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Supervision of Clinical Activities of Postgraduate Learners

Definitions (as defined by the College of Physicians & Surgeons of Ontario):

Postgraduate Learner – referred to as the “Learner” in this document, are physicians who hold a degree in Medicine and are pursuing residency / clinical fellowship education. The PG learner must hold valid registration with the College of Physicians and Surgeons of Ontario and be registered with the Postgraduate Medical Education Office.

Most Responsible Physician (MRP) – is the physician who has final responsibility and is accountable for the medical care of the patient. Every patient has an identified MRP. This ultimate responsibility cannot be delegated to a postgraduate learner. The person who is the MRP may vary from the daytime compared to after-hours care however the delegation of the MRP must be apparent to the learner. The delegation of the MRP may also vary from service to service but needs to be clear to the learner.

Supervisors - are usually physicians but can be other healthcare providers or Clinicians (i.e., interprofessional care settings) who have taken on the responsibility within their respective training programs to guide, observe and assess the educational activities of Learners. The supervisor of a Learner involved in the care of a patient may or may not be the MRP for that patient. Residents or fellows often serve in the role of supervisors, but do not act as the most responsible physician for patient care. Some healthcare providers in supervisory positions may not hold faculty appointments however continue to act as the MRP for patient care within their scope of practise.

Preamble:

Appropriate clinical supervision of PG Learners is a key part of striking a balance between graded responsibilities for the Learner, and ensuring patient safety. Learners are pursuing an educational program that leads to independent practice. It is recognized that Postgraduate Learners may supervise junior residents and / or medical students, but they are never the Most Responsible Physician (MRP).

Arrangements for supervision should be discussed with the PG Learner, the Supervisor, the CTU or Site Director (where applicable) and the Program Director. The initiation of this discussion is the joint responsibility of the Learner and the Supervisor/Site or CTU Director. The discussion of supervisor roles and associated activities can be covered when the structure for supervision is outlined at the start of each rotation. This discussion is necessary in order to reach an understanding and agreement of all parties that reflects supervision practices during the day as well as after-hours (or on call). This discussion would also be part of the defined supervision structure so that it is clear who to call during regular hours, after-hours or on call.

It is expected that within the Faculty of Health Sciences and all associated teaching sites that all MRP's and Postgraduate Learners will comply with this policy. This is a general statement of policy which may require interpretation by programs, hospitals, and clinical or laboratory services. It is expected that ongoing assessment should be documented at appropriate intervals to substantiate the delegation of responsibility.

Factors to consider in applying this policy are as follows:

1. Level of training and level of experience of the Learner.
2. Level of demonstrated competency.
3. Location –the policy applies to all clinical settings e.g., ambulatory clinics, in-hospital care, operating room etc.; even for ambulance transport there must be appropriate supervision. However, the level of supervision may depend on the clinical environment e.g., chronic care facility versus the operating room versus EMS transports. Hospital Bylaws may also dictate the level of availability of the MRP in certain patient care environments.
4. Acuity of the treatment intervention; the acuity of the treatment intervention will dictate the level of direct involvement of the MRP.
5. Circumstances that may surround specific situations, e.g., emergent situations.
6. A Learner in Remediation.
7. Learners are expected to take on a graduated level of clinical responsibility in step with their demonstrated growing competency although never completely independent of appropriate supervision.
8. This policy does not supplant established hospital policies (ie. mandatory in person supervision for certain activities or mandating immediate contact of supervisor/MRP in the event of specific patient events).
9. Program or rotation specific factors such as supervision expectation for after-hours clinics or home visits for reasons of Learner safety.

These factors are particularly important when Learners are off-service and the MRP may not be familiar with the Learner's background and capabilities.

Purpose:

The purpose of this policy is to clarify the roles and responsibilities of the MRP and the Learner to ensure the safety of patients, whose care is central to the training process. It is recognized that there is graded responsibility in that the Learner is working toward independent practice in their specialty or area of focused competence.

Scope:

This policy applies to all postgraduate Learners (Residents and Clinical Fellows), registered with the Postgraduate Medical Education Office at McMaster University and the Clinicians who are involved in their clinical teaching.

I **Principles of Adequate Clinical Supervision**

1. Patient care is central. (*Refer to Guidelines on Patient Safety.*)
2. Proper training optimizes patient care as well as the educational experience.

3. The MRP accepts the responsibility to supervise the postgraduate Learner and to evaluate the Learner to ensure that delegation is appropriate.
4. The Postgraduate Learner accepts the responsibility of reporting information to the MRP. There must be an appropriate joint exchange of information between the MRP and the Learner. The Learner must ensure that notification is timely and that appropriate documentation is maintained.
5. The training program accepts the responsibility of ensuring that the Postgraduate Learner is adequately supervised and that clinical supervisors are evaluated on their ability to supervise Learners. The program is also responsible for documenting that the Learner has been taught to perform relevant procedures and is appropriately supervised according to the complexity of the procedure, potential risk to the patient, Learner skill and experience, and hospital regulations.

II What is Adequate Clinical Supervision? What are the obligations of a Supervisor?

