



Family & Community Medicine
UNIVERSITY OF TORONTO

**Physician Assistant
Professional Degree Program**

BSc PA Clinical Handbook

2020-2021

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IMPORTANT LINKS

1. CAPAs national standard of practice (CanMEDS-PA) https://capa-acam.ca/about-pas__trashed/canmeds-pa/
2. What to do if 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 Form¹
<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 <http://www.md.utoronto.ca/ohpsa/>

¹ Email completed form to placements@utoronto.ca AND to paprogram.coordinator@utoronto.ca

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 work force 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 students, ensuring they meet the expected competencies, 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 handbook². Your familiarity with this document, which follows the established CanMEDs format used in medical education, will enable you to appropriately assess the PA learners in the clinical environment.

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.

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

² CAPA, 2015 CanMEDS-PA at: <https://capa-acam.ca/wp-content/uploads/2015/11/CanMEDS-PA.pdf>

Contact Information – BScPA Program

NOSM Clinical Office

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For additional information, please contact the Toronto Office:

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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 Canada¹, the role of the PA is specifically determined by the scope of practice of the supervising physician and by 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 of Education at UHN (Michener). The three institutions have formed the Consortium of PA Education 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 Profile¹.

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.PAconortium.ca

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.

In conjunction and concurrent with the clinical year, academic courses will be delivered via both online modules and face to face attendance. The Residential Blocks are spread throughout the year, at the Academic Centre (UofT), allowing for simulations and group collaborative learning opportunities.

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 4th Wed morning 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 may 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 Quercus 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. A cumulative absence of more than two days due to illness may require documentation with a doctor’s letter for the absence, to be submitted to the Clinical Course Director. An [Absence Notification Form](#) must be submitted to the PA program office within 7 days of the absence for tracking purposes. 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.

Absence during the Year 2 Residential Blocks

Attendance during 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, whether during the Clinical Rotations or the Residential Block weeks requires support from the Office of Health Professions Student Affairs. A Petition for Consideration Form should be submitted to the Medical Director (submitted to the PA program office) prior to approval. 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.

Absences due to Suspected Highly Infectious or Sudden Illness

Unexpected absences require courteous and professional notification as soon as possible in a manner appropriate to the individual circumstances. During the Clinical Year, students will be evaluated on their professional behaviours and responsibilities, and attendance will be considered at that time. Students are expected to use common sense and good judgment in determining whether they should attend clinical placement in the event of their own acute illness.

In the event of an acute illness, PA learners are expected to notify the following contacts by email as well as phone, (as email can be unreliable at times):

The clinical preceptor

The site Medical Affairs office (if relevant)

The Clinical Course Director

The BScPA Program Office and relevant faculty members (during Residential Block)

It is the responsibility of the PA learner to **directly** contact the appropriate individuals as instructed in the event of an absence, and not to rely on others to convey the message.

Leaves of Absences

See 1.4 'Leaves of Absences' in the [Student Handbook](#)

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 a preceptor, the student must discuss their concerns with the Office of Health Professions Student Affairs. Only with the support of the OHPSA will any changes be considered, in consultation with the student, the counsellor and the Clinical Coordinator (or Designate).

Housing

When not staying at home during their clinical rotations, PA Learners are responsible to keep the Program office informed of their current housing 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 Office of Health Professions Student Affairs to discuss their situation. Only with the support of the OHPSA will any changes be considered, in consultation with the student, the counsellor and the Clinical Course Director.

Roles and Expectations of Clinical Preceptors

The clinical preceptor is a licensed physician or health care practitioner who provides daily supervision of the PA Learner on clinical placement. The role of the clinical preceptor is that of clinical supervisor as well as faculty preceptor/teacher.

The clinical preceptor, as a **clinical supervisor**, 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 given by the PA Learner

The clinical preceptor, as a **faculty preceptor/teacher**, is required to:

1. provide the PA Learner with adequate orientation to the clinical environment
2. within the first few days of the rotation, meet with the PA Learner to identify learning goals for the rotation
3. be conversant with the clinical objectives
4. 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
5. identify learning resources/readings to support and facilitate the learning of the PA Learner, including suitable Interprofessional Education (IPE) activities
6. involve PA Learners in various procedures, ensuring that the level of student involvement corresponds to the appropriate competence level of the student
7. identify appropriate patient encounters and procedures suitable for PA Learners in accordance with the clinical objectives and CAPA CanMEDS-PA
8. communicate with PA Learners regarding the need to schedule academic protected time every week
9. 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
10. 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
11. Proctor or appoint a proctor for the End Rotation Exam on the last Wednesday morning of the rotation.

