

**Division of Academic Affairs**

**School of Pharmacy & Health Professions**

**Department of Physician Assistant**

Physician Assistant Program Handbook (2022-2024)

Policies and Procedures for PA Students

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Contained herein are policies pertaining to students within the Department of Physician Assistant. Students in the Physician Assistant Program are bound to the policies in the University of Maryland Eastern Shore Student Handbook, the School of Graduate Studies Handbook and this Physician Assistant Program Handbook. The policies in this Physician Assistant Program Handbook apply to all students and faculty in the University of Maryland Eastern Shore Physician Assistant Program regardless of their location or time in the program.



**Division of Academic Affairs**

**School of Pharmacy & Health Professions**

**Department of Physician Assistant**

# Welcome

I am excited to welcome you to The University of Maryland Eastern Shore (UMES) Physician Assistant Program! You are part of an exceptionally talented student body that is recognized for its academic abilities, energy and creativity. I am proud that you chose UMES.

UMES offers exceptional opportunities for physician assistant students to participate in activities outside the classroom that add value to your time inside the classroom. Whether you participate in community service, medical mission trips or graduate research, UMES has something for physician assistant students to connect to the mission of medicine and service.

This Physician Assistant Handbook will acquaint all students about many aspects of The UMES Physician Assistant Program. This handbook is designed to explain the policies and procedures of the program and to provide supplemental information regarding the program and the University. Please keep in mind that information provided in this book is subject to change. Changes in structure and policy regarding the didactic and clinical year may occur. The program will make every attempt possible to provide you with updated information as it becomes available. Also, in these pages, you will see descriptions of the services and activities available to students, as well as Accreditation Review Commission on Education (ARC-PA) Standards, denoted by brackets [ ] and superscript font, which are referenced throughout this handbook to flag key specific topics as required for meeting accreditation mandates.

The key to successful performance is to remain focused on your goals and to utilize the many opportunities provided by the program and university to help you through your studies. We strongly advise that you take time to review this handbook to ensure you are aware of all resources provided to you.

Again, thank you for choosing UMES. I hope your year ahead is both challenging and successful.

Tiffany Maxwell, DHSc., MSA, PA-C

Program Director and Department Chair

# University and Program Information

## General University Information

The University of Maryland Eastern Shore (UMES), the State’s Historically Black 1890 Land-Grant institution, emphasizes baccalaureate and graduate programs in the liberal arts, health professions, sciences, and teacher education. In keeping with its land-grant mandate, the University’s purpose and uniqueness are grounded in distinctive learning, discovery, and engagement opportunities in agriculture, marine and environmental sciences, technology, engineering and aviation sciences, health professions, and hospitality management. Degrees are offered at the bachelors, masters, and doctoral levels.

UMES is committed to providing access to high quality values-based educational experience, especially to individuals who are first-generation college students of all races, while emphasizing multicultural diversity and international perspectives. The University serves the education and research needs of businesses, industries, government and non-government organizations. The University is committed to meeting the economic development needs on the Eastern Shore; workforce development needs of the State; international development priorities of the nation; and commercialization and entrepreneurial ventures of the University, through engagement activities and partnerships.

UMES is located in the small town of Princess Anne on the Eastern Shore of Maryland. The town dates back to 1733 and has many buildings and landmarks of historic interest. The quiet community environment is excellent for learning, yet it is only 3 hours by car from the abundant cultural and recreational facilities of Washington, D.C., Baltimore, Philadelphia, and Virginia Beach. The state's famous seaside resort, Ocean City, is only 30 minutes from the campus. The campus is located 13 miles south of the town of Salisbury, which provides shopping and recreational facilities.

The School of Pharmacy and Health Professions at UMES consists of five academic departments: Exercise Science, Pharmacy, Physician Assistant, Physical Therapy, and Rehabilitation Services. There are undergraduate programs in Exercise Science and Rehabilitation Services. Existing graduate programs include: Master of Science in Rehabilitation Counseling, Master of Science in Pharmaceutical Sciences, Master of Medical Science in Physician Assistant, Doctor of Physical Therapy (DPT), Doctor of Pharmacy (PharmD), and Doctor of Philosophy (PhD) in Pharmaceutical Sciences. Students are actively involved with faculty initiatives to improve the health and well-being of the community through health education/promotion.

## University Accreditation

The University of Maryland Eastern Shore is one of 12 universities and 2 Regional Education Centers within the University of Maryland System and is accredited by the Middle States Commission on Higher Education, an institutional accrediting agency recognized by the US Secretary of Education and the council for Higher Education Accreditation.

Program Accreditation Statement

The ARC-PA has granted Accreditation-Provisional status to the University of Maryland  Eastern  Shore Physician  Assistant  Program sponsored by the University of Maryland Eastern Shore.  
  
Accreditation-Provisional is an accreditation status granted when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program’s ability to meet the ARC-PA Standards or when a program holding Accreditation-Provisional status appears to demonstrate continued progress in complying with the Standards as it prepares for the graduation of the first class (cohort) of students.  
  
Accreditation-Provisional does not ensure any subsequent accreditation status. It is limited to no more than five years from matriculation of the first class.

## Organizational Chart

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Dean, School of Pharmacy and Health Professions

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Program Director

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Asst. Medical Director

Mosha Peters-Harris, MD

Medical Director

Letitia Banks, MD

Medical Director

Jonda White, MBA

Clinical Education Director

Tamarah Thompson, DMS, DSc.,MSHS, MS, PA-C

Didactic Education Director

Didactic Faculty & Lecturers

Clinical Faculty & Lecturers

Timothy Sparta, PA-C, Site Visitor

Felicia Elvis, PA-C, Clinical Coordinator

Kamil Alzayady, Ph.D.

Patrick Caruso, MD, FAAP

**Dr. Khaled Hasan, M.D., M.S., Ph.D**

Dr. Jeffrey Blair, MD, MPH, FACP, FAAP

Nicole Wooten, PA-C

Traci Guthrie

Program Management Specialist

Candice Logan, B.S.

Program Administrative Specialist

Charlett Handy, M.Ed., MPA

Admissions Coordinator

## Department of Physician Assistant Directory

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## University Mission

The University of Maryland Eastern Shore (UMES), the state’s historically black 1890 land-grant institution, has its purpose and uniqueness grounded in distinctive learning, discovery and engagement opportunities in the arts and sciences, education, technology, engineering, agriculture, business and health professions.

UMES is a student-centered, doctoral research degree-granting university known for its nationally accredited undergraduate and graduate programs, applied research, and highly valued graduates.

UMES provides individuals, including first generation college students, access to a holistic learning environment that fosters multicultural diversity, academic success, and intellectual and social growth.

UMES prepares graduates to address challenges in a global knowledge-based economy, while maintaining its commitment to meeting the workforce and economic development needs of the Eastern Shore, the state, the nation and the world.

## Program Mission

The Department of Physician Assistant is a master degree granting educational program of the University of Maryland Eastern Shore (UMES). As a component of the 1890 Land Grant University, it is committed to providing equal opportunity, especially to those of multicultural backgrounds. The program promotes health and wellness through the provision of quality primary care health education in a diverse environment that values the discovery of knowledge and the development, dissemination and practical application of that knowledge through community outreach and service. The department aims to educate and prepare competent and socially conscious clinical professionals to provide holistic, ethical, and compassionate care to meet the needs of diverse communities in local, state, national and global environments.

## Program Goals

1. Cultivate a holistic admission process to recruit and select multiculturally diverse and highly qualified applicants who can complete the rigorous Master of Medical Science in Physician Assistant Studies.

2. Facilitate a learning environment that promotes interprofessional collaboration to ensure continuity of patient care and positive patient outcomes.

3. Foster an environment that ensures our education, research, technology and service initiatives address the primary health care needs of the underserved rural and urban communities across Maryland and the nation.

4. Instill a commitment to continuous personal growth and professional development to empower learners to remain socially aware of regional and global health care concerns.

5. Prepare physician assistant students to exhibit the highest level of clinical, interpersonal and professional competencies while working as members of healthcare teams.

## Vision

We are committed to –

1. Fostering the interpersonal and collaborative attributes necessary for our PA students to become exemplary medical providers working in team-based practices.
2. Producing graduates who will master the skills required to competently and compassionately practice preventive and diagnostic medicine.

# General Program Information

# Program Admission Requirements {A3.11-A3.16}[[1]](#endnote-1)

## Admission Cycle

|  |  |
| --- | --- |
| CASPA Opens | May 1 |
| Application completed to CASPA | November 1 |
| Supplemental UMES Graduate School Application and supporting documents | Upon acceptance to the Program |
| Interview selected candidates | November – February |
| Admission decision | No later than March 15 |
| Acceptance invitation to those selected | Two weeks after admissions letter is received |
| Classes Start | End of August |

# Application Requirements {A3.13}[[2]](#endnote-2) {A3.14}[[3]](#endnote-3) {A3.15}[[4]](#endnote-4)

The Department will admit qualified candidates to matriculate through the MMS-PAS curriculum of study. Applicants from Health Personnel Shortage Areas (HPSA) <https://data.hrsa.gov/tools/shortage-area/hpsa-find> or Medically Underserved Areas/Populations (MUA/P) <https://data.hrsa.gov/tools/shortage-area/mua-find> and groups and/or racial/ ethnic populations underrepresented within the physician assistant profession are encouraged to apply and will receive preference. Graduates of the University of Maryland Eastern Shore and/or Historically black colleges or universities (HBCUs) will be offered an interview as long as the prospective student meets **all minimum admission requirements**.The UMES PA Program Admissions Committee selects students for admission. Applicants must meet the following minimum criteria for consideration for admission into the MMS-PAS Program:

1. A Bachelor’s degree from US institutions of higher education accredited by a regional accrediting association or the degree equivalent in another country with a 3.0 GPA on a scale of 4.0 from the institution. Students must have completed or be in the final stages of completing a bachelor's degree from a regionally accredited college/university or appropriate international institution. Students may apply while their degree is in progress; however, degree completion is required prior to the January 15th verification deadline. Official final transcripts documenting degree completion should be sent to PADept@umes.edu as soon as possible after degree completion.
2. As a policy, UMES Master of Medical Science in Physician Assistant Studies Program does not round-up any grades, including our own course examination scores and course GPAs. This also applies to prospective applicant cumulative science and prerequisite GPAs. However, if your cumulative undergraduate total GPA is below 3.0 on a 4.0 scale, and specifically only for the cumulative overall undergraduate GPA, we are mindful that some students do poorly in their freshman year but then excel in their remaining undergraduate years. The UMES PA Program views this as a sign of academic and emotional maturity. If you are such a student, and only once your application has been completed and verified by CASPA, you may email our Program Management Specialist at [PADept@umes.edu](mailto:PADept@umes.edu) and request that the Program reevaluate your transcripts. If approved, the Program may then recalculate your overall GPA based on your Junior and Senior course grades at a 4-year regionally accredited college or university. Courses completed at a community college and courses taken alone (i.e., not with a full semester course load) will not be included in this recalculation. It is important to understand that this is done on a case-by-case basis and the program decision regarding permitting the recalculation and the results of the recalculation are final and not open to consideration for appeal. Please see our waiver request here. Students requesting this exception may be asked to provide more information related to the reasons for academic performance.
3. Applicants with a Bachelor’s degree earned outside of the US must send their transcripts to one of the member organizations associated with the National Association of Credential Evaluation Services (<https://www.naces.org/members>) for translation. Then submit the results to CASPA, and complete all Medical Core prerequisite courses (see below) in the United States. No exceptions will be made.
4. Applicants who are not U.S. citizens are required to submit official test scores for either Test of English as a Foreign Language (TOEFL) <https://www.ets.org/toefl>, Pearsons Test of English (PTE) <https://pearsonpte.com/> or the academic International English Language Testing System (IELTS) <https://www.ielts.org/en-us> . The following are the minimum scores for admission consideration:
5. TOEFL: 250 computer-based or 100 Internet-based,
6. PTE: overall score of 68
7. IELTS: an overall band score of 7.0, with no individual band score below 6.0.
8. All applicants must successfully complete the following Medical Core prerequisite courses with a grade of “C” or higher (within the Bachelor’s degree *or* through coursework at a regionally accredited US institution of higher education).

Medical Core Prerequisite Courses and Credit Hours are listed in the chart below:

|  |  |
| --- | --- |
| **Coursework** | **Semester credit hours** |
| Medical Terminology | 1 |
| Biology with lab | 4 |
| Microbiology | 3 |
| Organic Chemistry I with Lab | 4 |
| General Chemistry/Biochemistry with Lab | 4 |
| Human Anatomy/Anatomy & Physiology I | 3 - 4 |
| Human Anatomy/Anatomy & Physiology II | 3 - 4 |
| Psychology | 3 |

1. Prerequisite science courses are to be completed within six years prior to the date of admission.
2. A waiver of the six-year requirement, or grade requirement, for a prerequisite course may be requested by the applicant if 1) there is a continuous employment history that would demonstrate knowledge of the course content, or 2) the applicant has a B grade or better, within the last six years, in a more advanced course in the same subject. Knowledge-based testing does not satisfy any of the prerequisites. **Waivers will not be considered until the application has been verified by CASPA**. Please see our waiver request here. The waiver should be submitted to [PADept@umes.edu](mailto:PADept@umes.edu). **The waiver must be approved by Program Director.**
3. All applicants to the PA Program must apply through the Central Application Service for Physician Assistants (CASPA). <https://caspa.liaisoncas.com/applicant-ux/#/login>. Applicants must also submit a supplemental application to the UMES Graduate School (<https://www.umes.edu/Grad/>).
4. When completing the CASPA application particular attention should be given to the following:

a. The applicant’s personal statement detailing their desire to become a physician assistant.

b. Three (3) letters of recommendation addressing the applicant’s potential as a physician assistant.

c. One of the letters of recommendation must be from a practicing physician assistant with whom the applicant has had a minimum of 40 hours of first-hand observation or “shadowing” experience. Please complete this form and upload to CASPA.

d. Documentation of a minimum of 500 hours of paid experience involving direct patient care hours are required. It is recommended that students obtain direct patient care hours in different medical settings, e.g., hospice, assisted living facility, hospital, underserved areas/countries, etc. To obtain strong direct patient care experience, students are encouraged to obtain certification credentials, e.g., paramedic, nurse's aide, phlebotomist, medical assistant, radiologic technologist, EKG tech, EMT (I or Basic), LPN, dental hygienist, or clinical laboratorians/scientists (the student MUST be performing phlebotomy, assisting with bone marrow aspirations/biopsy and must have direct patient interaction, not just with their specimens), and behavioral health technician. All required direct patient care hours must be completed by the application deadline. (Hours must be completed by the November 1st deadline). Please complete this form and upload to CASPA.

1. Applicants must have no history of drug abuse or conviction of a felony and must be able to pass a background and drug test. Background and drug tests must be performed prior to admission to the UMES PA Program, and prior to start of the clinical phase of the program.
2. Applicants must have no history of dismissal from another Physician Assistant program for academic or disciplinary reasons.
3. All applicants must be able to meet the program’s **Technical Standards**.

Application Requirements are subject to change for the next application cycle. Please continue to check back on this website for any changes or adjustments.

# Available Seats and Wait List (Alternates)

1. The program will offer seats to 30 candidates. Class size is determined by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA).
2. A wait-list of qualified alternate candidates for admission to the program may be maintained to replace previously selected candidates who decline or do not matriculate.

# Interview and Admissions Criteria {A3.14}[[5]](#endnote-5)

1. Applicants submitting a complete CASPA application prior to the November 1st deadline may be invited for an early interview. Otherwise, interviews of selected candidates will be conducted December through February.
2. Using criteria developed by the UMES PA Program’s Admissions Committee, applicants will be invited to interview. Please note that not all qualified applicants will be invited for an interview.
3. Criteria used by the interviewers in their evaluations of candidates include:

a. Past academic performance, grades, grade point averages in undergraduate and required Medical Core courses, extracurricular activities, work experience, length and quality of healthcare experiences.

b. Understanding of the history of the PA profession, the role and scope of physician assistant practice.

c. Appearance, emotional and intellectual maturity demonstrated during interview including interpersonal skills, the ability clearly communicates and establish rapport with others.

d. The competitive applicant should be aware of the uniqueness of a PA program at an HBCU, health disparities, be able to articulate an understanding of diversity, professionalism, cultural competency and have an interest or experience in serving in a medically underserved area.

e. All accepted applicants (to the PA Program) must submit a supplemental application to the UMES Graduate School.

# Acceptance Policy {A3.14}[[6]](#endnote-6)

1. Admission decisions will be based on information contained in the candidate’s CASPA application and the result of candidate interviews.
2. Admission decisions will be made no later than March 15th for the following Fall admission cycle.
3. Upon acceptance to the MMS-PAS Program, the candidate will be notified of acceptance and given two weeks to respond to their acceptance letter.
4. A **non-refundable** acceptance fee of $1,500.00 must accompany the acceptance letter. On admission, this acceptance fee will be credited toward PA program fees.
5. The program reserves the right to rescind acceptance of any candidate offered or seated into the program who has submitted incorrect or false information or documentation.

# Competencies {B1.01}[[7]](#endnote-7){B1.02}{B1.03}[[8]](#endnote-8)

## Student Learning Outcomes and Objectives (LOs)

Upon completion of the UMES PA Program, graduates are expected to be competent in the following areas: The PA Program learning outcomes are as follows:

LO1: develop ability to perform a complete physical exam and to organize, integrate, interpret and present clinical data in a clear, concise manner;

LO2: support effective and sensitive communication with patients;

LO3: apply advanced critical thinking skills to evaluate sources of information;

LO4: exhibit attributes of engaged citizenship, community service, and social justice;

LO5: develop effective communication and teamwork skills with health care teams, working in teams and groups to facilitate conflict resolution;

LO6: provide a comprehensive approach to normal human health and development, both physical and mental;

LO7: provide explanation and demonstration of skills needed to assess core diseases encountered in primary care;

LO8: integrate diagnostic assessment skills with knowledge of patient presentation, pharmacology and health care subspecialties to synthesize appropriate treatment plans;

LO9: promote cross-cultural and socioeconomic sensitivity, confront prejudice, and support development of effective medical practice in a diverse society;

LO10: exhibit competency practicing in clinical settings involving special needs patient populations;

LO11: promote commitment to provide effective, accessible, continuous, comprehensive and personalized health care;

LO12: emphasize fundamental importance of ethical behavior in medical practice;

LO13: promote teaching of patients, community and colleagues;

LO14: participate in generating new and evolving medical knowledge through research and intellectual inquiry;

LO15: apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness and integrate evidence from scientific studies related to patients’ health problems;

LO16: develop cutting edge knowledge of the PA profession with abilities to participate as leaders at the local, regional, state and national levels, shaping future policy and legislation to promote PA practice and advancement;

LO17: apply knowledge of basic science concepts to facilitate understanding of medical sciences;

LO18: demonstrate basic competency in basic clinical procedures performed by a graduate PA;

LO19: upon graduation, be prepared to enter the workforce as a gainfully employed PA with excellent job search skills and knowledge to obtain and maintain licensure in any state as a practicing PA;

LO20: collaborate effectively as a member of interprofessional health care teams;

LO21: exhibit the ability and skills to attend and care for patients in emergency settings; and

LO22: exhibit competency while practicing in community health and population health settings.

## Essential Knowledge and Skills

All candidates for graduation from UMES’s PA Program must possess essential knowledge, skills and abilities necessary to complete the curriculum successfully in order to function in a variety of clinical settings and to provide a wide spectrum of patient care. Therefore, every PA student must master a common body of basic science knowledge and master the principles, knowledge, and procedures of the major required supervised clinical practical experience (SCPE) clerkship specialties in (i) family medicine (FM), (ii) pediatrics,   
(iii) women’s health (WH), (iv) internal medicine (IM), (v) general surgery,   
(vi) emergency medicine (EM), and (vii) behavioral and mental health (B/MH). As detailed in this manual, The *Technical Standards* require that every student have, for example, sufficient capacities and abilities[[9]](#endnote-9) to: (i) acquire, synthesize, and apply information in a variety of settings and use a variety of modalities; (ii) manipulate the equipment, instruments, apparatus, or tools required to collect and interpret data appropriate to PA practice; (iii) use intellectual ability, exercise proper judgment, and complete all responsibilities within a timeframe that is appropriate to a given setting; (iv) demonstrate emotional stability to function effectively under stress and adapt to changing environments inherent in clinical practice and health care. This will be measured by the faculty team reviewing:

* Formative and summative course examinations completed by students;
* End-of-rotation examinations in Family Medicine, Pediatrics, Women’s Health, Internal Medicine, General Surgery, Emergency Medicine, and Behavioral/Mental Health;
* Review of clinical preceptors’ evaluations of student practice;

# [Curriculum](https://www.cmich.edu/colleges/CHP/hp_academics/physician_assistant/Pages/Curriculum-Overview.aspx)

The program operates within The School of Pharmacy and Health Professions. The UMES PA Program is a 28-month, full-time graduate professional medical sciences program designed to be taken over nine consecutive semesters with a curriculum emphasis on primary care medicine and clinical methods. The program trains learners to become ethical, compassionate and professional health care providers while preparing them for certification and licensing as graduate PAs. A Master of Medical Science in Physician Assistant Studies (MMS-PAS) degree is awarded upon successful program completion.

The UMES PA Program consists of nine (9) continuous semesters of rigorous graduate level training that covers all areas of medicine. The program, during the first 16 months of didactic study, provides students with a firm background in basic medical science, stressing the importance of patient interaction and teamwork in medicine through courses such as clinical medicine, patient assessment, pharmacotherapy, pathophysiology and diagnostic and therapeutic procedures.

The second year of the program is 12 months in duration and will provide students with Supervised Clinical Practice Experiences (SCPEs). Students will be matched to practicing physicians, PAs, NPs, or Nurse Midwives who serve as preceptors to assist in further educating and training PA students through actual patient encounters in team-based settings. Clinical rotations include the four core **primary care clerkships** of family medicine, pediatrics, women’s health, and behavioral/mental health; three **critical care clerkships** of general surgery, internal medicine, and emergency medicine, and; one **elective clerkship**. Students must pass each clerkship individually. You will learn more about the second year of studies during the spring 1 semester and in detail in summer 2 when you will undergo your formal SCPE year orientation and receive the **PA Program Clinical Year Student Handbook**.

It is important to note that all courses to be counted toward your degree must be taken at UMES while enrolled in the Physician Assistant Program. At this time, the UMES PA Program does not award or grant advanced placement. Under no circumstances will graduate level courses taken during your undergraduate education, or at any time prior to beginning the Physician Assistant Program, be counted toward your graduate degree. For example, if you take the required Applied Anatomy prior to your first semester in the Physician Assistant Program, the course will not be counted toward your MMS-PAS degree and you will be required to retake the course as part of your PA education. Courses taken at institutions other than UMES will not be accepted for credit towards your MMS-PAS. Furthermore, transfer credits will not be accepted.

