

Clinical Rotation Site Procurement Policy and Procedures

A3.08

Prospective and enrolled students are never required to provide or solicit clinical sites or preceptors. It is the responsibility of the Program to ensure that all students have access to all required clinical rotations and to have the ability to meet all Clinical Phase learning outcomes. The Program will allow students to volunteer to assist the Program in identifying new clinical site(s) where the student is interested in participating in a clinical rotation. These potential sites must undergo the same approval process as program-identified sites and be approved appropriate for use. Clinical sites not meeting Program standards will not be approved. Students interested in arranging their own clinical rotations should contact the Director of Clinical Education with all necessary information by May 1st of the Spring 1 semester.

Policy on Preceptorship by Family Members

To maintain the integrity of the clinical education experience and to avoid any real or perceived conflicts of interest, students enrolled in the Rowan-Virtua School of Osteopathic Medicine Physician Assistant (PA) Program are prohibited from participating in any clinical rotation where a family member serves as the primary preceptor or has supervisory responsibilities for the student.

For the purpose of this policy, a *family member* is defined as a spouse, domestic partner, parent, child, sibling, grandparent, grandchild, aunt, uncle, cousin, in-law, or any individual residing in the same household as the student. Additionally, the program reserves the right to determine on a case-by-case basis whether other personal relationships may constitute a potential conflict of interest.

Students are required to disclose any potential conflicts when clinical placements are being arranged. Failure to disclose such relationships may result in disciplinary action and could jeopardize the student's standing in the program.

Clinical rotations are intended to provide objective, rigorous, and unbiased assessments of a student's performance in a professional environment. To ensure these standards are upheld, students must complete their rotations under the supervision of preceptors with whom no personal relationship exists.

Policy on Away Rotations for Students on Probation

Students enrolled in the Rowan-Virtua School of Osteopathic Medicine Physician Assistant (PA) Program who are on academic probation or professional probation will generally not be approved to participate in away rotations, defined as clinical rotations located outside the program's designated geographic region of roughly 120 miles from campus.

The purpose of this policy is to ensure that students requiring additional academic or professional oversight remain within close proximity to program faculty and support services. This proximity facilitates more effective monitoring, timely intervention, and regular communication, all of which are essential to the student's progress and remediation.

Eligibility for away rotations will be determined at the time of clinical placement planning. Any student placed on academic or professional probation after away rotations have been scheduled may be reassigned to a local clinical site at the discretion of the program.

Requests for exceptions to this policy will not be considered. Students must be in good academic and professional standing to be eligible for clinical training experiences beyond the local geographic area.

Elective Rotation Policy

The Rowan-Virtua School of Osteopathic Medicine Physician Assistant (PA) Program provides students with the opportunity to complete an elective rotation as part of their clinical education. While students are encouraged to indicate their preferences for specific medical or surgical specialties, geographic locations, or clinical sites, the program cannot guarantee placement in any particular elective rotation.

Elective rotation assignments are made based on site availability, preceptor capacity, accreditation requirements, and the overall needs of the program. Although every effort will be made to accommodate student interests when possible, the program prioritizes ensuring that all students receive high-quality, educationally appropriate clinical experiences.

Students are encouraged to approach the elective rotation as a strategic opportunity for professional development. Electives can serve as a valuable way to explore areas of medicine the student may be interested in pursuing after graduation or to strengthen clinical knowledge in disciplines where the student feels less confident. Thoughtful selection of elective rotations can support both long-term career goals and preparation for the Physician Assistant National Certifying Examination (PANCE).

Students should be aware that not all specialties or geographic preferences can be met, and they may be assigned to elective rotations that differ from their initial selections. Flexibility and professionalism are expected throughout the placement process and during the completion of all clinical rotations, including electives.

Clinical Site and Preceptor Onboarding Process

In order to ensure Program compliance with accreditation standards, all preceptors and clinical sites are evaluated carefully. The required components of establishing a clinical site are outlined below.

1. A preceptor or clinical site is recruited by the Program or contacts the Program directly regarding interest in preceptorship.