Adequate clinical supervision requires meaningful and appropriate involvement with direct observation by the supervising physician in all aspects of patient management. This includes:

- a) Being familiar with program objectives;
- b) Making the patient or substitute decision-maker aware of the identity of
 1. The most responsible physician and the fact that the most responsible physician is ultimately accountable for the patients' care
 2. The identity of Learner(s) who are members of the treatment team, their stage in the postgraduate program, as well as their degree of involvement in patient care;
- c) Being willing, accessible and available to see patients when required or when requested. The supervisors must also be willing to validate, preferably in writing and within a reasonable time, pertinent aspects of the history and physical findings. The supervisor should also identify aspects of the case affording educational emphasis.
- d) Regularly evaluating a Learner's clinical competence and learning needs and assigning graduated responsibility accordingly
- e) Making reasonable efforts to determine that the Learner has the necessary competence (knowledge, skills and judgment) to participate in a patient's care and does not compromise that care;
- f) Ensuring that all relevant clinical information is made available to the Learner, and directly assessing the patient as appropriate; and

- g) Communicating regularly with the Learner to discuss and review the Learner's patient assessments, management, and documentation of patient care in the medical record.

Evaluation of the Learner's performance to ensure that graded responsibility is occurring appropriately.

III **What are the Obligations of the Postgraduate Learner?**

- a) Participate in the care of patients as appropriate to his or her competencies, and specific circumstances, as well as to meet identified educational needs;
- b) Make the patient or substitute decision-maker aware of their name, role, stage in the postgraduate program, and degree of involvement in patient care;
- c) Make the patient or substitute decision-maker aware of the name and role of the most responsible physician, and the fact that the most responsible physician is ultimately accountable for the patient's care;
- d) Communicate with the supervisor and/or most responsible physician in a timely manner:

When:

- i) At the time of a new consult for an outpatient or inpatient
- ii) About patient assessments performed by the Learner and whenever an unusual or unexpected finding is observed
- iii) When there is a significant change in a patient's condition
- iv) Whenever the diagnosis or management is in doubt
- v) When the Learner is considering a significant change in a patient's treatment plan or has a question about the proper treatment plan especially PRIOR to the undertaking of a procedure or therapy, that has the potential for immediate or future serious morbidity
- vi) About a patient discharge from an inpatient or outpatient situation
- vii) When a patient or substitute decision-maker and family expresses significant concerns; or
- viii) In any emergency situation ¹
- ix) Prior to arranging a patient referral to another service
- x) Before signing off on a consult

¹ i.e. Post code blue

“Timely” could mean immediately, or done in a “pooled” fashion i.e. at the end of the shift, depending on the type of rotation, circumstances and level of acuity.

The MRP must be notified, in a timely fashion, when:

1. There is a wish to transfer the patient under the MRP’s care
2. A patient is admitted to hospital for all emergency admissions.
3. A patient is admitted to hospital for all for elective admissions.

IV When there is a disagreement between a Learner and a clinical supervisor

When a disagreement between a Learner and a clinical supervisor involves the appropriateness of patient care and, in the mind of the Learner, the patient's care is in jeopardy, the same mechanism as already exists in the hospitals to guarantee patient safety shall be used. Specifically these include contact with the head of the appropriate service, the chief of the appropriate department or the Chief of Staff of the hospital

N.B. Use of such mechanisms does not implicitly reaffirm the position of either party, but patient safety is "of paramount importance".

In accordance with the *Health Care Consent Act* and the CPSO’s policy on Consent to Medical Treatment, informed patient consent is required in all situations where a treatment or a change in treatment is proposed. In addition, there are some factors unique to the postgraduate environment, which should be disclosed to the patient in order for them to make an informed decision as to whether to give or refuse consent

a) Significant component of procedure performed independently by Learner

When a significant component, or all, of a medical procedure is to be performed by a Learner without direct supervision, the patient or family of the patient must be made aware of this fact and where possible, express consent must be obtained. Express consent is directly given, either orally or in writing.

b) Examinations performed solely for educational purposes

An examination is defined as solely “educational” when it is unrelated to or unnecessary for patient care or treatment. An explanation of the educational purpose behind the proposed examination or clinical demonstration must be provided to the patient and their express consent must be obtained. This must occur whether or not the patient will be conscious during the examination. If express consent cannot be obtained, e.g., the patient is unconscious, then the examination cannot be performed. The most responsible physician and/or supervisor should be confident that the proposed examination or clinical demonstration will not be detrimental to the patient, either physically or psychologically

Related Documents for Further Reference:

1. CPSO Policy Statement – Professional Responsibilities in Postgraduate Education - <http://www.cpso.on.ca/policies/policies/default.aspx?ID=1846>
2. PGE:COFM Ontario Policy – Principles Regarding Supervision of Postgraduate Medical Trainees - <http://www.fhs.mcmaster.ca/postgrad/policies.html>
3. Hamilton Health Sciences – Policy Library – available on HHS intranet
 - a. Perioperative Supervision of Learners in the Operating Room
 - b. Endoscopy Supervision of Learners in Endoscopy
4. St. Joseph’s Healthcare – in draft
5. Guidelines re: Patient Safety - <http://fhs.mcmaster.ca/postgrad/documents/patientsafetyFINAL...pdf>

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