# Course Schedule

## [Didactic](https://www.cmich.edu/colleges/CHP/hp_academics/physician_assistant/Pages/Curriculum-by-Semester.aspx) Phase (Semesters I-IV)

|  |  |  |
| --- | --- | --- |
|  | **Fall I** |  |
| PHAS 607a | Regional Anatomy | 5 |
| PHAS 633 | Scientific Basis of Medicine I | 3 |
| PHAS 650 | Diagnostic Tests I | 2 |
| PHAS 660 | History and Physical Examination I | 3 |
| PHAS 625 | Clinical Pharmacology I | 3 |
| PHAS 608 | Clinical Medicine I | 4 |
|  |  | **20** |
|  | **Winter I** |  |
| PHAS 607b | Regional Anatomy | 1 |
|  |  | **1** |
|  | **Spring I** |  |
| PHAS 609 | Clinical Medicine II | 4 |
| PHAS 626 | Clinical Pharmacology II | 3 |
| PHAS 651 | Diagnostic Test II | 2 |
| PHAS 620 | Infectious Disease | 3 |
| PHAS 634 | Scientific Basis of Medicine II | 2 |
| PHAS 640 | Clinical Problem Solving I | 3 |
| PHAS 661 | History and Physical Examination II | 3 |
| PHAS 671 | Preventive Medicine | 2 |
|  |  | **22** |
|  | **Summer I** |  |
| PHAS 610 | Clinical Medicine III | 4 |
| PHAS 635 | Scientific Basis of Medicine III | 2 |
| PHAS 630 | Clinical Procedures I | 3 |
| PHAS 641 | Clinical Problem Solving II | 3 |
| PHAS 627 | Clinical Pharmacology III | 3 |
| PHAS 652 | Diagnostic Tests III | 2 |
| PHAS 662 | History and Physical Exam III | 3 |
| PHAS 673 | Psychiatry | 3 |
|  |  | **23** |
|  | **Fall II** |  |
| PHAS 612 | Obstetrics/Gynecology | 3 |
| PHAS 614 | Pediatrics | 3 |
| PHAS 616 | Surgery | 2 |
| PHAS 618 | Emergency Medicine | 2 |
| PHAS 624 | Issues in Practice | 2 |
| PHAS 631 | Clinical Procedures II | 3 |
| PHAS 645 | Crit. Appraisal of Med. Lit & Evi Based Med | 2 |
| PHAS 642 | Clinical Problem Solving III | 3 |
| PHAS 672 | Applied Ethics and Law | 2 |
|  |  | ***22*** |
|  |  |  |
|  | **Total Didactic Year credits** | **88** |
|  |  |  |
|  | **Clinical Phase** |  |
|  | **Winter II** |  |
| PHAS 675 | Clerkship Preparation | 2 |
|  |  | **2** |
|  | **Spring II** |  |
| PHAS 680 | Capstone I | 2 |
| PHAS 690 | Clinical Education I | 9 |
|  |  | **11** |
|  |  |  |
|  | **Summer II** |  |
| PHAS 691 | Clinical Education II | 6 |
|  |  | **6** |
|  | **Fall III** |  |
| PHAS 681 | Capstone II | 2 |
| PHAS 697 | PANCE Preparation Seminar | 2 |
| PHAS 692 | Clinical Education III | 9 |
|  |  | **13** |
|  |  |  |
|  | **Total Didactic Year Credits** | **88** |
|  | **Total Clinical Year credits** | **32** |
|  |  |  |
|  | **Total credits for PA Program** | **120** |

# Supervised Clinical Practice Education Clerkship Phase

All courses must be taken in the semester/order listed, unless special circumstances (de-matriculation or extended leave) interfere with a student’s ability to complete the curriculum as prescribed. Requests to deviate from the prescribed curriculum for reasons other than those listed above will not be granted. Students forced to deviate from the prescribed curriculum due to de-matriculation or extended leave will be assigned an alternative curriculum by the PA Program’s Progress and Promotion Committee. More detailed information regarding the didactic and clinical curriculums, including rules and regulations, can be found throughout this handbook. Please note that the UMES PA Program does not strictly follow the University’s academic calendar. For specific schedules, please refer to the Clinical Program Handbook.

## Classroom and Lecture Schedule

Lectures are generally given in blocks, Monday – Friday, to best accommodate laboratory sections and seminars as well as clinical mentorship days which start during the first summer of the didactic year. Break times are given per university policy. **Final decisions regarding laboratory sections, course meeting times, and formative testing is under the authority of the Program Director only. Students are prohibited from requesting changes to lab sections and class time after the semester has begun.**

While students receive a class schedule for the semester that includes weekly course, lab, seminar, and guest lecturer schedules, the program cannot always adhere strictly to the days and times listed. The majority of the part-time faculty is composed of practicing Physicians and PAs whose schedules may fluctuate. When an emergency or conflict arises and classes must be rescheduled, an effort is made to do so within regularly scheduled class times; however, the program reserves the right to schedule classes, lectures and events in the evenings, on Saturdays and on Sundays. **The PA Program also reserves the right to add additional hours to previously scheduled class hours as necessary.** For example:

* ACLS training must be provided by a certified ACLS instructor and is several hours long. The PA Program typically schedules ACLS training for learners during the Clerkship Boot Camp course or over the weekend.
* Due to the fact that the time allocation for several examinations often requires many hours, the tests and student assessment sessions are frequently scheduled outside of regular class times.

Students are expected to be in the classroom, ready to begin classes at the stated times. Clinical mentorship days can be cancelled at any time by the program. All small group, laboratory and mentoring schedule assignments are planned out by the faculty and staff and cannot be changed by students.

Classroom seating and laboratory assignments are at the discretion of the Instructor of Record and the Curriculum Review Committee. Use of laptops, computers and other electronic devices in the classrooms are at the discretion of the Instructor of Record. Furthermore, recording of lectures in any manner (i.e., audio, video, etc.) is prohibited unless pre-approved by the Instructor of Record. Use of any electronic device in classrooms/laboratory session is prohibited, unless specifically permitted by the Instructor of Record/CRC.

# Didactic First Year

## Unique Qualities of the Program

During the didactic phase of the program, students take courses that build on their prerequisite knowledge and skills to develop an extensive fund of knowledge in human anatomy, physiology, pathophysiology, behavioral medicine, infectious disease, pharmacology, ethics, clinical medicine and medical/surgical specialty areas. Students also complete courses to develop specific skills and competencies in medical history, physical examination, treatment processes and clinical procedures.

## Clinical Problem Solving coursework’s mentorship experience

A three-semester Clinical Problem Solving (CPS) course series draws upon knowledge learned in all other courses. Traditional classroom lectures are supplemented with small group learning and critical thinking experiences, simulated patient interactions and mock medical procedure training and testing. Furthermore, primary care clinical mentorship experiences are integrated into these courses, which provide not only exposure to role models for professional behavior and inter-professional shared learning, but also serve as an active introduction to patient management while reinforcing knowledge and skills gained through classroom work.

The clinical mentorship experience starts in the fall of the first year. Through the clinical problem solving coursework and mentorships, PA students learn to become critical thinkers.

# Clinical 2nd Year (Supervised Clinical Practice Experiences) {B3.01}[[10]](#endnote-10) {B3.02}[[11]](#endnote-11) {B3.03}[[12]](#endnote-12) {B3.04}[[13]](#endnote-13) {B3.05}[[14]](#endnote-14) {B3.06}[[15]](#endnote-15) {B3.07}[[16]](#endnote-16) {A3.03}[[17]](#endnote-17)

## Terminology for Clinical Year

## Accreditation Review Commission on Education for the Physician Assistant (ARC-PA).

* Supervised Clinical Practice Experience (SCPE).
* Standards associated with Clinical year (B3.01, B3.02, B3.03, B3.04, B3.05, B3.06, B3.07).
* [Additional Standard: ARC-PA Standard A3.03 -Students must not solicit clinical sites or preceptors. The Program must coordinate Clinical Sites and preceptors for program-required rotations. Referrals are accepted. Student family members, including spouses, current or future family members, are also not permitted to solicit clinical sites or preceptors or be clinician instructors.]
* POD - Area or town assignment and the surrounding area (up to a 60-mile radius).
* Preceptor - Any instructional faculty member who provides student supervision during a SCPE. Students may train with multiple seasoned clinicians whether MD/DO, PA/NP, CNM, PhD, or any licensed clinician; LMSW, MALLP, MALPC, or LBSW.
* Rotation - Another term for SCPE.

## Clinical Education Team

* Clinical Education Director (CED)
* Program Management Specialist (PMS)
* Program Administrative Specialist (PAS)
* Program Director (PD)
* Medical Director(s) (MD)
* Clinical Coordinator (CC)
* Clinical Site Visitor (CV)

# Special Circumstance Placement Consideration

Students with extenuating circumstances may apply for special consideration in placement when alternatives are available. All requests must be made to the Physician Assistant Program for referral to the Clinical Education Director prior to the match process. Requests should be made in writing, sent by e-mail and include a description of the extenuating circumstances. The Clinical Education Director will consult with the Clinical Education Team on each request. Requests will be granted based on, but not limited to: personal need, professional conflict (patient-physician relationship; student-faculty relationship), site availability and educational capacity. Students granted special considerations placement are still expected to complete the match process.

# Out-of-State Clinical Assignments

Students are required to complete all core SCPE assignments. Due to the unique location of the Eastern Shore, placements will be made in neighboring states, Delaware and Virginia. These placements will only be granted within health systems where UMES has existing Affiliation Agreements. Students may request their elective rotation in the neighboring states however, the Program Management Specialist will consult with the Clinical Education Team on each request. Each student will be allowed only one (1) out of state rotation (unless placement is in accordance with the aforementioned circumstances). The student will be responsible for all housing and transportation costs whether in-state or out of state.

# PODS

SCPE sites are unique in comparison to other PA programs. As most programs are associated within one specific health system, UMES’s PA Program must rely on multiple health systems and independent clinical sites for its SCPE's. Because of this unique set up, the program creates areas or PODS based on the number of resources it can provide. The number of PODS varies per year and are not necessarily the same every year.

***\*A note about PODS: Although the program strives to place students within their preferred POD for all SCPEs, the program reserves the right to place students in SCPEs outside of the generalized 60-mile radius POD if necessary. The program also may reassign a student to a new POD altogether during the course of the clinical year.***

# Match Process for SCPE Assignments

The match process is an exciting rite of passage for PA graduate students that is a culmination of years of hard work, dedication, and matriculating from the didactic to the clinical year. This process will align students within a POD in which they will train for the majority of the clinical year. Utilizing the online survey tool, the program will do its best to match students with their top preferences.

* The program makes all decisions with regard to clerkship assignments, content and sequencing. The PA Program reserves the right to modify the above referenced clerkship rotation assignments in accordance with accreditation standards, preceptor availability, clinical site resources and program need.
* Students are permitted to identify a potential preceptor outside of the established PA Program network. Students are asked to provide contact information for the potential preceptor. The Program Management Specialist will contact the site to inquire about the interest and appropriateness of the site. Once the site is vetted via phone, a site visit will be made by a member of the clinical team to determine if the site meets the expectations for servicing as acceptable clinical experiences.
* Students are not allow to have a relative serve as a preceptor for himself or herself. The provider (relative) may serve as a preceptor to a classmate.
* Students are not allowed to have clinical rotations with a current employer. If a student has a signed contract to work with a particular office or preceptor after graduation, the student may not use that provider as a preceptor during the clinical year- this includes the elective rotation.
* **Students are not required to provide or solicit clinical sites or preceptors. The program is responsible for coordination of all Clinical Sites and Preceptors.**

# Required Clinical SCPE Rotations {B3.02}[[18]](#endnote-18) {B3.03}[[19]](#endnote-19) {B3.04}[[20]](#endnote-20)

* Family Medicine
* Pediatrics
* Women's Health
* Mental and Behavioral Health
* Internal Medicine
* Emergency Medicine
* General Surgery
* Elective

# Tentative Calendar

## Tentative Calendar and Timeline for Class of 2025 (Tentative)

## Didactic Year (16 months)

* Fall 2023
* Spring 2024
* Summer 2024
* Fall 2024

## Clinical Year (8 – 5 week rotations + callback)

* Spring 2025
  + Rotation Date: January 20, 2025 – February 19, 2025
    - Callback: February 20-21, 2025
  + Rotation Date: February 24, 2025 – March 26, 2025
    - Callback: March 27-28, 2025
  + Rotation Date: March 31, 2025 – April 30, 2025
    - Callback: May 1-2, 2025
* Summer 2025
  + Rotation Date: May 19, 2025 – June 18, 2025
    - Callback: June 19-20, 2025
  + Rotation Date: June 23, 2025 – July 23, 2025
    - Callback: July 24-25, 2025
* Fall 2025
  + Rotation Date: July 28, 2025 – August 27, 2025
    - Callback: August 28-29, 2025
  + Rotation Date: September 1, 2025 – October 1, 2025
    - Callback: October 2-3, 2025
  + Rotation Date: October 6, 2025 – November 5, 2025

Callback: November 6-7, 2025

# Policies Governing Clinical Year {A3.02}[[21]](#endnote-21)

## Class of 2025 Time Line

Didactic Clinical Mentorship (Clinical Team)

|  |  |
| --- | --- |
| Date: November, 2024 | CastleBranch Requirements due (Background Check/Drug Screen) |
| Date: December, 2024 | Clinical Orientation Part 1 for Clinical Year |
| Date: September, 2024 | Requirements Due (Immunizations, Background Check, Drug Screen, etc.) |
| Date: October, 2024 | Clinical Team reviewing surveys and making placements |
| Date: December, 2024 | Clinical placement assignments announced for Class of 2023 |
| Date: December, 2024 | TB Test due (See Timeline for Clinical Requirements) |
| Date: December, 2024 | Influenza Vaccine (See Time line for Clinical Requirements) |
| Date: December, 2024 | Mentorships begin\* |

Clinical Clerkship (Clinical Team)

|  |  |
| --- | --- |
| Spring 2025: | Orientation Part 2- for Clinical Year |
| Date: December, 2024 | Update CastleBranch requirements for Clinical Year |
| Date: December, 2024 | Influenza Vaccine Due |
| Date: January, 2025 | Clinical Clerkship Starts |
| Date: December, 2025 | Clinical Year Ends |

\*Failure to complete any request by due date will result in delay of Mentorship/Clinical Clerkship year.

\*\*Please note that times are only estimated; dates may change based on program needs and site availabilities.

# Essential Technical & Academic Standards for Matriculation and Promotion {A3.13}; {A3.15}[[22]](#endnote-22)

## Technical Standards

A candidate for the Master of Medical Science in Physician Assistant Studies (MMS-PAS) degree earned after successful completion of the PA Program must have abilities and skills in the functional areas described below and must have the physical and emotional stamina and capacity to function in a competent manner, and consistent with these standards, in the classroom and in clinical and laboratory settings, including settings that may involve heavy workloads, long hours and stressful situations.

**1. Observation**

* Observe demonstrations and conduct experiments in the basic sciences.
* Observe a patient accurately at a distance and close at hand, noting non-verbal as well as verbal signals. This ability requires functional vision, hearing, and somatic sensation.

**2. Communication**

* Relate effectively with patients, conveying a sense of respect, compassion, and empathy. A student must be able to communicate clearly with and observe patients in order to elicit information, accurately describing changes in mood, activity and posture, and perceive verbal as well as non-verbal communications.
* Communicate with patients, their family members, and the health care team through oral, written, and electronic forms.

**3. Sensory and Motor Coordination or Function**

* Demonstrate sufficient sensory and motor function to perform a physical examination utilizing palpation, auscultation, percussion, and other diagnostic maneuvers.
* Execute prompt, precise, and appropriate responses to provide general and emergency care to patients.
* Manipulate equipment and instruments to perform medical procedures required to attain curricular goals and patient care (e.g. needles, stethoscope, ophthalmoscope, tongue blades, intravenous equipment, gynecologic speculum, and scalpel).
* Perform basic laboratory tests (urinalysis, complete blood count, etc.), and diagnostic and therapeutic procedures (phlebotomy, arterial blood gas drawings, lumbar puncture, arthrocentesis, etc.).

**4. Cognitive, Integrative and Quantitative Abilities**

* Conceptualize, integrate and qualitatively analyze information derived empirically and rationally for problem solving and decision-making.  This includes abilities to reason, calculate, analyze, measure and synthesize information in a variety of settings, including those that may be urgent with increased transient stress and distractions.
* Comprehend three-dimensional relationships and spatial relationships of structures, including anatomical structures.
* Collect, organize, prioritize, analyze and assimilate large amounts of technically detailed and complex information within a limited time frame. This information will be presented in a variety of educational settings, including lectures, small group discussions, and individual clinical settings.

**5. Behavioral and Social Attributes**

* Demonstrate empathy, integrity, honesty, concern for others, good interpersonal skills, interest and motivation as these personal qualities are all required during the educational training process and in patient care.
* Possess the emotional health required for full use of intellectual abilities that include the exercise of good judgment, execution of all educational and clinical responsibilities, and the development of mature, sensitive and effective professional relationships with patients and members of the medical team.
* Possess adequate endurance to tolerate mentally and physically taxing workloads and adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients.

*\*If student no longer meet the technical requirments after matriculation, the probem must be notified and student’s ability must be re-evaluated.*

## General Academic Rules and Guidelines for Progress and Promotion

[*See Progress and Promotion Policy*](#B1)

* Student attendance in classes is mandatory.
* Students are required to stay updated on school/class activities by checking email, Canvas, and postal mail on a daily basis.
* Students are required to follow the Dress Code of the School as an integral part of their training and professionalism.
* Clinical Mentorship and Clinical Clerkships will be provided off-campus. The site will most likely be in an area distant from UMES and Princess Anne. Students are responsible for their transportation and possibly for relocation to their assigned site and for their own housing during this period.
* Each student is assigned to a faculty member for mentoring on academic matters and professional activities. The faculty advisor will serve as the student’s first line of communication in addressing academic or professional issues. Additional counseling services are available through the Office of Student Affairs and the resources of the University.
* A student must complete all graduation requirements to graduate.
* The faculty of the UMES Physician Assistant Program reserves the right to revise the curriculum at any time to ensure that students acquire the most current and relevant training possible. If curricular changes become necessary, every effort will be made to apprise students of the changes made and how these changes impact their course of study. In all cases, however, the production of well-prepared graduates will prevail as the dominant concern.
* Students are required to enroll in and complete courses in sequence, adhering at each level to all prerequisites. No student will be permitted to take courses out of sequence, or enroll in a course without having satisfied the prerequisites.
* A student may be dismissed from the program, after due process, by reason of conduct unbecoming of a professional student.
* A student may be dismissed from the program, after due process, due to violations of the UMES Physician Assistant Professionalism Policy (See Student Grievances).

## Grading

1. Assignment of course grades is the responsibility and prerogative of the course instructor. Your course instructor will inform you of the criteria that will be used to determine final course grades. In general, where course grades are determined on the basis of a cumulative system of points, grades will be assigned according to a straight grade system. Grade Point Average (GPA) equivalents are as follows:

|  |  |
| --- | --- |
| A | 90-100% |
| B | 80-89% |
| C | 75-79% |
| F | ≤ 74.99% |

1. Minimum passing course gradesStudents must earn a grade of A through C in order to receive a course credit toward their degree and to continue in the program. Courses in which a student earns a grade below C do not count toward meeting MMS-PAS degree requirements, and require an academic hearing by the faculty. Earning below a C in a course (under 74.99%) may prevent a student from being permitted to continue in the program. As a policy, UMES Master of Medical Science Physician Assistant Studies program does not round-up any grades, including our own course examination scores and course GPAs.
2. Minimum overall GPA requirement

***Students must also maintain a cumulative grade point average of 3.0 throughout the program* or they will be placed on academic probation as described in the Graduate Catalog 2017 – 2018 located here** [http://catalog.umes.edu/content.php?catoid=8&navoid =233#minimum-gpa-grades-for-graduate-students](http://catalog.umes.edu/content.php?catoid=8&navoid%20=233#minimum-gpa-grades-for-graduate-students)**.** Failure to earn better than a 3.0 semester grade point average in terms subsequent to probation WILL prevent a student from being permitted to continue in the program.

1. Grade Grievance

Student grievance appeal must be based upon the Program’s failure to follow established policies or procedures. **Any grievance must be based on evidence that a factual or procedural error was made or that some significant piece of information was overlooked.** Matters related to grading disputes shall include issues regarding grades awarded or processes by which grades are determined. Professionalism is expected at all stages of the process. The appeal process **must** always begin with a written, dated, signed appeal (if e-mail it must be from the student’s UMES e-mail account) to the Didactic Educational Director during the Didactic year and to the Clinical Education Director during the clinical year. The student is also encouraged to meet with his or her faculty advisor and may do so at any point in the process. If the situation is not resolved through discussion with the Didactic/Clinical Education Director, the student may continue the grievance process by providing a written, dated, signed appeal statement to the Program Director describing the specifics of the grievance within **thirteen (13) business days** following the posting of the grade being disputed. Non-written complaints or written complaints received after this deadline will not be accepted. A student seeking to appeal a grade should seek a solution through the following procedure by entering an initial appeal to the Didactic/Clinical Education Director and proceeding in the stated order of the following table:

|  |  |
| --- | --- |
| **Appeal Step** | **Maximum number of business days in each step of the appeals process** |
| Student submits Appeal to Didactic/Clinical Education Director^ | 5 |
| Didactic/Clinical Educational Director rules on the appeal (first appeal level)\* | 5 |
| Student submits appeal to the Program Director and Department Chair^# | 3 |
| Program Director and Department Chair rules on the appeal (Second appeal level) | 5 |
| Student submits appeal to the Dean^+ | 3 |
| Dean Rules on the Appeal (Final appeal level) | 5 |
| ^ If the person responsible for receiving the appeal is not available, another faculty member or administrator may be designated by that person or by the Program Director to function in his/her stead.  \* The Didactic and/or Clinical Education Director collaborates with the faculty/Preceptor who taught the material in determining the ruling.  # Appeal in writing to the Program Director and Department may be as soon as the Didactic Education Director has ruled but must be within 13 business days of grade posting.  + Appeal in writing to the Dean may be as soon as the Program Director and Department Chair have ruled but must be within 19 business days of grade posting. | |

# Examinations {B4.01}[[23]](#endnote-23){B4.03}[[24]](#endnote-24), {B4.04}[[25]](#endnote-25)

Students are expected to take all examinations on the scheduled dates. The course instructor determines the rescheduling of an examination if circumstances warrant   
(e.g., documented illness, previously identified religious holiday, or death of immediate family member). If a student fails to take a scheduled examination, without obtaining permission from the course director prior to the examination, the student will receive a “zero” on that scheduled examination. Examinations are timed and the examinee will be given no extra time to complete the examination, unless the student at the start of the semester was assessed by the Office of Institutional Equity and Compliance.

All students that have accommodations to take an exam in another area will be scheduled with the Program Office to be taken in a designated room, which can be observed by Faculty and Staff members of the PA Program or a representative from the Office of Institutional Equity and Compliance.

Program Summative Examinations and Student Assessments

At UMES’s PA Program, we define competence as adequacy of performance. The purpose of this evaluation is not only to assess what we have taught in the program rather it is to evaluate entry to practice competencies (knowledge application). We use multiple assessment methods longitudinally to assess learner knowledge, skills and attitudes. This is a separate requirement for graduation as defined in the ARC-PA standards: *B4.01* The program must conduct frequent, objective and documented evaluations of student performance for both didactic and supervised clinical practice experience components. The evaluations must align with what is expected and taught, as defined by the program’s instructional objectives and learning outcomes.

Our assessment instruments include:

1. Summative I – First semester, second year. The scores as defined below are used to determine whether students require additional remediation and mentoring during the clinical year. Students with the highest level of risk will have received a score below 225 (out of a possible 300) and will be required to complete more extensive remediation assignments defined in the Academic Improvement Plan. Students will be allowed to retake the summative **once** after an initial failure.
2. PACKRAT I– First semester, second year. The scores, as defined below and entitled “Average Test Scores by Risk”, are used to determine whether students require additional remediation and mentoring during the clinical year. Students with the highest level of risk will be required to complete more extensive remediation assignments defined in the Academic Improvement Plan.
3. OSCE I – First semester, second year. This “hands-on” examination is specifically designed to test the PA student’s clinical competence. This will be administered at UMES or at another designated location.
4. OSCE II – End of the clinical year. This “hands-on” examination is designed specifically to test the PA student’s clinical competence. This will be administered at UMES or at another designated location.
5. Summative II – This is a 700-question multiple-choice examinations given over 2 days. This examination tests the student’s knowledge base for all organ systems. Students will be able to meet with their advisor and discuss a study strategy that students can pursue to prepare for the PANCE.
6. Summative Professionalism Development Assessment Tool (PDAT). Evaluation of professionalism is an on-going process throughout the program. Prior to graduation, students and their advisor will complete the summative tool and discuss their strengths and weakness in this area.
7. To receive final signature for graduation students must complete all formative and summative assessments in the 2nd year, Summative II, PACKRAT II and PHAS 697 PANCE Preparation Course. The scores, as defined below and entitled “Average Test Scores by Risk”, are used to determine whether students require additional remediation and mentoring during/throughout the clinical year. Students with the highest level of risk will be required to complete more extensive remediation assignments defined in the study contract and will not be able to graduate or eliable to sit for PANCE.
8. “Average Test Scores By Risk”- Summative I, II and PHAS 697 PANCE Preparation: The program will use the risk analysis score stratification to determine whether a student requires remediation and mentoring during the clinical year. Any student who achieves scores within category (three-risk) stratification or below risk category will be required to participate in a learning contract during the clinical year. If the student shows sufficient improvement during subsequent formative or summative examinations, they may be released from the supervised study contract. Any student who achieves scores in the critical risk or fail category on the SUMMATIVE II or the PHAS 697 PANCE Preparation Course will be required to complete all elements of a study contract supervised by a faculty advisor. The faculty advisor can determine if the student has not satisfied the required remediation which can result in a delay in graduation. The Program Director will acknowledge that the student has met graduation requirements only upon satisfying the remediation agreement. In addition, the student must achieve a score of 527 or above on the SUMM II and students must score above the (three-risk) stratification in PHAS 697 PANCE Preparation Course to pass and to be cleared to graduate. If the student does not meet the standard by the end of the semester, their graduation will be delayed and they will be required to enroll in the a program Special Topics Course.