2. Program faculty conducts an initial clinical site evaluation.
3. The preceptor manual is given to any potential preceptor at the clinical site.
4. The Director of Clinical Education determines who at the clinical site can serve as a preceptor with a review of their board certification, licensing, and their ability to meet the course learning outcomes.
5. The Director of Clinical Education will provide the syllabus to each preceptor and preceptors will attest to being able to meet the course learning outcomes.
6. The Clinical Year Committee reviews the information gathered above regarding the clinical site and any potential preceptors and endorses the clinical site and/or preceptor for use.
7. A Clinical Education Affiliation Agreement is executed by both parties, and all supporting documentation is gathered (i.e. proof of medical malpractice insurance, general liability insurance, board certifications, and licenses of all preceptors involved).
8. If an approved clinical site has an approved preceptor available, this information is utilized by the Director of Clinical Education to schedule a student to complete a clinical rotation.

Precepting Process

1. The student is assigned to the clinical site by the Director of Clinical Education.
2. The student information is forwarded to the preceptor (as well as associated clinical sites), and includes: student biography, photograph, immunization records, date of last TB testing, N95 fit test, background check, verification of health insurance coverage, certificate(s) of malpractice insurance coverage, HIPAA training certification, and ACLS/BLS certifications.
3. The student begins the clinical rotation, and the Director of Clinical Education provides the preceptor with the most updated version of the specialty-specific objectives and outcomes.
4. The student will evaluate the clinical site, learning experience, preceptor, and clinical site resources at the conclusion of the clinical rotation.
5. The preceptor will evaluate the student's performance at mid-rotation and at the end of the rotation and will send the appropriate documentation to the Program accordingly.

Clinical Site and Preceptor Evaluation Process

The PA Program is committed to ensuring the quality and effectiveness of its clinical training sites through a structured evaluation process. Clinical sites and preceptors are continuously assessed to maintain high educational standards and to support student learning outcomes. The Clinical Year Committee (CYC), chaired by the Director of Clinical Education, oversees this evaluation process, reviewing all SCPE-related data and analysis as supplied by the Data and Assessment Committee (DAC). Evaluations of clinical sites are conducted through student site/preceptor/course evaluations, faculty site evaluations/visits/interviews, preceptor evaluations of students, and student assessment outcomes.

Each clinical site undergoes an initial evaluation by the Director of Clinical Education or a designated faculty member. Every clinical site is re-evaluated each year by the CYC. Student evaluations of clinical sites, courses, and preceptors are analyzed in aggregate and compared across similar rotation sites to identify trends in performance. Sites receiving an evaluation score

below the program's established benchmark of 3.5/5.0 on a Likert scale are subject to intervention by the Director of Clinical Education, who will develop an action plan for improvement. If a site does not show measurable improvement within two years, it will no longer be utilized for student placements. The findings from clinical site evaluations are reviewed by the Clinical Year Committee and Curriculum Committee, ensuring that the program's clinical training experiences align with its educational objectives and accreditation standards.

The PA Program verifies preceptor credentials, certifications, and licenses through a formal review process conducted by the Director of Clinical Education, ensuring that all preceptors hold active, unrestricted professional licensure, appropriate board certification, and relevant clinical experience to serve as qualified instructors for PA students.

The program also conducts a formal evaluation of clinical preceptors to assess their effectiveness in mentoring and educating students. Preceptors are evaluated by students at the conclusion of each rotation, with feedback collected on their teaching ability, accessibility, clinical expertise, and professionalism. This data is analyzed alongside student performance metrics and site evaluations to identify patterns or concerns. Preceptors scoring below the established benchmark of 3.5/5.0 are provided with feedback and may be required to participate in faculty development initiatives. The Director of Clinical Education works closely with preceptors to address identified areas for improvement. Preceptors who consistently fail to meet program standards despite intervention may be removed from the program's preceptor network. Findings from the preceptor evaluation process are reported to the Clinical Year Committee to ensure continuous quality improvement and compliance with accreditation standards.

Clinical Preceptor Credentialing and Evaluation Policy

To ensure the integrity and quality of clinical education, all clinical preceptors serving the Rowan-Virtua School of Osteopathic Medicine Physician Assistant (PA) Program must maintain appropriate licensure, credentials, and board certification in their respective disciplines (where applicable). The program is committed to maintaining a high standard of clinical instruction aligned with accreditation requirements and institutional policies.