Suggested Topics for Orienting PA Learners to the Clinical Rotation

- ✓ Introduction to clinical, clerical and administration staff
- ✓ Tour of facility
- ✓ 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

Parameters for Clinical Supervision of PA Learners

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 assessment of the Physician Assistant student must be based on the CAPA 2015 CanMEDS-PA, formally the Scope of Practice and National Competency Profile¹. These include competencies in the role of Medical Expert, Communicator, Collaborator, Manager, Health Advocate, Scholar and Professional.

Conditions used in the Assessment of PA Learners

Physician Assistant Students should be assessed under the following conditions:

- While being observed by a preceptor
- While working with a physician or health care provider
- In a real or simulated clinical environment
- With a real or standardized patient
- With access to reference material, clinical documents, clinical instruments and supplies

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
 - Formative feedback on a daily basis between preceptor and PA Learner
 - Case Logs entered daily by the student
2. Mid Rotation:
 - a. “Observation of Clinical Skills Assessment 1”
 - To be completed and submitted through MedSIS at the half-way point of each rotation - Formative assessment
3. End Rotation:
 - a. “Observation of Clinical Skills Assessment 2”
 - To be completed and submitted through MedSIS during the final week of each rotation
 - Formative assessment
 - b. “End Rotation Assessment”
 - To be completed and submitted through MedSIS during the final week of the rotation - Summative Assessment – 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 a 120 questions, 100 scored and 20 non-scored, multiple choice, 2 hours in duration. The exceptions are: Primary Care A and Electives 1+2.

Accessing the Assessment forms

The “Observation of Clinical Skills Assessment” and the “End Rotation Assessment” with their corresponding instructions and rubrics are available on MedSIS. The assigned preceptors will be sent an email with the direct link to the required assessment form. Preceptors are expected to complete the forms on-line. Using the direct link, 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 to have the assessment form

reassigned. Preceptors may access the “Assessor’s Rubric” for the “End Rotation Assessment” on our website as follows: <https://www.paconsortium.ca/information-preceptors>

Notifications and reminders to complete Assessment Forms

Preceptors will be sent email notifications from MedSIS as a reminder to complete the evaluations. Reminder emails are sent at weekly intervals up to a maximum of 4 weeks. It is the professional responsibility of preceptors to ensure completion of the student assessments in a timely way, including setting aside time to meet with students face to face in the middle and end of the rotation for formal feedback.

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 and/or Medical Director as soon as possible.

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 Behaviour³ and the CAPA 2015 CanMEDS-PA¹.

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 student to chart, while others specify timeframe 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

³ Available at: <http://www.governingcouncil.utoronto.ca/policies/ProBehaviourHealthProStu.htm>

Attitudes and Professionalism

The development or growth of an appropriate set of attitudes about patients, their illnesses and working within a healthcare team is one of the most important goals of clinical training. For example, Surgery can be a high intensity, high stress specialty and as such requires a positive attitude, which looks at a problem as a challenge not an impediment.

The major categories of attitudes that PA Learners should develop in their clinical training are listed and described below:

(i) Attitudes which facilitate *appropriate professional and ethical behaviour*.

PA Learners must behave:

- Conscientiously
- With honesty
- With respect for patients and co-workers

(ii) Attitudes which facilitate *reliability*.

These are implied when PA Learners:

- Complete tasks without prompting
- Provide comprehensive follow-up
- Are always up to date

(iii) Attitudes which foster *initiative and motivation*.

Evidence of these include the following behaviours:

- Soliciting criticism and receiving it with equanimity
- Consistently trying to improve
- Sharing knowledge with others, volunteering to give talks
- Effecting change
- Being keenly interested in learning, and consistently learning around cases

(iv) Attitudes which promote *interpersonal relationships* with patients, their families and other members of the health care team.