“Passing” the Program Summative Assessment

* Students need to pass all individual components of the Summative Assessment with a minimum grade of 226 (out of a possible 300). A learner can repeat any component of the assessment within one week. Any student with a second failure will be referred to the PA Progress and Promotion Committee as referenced above.

Passing the UMES PA Program Summative Examination

* The Summative process has two sections:

1. A 700 Question two step MCQ Clinical Knowledge examination (CK)
2. A six station Comprehensive Clinical Skill Examination (CCSE)
3. Each section needs to be passed independently with score of 75.00%
4. Each section may be repeated once and must be passed with a score of 75.00%. Date of the repeat examination will be determined by the Program Director

Failure After Two Attempts

* Any student failing any section of the summative process after two attempts will be held from graduation and will be remediated for a period of six weeks. A diagnostic assessment of the deficiencies will be performed by the Program Director and the Program Director will assign a faculty member experienced in the remediation process to assist. The student will be registered in a three credit special topic course. The student will have one more attempt at passing either of the failed sections.
* Should the student fail the remediation section(s) again, the student’s graduation will be delayed for one complete semester and the student will need to register in a Special Topics I course under the direction of a faculty member experienced in the remediation process. After a second failure of diagnostic assessment(s), students will be reguried to register in Special Topics II at the discretion of the Progress and Promotions Committee. Any learner failing the second attempt at remediation will be referred to the Progress and Promotions Committee for further action, which may include further remediation or dismissal.

# Academic Probation, Dismissal, Deceleration and Withdrawal {A3.15}[[26]](#endnote-26)

## Academic Probation

This is a professional program with high expectations of its students. The academic performance and behavior of all students is closely monitored. Academic Probation and Dismissal are sanctions that may be invoked for:

* Academic performance below expected standards, or
* Violation(s) of the Physician Assistant Program Policies and the UMES Code of Conduct

*If a student’s academic performance or behavior does not meet the standards and/or requirements of the Department, his or her performance and behavior is reviewed by the Progress and Promotion Committee.*

## Academic Probation Guidelines

* The letter of academic probation from the Program Director, representing the Progress and Promotions Committee’s decision, will stipulate the requirements of probation and a time line for the student to meet the assigned requirements to avoid dismissal.
* Students placed on academic probation by the Progress and Promotion Committee will be advised of this action in writing. The students must acknowledge the receipt of the action in writing within 24 hours.
* Academic deficiencies will be clearly outlined and the student will be required to attest to their knowledge of the deficiencies noted.
* Students on academic probation may continue attendance under conditions specified by the Progress and Promotion Committee. The specified conditions and/or actions will be outlined letter and if students fail to meet and/or comply with the conditions outlined within the notification, they may be dismissed.
* If after two additional semesters, a student again violates any of the conditions set forth for the probationary status, the student is subject to continued academic probation, withdrawal from the Program, or dismissal.
* Written acknowledgment of the specific requirements will become a permanent part of the student’s record and will be available for future reference.

## Dismissal

Dismissal - A single grade of “F”

In the Didactic year the Didactic Education Director will meet with the student to discuss the circumstances which contributed to the student’s poor performance. The Didactic Education Director will refer the student to the Progress and Promotions Committee for review **WITH A RECOMMENDATION FOR DISMISSAL FROM THE PROGRAM** pursuant to departmental policy. The Progress and Promotions Committee will review the student’s overall progress, the instructors’ evaluation of the student in the course(s) involved and all other applicable information. After completing its review the Progress and Promotions Committee will;

1. Formally dismiss the student from the program; and
2. Refer the student to the Office of Student Affairs for academic retention, career and mental health counseling.

Note: A student who receives a grade of "F" or below during the Didactic Phase or Clinical Phase will be ***ineligible*** to re-apply for re-admission into the program.

Deceleration

The UMES PA curriculum is designed to be delivered on a full-time basis to students in a cohort.

Didactic Curriculum

In the event a student fails one or more didactic courses, the PPC Committee may recommend a deceleration. This allows the student to repeat the failed course(s) with the next cohort. All skills and knowledge must be maintained through the Program. Therefore, a decelerated student will be required to repeat all Program courses. The student is responsible for all tuition costs incurred by deceleration. A second failure after deceleration will result in a dismissal from the Program. All program coursework is still required to be completed within 4 years from the original date of matriculation.

Deceleration is not an option in lieu of disciplinary action including but not limited to academic probation, university suspension or any other professional/ethical violation that would be considered grounds for dismissal from the program.

Deceleration Process and Procedures

Deceleration may occur for the following reasons:

1. Deceleration Process A student is granted a leave of absence by the PA program.
2. A student fails one or more courses of the Didactic phase of the program.
3. A student is required to repeat a failed rotation at the end of the program.

To proceed with the option of deceleration, students must notify the UMES PA Program and the School of Graduate Studies in writing within one (1) week of their notification of dismissal. If approved students must then complete a *Reinstatement Application* via the Graduate School website (<https://wwwcp.umes.edu/grad/readmission-or-reinstatement/> ).

Clinical Curriculum

Failure to successfully complete the clinical or professional requirements of SCPE will result with repeating the SCPE prior to graduation, or dismissal from the Program. The student will be responsible for all tuition costs incurred by the failed SCPE.

## Withdrawal

Withdrawal from the Program

During the course of the Didactic Phase, if a student encounters difficulty meeting course objectives or maintaining acceptable grades due to unexpected illness or other significant problems or impairment **IT IS THE STUDENT'S RESPONSIBILITY TO NOTIFY THE DIDACTIC EDUCATION DIRECTOR AND/OR THE PROGRAM DIRECTOR AS SOON AS POSSIBLE.** The didactic director and/or the program director will meet with the student to discuss the option of **withdrawal** from the program/University.

## Re-Admission After Withdrawal

A student who withdraws from the program while in good academic standings may re-apply for re-admission into the program; however, re-acceptance after withdrawal is not guaranteed. The former student must re-apply in its entirety and compete with that cohort of applicants also seeking admission into the program.

## Academic Integrity

The PA Program expects the highest standards of academic integrity throughout the university and our medical communities. Because academic integrity and ethical behavior are vital to an academic environment and to the development of qualified PAs, graduate students are responsible for learning and upholding professional standards of research, writing, assessment and ethics.

In the academic community the high value placed on truth implies a corresponding intolerance of scholastic dishonesty. Written or other work which a student submits must be the product of his/her own efforts and must be consistent with appropriate standards of professional ethics. Academic dishonesty, which includes plagiarism, cheating and other forms of dishonest behavior is prohibited.

## Course Remediation

Student progress is monitored and documented in a manner that promptly identifies deficiencies in knowledge or skills and establishes means for remediation as described herein:

1. A student receiving a “C” in a didactic course or “C” grade in a SCPE course, a failed end of rotation exam or failed OSCE will remediate the identified area(s) of deficiency. The specific remediation plan developed is at the discretion of the course instructor in collaboration with the Didactic Education Director and the faculty advisor for didactic courses and the Clinical Education Director with collaboration of the Faculty Advisor and Clinical Preceptor for SCPE courses and may include but is not limited to:
   * Reading assignments.
   * Written completion of selected course learning objectives with reference citations.
   * Written response to selected exam items with reference citations.
   * Problem-based learning exercises focused on area(s) of weakness.
   * Written self-reflection exercise.
   * Individual faculty-led tutoring (especially skills related deficiencies). Skills review and assessment.
   * Repeating a portion of or the entire SCPE
2. Students will be reassessed after completion of the outlined remediation plan with an emphasis on areas of poor performance. The assessment activity may vary depending on the nature of deficiency and degree of remediation necessary. A successful remediation plan will include:
3. Learning Contract: which consists of an academic improvement plan that will highlight: self-awareness, self-reflection, behavior evaluation that impacted students’ performance. Students will also document the academic, medical competency and professionalism performance that will be required for successful remediation of material.
4. Date in which assigned activities are due and follow-up (all remediation assignments must be completed before the next semester/rotation).
5. The responsible Course Instructor or faculty member must document remediation efforts and outcomes and submit documentation to the Didactic Education Director to be filed in the student’s official file.
6. The Course Instructor must notify the Didactic Education Director or the Clinical Education Director of any student needing remediation. The DED and CED will be responsible to notify the Progress and Promotion Committee of any remediation plan. To ensure adequate rigor and consistency within the program, the Progress and Promotion Committee must approve remediation plans and remediation reassessments prior to implementation.
7. Unsuccessful remediation efforts will be forwarded to the Progress and Promotion Committee for review. The Committee will recommend appropriate courses of action, which may include the entire range of possible outcomes up to and including dismissal from the program.

## Assessment Remediation

Student progress is monitored and documented in a manner that promptly identifies deficiencies in knowledge or skills and establishes means for assessment remediation as described herein (Assessment Remediation is not retesting):

1. A student receiving a “F” in a didactic Assessment (test/exam) or “F” grade in a SCPE course, a failed end of rotation exam or failed OSCE will remediate the identified area(s) of deficiency. The specific remediation plan developed is at the discretion of the course instructor in collaboration with the Didactic Education Director and the faculty advisor for didactic courses and the Clinical Education Director with collaboration of the Faculty Advisor and Clinical Preceptor for SCPE courses and may include but is not limited to:
   * Test-Item analysis
   * Reading assignment
   * Tutoring
   * Written completion of selected course learning objectives with reference citations.
   * Student Success Coach or CASS
   * Academic Intervention (course instructor/advisor).
   * Written response to selected exam items with reference citations.
   * Problem-based learning exercises focused on area(s) of weakness.
   * Written self-reflection exercise.
   * Individual faculty-led tutoring (especially skills related deficiencies). Skills
   * Review and assessment.
   * Repeating a portion of or the entire SCPE

# Physician Assistant Program Policies and Procedures {A3.02}[[27]](#endnote-27)

## Professionalism Policy

UMES Physician Assistant Program supports the University Student Conduct Code. As members of the UMES community and future health care practitioners, students are expected to uphold these fundamental values including honor, personal and academic integrity, justice, freedom, leadership, civility, and loyalty to the University. Students are also to respect diversity, spirituality, and personal and property rights of others. We have established this professionalism policy, which forms the model of conduct for student members of our academic community. Consistent with the University, the Physician Assistant Program is an academic community. Its fundamental purpose is the pursuit of knowledge. Like all other communities, the school will function properly only if its members (faculty, students and staff) adhere to clearly established goals and values. Essential to the fundamental purpose of the program is the commitment to the principles of truth and academic honesty, and the University Code of Conduct. Accordingly, the professionalism policy is designed to ensure that the principles of academic honesty lie with the student. It also addresses e-professionalism, professional attire and attendance.

**Students that receive two professional citations during the didactic or clinical year will be automatically put on Professional Probation. Students on Professional Probation will be followed continuously via a Professionalism Improvement/Remediation Plan for the remainder of the didactic year /clinical year and will be required to check in with their advisors as outlined in the plan.** Students who do not meet the Professionalism Improvement/Remediation Plan requirements will be dismissed from the program.

The PPC serves as a hearing board for violations of the UMES PA Program Professionalism Policy. The PPC will make recommendations to the Program Director. The Program Director will then notify the student in writing of actions concerning alleged violations. A record of disciplinary action normally is maintained by the Office of Student Conduct Affairs until the student graduates or leaves the School of Pharmacy and Health Professions or university. Students may examine the contents of their file by appointment with the Program Director.

All UMES PA students share the following responsibilities: to read, become acquainted with, and adhere to the School of Graduate Studies, The School of Pharmacy and Health Professions and, the University Student Conduct Code; to respect personal and property rights of others, and to act in a responsible manner at all times, on or off campus; to protect and foster the intellectual, academic, research, cultural, and social missions of the university; and, to observe the laws of local, state and federal government agencies.

## Professionalism Policy Violations

The Professionalism Policy includes standards for academic, non-academic, and clinical behavior. The Professionalism policy represents general standards of behavior and illustrates ideals for which to strive; however, specific infractions reported by students, preceptors or faculty will be investigated with respect to both the magnitude and chronicity of incidents considered. It should also be understood that these general standards may not afford guidance in every conceivable situation or anticipate every possible infraction.

## 

## Student Code of Conduct

The University of Maryland Eastern Shore claims certain foundational principles of values upon which its entire existence stands. All students at the University of Maryland Eastern Shore have the duty to observe and uphold and accept these values as the ***code of conduct***. These include;

* honor, personal and professional academic integrity
* commitment to attendance and punctuality
* respect for diversity, spirituality, and personal and property rights of others
* justice, freedom, leadership, civility
* loyalty to the University

Physician Assistant students are subject to the same level of conduct as all University of Maryland Eastern Shore students; students residing in university housing are subject to the rules for all students who reside in university housing. Any infractions of these rules will be handled by the UMES Judicial Board. All students are encouraged to study the sections concerning these violations in the University Student Handbook. **In addition to the University Student Handbook, Physician Assistant students shall not:**

* Fail to conform his/her conduct to the ethical and moral standards of the physician assistant profession as articulated in the American Academy of Physician Assistants Statement of Values.
* Intentionally make misrepresentation on a resume or curriculum vitae concerning class rank, grades, academic honors, student organization involvement, work experience, or any other matter relevant to job placement.
* Purposely furnish false information.
* Engage in disruptive behavior in class.
* Violate the physician assistant program attendance policy.
* Violate the Dress code policy.
* Demonstrate inappropriate or disrespectful behavior toward fellow students, faculty, staff, preceptors, and staff/employees at SCPE sites or other community organizations.
* Engage in inappropriate or disrespectful interaction with patients.
* Unauthorized use or removal of prescription or nonprescription drugs, devices, or confidential information from the clinical sites.
* Perpetrate any form of theft, forgery, falsification, or fraudulent use of university or experiential practice site property.
* Willfully conceal or misrepresent information material to an investigation of an alleged violation of this Professionalism Policy when the information is sought by the Physician Assistant Program faculty.
* Engage in the use and distribution of illegal drugs***\****.

***\*****Please are required to follow the UMES Alcohol and Drug Abuse Policy.*

## Clinical Code of Conduct Policy

The Clinical Education Director or designee will be charged with the responsibility of promptly investigating alleged infractions of this code.

The following code of conduct will guide the ethical behavior in hospitals, community clinics, research and production facilities, and various rotation sites. We feel that the magnitude of our responsibility as healthcare professionals necessitates the establishment of the highest standards of professional conduct.

## Respect and Concern for the Welfare of Patients

The Student will:

* Treat patients and their families with respect and dignity both in their presence and in discussions with others.
* Recognize when one’s ability to function effectively is compromised and ask for relief or help.
* Recognize the limits of student involvement in the medical care of a patient and seek supervision or advice before acting when necessary.
* Not use alcohol or other drugs in a manner that could compromise themselves or patient care.
* Respect for the rights of others

The Student will:

* Deal with professional, staff and peer members of the health care team in a considerate manner and with a spirit of cooperation.
* Act with an egalitarian spirit toward all persons encountered in a professional capacity regardless of race, religion, gender, sexual preference, age, national origin, physical disability, marital status, political affiliation, or socioeconomic status.
* Respect the patient’s modesty and privacy.

## Trustworthiness

The Student will:

* Be truthful in communication to others.
* Maintain confidentiality of patient information.
* Admit errors and not knowingly mislead others to promote one’s self at the expense of the patient.
* Not represent himself/herself as a physician, physician assistant, or other health professional.
* Accurately acknowledge the sources for all information reported. Failure to do so will be considered plagiarism.

## Responsibility and Sense of Duty

The Student will:

* Participate responsibly in patient care or research to the best of his or her ability and with the appropriate supervision.
* Undertake clinical duties and persevere until they are complete.
* Notify the responsible person if something interferes with his or her ability to perform clinical or academic tasks effectively.

## Professional Demeanor

The Student will:

* Maintain a neat and clean appearance, and dress in attire according to the dress code policy.
* Be thoughtful and professional when interacting with patients and families.
* Strive to maintain composure during times of fatigue, professional stress, or personal problems.
* Avoid offensive language, gestures, or inappropriate remarks.

*NOTE: The above standards of clinical conduct are based on the Code of Conduct for Duke University Medical Students and have been adapted to meet the individual needs of the School of Pharmacy and Health Professions at the University of Maryland Eastern Shore.*

## E-Professionalism Policy

Even though sources of ethical principles may differ, the Professional Student Conduct Code includes an e-professionalism policy which stipulates that faculty and staff will not permit students access to their ***personal*** e-mail, social networking sites (e.g. Facebook, Twitter), webpage, blogs, or any other internet or world wide web based communicative networks. Because LinkedIn® is a professional networking site, faculty and staff may permit student access to their LinkedIn® profile.

Your email, blogs, Webpages, social networking sites (e.g. Twitter, Facebook) and all other internet or world wide web based communicative networks are as much a part of your professional image as the clothes you wear. Therefore, all students in the Physician Assistant program are expected to demonstrate high standards of professional behavior in all educational settings, including classrooms and laboratories, professional and clinical sites, and in non-educational settings, including the internet, e-mail and other forms of electronic media.

Additionally, there are a set of generally accepted rules and conventions when participating in online classes and discussions. These guidelines are sometimes referred to as Netiquette. A set of common Netiquette rules for online classes has been published by Alma Mintu-Wimsatt and colleagues in the Merlot Journal of Online Learning and Teaching (<https://jolt.merlot.org/vol6no1/mintu-wimsatt_0310.htm>) and is copied below:  
• Do not dominate any discussion. Give other students the opportunity to join in the discussion.  
• Do not use offensive language. Present ideas appropriately.  
• Be cautious in using internet language. For example, do not capitalize all letters since this suggests shouting.  
• Popular emoticons such as 😀😀 can be helpful to convey your tone but do not overdo or overuse them.  
• Avoid using vernacular and/or slang language. This could possibly lead to misinterpretation.  
• Never make fun of someone’s ability to read or write.  
• Share tips with other students.  
• Keep an open mind and be willing to express even your minority opinion. Minority opinions have to be respected.  
• Think and edit before you push the Send button.  
• Do not hesitate to ask for feedback.

• Using humor is acceptable but be careful that it is not misinterpreted. For example, are you being humorous or sarcastic?

## Attendance Policy

*Attendance is required at all scheduled instructional periods and all scheduled assessments, reassessments, and extended learning periods.*

## Absence from Instructional Periods

Attendance and promptness is expected for all scheduled classes. A student is responsible for all covered material and should notify a faculty member if he/she is unable to attend. Classroom activities and participation are considered an important part of the teaching-learning process. The faculty is not obligated to make-up missed activities.

Leaving an open laptop at your seat for an extended period, giving the appearance of being in attendance while not actually in attendance, is a violation of the attendance policy. Such violations may be reported to the Progress and Promotions Committee.

The UMES Physician Assistant Program has adopted a ‘no fault’ absentee policy. ‘No fault’ means that normally all absences are equal regardless of the reason, no questions asked. Tardiness is considered an absence. **A student cannot have more than three absences in a academic year**. *Attendance can be taken at any time during the day, and may also be taken multiple times during a day.* If an extended illness requires a student to be absent for more than three days, a doctor’s note*\** must be provided specifying the reason for the absence for all days out, including the initial three days. Any other absences that might cause a student to miss more than three days (a personal emergency or emergency in the student’s immediate family, attendance at a professional meeting, jury duty [see bullets below], military duty) must be approved by the Didactic Education Director in writing two weeks in advance for a scheduled event or prior to the fourth absence for an emergency event. An absence documentation form can be obtained from the **Program Administrative Specialist and/or in the Appendix G of the PA Program Handbook**.

* A personal emergency or emergency in the student’s immediate family (i.e., parent, guardian, spouse, child, or sibling of the student) such as death, hospitalization, extended illness, or other emergency situation.
* Attendance at a professional meeting provided that the absence has been pre-approved by the CED or DED at least two weeks in advance. Each student must individually submit a request. If an excused absence is granted, the student must submit a copy of an accepted registration.\*
* Jury duty. The student must submit official documentation of the duty. \* Military duty. The student must submit official documentation of the duty.

Students with prolonged illnesses or other personal issues that result in multiple absences should consult with the Didactic Education Director or the Clinical Education Director regarding taking a leave of absence.

Absence documentation forms will be submitted to the Didactic Education Director or the Clinical Education Director, who will sign the absence documentation form and keep it on file in the student’s records. If able, the student should also contact the course instructor. The student will not be allowed to assess or reassess the course.

Falsification of documentations is considered a violation of the School’s Code of Conduct and will result in disciplinary action up to and including termination.

Attendance penalties for absence are expected to be included in the term-long or elective courses. A clear policy will be outlined in the individual syllabus.

## Absence from Assessment, Reassessment, and Remediation Periods

A student who must miss an exam due to illness must contact the course instructor and didactic education director by email and/or voicemail (preferably before the exam or as soon as possible), seek treatment from a health-care provider, and provide documentation of the illness from the health care provider. By starting an exam, a student affirms that he/she is well enough to take the exam, and the exam will count in the student’s grading. Requests for make-up exams for reasons other than illness must be approved by the course instructor in writing, prior to the original exam date.

If an absence from a scheduled assessment or reassessment is documented with a doctor’s note, the student will be assessed by the Didactic Education Director. Because the student could not participate in the team assessment, the student will not be entitled to receive team points on any makeup assessment.

Working with the student, the Didactic Education Director should arrange for the student to take the assessment as soon as possible following the student’s return to school. Every effort should be made to schedule the makeup assessment so that it does not jeopardize the student’s performance on other scheduled assessments. The date and time of the makeup assessment will be communicated to the Program Director and may or may not be scheduled for regular school hours.

## Attendance at Clinical Mentorship and Clerkships

Attendance is required at all clinical rotations. Students are required to abide by the [attendance policies](#B4) outlined in the program manual.

## Class Start Time, Assessment Start Time, and Class Hours

The stated class hours for the didactic portion of the curriculum are from 8:00 a.m. to 8:00 p.m. In observance of these posted times, students and all faculty who are scheduled to teach will be expected to be present at 8:00 a.m., except when otherwise approved by the curriculum committee and the faculty. This does not necessarily mean that faculty have no flexibility and must always begin lecturing at 8:00 a.m. Faculty have the latitude to allow students to study in their groups or work on special projects; however, that time must be defined and structured, faculty should be available to assist and facilitate students in their learning. Students will not be allowed “time off”, “comp time” or time to complete assignments intended as “homework,” or be off-campus during these class days unless approved by the Didactic Education Director and faculty as part of the syllabus.

## Outside Activities and Work Policy

Employment is **strongly discouraged**. The Physician Assistant curriculum has been designed to be a full-time activity for students. It consists of a very demanding course load with a great deal of time spent in class and in clinical experiences. There are also many special seminars, films and guest lecturers that may be available to students on relatively short notice. We encourage you to seek outside sources of financial support (scholarships, loans, etc.) so that you may devote as much time as possible to your professional education.

Physician Assistant students may not perform service work within the Physician Assistant Program and will not be substituted for regular staff. Students are prohibited from substituting for clerical and/or clinical personnel during first year clinical experiences and clinical rotations. While enrolled in the program, no student may serve as a formal instructor to other enrolled students.

## Dress Code Policy

As a representative of the UMES Physician Assistant Program, a student’s personal appearance is an extension of the School and will, to some degree, determine how customers, patients, and colleagues view the student, the program, and the profession of Physician Assistant.

*The following standards for attire apply to all students enrolled in the UMES Physician Assistant Program. These standards shall be followed during all hours in which the School is open to the public (generally 8:00 A.M. to 8:00 P.M., Monday through Friday) and cover any Clinical site.*

The School of Pharmacy and Health Professions and Physician Assistant Department has established a business casual dress code to allow our students to work and study comfortably in the classroom, laboratory and clinical settings, as well as project a professional image for customers/patients, potential employers, and school visitors.

Casual clothing is not suitable for the physician assistant students expect during assessment days; therefore, these guidelines will help you determine what is appropriate to wear to class, laboratory or clinical sites. Clothing that works well for the beach, yard work, dance clubs, exercise sessions, and sports contests are *not appropriate* for a professional appearance. Clothing that reveals cleavage, your back, your chest, your feet, your stomach or your underwear is *not appropriate* for the school. Torn, dirty, or frayed clothing is *unacceptable*. Any clothing that has words, terms, or pictures that may be offensive to other students, faculty or staff is *unacceptable*.