All preceptors must provide documentation of their professional licensure and board certification(s) at the time of onboarding. These credentials will be verified by the PA program and re-verified **biannually** to ensure compliance. This credentialing review includes, but is not limited to, state professional licensure status, board certification (if applicable), and confirmation of good standing with relevant regulatory bodies.

Should a preceptor fail to maintain an active license, fall out of good standing, or allow their board certification (if required for practice or instructional credibility) to lapse, they will be **immediately removed from the clinical preceptor roster**. Such individuals will no longer be permitted to supervise students or serve in any instructional faculty capacity on behalf of the PA program.

This policy is in place to protect the educational experience of students, ensure patient safety, and uphold the regulatory standards set by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). The program reserves the right to perform additional credential checks at any time should concerns arise regarding a preceptor's professional status.

Clinical Site Visits

The Program will conduct periodic site visits to maintain relationships with clinical sites and providers. These site visits can be completed by faculty, alumni, adjunct faculty, or other personnel that the Program determines to be appropriate. Site visits can occur in person, by phone, or by video conferencing.

1. Site visits are mandated under any of the following conditions:
 - In reply to a preceptor request or complaint about a student.
 - In response to a student's concerns, whether communicated verbally or in conjunction with the mandatory student evaluation of the site/preceptor.
 - At the sole discretion of the Program.
2. Site visits can be requested for any reason by either the preceptor or the student by contacting the Director of Clinical Education. Under these circumstances the decision to conduct a site visit will be made by the Director of Clinical Education, in conjunction with the Program Director.
3. All sites have site visits conducted with the initial onboarding process, and then for any reason listed above. Site visits can be completed by faculty, alumni, adjunct faculty, or other personnel that the program determines to be in appropriate standing. Each visit will have a secondary Clinical Site Evaluation form filled out.

Call-Back Days

All PA students on rotation are required to attend Call Back Days. All Call Back Day activities are mandatory. There are a number of activities that take place on Call Back Days. They may include any of the following:

- End of rotation examinations.
- Elective Presentations: Student presentations on medical topics/patient case(s) experienced on rotations.
- Didactic Sessions: Review sessions based on the student's collective areas of weakness as determined by analysis of PACKRAT, Didactic year, EOR, and EOC performance.
- Lecture Series: assorted lectures on medical topics, CV writing, PANCE prep, coding/billing, contract negotiations, etc.
- Practical assignments: problem oriented practical exams, OSCE preparation, Clinical and Technical Skills training.
- Call Back Days will take place on the last Thursday and Friday of each five-week block. Depending on the planned activities, students can expect to be dismissed no later than 6 p.m.

Clinical Rotation Assessments

Preceptor Evaluations of Students

- **Preceptor Mid-Rotation Evaluations:** An interim evaluation will be submitted midway through the clinical rotation. This evaluation will not be graded but will provide the student, preceptor, and Program information on how the student is progressing through the clinical rotation. The Program's hope is to objectively measure how the students know their expectations. Any student receiving a score of less than "3" on any category will be required to meet with the Director of Clinical Education. Any preceptor who scores a student on any component less than "3" must contact the Director of Clinical Education to discuss a remediation plan. Students unable to improve these scores may fail the rotation.
- **Preceptor Final Evaluation:** The student will be evaluated on their ability to understand various roles in health care and working on the health care team, clinical skills, medical knowledge, evidence-based decision-making, preventive care and counseling, and professional behavior. Students must obtain an 80% in the professionalism section of the Preceptor Final Evaluation form, and an 80% overall on the Preceptor Final Evaluation to pass a clinical course.

Mid-Rotation Student Self-Evaluation

The student must fill out a Mid-Clinical Rotation Self-Assessment Check-in prior to attending the mid-rotation preceptor meeting. This form, individualized for each rotation, allows the student to understand their progress towards demonstrating competency in the preceptor evaluation items and guides the student towards ensuring that they are meeting ARC-PA Standards for clinical rotations. A student must inform the Director of Clinical Education if a response indicates that required experiences are not being met. This will prompt a conversation between the Director of Clinical Education, the preceptor, and the student to ensure ample opportunity to meet the requirements before the end of the rotation.