Evidence of these is seen when students:

- Communicate appropriate information to patients and families in a clear and comprehensive way
- Demonstrate an understanding of patients' and families' needs and concerns
- Act with warmth, empathy and compassion
- Show the ability to win confidence and cooperation of patients and family members
- Handle difficult situations well
- Are highly integrated into team structure

Interprofessional Education (IPE)

The BScPA Program, as part of the Faculty of Medicine at the University of Toronto, includes the mandatory requirements of the Interprofessional Education Curriculum, offered by the Health Sciences faculties at our institution. The definition of an Interprofessional educational activity is when individuals from at least 2 different roles or professions learn about, from and with each other as a collaborate team, working towards best outcomes. Many clinical sites in Ontario have, imbedded within their Clinical or Medical Affairs departments, dedicated personnel and provide opportunities for all students to participate in IPE lectures, briefings and activities. Informal activities are also readily apparent, as healthcare delivery in Ontario is often delivered in a multidisciplinary way.

PA Learners are expected to continue fulfilling the IPE curriculum requirements into their second year in the BScPA Program. During this clinical year, PA Learners are expected to complete three specific clinical IPE learning activities at various intervals, as defined by the IPE curriculum. These activities need not occur in a single placement or at a single site, and it is recommended that a variety of IPE opportunities are sought out while in the clinical setting.

PA Learners are responsible to meet the deadlines for submission of at least one clinical activity by each of the set deadlines throughout the Clinical year (information is posted in Google calendar and Quercus)

Detailed requirements and deadlines throughout the year are posted in Google Calendar and available in Quercus. Clinical preceptors can play an active role in assisting PA learners seek out suitable IPE activities to meet their requirements (Information for preceptor regarding the IPE requirements is available upon request.)

Logging of Clinical Encounters

PA Learners are expected to log patient encounters as a diagnosis, procedure or both in the Case Logs tracking tool. Students are strongly encouraged to log on a daily basis, in real time, during the clinic hours, using mobile devices or easily accessible computers. The list of mandatory diagnosis and procedures have been taken from the CAPA National Competency Profile, and are available in Quercus.

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.

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 and Clinical 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 and paprogram.coordinator@utoronto.ca **as soon as** the accident occurs, as the timelines to submit workplace insurance claims are very tight

Clinical Placements - Overview

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

After the individual Clinical Placement descriptions, there are the overall lists of requirements for every PA Learner to meet in order to successfully complete the program. It is expected that there will be overlap in exposure and that only a portion of the requirements will be met in one individual rotation, hence the utility of the Case Logs patient encounter logging tool.

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.

End Rotation Exam

At the completion of the rotation, a proctored End Rotation Exam is to be completed by each learner at the end of the Primary Care B rotation. The learner will require computer and internet access.

FAMILY MEDICINE – Required Case Logging

Encounters/Diagnosis	Level of Involvement		
	Discussed /w Preceptor	Observed Patient /w this condition	Assessed Patient /w this Condition
Abnormal vaginal bleeding (pre or post-menopausal)			
Adnexal/pelvic mass			
Complications in pregnancy			
Contraceptive methods			
Fetal well being issues			
Genital tract infections/vaginal discharge			
Pap testing			
Menopause/urogenital aging			
Menstrual issues			
Prenatal care			
Sexual history			
Dizziness/vertigo			
Epistaxis			
Hearing loss			
Neck mass/lymphadenopathy/thyroid			

Otitis media/externa			
Sinus issues			
Abdominal pain/GI complaints			
Anxiety disorders/symptoms – also on psych			
Asthma			
Chest pain			
Coronary artery disease			
Cough/dyspnea			
Diabetes mellitus			
Fatigue			
Female preventive health exam			
Fever – on med list			
Headache			
Hypertension			
Low back pain			
Male preventive health exam (prostate, testicular issues)			
Mood			
Musculoskeletal concerns (back			
Obesity / nutrition counselling			
Osteoporosis			
Palliative care			
Review of blood work/lab abnormalities			
Skin conditions			
Urinary tract infection			
Well baby / child care			

Procedure	Observed	Assisted	Independently Performed
Otoscopy			
Speculum exam			
Cultures – vaginal and/or cervix			
Throat swab			
Counselling on sun protection and the ABCDEs of melanoma – move up into box			
Urinalysis			
Immunization (IM, SC, intradermal)			

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.

End Rotation Exam

At the completion of the rotation, a proctored End Rotation Exam is to be completed by each learner. The learner will require computer and internet access.