## Guide to Business Casual Dressing for the Physician Assistant Department

In addition to the above guidelines, a more specific overview of appropriate business casual attire is being provided below. Items that are not appropriate for the office are listed too. Both lists are all-inclusive and both are open to change. The lists tell you what is generally acceptable as business casual attire and what is generally not acceptable as business casual attire.

No dress code can cover all contingencies so students must exert a certain amount of judgment in their choice of clothing to wear to the program. If you experience uncertainty about acceptable, professional business casual attire for the program, please ask the Program Director or Didactic Education Director.

Slacks, Pants, and Suit Pants

Slacks that are similar to Dockers and other makers of cotton or synthetic material pants, wool pants, flannel pants, dressy Capri, and nice looking dress synthetic pants are acceptable. Inappropriate slacks or pants include jeans (pants which contain rivets), sweatpants, athletic pants, Bermuda shorts, short shorts, shorts, bib overalls, leggings, and any spandex or other form-fitting pants people wear for biking or exercise. Pants must be worn properly at the hips. No student shall dress in a way that his/her underwear is partially or totally exposed and proper undergarments shall be worn.

Skirts, Dresses, and Skirted Suits

Casual dresses and skirts, and skirts that are split at or below the knee are acceptable. Dress and skirt length shall be no shorter than one inch above the knee (when standing). Short, tight skirts that ride halfway up the thigh are inappropriate for the program. Mini-skirts, skorts, sun dresses, beach dresses, and spaghetti-strap dresses are inappropriate for the program.

Shirts, Tops, Blouses, and Jackets

Casual/dress shirts (for males, shirts must have a collar), sweaters, tops, tailored blouses, golf-type shirts, and turtlenecks are acceptable attire for the program. Most suit jackets or sport jackets are also acceptable attire for the program. Inappropriate attire for the program includes tank tops, midriff tops, spaghetti straps, tube tops, swim tops, shirts with potentially offensive words, terms, logos, pictures, cartoons, or slogans, halter-tops, tops with bare shoulders, hoodies, sweatshirts and articles of fleece, and t-shirts unless worn under another blouse, shirt, jacket, or dress. Additionally, students should wear professional lab coats with name tags during school related health fairs and campus activities.

Shoes and Footwear

Conservative athletic or walking shoes, oxfords, loafers, clogs, boots, flats, dress heels, and leather deck-type shoes are acceptable for the program and shall be clean and in good condition. Flashy athletic shoes, thongs, flip-flops, slippers, platforms, work boots, hiking boots, and any non-dress shoe with an open toe are not acceptable in the program. Closed toe and closed heel shoes are required in laboratories.

Hats and Head Covering

Hats, caps, and other head gear may not be worn in the building halls aforementioned during the hours that the dress code is in effect. Only headgear worn for bona fide religious purposes or to honor cultural tradition is permissible.

General Personal Care Standards

Adequate precautions shall be taken to maintain good personal hygiene. These precautions include regular bathing, use of deodorants and regular dental hygiene.

Hair Maintenance

Hair shall be neatly groomed and clean, styled off the face and out of the eyes. If close contact with patients occurs (e.g. physical assessment procedures); hair longer than shoulder length shall be secured. Hair may not be dyed any unnatural hair colors. Spiked hair, including but not limited to faux hawks and Mohawks, is not allowed.

Cologne, Perfume or Aftershave

The use of cologne, perfumes, body sprays, scented body lotions or aftershave shall be used with restraint. It is not recommended in the patient care setting due to patient allergies and sensitivities.

Cosmetics

Cosmetics shall be applied in good taste and moderation.

Skin

No tattoos or body piercings are allowed to be visible (other than earrings).

Nail Maintenance

Nails shall be well groomed, manicured and of short to medium length that will not interfere with the patient care.

Jewelry

Jewelry and accessories shall be non-distracting and in good taste, with limited visible body piercing. Gauges or stretchers are not appropriate.

Dress-down Casual Days

At certain times the program director or designated member of the PA Faculty may declare a dress- down day. Clothing should be in good condition, not torn or worn out. On such days, the guidelines for Business Casual found above remain in effect except that jeans, t-shirts and sweat shirts may be worn. All other restrictions pertaining to casual clothes still apply. The prohibition of potentially offensive words and logos continues, as does the prohibition of tank-tops, shorts and flip-flops.

## Academic Dishonesty

Alleged violations of the UMES Physician Assistant Program involving academic dishonesty such as falsification, collusion, plagiarism or cheating will be resolved through the proceedings of the Progress and Promotion Committee (PPC). Complaints can be made confidentially. Every effort should be made to maintain the confidentiality of all the members involved in the alleged incident. However, if a full hearing is warranted, the accused will have the opportunity to review the evidence against them including information about witnesses involved in the case. Faculty, preceptors and staff who become aware of academic dishonesty may choose to first counsel that student. However, in all cases the incident should be documented and submitted to the Office of Student Affairs for inclusion in the student’s file.

One of the objectives of the Physician Assistant Program is to promote the highest standards of professionalism among its students. The integrity of work performed is the cornerstone of professionalism. Acts of falsification, cheating, and plagiarism are acts of academic dishonesty, which show a failure of integrity and a violation of our educational objectives; these acts will not be accepted or tolerated. The following definitions and guidelines describe violations related to academic dishonesty.

1. ***Plagiarism*** as a form of cheating is unacceptable. Plagiarism is the act of presenting as one‘s own creation works actually created by others. Plagiarism consists of:
   1. taking ideas from a source without clearly giving proper reference that identifies the original source of the ideas and distinguishes them from one‘s own;
   2. quoting indirectly or paraphrasing material taken from a source without clearly giving proper reference that identifies the original source and distinguishes the paraphrased material from one‘s own compositions;
   3. quoting directly or exactly copying material from a source without giving proper reference or otherwise presenting the copied material as one‘s own creation.
2. ***Falsification*** is unacceptable. Falsification includes but is not limited to:
   1. creating false records of academic achievement;
   2. altering or forging records;
   3. misusing, altering, forging, falsifying or transferring to another person, without proper authorization, any academic record;
   4. conspiring or inducing others to forge or alter academic records.
3. ***Cheating*** is also unacceptable. Cheating includes but is not limited to:
   1. giving answers to others in a test situation without permission of the tester;
   2. taking or receiving answers from others in a test situation without permission of the tester;
   3. having possession of test materials without permission;
   4. taking, giving, or receiving test materials prior to tests without permission;
   5. having someone else take a test or complete one‘s assignment;
   6. submitting as one‘s own work, work done by someone else;
   7. permitting someone else to submit one‘s work under that person's name;
   8. falsifying research data or other research material;
   9. copying, with or without permission, any works, (e.g., essays, short stories, poems, etc.), from a computer hard drive or discs and presenting them as one‘s own.
4. ***Collusion*** is also unacceptable. Collusion includes but is not limited to:
   1. completing any portion of an assignment, report, project, experiment or exam for another student;
   2. claiming as their own work any portion of an assignment, report, project, experiment or exam that was completed by another student, even with that other student’s knowledge and consent;
   3. providing information about an exam (or portions of an exam) to another student without the authorization of the instructor;
   4. seeking or accepting information provided about an exam (or portions of an exam) from another student without the authorization of the instructor.

## Testing Policies and Procedures

What to expect on testing day!

You will report to the **testing lab** for all exams to include mid-term and finals. Readiness assessments will be done virtually also. **Location: Waters Hall: Room 1105 and 1107**. There are assigned seats (please only sit in the seat you are assigned too). **No items** are allowed in the testing lab (with the exception of a pen or pencil). No smart watches allowed. **Please put all of your personal items in your locker before your exam.**  On exam day you need to arrive 10 minutes before the start of the exam. For example: You need to arrive at the testing lab at 10:50 am for an 11:00 am exam.

What happens during the test?

Once you are instructed to log on you will log on to the Examsoft (Exemplify) website and download the exam <https://examsoft.com/>. The exam will not start until the time it is scheduled (if you log in early the exam will not open). Once the exam starts, there will be absolutely no talking and no questions are allowed. Only **exception** is a technology error or concern, otherwise you instructor or proctor will not answer any questions. Each exam is one minute per question (i.e. 50 minute for 50 questions) on finals and midterm- time may be increased due to complexity of content.

What happens if I have questions or concerns during the exam?

Once you enter the testing lab- you will be given a sheet of scrap paper (which will have the color of the day) with the academic dishonesty policy for you to sign and date. The back of the Academic Dishonesty Policy form can be used as scrap paper and a place for you to write questions or concerns you have about any exam questions. **We will not discuss any exam content during the exam!** At the end of the exam you will hand in this paper to the proctor and will be given to the Didactic Education Director for review. You may also use the note section within Examsoft (Exemplify) to leave your feedback or concern with a question. Once the exam is over, you must turn in your scrap paper, we will not take any other questions or concerns related to that exam.

When do we get the result of our exam? Are we allowed to review the exam?

Immediately after you submit your exam you will have **10 minutes to review your exam**. If you have concerns with a question- you can write them down on the scrap paper and turn the scrap paper in before you leave the room. If you score below a 75% you will be required to meet with your instructor/advisor for a test analysis and/or review. At the end of the exam you will not receive a grade- you will only be able to see the test question and your answers. Grades will be release 48 hours after exam. This allows the DED to check the exam for errors and review student comments and concerns. Once the score are released- that is final (no additional question or concerns will be accepted). The professor will fill knowledge gaps. **We do not retest!**

## Non-academic Violations of the Professionalism Policy (e.g. Dress Code, Attendance Policy)

Non-academic issues such as dress code or attendance policy violations may be resolved through the Didactic and Clinical Education Directors via a professional citation. Inappropriate professional or personal behavior includes, but is not limited to the following: excessive absence or disruptive behavior in class; inappropriate or disrespectful behavior toward fellow students, faculty, staff, preceptors, or staff/employees at clinical practice sites; inappropriate or disrespectful interaction with patients; and, unprofessional dress, language, or conduct as defined by the PA Program, clinical site or the university.

**Students that receive two professional citations during the didactic or clinical year will be automatically put on Professional Probation. Students on Professional Probation will be followed continuously via a Professionalism Improvement/Remediation Plan for the remainder of the didactic year /clinical year and will be required to check in with their advisors as outlined in the plan.** Students who do not meet the Professionalism Improvement/Remediation Plan requirements will be dismissed from the program.

The PPC serves as a hearing board for violations of the UMES PA Program Professionalism Policy. The PPC will make recommendations to the Program Director. The Program Director will then notify the student in writing of actions concerning alleged violations. A record of disciplinary action normally is maintained by the Office of Student Conduct Affairs until the student graduates or leaves the School of Pharmacy and Health Professions or university. Students may examine the contents of their file by appointment with the Program Director.

## Attendance Policy Violations

The Didactic and Clinical Education Directors monitor the attendance of students during the academic and clinical years. Students with more than 3 absences, as outlined in the [Attendance policy](#B4), will be referred to the Didactic and/or Clinical Education Director. If the student has more than 3 absences after all documentation is considered, the student will be placed on probation. Students with continued willful infractions while on probation may be referred to the PPC for additional sanctions including, but not limited to, suspension or termination.

## Dress Code Violations and other Non-academic Violations

Students are to adhere to the dress code policy during school hours (8:00 AM-8:00 PM). Exceptions (e.g. dress down days) are permitted and students should follow the guidelines outlined in the dress code policy. Students may report dress code and other non-academic violations of other students to faculty, preceptors, or staff.

Once aware of the violation, faculty, preceptors and staff may choose to first counsel the accused student. The student may be asked to leave the class if the behavior is disruptive, sent home to change into appropriate attire, or referred to the Didactic and/or Clinical Education Director. However, in all cases the incident should be documented and submitted to the PPC and the Office of Student Affairs for inclusion in the student’s file. Minor non-academic violations will generally be resolved through the Didactic and Clinical Education Directors. However, both the Directors and Program Directors can refer students to the PPC for repeated or severe non-academic violations of the professionalism policy.

## Reporting and Investigating Misconduct

When issued a Citation for Unprofessional Behavior, each student will be given an opportunity to defend his/her position regarding the matter. The PPC may recommend counseling, referral and/or education to prevent subsequent episodes of unprofessional behavior; formal sanctions; or immediate dismissal from the Physician Assistant Program.

If a student receives a second Citation for Unprofessional Behavior, the PPC will consider all citations and determine an appropriate response to the events identified. The response of the committee may include: educational activities, formal sanctions or dismissal from the Physician Assistant Program.

Citations for Unprofessional Behavior will be kept in the student’s Physician Assistant Program records. All acts of unprofessional behaviors will be taken into account during the student’s didactic and clinical year summative evaluations.

# Ceremonies for the PA Program

## White Coat Ceremony

This is done during the third semester of the didactic year. The Ceremony will be put on by the Program. The Program will determine the date and time this event will take place.

## Graduation Ceremony

This is a Ceremony that will take place at end of the final semester. The Program will determine the date and time this event will take place.

# Communication between the Program and Students

The program will utilize a wide variety of communication methods in order to maintain a constant connection between the program and students.

## Email

Upon acceptance to the UMES Physician Assistant Program, each student will be issued a complimentary personal university email account (a “UMES account”) for his/her use while enrolled at UMES. All official university correspondence will be directed to these UMES accounts, and it will be the student’s responsibility to monitor this account regularly and to read all posted University correspondence. Students may use these UMES accounts as they wish, subject to restrictions of UMES’s Acceptable Use Policy. In addition, students are reminded that some of the UMES-generated correspondence to these accounts will contain confidential information, and it is important that they keep their passwords as secure as possible and change it at least twice each year.

The university recognizes that a student may wish to forward mail issued to his/her UMES account to another email account hosted off-campus, and UMES’s Office of Information Technology provides instructions for doing this through its Help Desk. In the event that a student elects to forward email initially addressed to their UMES account, he/she still remains responsible for all important dates, events, billing deadlines, or other important forwarded information. In addition, UMES will not be held responsible for any breach of confidentiality that might occur while information is being forwarded to an off-campus location.

As part of the Professionalism Policy, students are required to check their UMES email accounts daily for correspondence from the PA Program, which may include program updates, class schedules, last minute class changes and other critical information. Students are responsible for keeping their email inboxes clean to prevent unsuccessful transmission of program correspondence due to insufficient space. Students are expected to check email while on vacation or away from campus. If you are traveling to a location without email access, please contact your advisor prior to departure. **Please note, not checking emails for program updates and correspondence does not excuse student accountability or adherence to email content. Checking email and corresponding in a timely manner is part of the Program’s Professionalism Policy.**

Please note that the UMES email server has very limited space. Large files (i.e., PowerPoint presentations, files with pictures, etc.) should not be sent nor stored in your UMES email account. **Files should be saved to your hard drive, file space or personal folders. Failure to communicate with the program within a timely response 24-48 hours will result in an unprofessional citation**.

## Canvas

Students will have access to Canvas, which will provide important information concerning their registered courses throughout their tenure in this program. Faculty and Staff will use Blackboard to communicate with students in regards to courses, labs, and other schedule information.

## Social Media

The PA Program recognizes the prevalence and importance of social media in modern education. Social media, however, is not an appropriate or professional means of communication between students, preceptors, and the program and therefore is prohibited. Students are expected to be on time for all learning activities and clinical rotations.

## Contact Information

It is the responsibility of the student to provide the program with an accurate and up-to-date mailing address and telephone number(s). Any changes should be reported immediately to the Physician Assistant Program Administrator as well as the UMES Office of the Registrar. Student contact information must also be entered and updated in the student Exxat portal.

## Telephone Tree

Each class of students generates a method of mass communication, usually in the form of a telephone tree, to disseminate information in the event of an emergency or schedule change. A copy of the class “phone tree” should be provided to the Physician Assistant Program Administrative Specialist and each Principal Faculty member so that last-minute notifications can be communicated.

# Storage of Digital Personal Information

To ensure the security of patient information in compliance with HIPAA requirements, students are strictly prohibited from using any digital device to store or track patient information.

# Faculty Advising {A2.05}[[28]](#endnote-28) {A3.10}[[29]](#endnote-29)

## Academic concerns

Each student is assigned a member of the faculty as his or her academic advisor. The role of the Faculty Advisor is to monitor student progress in the program and to serve as the student’s advocate. Each student is encouraged to meet with his or her Faculty Advisor at a minimum of once every semester. ***However, when an academic problem arises, students are required to promptly meet with their Faculty Advisor****.*

Within two weeks of the program’s beginning, students are expected to meet with their faculty advisor to complete their Introductory Advisement Session. During the initial “in person” meeting, admissions data and any potential areas of concerns about the students pre-enrollment performance will be discussed with the student including study skills, learning styles, and the quality and quantity of study sessions. Additionally, the program will also provide group advisement sessions in the form of a study skills and time management seminar provided at the beginning of the didactic phase of the program.

Academic counseling will include a review of the student’s progress in meeting the PA Program’s academic and professional objectives, along with any other issues or concerns raised by the student. Prior to each scheduled advisement, the advisor will collect data concerning their advisee's performance including grades on various evaluation tools and feedback from instructors. The student’s study skills, learning styles, and the quality and quantity of study sessions will also be reviewed at advisor meetings to identify areas for potential improvement. After the Introductory Advisement Session, students are to formally meet at least twice per year in person with their advisor. The content of academic advisement will be documented on the Program’s Student Advisement Form and maintained in the student’s program file.

The Progress and Promotion Committee will meet mid-term, at the end of each term, at the end of the didactic phase, and prior to graduation to discuss each student’s academic progress. Each student’s performance data and progress across the curriculum will be reviewed. Course instructors will be asked for input. Advisors will also give updates on any important events concerning their advisees. If a student is identified as having academic difficulties or other difficulties impacting academic and/or personal well-being, the assigned advisor will be asked to meet with the student and will document their conversation using the Student Advisement Form. Academic Improvement Plans will be used to facilitate student success in accordance to remediation policies.

Students requiring remediation will be asked to meet with advisors more frequently. Advisors will frequently interact with advisees via email, especially those in the clinical phase of study. Advisors will follow students throughout the curriculum to integrate the didactic and clinical phases. Students on Learning Contracts will require longitudinal follow-up and assessment of subsequent progress.

## Faculty Responsibilities

Each student is assigned a Faculty Advisor for the duration of the program. The role and responsibilities of the advisor include but are not limited to the following:

* Provide communication between the student and faculty;
* Meet with student at least two times per year;
* Meet with student if problems arise, e.g. academic or professional difficulties;
* Know the student advisee’s grades, skills and professional conduct;
* Assist the student in meeting the educational objectives of the program;
* Discuss strengths and areas for improvement;
* Suggest improvements in time management and study skills as needed;
* Help plan in conjunction with a course instructor remediation for deficiencies in skills or knowledge;
* Discuss summative academic, clinical skills and professional/behavioral evaluations;
* Identify additional faculty member(s) who will be easily accessible if a student wishes to discuss a problem of a personal or professional nature;
* Record meetings with student advisee in student file;
* Refer to appropriate services including but not limited to the Counseling Services, Center for Access and Academic Success, Student Health Services etc., as needed;
* Enable the student to identify the materials necessary to achieve the educational and objectives and professional standards of the Program.

## Student Responsibilities

* Discuss areas of strength and areas for improvement with the advisor;
* Complete a Student Self-Assessment;
* Help plan a course of action to remediate deficiencies and capitalize on strengths;
* Meet with advisor at least two times per year;
* Meet with advisor on an as-needed basis when problems arise;
* Make an honest effort to follow the plans derived from the session.

## Example of Output from Advising Sessions (Not Comprehensive)

* Referral to Center for Academic Excellence
* Referral to Counseling Center
* Referral to Student Success Coach
* Referral to Health Care Provider
* Student assess time management skills/make changes to allow additional study time
* Adjustment of Study Habits
* Behavior Modification
* Specific Remediation Program
* Discuss Availability of Tutoring Services
* Begin Exercise Program/Other Stress Reduction Techniques
* Career Goal Reexamination

***Personal problems:*** If a personal problem arises, students are advised to meet with their Faculty Advisor at their discretion, particularly if the problem is impacting their academic performance. Students may be referred to on-campus services including the Student Health Services or the University’s Counseling Service Center, depending on the problem. If further services are required, a student will be referred to providers in the community who are experienced in working with a graduate student.

# **Evaluation of Comportment (Professionalism, Values & Work Ethics) {A3.11}**[[30]](#endnote-30)**; {A3.17}**[[31]](#endnote-31) **{A3.10}**[[32]](#endnote-32) **{B4.01}**[[33]](#endnote-33)

Evaluations are conducted by the faculty, your assigned clinical mentors and preceptors, members of the student Progress and Promotion Committee (PPC), and by academic committees and authorities. Standards for academic evaluation are applied to all students in a particular course of study. Such standards may be articulated, verbally or in writing as part of a course and included in course evaluation forms. Under academic standards relating to professional comportment, deficiencies in comportment give rise to adverse academic evaluations, grades and narrative reports of performance. Such matters are normally addressed in a remedial manner. However, if a faculty member, in the course of evaluating professional comportment, obtains evidence of wrongful misconduct by a student in violation of Program or University policy, the allegation will normally be pursued as a disciplinary infraction.

**The faculty evaluator may factor into the course evaluation the results of any such disciplinary case arising out of a particular course.**

# Program Infrastructure

## Meetings with students

The Program Director will meet periodically with students as a group. Meetings with the second year students are formally scheduled during ***call back*** sessions. The purpose of the meetings is to:

* Update students about program issues and projects;
* Promote Physician Assistant leadership opportunities;
* Promote scholarship opportunities; and
* Address questions, concerns and suggestions related to the Physician Assistant Program and Physician Assistant profession.
* The Program Director will conduct townhall meetings with both the first and second year students each semester. Student concerns from a global perspective will be addressed and brought back to the program executive committee or appropriate committee.
* Meetings with student E-BOARD which is the SAAAPA student society. This will include discussions about student events, student initiatives, national challenge bowl preparation, white coat and graduation preparation.

## PA Program Committees

While each member of the Physician Assistant Program faculty has specific areas of responsibility, the planning and execution of the program is a highly collaborative effort. Furthermore, many of our first-year clinical mentors and second year clinical instructor (CI) preceptors serve as volunteer Adjunct Faculty.

## CRC (Curriculum Review Committee)

Team Members: Program Director, Didactic Education Director (Chair), Program Administrative Specialist, Principal Faculty, and/or Ad-hoc guests

The CRC reviews of all didactic courses and clinical clerkships, and makes decisions regarding programmatic changes based on quantitative and qualitative data findings (and subsequent faculty discussion). The committee utilizes national benchmarks for comparison with the program’s curricular content and sequence, and it prepares the ARC-PA’s Self-Study Report (SSR), the role of the CRC is to:

* Review and update the mission as needed.
* Perform appropriate mapping of programmatic content with graduate outcome data.
* Review best practices to determine future trends for curriculum development.
* Develop goals and objectives for the program.
* Review aggregate data involving the admissions process to ascertain whether changes need to be made to overarching requirements.
* Initiate the development of curriculum, as indicated – Review, finalize, and approve proposals.
* Initiate the revision/updating of course objectives and curriculum content, as indicated - Review, finalize, and approve proposals.
* Attendance by half of the membership will constitute a quorum.
* Program assessment-review aggregate data once completed at the data analytic committee level to make determinations regarding areas needing modification.
* Review student reviews of faculty, preceptors, and clinical sites, and makes decisions based on findings
* Assign workloads to core and adjunct faculty
* Assign academic advising caseloads to faculty for formative and summative outcome monitoring, in order to counsel learners regarding academic outcomes and any professional issues
* Review employer surveys, exit surveys, and PANCE findings at the aggregate level;
* Review student retention and graduation rates; etc.
* Sets standards for the summative assessment process
* Minutes are taken by the PA Program Management Specialist or Program Administrative Specialist as assigned

The CRC meets twice monthly to discuss issues of curriculum, course surveys and course performance. The Didactic Education Director will chair this committee.