PAEA End of Rotation Exams

PAEA End of Rotation exams ("EOR exams") are a set of objective, standardized evaluations intended to serve as one measure of the medical knowledge students gain during specific clinical rotations. More information on the [content for each of the exams is available here](#).

Each student must complete and pass the Physician Assistant Education Association (PAEA) End of Rotation (EOR) examination corresponding to each supervised clinical practice experience (SCPE). EOR examinations are nationally standardized assessments designed to evaluate medical knowledge, problem-solving, and clinical reasoning consistent with entry-level physician assistant competencies.

The program determines performance using PAEA's score data and accompanying national statistics (mean and standard deviation) for each exam form.

Pass: Scaled score at or above the national mean minus 1.5 standard deviations (SD)

Fail: Scaled score below the national mean minus 1.5 SD

This approach provides a consistent, data-driven standard that aligns with national performance expectations and allows equitable comparison across exam versions and rotation disciplines. Students who fail an EOR examination must complete a formal remediation plan under faculty supervision. The Data and Assessment Committee reviews EOR outcomes annually to ensure the continued appropriateness, reliability, and fairness of this standard.

Patient Logging

It is imperative for the student to log all of their patient encounters throughout the clinical phase. This tool is vital to ensure that every student is meeting all of the standards related to clinical rotations. This will allow the PA Program faculty to track student progress towards meeting competencies and will allow for intervention if needed.

Students are to submit logs during the Clinical Phase documenting the patient encounters, diagnoses, and procedures while on rotations. It is understood that the number of patients may vary at specific sites.

Logging must be done daily so that data is not lost. Faculty will review this data on a weekly basis. Any technical problems with the electronic logging system should be addressed to the Director of Clinical Education immediately. Patient logging is Pass/Fail and must be completed for every rotation. Failure to log patients or procedures during a rotation will result in a failure of the rotation.

Failure to log patients and procedures on a daily basis (logs will be checked weekly) and/or to submit the Student Self-Assessment Mid-Rotation Form by the due date will result in a 2-point per week deduction from your overall course grade.

It is imperative that all patient encounters and procedures be logged. This data is utilized by the Program to evaluate sites/preceptors and number and type of student/patient experiences. Procedure logging may also help with credentialing post-graduation. The following fields are mandatory: age group, diagnosis, chief complaint, procedure/procedure code, case type, visit type, minutes with patient and preceptor, and the box clicked for Prenatal Care or Psychiatric (mental or behavioral) Care, if appropriate.

Course-Specific Assignments

Each rotational course has specific assignments related to the course-level learning outcomes. This information can be found in the individual course syllabus.

PACKRAT

At the conclusion of the didactic year, and again during the Capstone Course, students will participate in a 225 question “board like” examination (PACKRAT and PACKRAT II) which are used by PA Programs to help students determine areas that need to be addressed while preparing for the PANCE. From the information gathered, the faculty will assist in the development of call back day activities, assessment of the program and the curriculum, and the evaluation of

individual students. No grade is associated with either PACKRAT I or II. PACKRAT performance has been suggested to be a strong predictor of student performance on the PANCE. Therefore, students will be required to develop remediation guides with the help of their advisors if they meet the below PACKRAT remediation policy.

As part of the PACKRAT remediation policy and as a required resource for the clinical year courses, all students will be required to purchase a subscription of UWorld. UWorld will be a primary resource utilized for PACKRAT remediation.

End-of-Curriculum (EOC) Exam

This 300-question exam is built using a blueprint and content area list developed by PA educators and national exam experts and is required to be delivered in the final four months of the PA Program. The EOC exam is developed by PAEA and given through ExamDriver. This exam will be given in the Spring II semester of the Clinical year. Students must demonstrate competency of the exam material to graduate from the PA Program. Students must score a 1450 or greater to progress in the program and graduate. Students who score below 1450 must remediate and will be eligible for one reassessment attempt after developing a robust remediation plan with their advisor. Failure of the remediation reassessment attempt will result in a failure of the Capstone course and placement on a Performance Improvement Plan.

As part of the EOC remediation and as a required resource for the clinical year courses, all students will be required to purchase a subscription of UWorld. UWorld will be a primary resource utilized for EOC remediation.