facilities.

### **Clinical Environment**

The preferred setting for this clinical placement is a community hospital in which the PA learner is paired with a general internist and/or a hospitalist. Opportunities for clinical learning with allied health providers and alongside other healthcare learners are encouraged.

### **Work and Call Schedule**

The PA Learner is expected to work the same shift schedule as their preceptor; this may include day, evenings and weekends. The call schedule is in accordance with the clinical supervisor's own call schedule, but should be no more than 1 in 4. If the call duty goes past midnight, the PA Learner should be allowed to leave by noon the following day. If the call duty ends before midnight, the PA Learner is expected to work a normal shift the following day.

## **Women's Health (optional)**

### **Overview**

The Woman's Health placement provides PA learners with opportunities to apply the medical theory learned during their didactic year to clinical practice by continuing to develop competence in clinical and procedural skills. The intended experience is to provide in-depth exposure to the spectrum of problems and issues associated with women's health care as well as routine prenatal, intrapartum, and postpartum obstetrical care. Experiences should also include family planning and birth control, recognition and treatment of sexually transmitted infections, cancer detection, and evaluation of common gynaecological problems encountered in primary care. The educational experiences should emphasize the continued development of competencies in patient assessment and management essential to the care of women at a generalist level, in both in and outpatient settings.

## **Clinical Environment**

The preferred setting for this placement is a primary or secondary level health care center in which the PA learner is paired with a physician whose primary focus is obstetrics/gynaecology. Scheduled operating room assist time should not exceed one day per week. Opportunities for clinical learning with allied health providers (mid-wives, Family physicians, etc.) and alongside other healthcare learners are encouraged.

## **Work and Call Schedule**

The PA Learner is expected to work the same shift schedule as their preceptor; this may include day, evenings and weekends. The call schedule is in accordance with the clinical supervisor's own call schedule, but should be no more than 1 in 4. If the call duty goes past midnight, the PA Learner should be allowed to leave by noon the following day. If the call duty ends before midnight, the PA Learner is expected to work a normal shift the following day.

# **Paediatrics**

## **Overview**

The Paediatrics clinical placement provides PA learners with opportunities to apply the medical theory learned during their didactic year to clinical practice by continuing to develop competence in clinical and procedural skills. The intended experience is to provide in-depth exposure to the spectrum of conditions and issues associated with the paediatric population as well as routine newborn and well-child care. Experiences should include paediatric patients of all ages, including adolescents. The educational experiences should emphasize the continued development of competencies in patient assessment and management essential to the care of babies and children at a generalist level, in both in and outpatient settings.

## **Clinical Environment**

The preferred setting for this placement is primarily in a primary care paediatric practice in which the PA Learner is paired with a generalist paediatrician. At least fifty percent of the placement should be spent in the ambulatory care setting. Opportunities for clinical learning in Paediatric ER, walk-in clinics, acute care hospitals and outreach clinics for special populations are encouraged.

## **Work and Call Schedule**

The PA Learner is expected to work the same shift schedule as their preceptor; this may include day, evenings and weekends. The call schedule is in accordance with the clinical supervisor's own call schedule, but should be no more than 1 in 4. If the call duty goes past midnight, the PA Learner should be allowed to leave by noon the following day. If the call duty ends before midnight, the PA Learner is expected to work a normal shift the following day.

# **Mental Health/Psychiatry**

## **Overview**

The Mental Health/Psychiatric placement provides PA learners with opportunities to apply the medical theory learned during their didactic year to clinical practice by continuing to develop competence in clinical skills. The intended experience is to provide in-depth exposure to the spectrum of patients with common psychiatric conditions and to the behavioural components of health, disease and disability. Social, economic, cultural and environmental variables that may act as predisposing, precipitating and perpetuating factors to mental illness are to be highlighted.

The educational experiences should emphasize the consolidation of the achievement of excellence in communication skills development, the utilization of a patient-centered approach in establishing a therapeutic relationship, and the promotion of mental health wellness. PA Learners are expected to perform patient assessments (history taking and mental status examination) and develop competencies in recognizing and categorizing psychiatric disturbances, developing techniques for early intervention and understanding of the role of psychiatric referral.

## **Clinical Environment**

The preferred setting for this placement is a primary or secondary level health care center in which the PA is paired with a generalist psychiatrist. The preferred environment is an outpatient setting with opportunity for consultation to other services. Observation of psychotherapy sessions and group therapy sessions is recommended. Opportunities for clinical learning with allied health providers (nurses, social workers, psychologists, family physicians, etc.) and alongside other healthcare learners are encouraged.

## **Work and Call Schedule**

The PA Learner is expected work the same shift schedule as their preceptor; this may include day, evenings and weekends. The call schedule is in accordance with the clinical supervisor's own call schedule, but should be no more than 1 in 4. If the call duty goes past midnight, the PA Learner should be allowed to leave by noon the following day. If the call duty ends before midnight, the PA Learner is expected to work a normal shift the following day.

## **Elective**

### **Overview**

The elective placement is intended to provide an opportunity for PA Learners to explore additional potential professional options as Physician Assistants. PA Learners are encouraged to seek out clinical experiences in particular areas of interest or to supplement clinical experiences from their core rotations. Elective clinical placements are dependent on availability and recruitment of appropriate clinical preceptors.

### **Clinical Environment**

Elective experiences may include clinical experiences in any medical or surgical subspecialty, subject to approval by the BScPA program

### **Clinical Objectives**

The Elective clinical placement objectives are expected to be based on the Canadian Association of Physician Assistant Scope of Practice and Competency Profile.

### **Work and Call Schedule**

The PA Learner is expected work the same shift schedule as their preceptor; this may include day, evenings and weekends. The call schedule is in accordance with the clinical supervisor's own call schedule, but should be no more than 1 in 4. If the call duty goes past midnight, the PA Learner should be allowed to leave by noon the following day. If the call duty ends before midnight, the PA Learner is expected to work a normal shift the following day.