## CYT (Clinical Year Team)

Team Members: Clinical Education Director (chair), Medical Director(s) Program Management Specialist, Clinical Lecturer member(s), Program Director, Clinical Coordinator and Clinical Site Visitor

The charge of the CYT is as follows:

* Review clinical year policies and procedures
* Strategic planning and implantation of clinical site development
* Operationalizing clinical site review strategies
* Troubleshooting clinical student concerns and issues
* Tabulate and prepare clinical year related data and transmission to the data analytic committee
* Placement of students into clinical sites
* Conduct appropriate public relations activity to promote the PA profession
* Study best practices related to PA clinical education
* Minutes are taken by the PA Program Management Specialist or Program Administrative Specialist as assigned

## DAC (Data Analytic Committee)

Team Members: Program Director (Chair), Didactic Education Director, SPHP Assessment Director and PA Assessment Consultant

The charge of the DAC is with facilitating the analysis of programmatic data. This includes the following objectives:

* Review data sets and prepare for statistical analysis
* Review trend data and make recommendations to the curriculum committee about areas needing further analysis
* Analyze and tabulate qualitative data from preceptors, graduates, student evaluations of faculty, student evaluation of courses, and faculty evaluation of the program,
* Operationalize the programs assessment plan involving quantitative and qualitative analysis.
* Compile and analyze important trend data such as graduation rates, student attrition rates, faculty and staff attrition rates
* Compile and analyze data from admissions cycle to determine appropriate metrics and recommendations to the admissions committee
* Analyze formative and summative data to determine student risk stratification
* Analyze graduate outcome such as PANCE scores and pass rate
* Review and analyze clinical year data from preceptors and students
* Minutes are taken by the PA Program Management Specialist or Program Administrative Specialist as assigned

## Progress and Promotion Committee (PPC)

Team Members: Program Director (Chair) Didactic Education Director, Clinical Education Director and Principal Faculty Members, Adivorsl University representation (ad hoc when addressing specific student concerns – i.e., UMES School of Graduate Studies (Director of Admissions), UMES PA Program Adminstation.

The PPC is charged with:

* Analysis of formative and summative assessments on all students
* Determines student readiness to transition from one semester to the next, year 1 to year 2, and ultimately from the program to graduation
* Decision-making based on data findings and faculty discussion
* Adjudicating issues that arise at any time during the year due to failure of a learner to maintain the standards set forth in the UMES PA Program
* Attendance of half the members constitutes a quorum.
* Minutes are taken by the PA Program Management Specialist or Program Administrative Specialist as assigned

The PPC is also responsible for adjudicating issues that arise at any time during the year due to failure of a learner to maintain the standards set forth in the UMES PA Program Policies and Procedures, or as stated in other pertinent and applicable, distributed or published PA Program, School of Graduate Studies or the University of Maryland Eastern Shore documents or statements. When addressing specific student issues and needs due to suspect problems relating to progression through the program and/or professional behavior issues, University representation will be called upon to participate in data review, discussion, hearing from the student(s) of concern, and decision-making based on findings. The PPC is also responsible for the removal of a student from extracurricular activities if the student is deemed to not be in satisfactory academic standing at any time during their PA education.

## Admissions Committee

Team Members: Admission Coordinator (Chair), Principal Faculty, Medical Directors, Auloi members

The Admissions Committee is charged with:

* Screening applicants and learner selection
* Review of admissions policies, procedures and assurance of the accuracy and consistency of admissions publications (website, brochure, catalog, etc.)
* Reviews and evaluates admissions requirements, including prerequisite courses, to assure adequate applicant preparation for the program’s curriculum
* Analyzes trends in the applicant pool and learner enrollment using national and/or regional benchmarks
* Analyzes aggregate learner data related to attrition, deceleration, remediation, and performance/attrition data in the context of admission demographics.
* Minutes are taken by the PA Program Management Specialist or Program Administrative Specialist as assigned

## PA Program Executive Committee

Team Members: Program Director (Chair), Didactic Education Director, Clinical Education Director; PA Program Management Specialist

The Executive Committee is charged with:

* Oversight of all operational aspects of the program – this is where information and conclusions brought from the other committees are analyzed.
* Program policy ratification and major decisions about strategic planning are voted upon.
* Review of ARC-PA requirements.
* Rollout of in-house in-service training, and meeting with learners (as a group to address needs or questions about the program).
* Implement orientation to the next phase of the program, update learners on projects.
* Encourage PA leadership opportunities and plan for community outreach.
* Minutes are taken by the PA Program Management Specialist or Program Administrative Specialist as assigned.

## Scholarship Committee

Team Members: Admission Coordinator (Chair), Medical Director, Program Director, Principal Faculty

The Department of Physician Assistant is aligned with the University of Maryland Eastern Shore’s (UMES) mission to provide access to a holistic learning environment that fosters multicultural diversity, academic success, and intellectual and social growth. This scholarship serves to increase the number of underrepresented health care providers in the field of Physician Assistant as defined by the Physician Assistant Education Association.

The Scholarship Committee is charged with:

* Evaluate applications of candidates who meet eligibility requirements.
* Vote and award scholarship recipients.
* Evaluate on-going scholarship dispersement based on eligibility criteria.
* Annual evaluation and review of scholarship requirements.

This meeting involves all operational aspects of the program. This is where information and conclusions are brought from the curriculum committee, clinical year committee, admissions committee, and other ad hoc committees. Program policies are ratified and major decisions about strategic planning are voted upon by this committee. Additional responsibilities include: to review ARC-PA requirements, rollout of in-house in-service training, and meeting with learners (as a group to address needs or questions about the program). Implement orientation to the next phase of the program, update learners on projects, promote scholarship opportunities, encourage PA leadership opportunities, plan for community outreach, arrange for SPHP promotion initiatives, review promotional materials, share updates from the College, University, professional meetings, etc.

# University of Maryland Eastern Shore Physician Assistant Student Society (UMESPASS)

## Overview and Activities

With goals to promote academic achievement, clinical excellence and to promote the Physician Assistant as a member of the health care delivery team, The UMES Physician Assistant students established the Physician Assistants at The University of Maryland Eastern Shore (UMESPASS). Membership is open to all students in the UMES Physician Assistant Program and dues are determined on a yearly basis by the officers and members in the society. A Physician Assistant Program faculty member serves as the advisor and provides direction in UMESPASS activities.

During the second year, the president and other officers offer their knowledge and experience to officers in the first year class. Additionally, the president may continue to serve the second year class by assisting in the dissemination of information important to the class and by planning gatherings.

Each year the UMESPASS participates in numerous community-based service projects. The student society also participates in the Assembly of Representatives (AOR) each year, with the class president serving as the AOR representative. The AOR meets annually in the first two days of the AAPA Annual Conference to establish Student Academy (SAAAPA) policies and bylaws, elect the SAAAPA Board of Directors and direct activities of the Board for the following year.

## Duties of Class Officers

## President

This position requires a flexible, open-minded and motivated person who possesses excellent time management skills. The main responsibility of the class President is to be a good communicator. The President represents the class at state and national meetings, helps with organizing projects and facilitates communication between the class, faculty, campus administrators and other professionals. This position also requires a person to be a team player, since most decisions that are made on behalf of the class are discussed with the E-board members and classmates.

The President is the link between students and faculty. When a faculty member has a message for the class (usually an announcement), it is the President’s responsibility to meet with the faculty member and relay the message to the class. More often, classmates will raise a concern to the President who will bring the concern to the appropriate faculty. Popular requests are class and exam schedule changes.

Challenge Bowl for both MAPA/AAPA this is part of the PA Program requirements (Learning Outcomes 4 and 16.)

## Vice President

The main role of the Vice President is to assist the President and other E-board members in all matters that pertain to class issues. The Vice President coordinates special student projects and organizes the new class orientation in March.

## Secretary

The class Secretary is responsible for keeping lecture notes, recording important dates for class events, creating a class email list and forwarding email announcements from faculty and staff to the class list, typing E-board meeting minutes, creating a “phone tree” for last-minute class announcements and organizing the PA Student Resource Room. The Secretary must be extremely organized and able to maintain a good working relationship with other class officers.

## Class Treasurer

The class Treasurer is responsible for maintaining the class bank account, tax-free identification number and budget; collecting class dues; issuing checks for class functions; and arranging a representative to speak to your class regarding medical equipment in-service.

Ability to create Excel spreadsheets, balance a checking account, keep/manage a budget and take a strong initiative to manage the budget and make reimbursements appropriately is required. The Treasurer also must have knowledge of (or willingness to learn) banking rules pertaining to clubs/organizations and appropriate (as outlined by the university) activities for your class to sponsor. This is by no means a time consuming position once dues have been set, collected and registered, and a budget determined.

## MdAPA/AAPA Representative

The MdAPA representative works closely with MdAPA on a variety of levels.  The MdAPA Representative’s main duties are to attend MdAPA meetings, vote on behalf of UMES in the MdAPA elections and update your classmates on current MdAPA issues.  MdAPA meetings are usually held quarterly on a Saturday morning, but occasionally have been scheduled bimonthly.  Other optional duties are to provide newsletters to MdAPA regarding your class activities and progress and assist in projects for the annual MdAPA conference in October. The Representative will work closely with the Program Office for both MdAPA and AAPA. The AAPA conference is to take place in May of the 2nd summer. The AOR or MdAPA/AAPA Representative will need to attend the conference and all student activities. Will also help and support the quiz bowl team that will be participating at the AAPA conference.

## Social Coordinators

The Social Coordinators are responsible for planning fun activities to give classmates a reprieve from the stresses of PA student life. Examples of past years’ activities include a summer picnic for both first and second year students, Halloween party, Christmas party, cohort mission trips, community service events and cohort projects .

The Social Coordinators will take pictures of class parties, outings, community service projects and other events. The Social Coordinators also is responsible for assembling a scrapbook at the culmination of the program, which can be entered in an annual AAPA contest.

The Social Coordinator will also assists in the organization of blood pressure clinics or blood drives in the community and disseminating health information to the community.

## Community Service Requirement

During the course of the student’s tenure in the PA Program, he/she will be required to complete a **minimum of 40 hours** of verified community service or volunteer work in the local community.

* Minimum 60% (27 hours) of community service should be completed during 1st year
* 40% (13 hours) of community service should be completed during 2nd year.

It is the student’s responsibility to track these hours and report them to the designated faculty member for inclusion in the student’s professional file.

* Excel spreadsheet: calculate the total community service hours
* Faculty advisor: monthly check-in

These community service hours may be coordinated by the UMESPASS organization for group participation or may be done individually.

* Complete service hours request form prior to completing service hours
* Training should be provided before the activity if needed
* Community service may include health and non-health services
* Community health service is recommended

The community service should be focused on meeting the medical needs of the local community or community improvement/activities, examples of service opportunities include: hosting a medical screening event, volunteering in the medical tent of a charity run/walk event or blood drive, offering education or screenings to attendees of local senior centers. Status on the completion of service hours will be intermittently reported to faculty advisors to ensure that students have appropriate plans to complete required hours before the end of the program.

# Health Insurance Portability and Accountability Act (HIPAA)

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a Federal Regulation dealing with health records. The purpose of the Act is to ensure the privacy and security of Protected Health Information (PHI) with regard to patient records and research subject data.

* You will take a formal [HIPAA review](https://www.cmich.edu/colleges/CHP/hp_academics/physician_assistant/SiteAssets/Pages/Student-Handbooks/HIPAA%20and%20BBP.pdf) during the Summer I during the Clerkship Preparation course, just prior to your SCPE year.
* HIPAA training may be repeated at any time during the clinical year at the discretion of the clinical placement site administrators, in accordance with the established affiliation agreement.

UMES Physician Assistant Program students must adhere to all HIPAA guidelines, which include:

* Patient information may not be discussed where the information may be overheard by unauthorized individuals (i.e., hallways, elevators, water coolers, at home or at social events).
* Dictation of patient information must occur in a private location where the information cannot be overheard by unauthorized individuals.
* Documents containing confidential information must be stored in a safe and secure location.
* Documents containing confidential information must be picked up as soon as possible from printers, copy machines, mailboxes, fax machines, etc.
* Confidential documents must be disposed of by shredding or otherwise destroying the documents. Tearing up and placing in a standard trash receptacle is not acceptable.
* PHI may not be accessed for personal use. PHI may only be accessed as is necessary to fulfill your professional duties.
* It is the provider’s duty and responsibility to keep health care information completely confidential.
* Computer “passwords” must not be written down or shared.

## UMES Physician Assistant Program HIPAA Security Reminder

UMES faculty, staff and students who access electronic PHI are reminded that they are responsible for maintaining the security of their personal account and of their workstation. Violations of UMES PA Program policies regarding the security of PHI are punishable by disciplinary steps up to and including termination from the program.

HIPAA Certified or Labeled computers hold access to electronic PHI, such as medical records/health information and are designated for use only for charting or review of PHI. Only “pre-approved” software is to be installed on HIPAA computers in coordination with your department’s information tech representative. If you do not have a technical representative, call the Help Desk for guidance regarding which HIPAA technician is assigned to assist your department. In order for the UMES PA Program to comply with federal HIPAA regulations, remember:

* To maintain the security of your account:
* All users must change their password at least 3 times per year.
* Use a strong password that includes a mix of letters, both upper and lowercase, numbers and special characters.
* Never write down your password unless it is to be kept in a securely locked area for disaster recovery/emergency purposes.
* Do not give your password to anyone else or let someone work under your account/password—each account can be tracked and the designated user will be held responsible for privacy violations.
* Report to your supervisor any problems with an account, such as an account that has been locked out for multiple incorrect logon attempts without your knowledge.
* To maintain the security of your workstation:
* Always lock your workstation when you are away from it.
* Log out of the application and/or computer after completing PHI work.
* UMES policy prohibits storing PHI on removable media, such as floppy disks or CDs, or on your computer’s hard drive, such as the “My Documents” folder. PHI may only be stored within the appropriate primary system (SAP, Pyramid, etc.) or in the HIPAA protected network.
* Ensure that only pre-approved software is installed on the workstation.
* Report to your supervisor any new or suspicious software installed without your knowledge.

# Student Support Services {A3.10}[[34]](#endnote-34)

## Counseling/Mental Health Services

You are responsible to listen to your mind, your heart, your soul, and pay attention to your mental health. As a college student, there may be times when personal stressors interfere with your academic performance and/or negatively impact your daily life. If you or someone you know is experiencing mental health challenges at UMES, please contact Counseling Services located on the 2nd floor of the Student Development Center, Suite 2260 or call 410 651-6449. The services are free and confidential.  If you  need to speak to a counselor after hours, call Healthy Hawks, a 24/7/365 mental health support line at (410)651-HELP (4357).

## Health Center

All registered students, including graduate, transfer and international students, regardless of number of credit hours being taken, are required to provide a completed health history form and proof of up-to-date immunization status for measles, mumps, rubella (MMR) and tuberculosis (TB) prior to registering for and/or attending classes. Students living in campus housing must also meet the meningitis requirement.

A University-sponsored health insurance plan is available. Full-time international students (undergraduate and graduate) are automatically enrolled in the insurance plan unless they opt out. To opt out of the University health insurance plan, students must sign the insurance waiver in the Student Health Center and present proof of current valid health insurance coverage.

Waivers must be completed by September 7 in the Fall and by February 7 in the Spring. If no waiver is completed, the student’s account will be billed for insurance at the current rate. Domestic graduate students (full or part-time) are eligible for the plan but must enroll directly. Copies of the insurance brochure may be obtained from the Student Health Center or accessed online at (http://njcservices.com/umes.htm). Students with questions about using the insurance should contact the Health Center staff.

## Office of Institutional Equity and Compliance

Assists the University in compliance with the provisions of the Americans with Disabilities Act of 1990 (ADA) and Section 504 of the Rehabilitation Act of 1973 for full-time undergraduate and graduate students enrolled at the University of Maryland Eastern Shore.

* Assists the University community in understanding the effects of disabilities and eliminating the physical, technical, attitudinal and programmatic barriers that limit the range of opportunities for students with disabilities.
* Arranges for review of documentation and provides individuals with reasonable accommodations.
* Maintains and protects the confidentiality of individual records as required by state and federal laws.

## Military Affiliated and Veterans Students

UMES is fully accredited for accepting Veteran students and assists them in their needs for certification. Credit is given for any work done in the military service related to their major field of study. The Certificate of Eligibility must be submitted to the Office of Undergraduate Admissions when the veteran reports for registration. Benefits to which the veteran is entitled will be sent monthly by the Veterans Administration and directly to the veteran after he/she has been properly certified. Each veteran is responsible for the payment of all fees and expenses at the same time as regular students. The Undergraduate Admissions Office coordinates veteran services. Veterans are advised to contact that office for further information on admissions, tutorials, and special programs.

# Safety and Security {A1.02}[[35]](#endnote-35) {A3.07}[[36]](#endnote-36) {A3.08}[[37]](#endnote-37)

## Health Insurance Requirements

Students are required to maintain personal health insurance during enrollment in UMES’s Physician Assistant Program. Proof of insurance coverage must be provided prior to orientation. Students are responsible for all personal health care costs incurred while enrolled in the PA Program. These costs may include but are not limited to: immunizations, illness, PPD testing, health evaluation post exposure to a communicable disease, or other accidental injuries sustained during program mandated training activities. Due to the potential for exposure to potentially infectious materials, insurance should cover screenings, diagnostics, treatments, and short and long term disability compensation that may result from any potential exposure. All screening, treatment, or disability maintenance costs that insurance does not cover will be the sole responsibility of the student. All covered, uncovered, or related costs are the exclusive responsibility of the student and not the responsibility of University of Maryland Eastern Shore.

## Standard Precautions

**Definition:** Standard precautions are the minimum safety and infection prevention practices that apply to **all** patient care, laboratory or technical skills training experiences in any setting where healthcare or healthcare training is delivered. These practices are designed to protect healthcare professionals (HCP) and prevent HCP from spreading infections to others. Students will be instructed in Standard Precautions early in the program during orientation and throughout the didactic phase of the program.

Compliance with all safety practices is a not just good procedure - it is a mark of your professionalism. Persistent **failure to observe and practice Standard Precautions may result in adverse/disciplinary action for unprofessional behavior and referral to the Progress and Promotion Committee.**

Students will be required to complete any clinical site-specific safety or security training requirements in preparation for supervised clinical practice rotations.

**Accidental Exposure**

There are several steps students should take in the event of Accidental Exposure. Those steps include, but may not be limited to, the following:

* Remove soiled clothing and administer immediate aid, including washing skin, flushing eyes 10-15 minutes, etc.  Remove contact lenses if eyes are exposed.
* Notify the preceptor immediately. **DO NOT DELAY. GET ASSISTANCE IMMEDIATELY.**
* Immediately report to or contact the designated person/department at the clinical site to receive information and counseling regarding proper protocol and treatment for accidental exposure.  In some cases this might be the Employee Health or Occupational Health Services Department. **PLEASE NOTE: Health care entities are not obligated to provide students with treatment although some may do so.** All UMES students are required to carry health insurance for the duration of the program.
* Should the clinical site not provide you with treatment, students should go to the closest Urgent Care, Family Doctor or Emergency Department for immediate treatment at their own expense.  Student injuries are not work related injuries and therefore not covered under Workman’s Compensation Laws.
* Following an exposure, once the student has followed the clinical site’s protocol, the affected students must contact the Clinical Education Director within 24 hours of the incident. The student must also complete the STUDENT EXPOSURE FORM (Located in the Clinical Education Handbook) and follow the directions at the top of the form. Please complete the form as accurately and completely as possible. Subsequently, a UMES Accidental Personal Injury Report must be completed by the CED or PMS, and is filed in the PA office for tracking, with a copy sent to UMES Conduct Administrator ([https://www.umes.edu/OIE)](https://www.umes.edu/OIE)

## Liability Insurance

UMES PA students are covered under the state’s liability insurance throughout enrollment in the Program. Student name and social security number must be submitted to ensure coverage. Proof of insurance will be provided to clinical sites where students are assigned. Coverage will be in effect for Program-assigned clinical rotations and experiences, but will not be in effect for students working in a clinical setting not affiliated with the Program, such as that occurring during outside employment or in the case of volunteer work either during the academic year or during a break, unless it is Program-assigned. Students are also required to purchase or arrange a private malpractice policy. Information on a free policy can be found at https://www. cmfgroup.com/professional-liability-insurance/ physician-assistant-student-insurance /.

## Latex Allergy Policy

Latex products are extremely common in the medical environment. Students with a history of latex allergy are at risk for future severe reactions upon exposure to latex products. Although students with localized contact irritant dermatitis can be accommodated, those with a history of generalized reactions or true anaphylaxis need clearance from an allergist and may need to carry an Epi-pen.

Any student with a known latex allergy, or having or describing symptoms consistent with latex allergy, is advised to consult a qualified allergist for evaluation. Such evaluation is at the student’s expense. Any student found to be latex allergic must determine whether or not to continue with PA training, acknowledging the risk of becoming ill even if after reasonable precautions are taken and accommodations are made.

If such a student elects to continue in training, the student must realize that he/she assumes any responsibility and risk posed by allergic reactions, which can range from mild symptoms to anaphylaxis and death. In the event such an allergy is present, either intentional or inadvertent exposure to latex and related products may lead to these consequences. Although the Program will do all it can to provide latex-free gloves during laboratory session, it cannot guarantee a latex-free environment because other students may not be using latex-free gloves and other materials. Furthermore, we cannot guarantee a latex-free environment at every clinical training site.

If a student chooses to proceed with training in the face of significant risk, the student will be required to sign a waiver stating that he or she understands the risk. This waiver will be forwarded to each of the student’s clinical sites.

# Criminal Background Checks/Drug Screenings {A1.02}[[38]](#endnote-38) {A3.01}[[39]](#endnote-39) {A3.02} {A3.05} {A3.06} {A3.07} {A3.08} {A3.09}

## Criminal Background Checks/Drug Screen Urinalysis

All students are required to have a criminal background check (CBC) report on file with the UMES Physician Assistant Program. The criminal background check is performed by CastleBranch at the expense of the student. Information on obtaining the initial CBC is sent to each student who has accepted an offer of admission with the UMES Physician Assistant Program for the incoming class. Please note the following:

* The Criminal Background Check is MANDATORY.
* Information from the CBC must be on file with the UMES PA Program before the student secures a seat in the class.
* Additional background checks may be required of external institutional partnerships prior to participation in experiential activities. Financial and other responsibilities for these CBCs are the sole responsibility of the student.

All students are required to have a drug screening test on file with the Physician Assistant Department. The drug screening is performed by CastleBranch, at the expense of the student. Information on obtaining the initial drug screening is mailed to each student who has accepted an offer of admission with the Physician Assistant Program for the incoming class. Information from the drug screening must be on file with the Physician Assistant Program before the student secures a seat in the class. Additionally, students may be required to perform a drug screening to be eligible for placement in specific external institutional partnerships prior to participation in experiential activities. Financial and other responsibilities for these drug screenings are the sole responsibility of the student.

Additionally, each student is subject to mandatory random drug screening during the Master of Science education program as requested by the UMES Department of Physician Assistant and/or the clinical site. Failure to successfully pass a drug screening test, refusal to submit to a test, or any other violation of the UMES substance abuse policy, will have consequences that may result in dismissal from the program, legal issues and/or financial complications for the student.

To foster a safe learning environment and comply with affiliates for off-campus learning experiences, the UMES PA Program requires a Criminal Background Check and a Drug Screen.

**Criminal Background Check:** A National Records Indicator with SOI will be issued. Criminal records are not indexed by social security number but are typically indexed by name and date of birth. Should you have a criminal record dispute, per the FCRA, students have the right to dispute the results of their background check. All disputes are conducted by CastleBranch at no additional charge. Result disputes are reviewed within 5 days of submission and are resolved within thirty days.

**Drug Screen Urinalysis**: A 12-Panel Drug screen analysis will be issued. The screening site and instructions will be provided through CastleBranch.

## Student Identification

All students are required to wear a name tag that includes their name and identification of program sponsorship while on the UMES campus and during supervised clinical rotations or when required by the program. In some instances, clinical affiliations sites will require additional identification and nametags to be worn. UMES name-tags will be initially provided by UMES at the time of White Coat Ceremony. Students will also be issued ID cards by UMES that will provide access to various UMES facilities and services.

## Campus Police

The Department of Public Safety and University Police are committed to providing the highest quality of service to the university community and the public. We are constantly striving to meet the needs and rights of students, faculty, staff and our guest. Staff is on duty 24 hours a day, seven days a week. The law enforcement staff of the Department of Public Safety is Maryland Police and Correctional Training Commission certified police officers. Each office is trained to manage and respond to the needs of the community in a professional and efficient manner. Students are urged to report situations that could threaten the health and/or safety of members of our community; this includes suspicious persons, thefts, assaults, car accidents and unsafe conditions. University Police may be contacted anytime 24 hours a day; you can walk in for assistance or dial the office at ext. 3300 for non-emergencies. For emergencies, you can contact our office by dialing ext. 6590. We also provide campus escort service, as well as managing security personnel in our residence life units.