EMERGENCY MEDICINE -- Required Case Logging

Encounters/Diagnosis	Level of Involvement		
	Discussed /w Preceptor	Observed Patient /w this Condition	Assessed Patient /w this Condition
Abdominal pain			
Acute pain management			
Altered level of consciousness			
Anaphylaxis/allergic reaction			
Arrhythmia			
Chest pain			
First trimester bleeding			
Fracture/sprain			
Headache			
Hypotension/shock			
Overdose/toxicology			
Seizures			
Shortness of breath/hypoxia/apnea			
Testicular torsion/male genital conditions			
Trauma			

Procedure	Observed	Assisted	Independently Performed
Airway assessment/management			
Cardiac monitor placement			
Casting/splinting			
CXR interpretation			
ECG interpretation			
Extremity X-ray interpretation			
Suturing/knot tying			

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 required.

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.

End Rotation Exam

At the completion of the rotation, a proctored End Rotation Exam is to be completed by each learner. The learner will require computer and internet access.

SURGERY – Required Case Logging

Encounters/Diagnosis	Level of Involvement		
	Discussed /w Preceptor	Observed Patient /w this Condition	Assessed Patient /w this condition
Acute abdomen (ex. Appendicitis, bowel obstruction)			
Postoperative electrolyte management			
Postoperative fever			
Postoperative urine output management			
Trauma			
Tumour/malignancy			
Wound care			

Procedure	Observed	Assisted	Independently Performed
Foley catheter insertion			
Laparotomy/laparoscopy			
Preoperative assessment			
Suturing/knot tying/staple removal			
Wound closure/dressing/care			

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.

End Rotation Exam

At the completion of the rotation, a proctored End Rotation Exam is to be completed by each learner. The learner will require computer and internet access.

MEDICINE – Required Case Logging

Encounters/Diagnosis	Level of Involvement		
	Discussed /w Preceptor	Observed Patient /w this Condition	Assessed Patient /w this Condition
Altered level of consciousness			
Anemia			
Asthma			
Chest Pain (acute)			
Chronic pain management			
Congestive heart failure			
COPD			
Diabetes mellitus type 1			
Diabetes mellitus type 2			
Electrolyte disturbance			
Fever			
Gastrointestinal bleeding/GI disease			
Hepatobiliary disease			
Hypertension, acute			
Hypertension, chronic			
Peripheral vascular disease			
Pneumonia			
Renal failure/kidney injury or stone/kidney disease			
Seizure			
Stroke/TIA			
Thrombosis			
Weakness/paresis/paralysis			

Procedure	Observed	Assisted	Independently Performed
Blood gas interpretation (arterial or venous)			
Code blue/ resuscitation			
CXR interpretation			
ECG interpretation			
Family meeting for care planning			
Nasogastric tube placement			
Venipuncture			

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.

End Rotation Exam

At the completion of the rotation, a proctored End Rotation Exam is to be completed by each learner. The learner will require computer and internet access.

PAEDIATRICS – Required Case Logging

Encounters/Diagnosis	Level of Involvement		
	Discussed w/ Preceptor	Observed Patient /w this Condition	Assessed Patient /w this Condition
Abdominal pain (acute or chronic)			
Adolescent history			
Anemia			
Assessment of puberty			
Behavioural concerns			
Breast feeding problems			
Dehydration			
Dermatitis (atopic/contact/seborrheic)			
Development concerns			
Fever			

Growth/nutrition problem/FTT			
Heart murmur			
Jaundice			
Newborn care			
Otitis media			
Rash (viral)			
Respiratory illness			
Seizure			
Tonsillitis			
Urinary tract infection			

Procedure	Observed	Assisted	Independently Performed
Injection IM			
Injection SC			
Plot/interpret growth parameters			
Throat swab			

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 7. 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.

End Rotation Exam

At the completion of the rotation, a proctored End Rotation Exam is to be completed by each learner. The learner will require computer and internet access.

PSYCHIATRY – Required Case Logging

Encounters/Diagnosis	Level of Involvement
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	Discussed /w Preceptor	Observed Patient /w this Condition	Assessed Patient /w this Condition
Abuse			
Anxiety disorder/symptoms			
Delirium or dementia			
Mood – bipolar mania or bipolar depression			
Mood – depression			
Personality disorders			
Schizophrenia			
Substance use disorder			

Procedure	Observed	Assisted	Independently Performed
Assessment of capacity			
Assessment of child & family			
Assessment of violence/agitation			
Medication monitoring			
MMSE or MOCA			
Legal certification forms			
Suicide risk assessment			

Electives

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 7. 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.