## Emergency Services

There are emergency “blue light” telephones strategically located throughout the campus, which are connected to the Department of Public Safety for immediate Police response. Elevators also have emergency phones, which are also connected to the Department of Public Safety and can serve as emergency telephones. The Department of Public Safety can be reached for emergency assistance by dialing extensions 410-651-3300 or 410-651-6590, twenty-four (24) hours a day.

## Escort Services

Escort services are provided to students during the evening hours by the Department of Public Safety. Students desiring escort services should contact the Department of Public Safety at 410-651-6590.

## Emergency Notification

In the event of a campus emergency several methods will be used to make the appropriate notification depending on the type and extent of the emergency. Our policy is that quantity verses quality takes priority, in other words, we will use as many methods as possible to communicate the existence of an emergency, and as quickly as possible. Events which might require use of notification systems are severe weather, HAZMAT spills, fire, flooding, major road closures, criminal activities requiring precautions, etc. Several or all of the listed methods might be used for notification and those methods include: Emergency Siren/Public Address Notification System, text messaging for those students, faculty and staff registered for receiving text messaging, campus wide e-mail notification, campus cable TV, campus electronic message monitors, WESM Radio, and local media channels. For every notification event we ask that you communicate with as many fellow students, co-workers and visitors that an emergency exists and follow any guidance or precautions provided.

## Parking Permits

All vehicles must be registered with the Department of Public Safety and display a valid parking permit. Permits must be properly displayed on vehicles, affixed to the front windshield (driver’s side) or via hang tag. Vehicles are not considered properly registered unless the proper permit is displayed. The registration period is September 1 through August 31. Permits can be purchased Monday through Friday, 8:30 a.m. to 3:00 p.m. at the Student Services Center, room 1135. UMES honors all valid parking permits for all University System of Maryland Institutions.

## Parking Areas

The University has both restricted and unrestricted parking areas, please pay close attention when parking on campus. Be aware that you can only park in designated parking lots where your permit authorizes you to park. Handicapped parking regulations are strictly enforced. Vehicles found parked illegally in these locations will be ticketed and towed. Remember an authorized parking space is a lined designated parking space.

# Reporting Crime and Incidents {A1.02}[[40]](#endnote-40)

Reporting crimes and incidents immediately is very important. The University Police Department is an agency that is manned by sworn police officers who have arrest powers. The University complements its sworn police officers with security personnel. Any occurrence that takes place on campus is to be reported immediately, and those that occur off campus should be reported as soon as possible. Any victim or witness of a crime, who desires to report an incident on a voluntary and confidential basis, may do so through the Police Department, the Vice President for Student Affairs and Enrollment Management, the Vice President for Administrative Affairs, Athletic Director, Coaches, Area Directors, and Resident Assistants, or any other member of the UMES faculty/staff. The individual's identity will be safeguarded when possible. The University Police Department closely cooperates with the Vice Presidents for Student Affairs and Enrollment Management and Administrative Affairs, Residence Life, Student Government, and the Counseling Center, to disseminate information about safety and security matters to the campus community through newsletters, annual brochures, scheduled meetings, and other forms of mass communications.

# Racism, Discrimination and Diversity {A3.15}[[41]](#endnote-41)

The University of Maryland Eastern Shore (UMES) is an equal access, equal opportunity institution fully committed to diversity in education and employment. All students, employees, and the campus community at UMES are valued, respected, and have the opportunity to receive an equitable experience in an inclusive, welcoming environment of openness and appreciation.

If you experience discrimination based on a protected class (race, color, religion, ancestry or national origin, sex, age, marital status, sexual orientation, gender identity, disability, or genetic information), you are encouraged to report the incident to the UMES Office of Institutional Equity and Compliance (OIE). You can do so by calling 410-651-6135, emailing [equity@umes.edu](mailto:titleIX@umes.edu), or visiting the Early Childhood Research Center, Suite 1129.

# Sexual Assault Policy {A3.15}[[42]](#endnote-42)

A student who has been the victim of sexual assault may go through a range of emotions, which impacts their decisions with regard to reporting the incident. Therefore, it is very difficult to have a procedure to cover all possibilities. The procedural list below serves as a general guideline to follow when you become aware of a sexual assault. Please note, the students name should not be forwarded in the notification chain. General guidelines are as follows: (<https://www.umes.edu/Police/Pages/Sexual-Assault-Policy-and-Procedures/>), https://wwwcp.umes.edu/oie/, and (<https://www.umes.edu/Student/Pages/Sexual-Misconduct-Policy---Procedures/>).

# Zero Tolerance Policy {A3.15}[[43]](#endnote-43)

The University of Maryland Eastern Shore maintains and strictly enforces a policy of zero tolerance with regards to fighting, the use, possession and/or distribution of illicit drugs, and the possession of dangerous weapons, firearms, and explosives. If a student is found guilty of using, possessing, selling or distributing illegal drugs; initiating a fight, or using any object (weapon) with the intent to cause harm, the minimum sanction may be suspension from the University for one (1) academic semester, and where appropriate students may be referred to local policing authorities for criminal prosecution. Suspension from the University for a violation of the zero tolerance policy may result in the cancellation of the accused student’s housing contract, loss of tuition and fees, grades attempted, and denial of a housing contract in the future. If a student is found guilty of drug distribution or the possession of dangerous weapons, firearms, or explosives, the maximum sanction may result in expulsion from the University.

# Inclement Weather Policy

The UMES PA Program will follow the inclement weather policy of the University with a few exceptions. Depending on the severity of prevailing or impending road conditions, the University will observe a state of (1) full operation, (2) minimum manning, or (3) closed. The UMES PA Program will observe a 2 hour delay if the University declares a state of minimum manning. University status will be announced on the UMES radio station, WESM-FM (91.3), as well as other local radio and television stations. If the UMES PA Program is closed, the affected faculty will reschedule activities as soon as possible. Activities may be rescheduled during evening or weekend hours. Students who are scheduled for Clinical Clerkships should consult the Clinical Education Handbook for the inclement weather policy.

# Faculty and Staff Contingent Policy

All UMES PA Program Courses with the exception of clinical skill courses operate on Hybrid Model. All courses are linked to Echo-360 and Google Meet, they are set-up to operate in a virtual setting. All full-time faculty and adjunct faculty are trained to operate all UMES PA Program and University software and virtual platforms. Therefore, in an event of inclement weather; a Department email is sent from the Didactic Education and/or Program Director issued to all didactic phase instructors and students to switch to remote instruction.

All clinical phase students follow the schedule of their clinical site. However, all clinical students are encouraged to use their judgment in regards to driving in inclement weather if transportation is not provided by the clinical site. They are required to notify preceptors and the clinical year team.

Clinical skills course will automatically be rescheduled. Faculty are notified as stated above.

# Student Resources {A1.09}[[44]](#endnote-44) {A3.10}[[45]](#endnote-45)

## Hazel Hall Hours of Operation

The Physician Assistant Program administrative suite is located in Suite 1034, Hazel Hall.

**The Program hours are:**

Monday-Friday 8:00 am - 4:30 pm.

**Hazel Hall is open the following hours:**

Monday-Thursday 7:30 am - 10:00 pm; Friday 7:30 am - 6:00 pm.

## Use of PA Graduate Room (Hazel Hall #1056) and Clinical Lab Room (Hazel Hall #1045)

* These study spaces are available during hours that the Hazel Hall is open to students.
* Food and non-alcoholic beverages are allowed as long as students keep a reasonable level of cleanliness and clean up after spills. The privilege of having food in the Physician Assistant Graduate Student Room will be withdrawn if cleanliness is not maintained.
* Campus Labs offer an opportunity to use specialized software that the student may not wish to purchase, but may need to use for a specific class assignment. Visit the UMES IT page <https://www.umes.edu/it> for more information on computing resources we offer.
* The University has both restricted and unrestricted parking areas, please pay close attention when parking on campus. Be aware that you can only park in designated parking lots where your permit authorizes you to park. Handicapped parking regulations are strictly enforced. Vehicles found parked illegally in these locations will be ticketed and towed. Remember an authorized parking space is a lined designated parking space.

## University Health Services

The Health and Wellness Program, located in Tawes Gymnasium, provides blended health promotion and illness prevention services with on-site fitness management. Health promotion services include, monthly health communication campaigns, presentations to residence halls, classrooms and student organizations, free health promotion items, workshops/seminars, growth groups, special events and exhibits. The fitness center management provides safe, effective, efficient and enjoyable exercise programs; equipped with state of the art cardiovascular machines, spin bikes, free and machine assist weights. For additional information on wellness programs, health promotion and fitness management, contact the Health and Wellness Office at (410) 651-7665.

* **In case of Emergency:** Dial 911 for ambulance and police assistance. Emergency care is provided by the Peninsula Regional Medical Center Emergency Room.
* <https://www.umes.edu/uploadedFiles/_DEPARTMENTS/Student/Content/Student%20Handbook%202017%20-%202018.pdf>

## IT Help Desk

The IT Help Desk can troubleshoot a variety of hardware and software problems with its two tiers of technical support. In addition, computer repair technicians are available to support more complex hardware and software issues. Problems escalated to this level may be subject to time and material charges. To obtain technical support, call the Help Desk at (410) 651-TECH (8324) or visit the Help Desk located in Waters Hall.

* ***Media Services*** provides a wide range of audio/visual resources as well as on-call educational technical support for the classroom needs of students and faculty. For a full list of media services, visit <https://www.umes.edu/FDL/Pages/Media-Services-Center/>
* ***Printer/Copier services -*** WEPA printers are available in Somerset Hall (1st & 3rd floors) and at various locations throughout campus. 73 Rev June 9, 2017 Back to Table of Contents The University Printing and Document Services (UPDS) are located in the Student Services Center. Services are available to all University personnel and students. Their hours of operation are Monday-Friday 8:00 A.M.-5:00 P.M., they are closed on the weekends and for holidays. There are costs related to all services. UPDS can be contacted at (410) 651-6485. Their services offered are below:
  + Black and White copying/printing
  + Color copying /printing
  + Booklet making
  + Business cards
  + Posters
  + Flyers
  + Banners
  + Transparencies
  + Collating/stapling
  + Padding
  + Tape, sparrow and plastic comb binding
  + Cutting/three hole drilling
  + Laminating
  + Folding
  + Carbonless paper printing
  + Faxing
  + MULTIMEDIA
  + VHS to DVD
  + PHOTO DVD
  + PUBLISH DISC (CD)
* ***Wireless Internet Access -*** Full audio/video services are available in each classroom, as well as wireless internet capabilities throughout Hazel Hall.

# Computing Resources {A1.08[[46]](#endnote-46), {A1.09}[[47]](#endnote-47)

There are over sixteen computer departmental laboratories located in 10 buildings on campus. Additionally there is the Waters Hall Computing Center which has 5 computer laboratories, one of which is dedicated for graduate student use.

# University Library Resources {A1.09}[[48]](#endnote-48)

The Frederick Douglass Library houses books, scholarly and popular periodicals and newspapers, microforms, multimedia, government documents, and agricultural extension materials. As a member of the University System of Maryland and Affiliated Institutions (USMAI) Consortium, the library is linked with the USMAI’s sixteen libraries via a shared integrated library system and discovery layer, and consortial licensing of database and e-journal subscriptions. Library faculty and staff develop and maintain the collections, and provide instruction services to the campus community. There are nine departments within the Library: Acquisitions/Collection Development, Information Technology, Cataloging, Circulation, Interlibrary Loan, Media Services, Reference and Instruction, Serials/Documents, and Special Collections. Library faculty and staff are competent and courteous individuals with a variety of skills, knowledge, and training. All are committed to providing quality service. Library technology continues to emerge, providing global access to collections. Electronic databases, eBooks, and e-journals enable patrons to fill their information needs. Please visit the Library website www.umes.edu/fdl for further information about the Library, including Library hours.

Reference, Research and Instructional Support

Acquisitions/Collection Development (410) 651-6615

This is the purchasing unit of the Frederick Douglass Library. Library materials in all formats: books, periodicals, audiovisuals and computer media are purchased and paid for by the Acquisitions staff. The Coordinator of Acquisitions and Collection Development is responsible for coordinating the selection of library materials with the help of other professional librarians and the faculty at UMES. The department, as a whole, is responsible for the planning and organization, as well as the selection and acquisition of all library materials.

Automation (410) 651-6612

The Automation Department provides technical support and development services for the library information management system (LIMS). The on-line public access catalog provides comprehensive information on library holdings in the Frederick Douglass Library as well as each of the 14 University System of Maryland and Affiliated Institutions libraries. The Online Catalog is accessible from all library locations supporting Internet access. Access the Online Catalog from a remote site using: <https://catalog.umd.edu/>.

Cataloging (410) 651-7697

The Cataloging Department is responsible for cataloging and processing all new material received by the library. These materials include books, audiovisuals, serials, dissertations, and theses. It is also the maintenance unit within the library, responsible for 1) correcting database problems, 2) withdrawing lost or damaged material from the library's collection, and 3) verifying name and subject authority work on the online catalog.

Circulation (410) 651-7691

All circulating material at the Frederick Douglass Library is checked out at the Circulation Desk on the first floor. Books may be returned there or in the book drops located outside the library. The Circulation Department offers services such as recalls on circulating materials and requesting materials from other USMAI campuses through the Intercampus Request Service. Laptops for use in the library are checked out here. The Circulation Department bills for late returns and lost items. Also, the Circulation Department houses the reserves collection. These are books placed on reserve by professors for limited time use. These books do not circulate outside the library and often come from a professor’s collection. Many textbooks and supplemental materials are usually included in the reserves collection.

Photocopying is available (Self-Service) both coin-operated or with the Hawk Card.

Interlibrary Loan (410) 651-6609

The Interlibrary Loan Department, located on the first floor, provides access to journal articles not available in the Library. The Department also requests books that do not belong to the Library, or to any of the other USM libraries. Requests may be made electronically via Iliad.

Media Services Center (410) 651-6275

The non-print collection is housed in the Media Services Center on the lower level. This collection consists of videotapes, slides and cassettes. Services include audiovisual equipment loans and non-print loans, videotaping, editing, videotape and audio cassette duplication. Other services such as banner and poster designs, transparency production, spiral binding and lamination are provided for a small fee.

The Media Services Center also provides access to the Interactive Video Network (IVN) System. UMES faculty, staff and students must present a valid university ID to borrow nonprint materials and audiovisual equipment. Borrowers who are not associated with the campus will need approval from the Dean of Library Services.

Reference Department (410) 651-7937

The Reference Department is located on the first floor to the rear as you enter the library. The collection consists of standard reference material, such as bibliographies, dictionaries, directories, encyclopedias, handbooks and manuals, indexes and abstracts (print and electronic), biographical sources, atlases, yearbooks, and almanacs. The department also has a strong humanities collection, and a Maryland Reference Collection. Computerized reference sources include the online catalog, a large variety of web-based databases, and access to the World Wide Web.

Services include course-related bibliographic instruction as well as one-to-one instruction on individual resources.

Serials/Documents Department (410) 651-6610

The Serials/Documents Department (lower level) houses journals, magazines, newspapers, newsletters, and state, federal, and international documents. The Serials Title List, Subject Guide to Serials, and Guide to Documents in the Frederick Douglass Library, are available at the Serials desk to aid patrons in locating material. Most items are cataloged and may also be located using the Online Catalog system. Please note that journals and magazines are arranged in Library of Congress call number order.

The Micro Media Room is located in the Serials/Documents Department. Titles on microfiche and microfilm are housed here. Six coin-operated reader/printers are available for microform reading and reproduction. Microcomputers are available for access to e-mail and Internet. There is a printer available.

All departmental material is non-circulating. Photocopying is available.

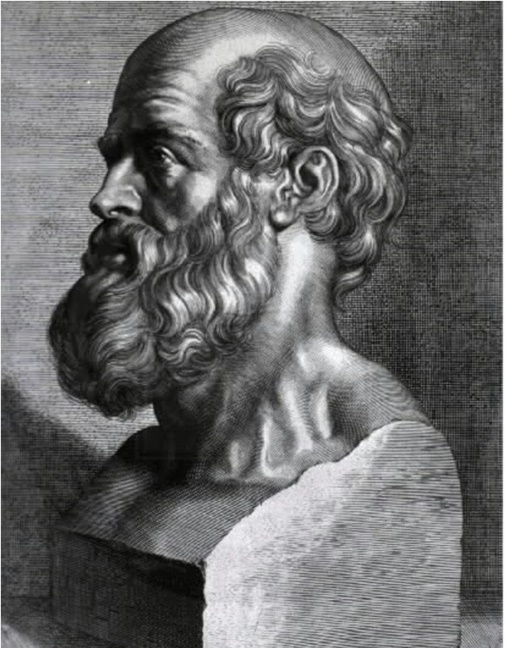
Special Collections (410) 651-7695

Rare books, manuscripts, theses/dissertations and archival material are housed in the Special Collections Department which is located on the second floor of the library. The particular strengths of the collection are Afro-American studies and literature, juvenile literature, and the social life, history, and customs of the Eastern Shore. University Archives houses the documentary records of the university, including official publications, reports, photographs, and miscellaneous documents relating to the history of the institution. The Manuscript Collection features the papers of public figures of the Eastern Shore and elsewhere. Most of the material is non-circulating. Photocopying is available.

Below is a list of available resources to all students enrolled at the University of Maryland Eastern Shore. This information is not intended to be comprehensive, and additional information can be found at the websites listed below:

<https://www.umes.edu/uploadedFiles/_DEPARTMENTS/Student/Content/Student%20Handbook%202017%20-%202018.pdf>

# The Oath of the Physician Assistant



**I** will recognize and promote the value of diversity. I will treat equally all persons who seek my care.

**I** will hold in confidence the information shared in the course of practicing medicine.

**I** will assess my personal capabilities and limitations, striving always to improve my medical practice.

**I** will actively seek to expand my knowledge and skills, keeping abreast of advances in medicine.

**I** will work with other members of the health care team to provide compassionate and effective care of patients.

**I** will use my knowledge and experience to contribute to an improved community. I will respect my professional relationship with the physician.

**I** will share and expand knowledge within the profession. These duties are pledged with sincerity and upon my honor.

# Definition of the PA Profession

As defined by the ARC-PA (2010/2014),[[49]](#endnote-49) PAs are “academically and clinically prepared to practice medicine with the direction and responsible supervision of a doctor of medicine or osteopathy. The physician-PA team relationship is fundamental to the PA profession and enhances the delivery of high quality health care. Within the physician-PA relationship, PAs make clinical decisions and provide a broad range of diagnostic, therapeutic, preventive and health maintenance services.” The ARC-PA continues to note that the “clinical role of PAs includes primary and specialty care in medical and surgical practice settings.” However, the PA practice may also include “educational, research and administrative activities.” As a result, “the role of the PA demands intelligence, sound judgment, intellectual honesty, appropriate interpersonal skills and the capacity to respond to emergencies in a calm and reasoned manner.” Thus, “essential attributes of the graduate PA include an attitude of **respect for self and others**, **adherence to the concepts of privilege and confidentiality** in communicating with patients and a **commitment to the patient’s welfare.**”

# Statement of Values of the PA Profession

As healthcare practitioners, PAs have a responsibility to conduct themselves ethically in their interactions with patients, colleagues, other health professionals and society. The following “Statement of Values” was adopted by the American Academy of Physician Assistants ([AAPA](http://www.aapa.org/)).**[[50]](#endnote-50)** These values provide a foundation upon which the PA profession’s ethical guidelines rest. All students who matriculate into the UMES Physician Assistant Program are expected to adopt and hold dear the following values:

* PAs hold as their primary responsibility the health, safety, welfare, and dignity of all human beings.
* PAs uphold the tenets of patient autonomy, beneficence, non-maleficence, and justice.
* PAs recognize and promote the value of diversity.
* PAs treat equally all persons who seek their care.
* PAs hold in confidence the information shared in the course of practicing medicine.
* PAs assess their personal capabilities and limitations, striving always to improve their medical practice.
* PAs actively seek to expand their knowledge and skills, keeping abreast of advances in medicine.
* PAs work with other members of the health care team to provide compassionate and effective care of patients.
* PAs use their knowledge and experience to contribute to an improved   
  community.
* PAs respect their professional relationship with physicians.
* PAs share and expand knowledge within the profession.

# Appendix A – Student Drug Screen {A3.02}[[51]](#endnote-51) {A3.15}[[52]](#endnote-52) {A3.17}[[53]](#endnote-53) {A3.18}[[54]](#endnote-54) {A3.19}[[55]](#endnote-55)

**Background and Purpose**

The purpose of this policy is to provide a safe treatment, working and learning environment for patients, students, clinical and institutional staff and protection of property during enrollment in the UMES Physician Assistant Program. Health care accreditation organizations mandate that hospitals and other health care agencies require students, who participate in the care of patients, be subject to the same compliance and work standards as their employees. Accordingly, submitting a negative drug screen is a condition for participation in certain clinical experiential learning opportunities offered during the didactic phase of the UMES PA Program curriculum, as well as certain Supervised Clinical Practice Experiences (SCPE) offered during the clinical phase of the program.

**Policy Statement**

As a prerequisite to participating in patient care, UMES PA students may be required to undergo one or more random drug screens. Such randomized testing is necessary in order to adhere to requirements of our clinical affiliates. When required by clinical facilities, students must complete drug screening prior to the onset of the given clinical experience. Students are financially responsible for services related to urine drug screening. Depending on the specific clinical site requirements, this may need to be repeated annually or more frequently.

Drug screening results that limit the Program’s ability to secure clinical experiences may prevent a student from being promoted within the program or recommended for graduation. By accepting admission into the UMES PA program, students agree to submit to a drug screening, and also agree to pay expenses associated with these requirements.

Acceptance into and successful completion of the UMES PA Program does not imply or guarantee that the student will be able to obtain state licensure upon graduation.

**Process**

1. **Process for obtaining a required drug screen** 
   1. Upon enrollment in the program, the UMES PA program will instruct students in the process for contacting the vendor with which the program has established a reporting relationship.
   2. The approved vendor will notify students via e-mail of the deadline for completion of any required drug screens throughout the course of the program.
   3. The approved vendor will provide students with instructions regarding obtaining and authorizing release of all required drug screen results.
   4. Required drug screen will consist of, but not be limited to: Amphetamines (amphetamine and methamphetamine), Cocaine metabolite, Marijuana metabolites, Opiates (codeine and morphine), Phencyclidine, Barbiturates, Benzodiazepines, Methadone, Propoxyphene, Methaqualone, and MDMA (Ecstasy).
   5. Results of all student drug screens will be provided by the approved vendor to the Program Director and/or the Clinical Education Director of the PA Program. Results will only indicate whether the test result is “negative” or “non-negative”. No additional information will be provided to the program.
   6. The approved vendor will ensure that all “non-negative” results are reviewed by a medical review officer/physician (MRO). A test is not considered “non-negative” until the MRO determines that the results are not due to a legally prescribed prescription medication being used as directed by their health care provider, or due to some other plausible reason. In these cases, students will receive a complete report and will have the opportunity to provide additional information/ documentation to the MRO for consideration. The UMES PA Program Director will be notified that the drug screen is undergoing review by the MRO. Following review, the program will receive notification of whether the results are deemed to be “negative” or “nonnegative”.
2. **Program examination of urine drug screen results** 
   1. The UMES PA Program Director and the Clinical Education Director will review all required drug screen reports for enrolled PA students.
   2. Because of the mandate to comply with health system policies, and the serious implications of a “non-negative” test, disciplinary actions against students may be imposed without the customary mechanisms of warning and probation.
   3. Students may not begin or continue coursework (clinical or non-clinical) immediately after a “non-negative” urine drug screen is received. As a result, the student will not be able to complete the requirements of the education program, and will be dismissed from the program following final review by the UMES PA Program Director.
3. **Appeals process**
   1. Dean of the School of Pharmacy and Health Professions
      1. A PA student dismissed from the program may, within seven days after the “nonnegative” drug screen was received and the student is notified of the dismissal, appeal to the Dean of the School of Pharmacy and Health Professions. The appeal must be made in writing and include any supporting documentation the student wishes to submit.
      2. The Dean will consider the request for appeal.
      3. The student may request a meeting with the Dean. The Dean will determine whether such a meeting is necessary, and will determine any terms of the meeting.
      4. The Dean will render a decision on the matter within seven days of receipt of the appeal request.
      5. The student, UMES PA Program Director, and the School of Graduate Studies will be informed of the Dean’s decision.
   2. Provost/Vice President for Academic Affairs
4. A PA student dismissed from the program and whose subsequent appeal to the Dean has also been denied may appeal the Dean’s decision. The appeal must be made in writing and received by the Provost within seven days of the Dean’s decision.
5. The Provost will consider the request for appeal.
6. The student may request a meeting with the Provost. The Provost will determine whether such a meeting is necessary, and will determine any terms of the meeting.
7. The Provost will render a decision on the matter within seven days of receipt of the appeal request.
8. The student, Dean of the School of Pharmacy and Health Professions, UMES PA Program Director and the School of Graduate Studies will be informed of this decision.
9. The decision of the Provost/Vice President for Academic Affairs regarding dismissal is final and cannot be appealed.

**Maintenance of Records and Confidentiality**

Drug screen results will be retained by the UMES PA Program Director and will remain separate from other student educational and academic records. Confidentiality will be maintained consistent with Family Educational Rights and Privacy Act (FERPA) and any other appropriate requirements and/or guidelines.

**Approved by:** Physician Assistant Program

# Appendix A.1 – Criminal Background Check Policy {A3.02}[[56]](#endnote-56) {A3.15}[[57]](#endnote-57) {A3.17}[[58]](#endnote-58) {A3.18}[[59]](#endnote-59) {A3.19}[[60]](#endnote-60)

**Background and Purpose**

University of Maryland Eastern Shore PA Program requires a background check on all of its conditionally admitted applicants and current students in order to enhance the health and safety of patients, students, faculty, and staff in the academic and clinical environments, to adhere to applicable healthcare regulations, and to attest to affiliated clinical facilities a student’s background and eligibility status. The background check will identify incidents in an applicant’s or student’s history that might pose a risk to patients or others.

**Policy Statement**

All UMES Physician Assistant Program conditionally admitted applicants and current students will be required to undergo criminal background and sex offender (CBSO) checks prior to matriculation, annually, or more frequently, at the discretion of the clinical faculty. For conditionally admitted applicants, the offer of admission is conditional upon results of the background check. If a conditionally admitted or current student declines to undergo a background check while enrolled in the program or if findings of a grievous nature are revealed, this will be grounds for revoking an offer of admission or dismissal from the program. Costs of the CBSO checks are the responsibility of the applicant/student. A copy of the CBSO check results will be made available to the applicant/student upon request. Other copies will be distributed as appropriate on a need-to-know basis. All applicants/ students will sign a release form indicating that the program has the right to release appropriate information to clinical sites.

CBSO check results that limit the Program’s ability to secure clinical experiences may prevent a student from progressing in their didactic phase of study, being promoted to the clinical education phase or being recommended for graduation. By accepting admission to the Program, applicants agree to submit to national criminal background checks, and also agree to pay expenses associated with this requirement.

Acceptance into and successful completion of the UMES PA Program does not imply or guarantee that the student will obtain state licensure upon graduation.

**Process**

1. **Examination of information obtained through criminal background and sex offender check** 
   1. The Program Director or designee will review the yearly CBSO check report results for all conditionally admitted applicants and enrolled students.
   2. If a CBSO check report contains adverse information, that report will be referred to the Conduct Administrator and the Progress and Promotions Committee (PPC) and the applicant/student will be informed and provided with the contact information to challenge the finding or provide explanatory information.

1. **Criminal Background and Sex Offender Review Committee process** 
   1. A standing Conduct Administrator and the PPC, comprised of members of the university graduate and undergraduate admissions offices, student affairs office, university counsel and university police chief, will be responsible for reviewing all materials referred to it by the UMES PA Program Director. Other University officials may be consulted, as appropriate.
   2. The Conduct Administrator and the PPC will evaluate adverse CBSO check reports in order to make a determination about the student’s suitability for continuation in the program. The committee may consult with the UMES PA Program Director in order to clarify program and professional standards prior to final determination.
   3. Conditionally admitted applicants and students who have adverse information in their CBSO check report, and who believe that there are mistakes in the report or extenuating circumstances to be taken into account, may submit a written request for consideration to the Committee. Any written request for consideration must occur with seven days of notification of adverse information.
   4. The Conduct Administrator and the PPC will conduct a careful review of the information in the CBSO check report, any self-reported information in the student’s file, including criminal convictions and pending adjudications, and any relevant supplementary information obtained from the student or from other sources, including court documents. Factors involved in the individual case review may include, but are not limited to:
      1. the nature, circumstances, and frequency of any reported offense(s)
      2. the length of time since the offense(s)
      3. available information that addresses efforts at rehabilitation
      4. the accuracy of the information provided by the student in their application materials
      5. the relationship between the duties to be performed as part of the educational program and the offense committed
   5. The Conduct Administrator and the PPC will be responsible for deciding whether the results of their CBSO check report investigation indicate the applicant is disqualified from entrance into the program or student should be dismissed from the program. They will forward their decision in writing to the applicant/student, the UMES PA Program Director, the School of Graduate Studies, and to the Dean of the School of Pharmacy and Health Professions within 30 days after receipt of referred report from the UMES PA Program Director.
2. **Appeals Process** 
   1. Dean of the School of Pharmacy and Health Professions
      1. A conditionally admitted applicant or student who is dismissed from the program based on the decision of the PPC may appeal the committee’s decision. The appeal must be made in writing and received by the Dean of the School of Pharmacy and Health Professions with a copy to UMES PA Program Director and the School of Graduate Studies within seven days after the Conduct Administrator and the PPC renders its’ decision.
      2. The Dean will consider the request for appeal.
      3. The applicant/student may request a meeting with the Dean. The Dean will determine whether such a meeting is necessary, and will determine any terms of the meeting.
      4. The Dean will render a decision on the matter within seven days of receipt of the appeal request.
      5. The applicant/student, UMES PA Program Director, and the School of Graduate Studies will be informed of the Dean’s decision.

* 1. Provost/Vice President for Academic Affairs
     1. A conditionally admitted applicant or student dismissed from the program by the Conduct Administrator and the PPC, and whose subsequent appeal to the Dean has also been denied, may appeal the Dean’s decision. The appeal must be made in writing and received by the Provost/Vice President for Academic Affairs within seven days of the Dean’s decision.
     2. The Provost will consider the request for appeal.
     3. The applicant/student may request a meeting with the Provost. The Provost will determine whether such a meeting is necessary, and will determine any terms of the meeting.
     4. The Provost will render a decision on the matter within seven days of receipt of the appeal request.
     5. The applicant/student, Dean of the School of Pharmacy and Health Professions, UMES PA Program Director and the School of Graduate Studies will be informed of this decision.
     6. The decision of the Provost/Vice President for Academic Affairs regarding dismissal is final and cannot be appealed.

**Maintenance of Records and Confidentiality**

Information obtained for the purpose of and during the CBSO check will be retained by the UMES PA Program Director separate from other student educational and academic records. Confidentiality will be maintained consistent with FERPA and any other appropriate guidelines.

**Approved by:** Physician Assistant Department

# Appendix B – Student Health Policy {A1.04}[[61]](#endnote-61) {A3.07}[[62]](#endnote-62) {A3.08} {A3.09}[[63]](#endnote-63) {A3.18}[[64]](#endnote-64) {A3.19}[[65]](#endnote-65)

**Associated Forms**:

Health Information and Immunization Form (<https://www.umes.edu/uploadedFiles/_WEBSITES/StudentHealth/Content/health%20history%20form2015.pdf>)\*

Immunization Release of Information Form\*

HIPAA Consent Form\*

*\*See Program Management Specialist for Associated Forms*

**ARC-PA Associated Standards:**

* **A1.04** - The sponsoring institution must provide academic support and student services to PA students that are equivalent to those services provided to other comparable students of the institution.
* **A3.07** - The program must define, publish, make readily available and consistently apply: a) a policy on immunization and health screening of students. Such policy must be based on then current Centers for Disease Control and Prevention recommendations for health professionals and state specific mandates. b) written travel health policies based on then current CDC recommendations for international travel for programs offering elective international curricular components.
* **A3.09** - The program must define, publish, make readily available and consistently apply policies that preclude principal faculty, the program director and the medical director from participating as health care providers for students in the program, except in an emergency situation.
* **A3.18** - PA students and other unauthorized persons must not have access to the academic records or other confidential information of other students or faculty.
* **A3.19** - Student health records are confidential and must not be accessible to or reviewed by program, principal or instructional faculty or staff except for immunization and screening results, which may be maintained and released with written permission from the student*.*

**Background and Purpose**

The purpose of this document is to define policies, procedures and availability of health services for students enrolled in the Physician Assistant Program.

**Policy Statement**

1. All students **MUST** provide proof of health insurance prior to matriculation. Each student’s personal health insurance policy must remain active throughout their participation in the program.
2. Students are financially responsible for the cost of all health care services they may require while enrolled in the program, including any health care services required as a result of their participation in scheduled program activities (e.g. TB testing, immunizations, treatment of injuries, pathogen exposure evaluation and treatment).
3. The following health requirements are mandatory and must be fully complied with prior to matriculation.
   1. **Tuberculosis:** One of the following completed within the past 12 months is required:

* Two-step TB skin test (administered 1-3 weeks apart)
* QuantiFERON Gold blood test (lab report required)
* If positive results, submit a clear chest x-ray (lab report required)
  1. **Immunizations:** Students must be current on all required immunizations. Either record of immunization or serologic proof of immunity must be provided for all listed conditions recommended by the Centers for Disease Control and Prevention for health care personnel, to include, but may not be limited to:
* Hepatitis B: BOTH of the following are required:
  + - A complete vaccination series AND
    - A positive antibody titer (lab report required)

If your titer was negative or equivocal, you must repeat the series and provide a 2nd titer.

* Measles, Mumps & Rubella (MMR): One of the following is required:
  + - 2 vaccinations: The first vaccination MUST be administered AFTER the age of 1 regardless of vaccination type. Vaccinations can be a combined MMR vaccination, however if individualized vaccinations are submitted you MUST submit 2 vaccinations for Mumps and Measles and 1 vaccination for Rubella OR
    - Positive antibody titer (lab report required) for all 3 components. If your titer was negative or equivocal, you must receive 1 booster vaccine (administered after your titer) and provide a 2nd titer.
* Varicella: One of the following is required:
  + - 2 vaccinations OR
    - Positive antibody titer (lab report required)

If your titer was negative or equivocal, you must repeat the series.

* Tdap (Tetanus/Diphtheria/Pertussis: One of the following is required:
  + - Documentation of a Tdap (Tetanus, Diphtheria & Pertussis) vaccination administered within the past 10 years OR
    - Documentation of a Tdap vaccination administered from any time AND a Td (Tetanus & Diphtheria) booster administered within the past 10 years. Renewal will be set for 10 years from the most recent vaccination. Upon renewal, a Td booster is required.
* Influenza: Students will be required to obtain influenza immunization annually while enrolled in the program.
  1. **Other Immunizations:** Students may occasionally be involved in patient care activities that require additional immunizations or disease prophylaxis (e.g. international rotations). It is the responsibility of the student to consult with the PD/CED to determine if any additional precautions are necessary.

Clinical sites may require additional vaccinations and documentation.

Students who have a medical contraindication for specific vaccinations may have additional requirements mandated (e.g., students who have a medical contraindication for influenza vaccination may be required to wear a mask during the entire influenza season). Some clinical facilities do not permit students who have not had the influenza vaccination for medical reasons, even with use of a mask. Changes in clinical site requirements may necessitate change in clinical rotation assignment or the inability to be placed on clinical clerkships.

1. Historical documentation without primary source evidence of tuberculosis screening, immunizations and/or serologic proof of immunity will not satisfy the program’s documentation requirements.

The following qualify as legitimate proof of immunization/TB testing status:

* + - Copies of the applicant’s medical record(s) on which administration and results of tuberculosis screening data is recorded.
    - Copies of the applicant’s medical record(s) on which administration of the immunization series is documented by the immunization provider (including immunization cards signed by the administering health care professional/agency).
    - Copies of the laboratory report(s) documenting results of serologic testing for immunity (antibody test results).
    - Copies of the applicant’s medical record(s) or a letter from the applicant’s health care provider documenting immunization non-conversion and explaining the process by which that conclusion was reached.
    - Immunization records must be submitted to the CastleBranch compliance tracking system, NOT to the Physician Assistant Department.
    - The PA program will access CastleBranch to ensure completion of required immunizations and TB screening of all students.
    - Students will be provided access to CastleBranch online files.
    - Program Director, principal program faculty, medical director, or program staff WILL NOT participate as health care providers for students enrolled in the program and WILL NOT have access to any student health information other than that defined in this policy.

All costs associated with meeting the above immunization requirements are the sole responsibility of the student.

**Student Health Insurance**

*As a condition of enrollment students are required to maintain health insurance and provide evidence of a primary insurance policy.* Due to the potential for exposure to potentially infectious materials, insurance should cover screenings, diagnostics, treatments, and short and long term disability compensation that may result from any potential exposure. Students will be responsible for providing any and all updates to the Student Health Center regarding their health status.

All costs are the exclusive responsibility of the student and not the responsibility of the student’s academic department, the UMES Physician Assistant Program, or University of Maryland Eastern Shore.

**Approved By:** Physician Assistant Department

# Appendix C – Academic Performance, Professionalism and Progression {A2.05}[[66]](#endnote-66) {A3.02}[[67]](#endnote-67) {A3.15}[[68]](#endnote-68) {A3.17}[[69]](#endnote-69) {B4.03}[[70]](#endnote-70) {B4.04}[[71]](#endnote-71)

**Associated Forms:**

Academic Performance Summary Clinical Phase\*

Academic Performance Summary Didactic Phase\*

Academic Improvement Form\*

Professional Development Assessment Tool\*

Student Self-Assessment of Behavior and Professionalism\*

Professionalism Concern/Violation Form\*

Graduation Verification Checklist

Technical Standards Attestation\*

Student Handbook Acknowledgement Form\*

*\*See Program Management Specialist for Associated Forms*

**ARC-PA Associated Standards:**

* **A2.05**- Principal faculty and the program director must be responsible for, and actively participate in the processes of:

**a)** developing, reviewing and revising as necessary the mission statement, goals and competencies of the program,

**b)** selecting applicants for admission to the PA program,

**c)** providing student instruction,

**d)** evaluating student performance,

**e)** academic counseling of students,

**f)** assuring the availability of remedial instruction,

**g)** designing, implementing, coordinating, and evaluating the curriculum, and

**h)** evaluating the program.

* **A3.02** - The program must define, publish, make readily available and consistently apply its policies and practices to all students.
* **A3.15** -The program must define, publish, consistently apply and make readily available to students uponadmission:

**a)** any required academic standards,

**b)** requirements and deadlines for progression in and completion of the program,

**c)** policies and procedures for remediation and deceleration,

**d)** policies and procedures for withdrawal and dismissal,

**e)** policy for student employment while enrolled in the program,

**f)** policies and procedures for allegations of student mistreatment, and

**g)** policies and procedures for student grievances and appeals.

* **A3.17** - Student academic records kept by the sponsoring institution or program, in a paper or electronic format, must be readily accessible to authorized program personnel and must include documentation:

**a)** that the student has met published admission criteria including advanced placement if awarded,

**b)** that the student has met institution and program health screening and immunization requirements,

**c)** of student performance while enrolled,

**d)** of remediation efforts and outcomes,

**e)** of summaries of any formal academic/behavioral disciplinary action taken against a student, and

**f)** that the student has met requirements for program completion

* **B4.02** - The program must monitor and document the progress of each student in a timely manner and according to its defined and published policies and procedures, to identify and address any deficiency in meeting program competencies in:

**a)** clinical and technical skills,

**b)** clinical reasoning and problem-solving abilities,

**c)** interpersonal skills,

**d)** medical knowledge, and.

**e)** professional behaviors

* **B4.03** - The program must conduct and document a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including: a) clinical and technical skills,

**a)** clinical reasoning and problem-solving abilities,

**b)** interpersonal skills,

**c)** medical knowledge, and

**d)** professional behaviors.

* **B4.04** - The program must document equivalency of student evaluation methods and outcomes when instruction is: a) conducted at geographically separate locations and/or b) provided by different pedagogical and instructional methods or techniques for some students.

**Background and Purpose**

The purpose of this policy is to provide clear expectations on requirements and procedures related to academic performance, professionalism, and progression.

Definitions

**Academic Intervention:** The process of identifying at-risk students early to promote successful acquisition of the requisite knowledge to be successful.

**Remediation:** The process of addressing deficiencies in a student’s knowledge and skills, such that the correction of these deficiencies is measurable and can be documented.

**Deceleration:** The loss of a student from an entering cohort, who remains matriculated in the Physician Assistant program.

**Good Standing:** Indicates a student who is not on academic or professionalism probation.

**Leave of Absence:** A period of time a student is granted to be away from his/her studies while maintaining the status of current student.

**Withdrawal:** A student-based decision that results in a student exit from the program. A student must reapply to the program to regain admission.

**Dismissal:** A program-based decision that results in a student exit from the program. A student must appeal dismissal to regain admission.

Policy Statement

**Required Academic Standards**

Attendance and participation requirements are outlined in the Student Attendance, Participation, and Inclement Weather policy.

Students enrolled in the UMES Physician Assistant Program must maintain adherence to the program standard of academic performance and professionalism.

**Progress and Promotion Policies**

After admission notification and prior to matriculation, students must meet the following to progress to the didactic phase:

1. Successfully complete the admission requirements including submission of all required immunizations and proof of health insurance.
2. Successfully complete the UMES PA Program Orientation.
3. Due to the sequential nature of the curriculum, students must successfully complete all courses for a given semester before becoming eligible to take courses in the subsequent semester. Students must successfully complete all courses in the didactic phase before they may progress into the clinical phase of the program. Any exceptions to this must be approved by the Progress and Promotion Committee (PPC).
4. Supervised Clinical Practice Experiences (SCPE) offered during the clinical phase of the program do not follow the semester calendar. Due to timing, as well as complexity of evaluative measures incorporated, student performance is assessed by the CED at the completion of each SCPE to determine progression to the next rotation.
5. At the conclusion of each semester, in both the didactic and clinical year, the PPC reviews each student’s academic and professional performance. Students must be recommended for progression by the PPC to be eligible to take courses in the subsequent semester and continue their progression through the program. In the event a student is identified to be at risk for Academic/Professionalism probation or dismissal at any time during the program, including SCPE, the PPC may convene more frequently to determine appropriate academic/professionalism intervention.

Guidelines used to determine progression from semester to semester include the following:

Semester to Semester Progression - Didactic Phase:

1. Achieve a minimum overall 3.0 GPA
2. No course grades below “C”
3. Obtain established minimal grades for Observed Standardized Clinical Examinations (OSCEs)
4. Achieve minimum established score for all formative and summative evaluations/examinations
5. Documented demonstration of professionalism

Progression from Didactic Phase to Clinical Phase:

1. Achieve a minimum overall 3.0 GPA
2. No course grade below “C”
3. Obtain established minimal grades for Observed Standardized Clinical Examinations (OSCEs)
4. Achieve minimum established score for all formative and summative evaluations/examinations
5. Documented demonstration of professionalism

Please note any grade below “C” within the didactic phase will result in dismissal from the program. [See Dismissal section below.](#B2)

Clinical Phase to Completion:

1. Achieve a minimum overall 3.0 GPA
2. Successfully complete all Supervised Clinical Practical Experiences/SCPEs
3. Two (2) failed clinical rotations will result in dismissal from the program.
4. Obtain passing grades on all end of rotation examinations (EORE).
5. Achieve minimum established score for all formative and summative evaluations/examinations
6. Documentation of professionalism
7. Indicate successful completion of community service hours

For the Clinical Phase of the Program, any failed rotation will automatically result in a delay in graduation, as each failed rotation will need to be successfully completed to meet graduation requirements. Additionally, student will have to enroll into PHAS 698 Special Topics I to complete (one failed Rotation). If a student fails two rotations (which is the maximum amount allowed), they will have to enroll into PHAS 699 Special Topics III to complete the final rotations.

**Requirements for Graduation**

To graduate from the PA Program and earn a Master of Medical Science in Physician Assistant Studies degree, students must:

1. Successfully complete all course work according to program defined academic standards including demonstration of meeting all Program Learning Outcomes.
2. Successfully pass all components of the summative evaluation.
3. Demonstrate they have met program expectations and acquired the competencies needed for entry into clinical PA practice with patients seeking: medical care across the lifespan, women’s health, care for conditions requiring surgical management, care for behavioral and mental health conditions.
4. Submit a completed graduation application to the School of Graduate Studies.
5. Be in good academic standing. In the event that a student is on academic probation as he/she enters the final semester, he/she must complete the final semester with the required overall G.P.A. of 3.0 to be awarded the degree.
6. Be in good professional standing. In the event that a student is on professionalism probation as he/she enters the final semester, he/she must successfully meet program-established conditions prior to the end of the final semester to successfully transition off professionalism probation prior to graduation.
7. Complete all requirements for graduation within four (4) years of the original date of matriculation.
8. Students who have incomplete grades or failures will not be approved for graduation. All program requirements must be meet before students are approved for graduation/white coat ceremony
9. Approval of the Progress and Promotion Committee

*\*Students should apply for graduation during the initial part of their final semester before all requirements for the MMS degree are complete. The graduation application is available on the UMES system website**. Completing a graduation application does NOT guarantee that students have met all requirements.*

**Course Instructor Role in Supporting Student Success – Didactic Phase**

Course instructors play a key role in supporting student success by identifying at-risk students as early as possible during the semester. Students will not be allowed to remediate course assessments to improve their grade (see *Remediation* below). When students are deemed to be **“At Risk”,** **academic interventions** should be initiated by the course instructor to promote student success and provide students the support they need to earn a final passing course grade. It is up to each individual course instructor to work with the student to determine how this may be best accomplished given the course objectives and outcomes and the individual student’s strengths and weaknesses in learning course content. Course instructors are responsible for providing the initial contact with those students deemed to be at risk. It is then the responsibility of the student to schedule a meeting with the course instructor to discuss strategies for success. Failure to do so may be reflected in the student’s professional behavior evaluation. It is the responsibility of the student to implement the suggestions made by the course instructor in a way that best accommodates their learning style.

Process:

* The course instructor has the flexibility to determine when there is a need for academic improvement. However, if a student receives two didactic course assessments (exam and/or practicum) below 80%, the course instructor should initiate academic intervention to ascertain all possible factors contributing to a low assessment score (e.g., foundation of knowledge, ineffective study strategies, test-taking errors, reading, comprehension, attention issues, poor time management, or personal problems, etc.).
* A signed **Academic Improvement Plan** outlining proactive strategies for success will be completed and will be submitted to the Didactic Education Director for inclusion in the student’s official file and for review at the next scheduled Progress and Promotion Committee (PPC) meeting.

The course instructor also has the ability, at any time, to initiate a referral for remediation if the issue requires intervention beyond minimal academic intervention that can be agreed upon between the student and the course instructor and requires reasonable time, resources and support. Then, the student should be referred to the Didactic Education Director who will initiate, in collaboration with the faculty advisor and course instructor, a formal remediation plan which will be put in the students file for review at the next scheduled PPC Meeting. [See Remediation below](#B3).

**Course Instructor Role in Supporting Student Success - Clinical Phase Academic**

Given the nature and complexity of educational activities on clinical rotations, a comprehensive, multifaceted process for evaluating student progress has been designed. The components each serve to assess different skills acquired by a student during clinical training. Therefore, academic intervention during the clinical year will occur on a case-by-case basis including, but not limited to, unsatisfactory marks on mid-rotation evaluations, professionalism issues, and/or an unsatisfactory or below “meets standard” scores on an end of rotation examination. In the event that an academic intervention is initiated (Academic Improvement Form completed) by a course instructor or a student is referred to the Clinical Education Director by a Preceptor for intervention on academic/ skills deficiency during the clinical phase of the program, the Academic Improvement Form is completed and forwarded to the Clinical Education Director to be kept in the students file and reviewed by the PPC similar to the process outlined for the didactic phase.

At any time, the course instructor or Clinical Education Director have the ability to initiate a formal remediation referral if the academic intervention requires extended time, resources and intervention. In this case, the Clinical Education Director in collaboration with the course instructor or preceptor will develop a formal remediation plan and forward a copy to the PPC for review at the next scheduled meeting.

**Required Academic Standards**

To remain in good academic standing, normal academic progress in the didactic phase of the UMES PA Program requires all students to achieve a minimum 3.0 G.P.A. each semester.

**Assessment and Minimum Grade Standards**

|  |  |
| --- | --- |
| A | 90-100% |
| B | 80-89% |
| C | 75-79% |
| F | ≤ 74.99% |

**Computation of Grade Point Average**

Grade Point Average is the ratio expressed by the sum of the quality points divided by the sum of credits attempted. Pass/Fail grades are not a component of the Grade Point Average.

The Quality Point values of these grades are:

Grade Quality Points per Credit Hour

|  |  |
| --- | --- |
| A | 4.0 |
| B | 3.0 |
| C | 2.0 |
| F | 0.0 |

**Remediation**

Student progress is monitored and documented in a manner that promptly identifies deficiencies in knowledge or skills and establishes means for remediation as described herein:

1. A student receiving a “C” in a didactic course or “C” grade in a SCPE course, a failed end of rotation exam or failed OSCE will remediate the identified area(s) of deficiency. The specific remediation plan developed is at the discretion of the course instructor in collaboration with the Didactic Education Director and faculty advisor for didactic courses and the Clinical Education Director with collaboration of the faculty advisor and clinical preceptor for SCPE courses and may include but is not limited to:

* Reading assignments.
* Written completion of selected course learning objectives with reference citations.
* Written response to selected exam items with reference citations.
* Problem-based learning exercises focused on area(s) of weakness.
* Written self-reflection exercise.
* Individual faculty-led tutoring (especially skills related deficiencies). Skills review and assessment.
* Repeating a portion of or the entire SCPE.

1. Students will be reassessed after completion of the outlined remediation plan with an emphasis on areas of poor performance. The assessment activity may vary depending on the nature of deficiency and degree of remediation necessary. A successful remediation plan will include:

* Academic Improvement Form: *Composition/nature of assessment and the student performance required for successful remediation of material*.
* Date in which assigned activities are due and follow-up.

1. The responsible course instructor or faculty member must document remediation efforts and outcomes and submit documentation to the Program Management Specialist to be filed in the student’s official file.
2. The course instructor must notify the Didactic Education Director or the Clinical Education Director of any student needing remediation. The DED and CED will be responsible for notification to the Progress and Promotion Committee (PPC) of any remediation plan. To ensure adequate rigor and consistency within the program, the PPC must approve remediation plans and remediation reassessments prior to implementation.
3. Unsuccessful remediation efforts will be forwarded to the PPC for review. The Committee may recommend appropriate courses of action, which may include the entire range of possible outcomes up to and including dismissal from the program.

**Professional Behaviors**

**Required Professional Behaviors**

Students must display a professional attitude. Expectations include, but are not limited to, those defined by the National Board of Medical Examiners as follows:

* + Adheres to institutional policies and procedures
  + Admits errors and assumes responsibility
  + Advocates for the individual patient
  + Arrives on time for scheduled activities and appointments
  + Conveys information honestly and tactfully
  + Demonstrates sensitivity to power inequalities in professional relationships
  + Fulfills responsibilities in a timely manner
  + Maintains composure during difficult interactions
  + Maintains thoroughness and attention to detail
  + Modifies behavior based on feedback
  + Requests help when needed
  + Responds promptly to communication requests
  + Acknowledges limits of one's own knowledge
  + Responds receptively to diverse opinions and values
  + Demonstrates humility
  + Maintains the confidentiality of test material

**Evaluation of Professional Behaviors**

The Progress and Promotion (PPC) Committee evaluates students’ professional behavior at the completion of every semester of the didactic and clinical phase of the program, by documented feedback from the students designated faculty advisor, course instructors, Didactic Education Director and Clinical Education Director (including input from the clinical preceptors). During this evaluation, the committee will meet and assess each student’s professional behavior using the following criteria:

**Respect**: Students are expected to treat all patients, faculty, program staff, clinical preceptors, and fellow students with dignity and respect. Conflicts should be resolved in a diplomatic and reasoned manner. Students should be sensitive and tolerant with regard to diversity in the student and patient population. Physician Assistant training involves a close working environment with other students and includes physical examination of fellow students and discussion groups that may reveal information of a personal nature. These situations must be approached with respect for the privacy, confidentiality, and the feelings of fellow students. The program will not tolerate incivility by any member of the PA community. Examples of incivility include rude, sarcastic, obscene, disruptive or disrespectful remarks or behavior, as well as verbal or physical threats, or damage to property.

* + Sensitive/responsive to needs of others
  + Sensitive/responsive to culture, age, gender and disabilities of others
  + Puts others interests before own
  + Provides assistance/comfort to others

**Flexibility**: Physician assistant training involves instruction from practicing clinicians with unpredictable schedules. At times lectures or clinical sessions may need to be adjusted with short notice. We believe the advantages of utilizing practicing clinicians outweigh this inconvenience and ask students to be flexible and tolerant of changes.

* + Attends required activities/arrives on time
  + Reliable, dependable, completes tasks fully and in timely manner
  + Accepts appropriate share of team work
  + Self-motivated, organized, and prepared
  + Accountable to patients, society, and the profession
  + Adapts well to stressful/changing circumstances

**Behavior**: Students are expected to behave in a responsible, reliable and dependable manner. The student must project a professional image in manner, dress, grooming, speech and interpersonal relationships that are consistent with being a medical professional. The student should recognize his/her personal limitations and biases, whether they are intellectual, physical or emotional and strive to correct them*.* He or she must demonstrate the professional and emotional maturity to manage tensions and conflicts and should seek professional help when necessary. Success in the Physician Assistant profession requires certain behavioral attributes including: empathy, discipline, honesty, integrity, the ability to work effectively with others in a team environment, and the ability to address a crisis or emergency situation in a composed manner.

* + Respectful, cooperative (team player), builds atmosphere conducive to learning
  + Acknowledges and values diversity, talents, skills, contributions of others
  + Communicates effectively (verbal and written)
  + Good interpersonal skills (develops appropriate professional relationships with peers, faculty, physician supervisors and other health care providers)
  + Recognizes/maintains appropriate boundaries
  + Displays tact and self-control

**Integrity**: Integrity is the quality of consistency and steadfast adherence to a defined code of ethics. It includes honesty and soundness of mind and body. Students are expected to demonstrate integrity by following all policies in the UMES Student Handbook, including those pertaining to academic dishonesty and unethical behavior. Physician Assistant students are also expected to display the highest ethical standards commensurate with work as a health care professional. These are outlined in the *Guidelines for Ethical Conduct for the Physician Assistant Profession* published by the American Academy of Physician Assistants.

* + Accurately portrays personal qualifications
  + Displays professional presentation (dresses appropriately and good personal hygiene)
  + Performs in accordance with regulatory and legal requirements (follow the rules), as well as the appropriate role of the physician assistant
  + Committed to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
  + Recognizes limitations and seeks, accepts and incorporates constructive feedback
  + Behaves honestly/appears trustworthy

This process will incorporate the following steps:

* + Students are provided the opportunity to complete a self-assessment prior to meeting with their advisor to discuss the PPC assessment.
  + Advisors will meet one-on-one with student advisees to provide feedback on PPC and student self-assessments.
  + If there are any areas of concern, the faculty member and the student can together address ways of improving those areas.
  + If there are any problem areas identified, the student may be required to meet with both the advisor and the Didactic Education Director, the Clinical Education Director, or Chair/Program Director to discuss specific steps for improvement. Such steps may include, but are not limited to, referral to appropriate resources, developing a contract regarding behavioral modification, on-going advisory meetings and other means of assisting the student to improve problem areas.
  + The form is reviewed with the student, signed and dated by both the Advisor and the student, and filed in the student’s record. By the end of the didactic education phase of the program the student will have had three (3) “Behavioral and Professional Evaluations” and by the end of the clinical year a total of at least two (2) Fall and Spring “Behavioral and Professional Evaluations”.

Behavioral concerns observed throughout the program will be documented on a Professionalism Concern/Violation Form. A Professionalism Concern is indicated to identify and document concerns and patterns of professional behavior violations. Professionalism Concerns do not constitute immediate adverse action. A Professionalism Violation is indicated when the observed behavior constitutes a greater concern requiring a meeting of the PPC to determine the need for immediate intervention.

Anytime a Professionalism Form is issued the student must be notified. In the event that a Professionalism Concern or a Professionalism Violation is issued, the faculty member must meet with the student to discuss the identified behavioral concern at which time the student will be provided an opportunity to respond and provide their comments to the form. Once reviewed and completed, these forms will placed in the student’s file to inform the behavioral evaluation process by the PPC.

***Professionalism Examples***

Professionalism Concern:

* Tardiness or absence without appropriate notification/approval.
* Student verbal communication that indicates a lack of respect
* Student use of unprofessional language (swearing)
* Student use of potentially discriminatory or demeaning language (speak ill of a patient, use of joke that could reasonably be considered demeaning or discriminatory)

Professionalism Violation:

* Evidence of cheating on an assignment or test
* Student intoxication or presumed intoxication from alcohol, prescription, or other drugs
* Student communication or interaction that is openly discriminatory, demeaning, or could reasonably be physically or emotionally harmful to another

During the clinical phase, students are also assessed via preceptor evaluations and direct observation by faculty on clinical site visits.

**Academic Dishonesty**

Alleged violations of the UMES Policy on Academic Integrity involving academic dishonesty such as falsification, collusion, plagiarism or cheating will be resolved through the proceedings of the Promotion and Progression Committee (PPC). Complaints can be made confidentially. Every effort should be made to maintain the confidentiality of all the members involved in the alleged incident. However, if a full hearing is warranted, the accused will have the opportunity to review the evidence against them including information about witnesses involved in the case. Faculty, preceptors and staff who become aware of academic dishonesty may choose to first counsel that student. However, in all cases the incident should be documented and submitted to the Office of Student Affairs for inclusion in the student’s file.

The PPC serves as a hearing board for violations of the Physician Assistant Professionalism Policy. The PPC will make recommendations to the Program Director. The Program Director will then notify the student in writing of actions concerning alleged violations. A record of disciplinary action normally is maintained by the Office of Student Affairs until the student graduates or leaves the School of Pharmacy and Health Professions or university. Students may examine the contents of their file by appointment with the Program Director.

One of the objectives of the Physician Assistant Program is to promote the highest standards of professionalism among its students. The integrity of work performed is the cornerstone of professionalism. Acts of falsification, cheating, and plagiarism are acts of academic dishonesty, which show a failure of integrity and a violation of our educational objectives; these acts will not be accepted or tolerated. The following definitions and guidelines describe violations related to academic dishonesty.

1. ***Plagiarism*** as a form of cheating is unacceptable. Plagiarism is the act of presenting as one‘s own creation works actually created by others. Plagiarism consists of:
   1. taking ideas from a source without clearly giving proper reference that identifies the original source of the ideas and distinguishes them from one‘s own;
   2. quoting indirectly or paraphrasing material taken from a source without clearly giving proper reference that identifies the original source and distinguishes the paraphrased material from one‘s own compositions;
   3. quoting directly or exactly copying material from a source without giving proper reference or otherwise presenting the copied material as one‘s own creation.
2. ***Falsification*** is unacceptable. Falsification includes but is not limited to:
   1. creating false records of academic achievement;
   2. altering or forging records;
   3. misusing, altering, forging, falsifying or transferring to another person, without proper authorization, any academic record;
   4. conspiring or inducing others to forge or alter academic records.
3. ***Cheating*** is also unacceptable. Cheating includes but is not limited to:
   1. giving answers to others in a test situation without permission of the tester;
   2. taking or receiving answers from others in a test situation without permission of the tester;
   3. having possession of test materials without permission;
   4. taking, giving, or receiving test materials prior to tests without permission;
   5. having someone else take a test or complete one‘s assignment;
   6. submitting as one‘s own work, work done by someone else;
   7. permitting someone else to submit one‘s work under that person's name;
   8. falsifying research data or other research material;
   9. copying, with or without permission, any works, (e.g., essays, short stories, poems, etc.), from a computer hard drive or discs and presenting them as one‘s own.
4. ***Collusion*** is also unacceptable. Collusion includes but is not limited to:
   1. completing any portion of an assignment, report, project, experiment or exam for another student;
   2. claiming as their own work any portion of an assignment, report, project, experiment or exam that was completed by another student, even with that other student’s knowledge and consent;
   3. providing information about an exam (or portions of an exam) to another student without the authorization of the instructor;
   4. seeking or accepting information provided about an exam (or portions of an exam) from another student without the authorization of the instructor.

**Academic Probation**

This is a professional program with high expectations of its students. The academic performance and behavior of all students is closely monitored. Academic Probation and Dismissal are sanctions that may be invoked for:

* Academic performance below expected standards, or
* Violation(s) of the Physician Assistant Program Policies and the UMES Code of Conduct

*If a student’s academic performance or behavior does not meet the standards and/or requirements of the Department, their performance and behavior is reviewed by the Progress and Promotion Committee.*

**Professionalism Probation**

Non-academic issues such as dress code or attendance policy violations may be resolved through the Didactic and/or Clinical Education Directors. Inappropriate professional or personal behavior includes, but is not limited to the following: excessive absence or disruptive behavior in class; inappropriate or disrespectful behavior toward fellow students, faculty, staff, preceptors, or staff/employees at clinical practice sites; inappropriate or disrespectful interaction with patients; and, unprofessional dress, language, or conduct as defined by the PA Program, clinical site or the university.

**Students that receive two professional citations during the didactic or clinical year will be automatically put on Professional Probation. Students on Professional Probation will be followed continuously via a Professionalism Improvement/Remediation Plan for the remainder of the didactic year /clinical year and will be required to check in with their advisors as outlined in the plan.** Students who do not meet the Professionalism Improvement/Remediation Plan requirements will be dismissed from the program.

The PPC serves as a hearing board for violations of the UMES PA Program Professionalism Policy. The PPC will make recommendations to the Program Director. The Program Director will then notify the student in writing of actions concerning alleged violations. A record of disciplinary action normally is maintained by the Office of Student Conduct Affairs until the student graduates or leaves the School of Pharmacy and Health Professions or university. Students may examine the contents of their file by appointment with the Program Director.

Attendance Policy Violations

The Didactic and Clinical Education Directors monitors the attendance of students during academic and clinical year. Students with more than 3 absences, as outlined in the Attendance policy, will be referred to the Didactic and/or Clinical Education Director. If the student has more than 3 absences after all documentation is considered, the student will be placed on probation. Students with continued willful infractions while on probation may be referred to the PPC for additional sanctions including, but not limited to, suspension or termination.

Dress Code Violations and other Non-academic Violations

Students are to adhere to the dress code policy during school hours (8:00 AM-8:00 PM). Exceptions (e.g. dress down days) are permitted and students should follow the guidelines outlined in the dress code policy. Students may report dress code and other non-academic violations of other students to faculty, preceptors, or staff.

Once aware of the violation, faculty, preceptors and staff may choose to first counsel the accused student. The student may be asked to leave the class if the behavior is disruptive, sent home to change into appropriate attire, or referred to the Didactic and/or Clinical Education Director. However, in all cases the incident should be documented and submitted to the PPC and the Office of Student Affairs for inclusion in the student’s file. Minor non-academic violations will generally be resolved through the Didactic and Clinical Education Directors. However, both the Directors and Program Director can refer students to the PPC for repeated or severe non-academic violations of the professionalism policy.

**Dismissal**

Dismissal - A single grade of “F”

In the Didactic year the Didactic Education Director will meet with the student to discuss the circumstances which contributed to the student’s poor performance. The Didactic Education Director will refer the student to the Progress and Promotions Committee for review **WITH A RECOMMENDATION FOR DISMISSAL FROM THE PROGRAM** pursuant to departmental policy. The PPC will review the student’s overall progress, the instructors’ evaluation of the student in the course(s) involved and all other applicable information. After completing its review the PPC will;

1. Formally dismiss the student from the program; and
2. Refer the student to the Office of Student Affairs for academic retention, career and mental health counseling.

Note: A student who receives a grade of "F" or below during the Didactic or Clinical Phase will be ***ineligible*** to re-apply for re-admission into the program.

Students may be dismissed from the Physician Assistant Program in the following circumstances as determined by the PPC:

1. When a student has one unsuccessful remediation effort.
2. When their behavior poses a threat to the standards of orderly operation, scholarship, and conduct.
3. When they have violated principles related to academic integrity and plagiarism as outlined by UMES Student Code of Conduct.
4. When their behavior poses a threat to the mental or physical well-being of others.
5. For any gross violations of professional conduct as determined by the Progress and Promotion Committee.

**Conduct Violations and Harassment**

The UMES Physician Assistant Program adheres to the same policy adhered to by University. This can be found in the UMES Student Code of Conduct found at <https://stg15.umes.edu/ConductAffairs/Content/Code-of-Conduct/>.

It is the responsibility of all members of the University community to create a safe and inclusive environment that is free from gender-based harassment, sexual misconduct, relationship violence, and stalking. Individuals who report violations of this policy in good-faith will be protected from retaliation.

For more information on the University policy on gender-based harassment and violence including reporting information visit the UMES Student Handbook at <https://www.umes.edu/uploadedFiles/_DEPARTMENTS/Student/Content/Student%20Handbook%202017%20-%202018.pdf>

**Student Grievances**

Academic Grievances

Grade Grievance/Dismissal Appeal

Student grievance appeal must be based upon the Program’s failure to follow established policies or procedures. Any grievance must be based on evidence that a factual or procedural error was made or that some significant piece of information was overlooked. Matters related to grading disputes shall include issues regarding grades awarded or processes by which grades are determined. Professionalism is expected at all stages of the process. The appeal process **must** always begin with a written, dated, signed appeal (if e-mail it must be from the student’s UMES e-mail account) to the Didactic Educational Director during the didactic year and to the Clinical Education Director during the clinical year. The student is also encouraged to meet with his or her faculty advisor and may do so at any point in the process. If the situation is not resolved through discussion with the Didactic/Clinical Education Director, the student may continue the grievance process by providing a written, dated, signed appeal statement to the Program Director describing the specifics of the grievance within **thirteen (13) business days** following the posting of the grade being disputed. Non-written complaints or written complaints received after this deadline will not be accepted. A student seeking to appeal a grade should seek a solution through the following procedure by entering an initial appeal to the Didactic/Clinical Education Director and proceeding in the stated order of the following table:

|  |  |
| --- | --- |
| **Appeal Step** | **Maximum number of business days in each step of the appeals process** |
| Student submits Appeal to Didactic/Clinical Education Director^ | 5 |
| Didactic/Clinical Education Director rules on the appeal (first appeal level)\* | 5 |
| Student submits appeal to the Program Director and Department Chair^# | 3 |
| Program Director and Department Chair rules on the appeal (Second appeal level) | 5 |
| Student submits appeal to the Dean^+ | 3 |
| Dean Rules on the Appeal (Final appeal level) | 5 |
| ^ If the person responsible for receiving the appeal is not available, another faculty member or administrator may be designated by that person or by the Program Director to function in his/her stead.  \* The Didactic Education Director and/or Clinical Education Director collaborates with the faculty/Preceptor who taught the material in determining the ruling.  # Appeal in writing to the Program Director and Department Chair may be as soon as the Didactic Education Director has ruled but must be within 13 business days of grade posting.  + Appeal in writing to the Dean may be as soon as the Program Director and Department Chair has ruled but must be within 19 business days of grade posting. | |

Grievance Process for issues unrelated to grades or dismissal appeal

The Physician Assistant Department recognizes due process and the rights of a student to appeal Program decisions/actions affecting the Progress and Promotion Committee (PPC) within the Program. **Student grievance appeal must be based upon the Program’s failure to follow established policies or procedures. Any grievance must be based on evidence that a factual or procedural error was made or that some significant piece of information was overlooked.** A grievance must be addressed in writing at each level of appeal and must be presented in the following prescribed sequence to the appropriate staff. A grievance does not guarantee a change in the decision.

1. All grievances must be submitted to the Program Director in writing within five working days of the Program action/decision being appealed.
2. Grievances will be reviewed by the appropriate program or university committee which most appropriately is identified to review the grievance. When appropriate, the Program Director will refer the grievance to the Dean of the School of Pharmacy and Health Professions if there is no university or program committee established to provide a fair and objective review of the grievance. A decision will be rendered to the student within five working days of receipt of the appeal. Students will be invited to attend the meeting at which the grievance is considered to present their case and respond to any questions the committee or Dean may have. As this meeting is a purely academic proceeding, no legal counsel will be allowed to attend or participate. The student may, however, request participation by other students or non-program faculty with approval of the Program Director. Proceedings may not be recorded in any manner (audio, video, digital, etc.)
3. Students who wish to challenge the Program’s decision may initiate a subsequent appeal to the Dean of the School of Pharmacy and Health Professions. This appeal must be initiated within five working days of the Program’s appeal decision and must be submitted in writing.
4. Students who wish to challenge the Dean of the School of Pharmacy and Health Professions appeal decision may initiate a subsequent appeal to Provost/Vice President for Academic Affairs within 5 working days.
5. The decision of the Provost/Vice President for Academic Affairs will be considered final and become effective upon ratification by the President.

**Deceleration**

The UMES PA curriculum is designed to be delivered on a full-time basis to students in a cohort.

Didactic Curriculum

In the event a student fails one or more didactic courses, the PPC Committee **may** recommend a deceleration. This allows the student to repeat the failed course(s) with the next cohort. All skills and knowledge must be maintained through the Program. Therefore, a decelerated student will be required to repeat all Program courses. The student is responsible for all tuition costs incurred by deceleration. A second failure after deceleration **WILL** result in a dismissal from the Program. All program coursework is still required to be completed within 4 years from the original date of matriculation.

Deceleration is not an option in lieu of disciplinary action including but not limited to academic probation, university suspension or any other professional/ethical violation that would be considered grounds for dismissal from the program.

Deceleration may occur for the following reasons:

1. Deceleration Process A student is granted a leave of absence by the PA program.
2. A student fails one or more courses of the Didactic phase of the program.
3. A student is required to repeat a failed rotation at the end of the program.

To proceed with the option of deceleration students must notify the UMES PA Program and the School of Graduate Studies in writing within one (1) week of their notification of dismissal. If approved students must then complete a *Reinstatement Application* via the Graduate School website (<https://wwwcp.umes.edu/grad/readmission-or-reinstatement/>).

Clinical Curriculum

Failure to successfully complete the clinical or professional requirements of SCPE will result with repeating the SCPE prior to graduation, or dismissal from the Program. The student will be responsible for all tuition costs incurred by the failed SCPE.

A student who receives a grade of "F" or below during the Didactic or Clinical Phase will be ***ineligible*** to re-apply for re-admission into the program.

**Leave of Absence**

Students with prolonged illnesses or other personal issues that result in multiple absences should consult with the CED and/or DED regarding taking a leave of absence.

Students requesting a leave of absence must apply in writing to the Program Director. In the event of a medical problem or pregnancy, the request should be accompanied by a letter from a healthcare provider describing the nature of the condition for which the leave is requested and the estimated length of time needed for recovery.

After consultation with the student, the Program Director will decide whether or not the leave is to be granted and the conditions under which the student may return to school. The Program Director reserves the right to consult with the Program Faculty and/or Progress and Promotions Committee for consideration of the leave of absence request. A student requesting a leave of absence must go through the following procedure:

1. Request in writing a leave of absence from the Program Director.
2. The student must personally meet with the Program Director to discuss the reason for the leave.
3. After consulting with the student, if it is determined that the leave of absence will be granted, the Program Director will assist the student through the official leave of absence procedure at the PA Program level. The Program Director will send an official letter to the student indicating that the leave of absence has been approved and specifying the terms of the leave. The terms of the leave of absence will be determined by the Program Director and reviewed with the student, including the following elements:
   * 1. Implications for resuming the curriculum (course requirements and sequencing issues)
     2. Duration of the leave (no longer than 12 months)
     3. Method for demonstrating academic readiness upon return to the Program
     4. Method for demonstrating ability to meet the technical standards upon return to the Program
     5. Need to repeat criminal background check and/or urine drug screen prior to return (at the student’s expense)
     6. Curriculum or policy revisions to which the student will be subject upon return to the Program
4. Upon receipt of the official letter from the Program Director, the student must provide the letter including the defined terms for the leave of absence, Program Director approval of the leave, and a note from his/her healthcare provider (if applicable) to the School of Graduate Studies. The School of Graduate Studies then assists the student with completing University administrative leave of absence processes related to financial aid, student accounts, and registration status. If a student does not return from the leave of absence at the specified time, the student will be administratively withdrawn from the program and will be responsible for all accrued fees and financial obligations.

If the leave is approved, the official start date of the leave of absence will be stipulated by the Program Director’s approval letter. In the event the student is incapacitated and unable to initiate the request, the Program Director may facilitate this process.

Any tuition reimbursement will be in accordance with the institutional refund policy. A leave of absence may result in a student graduating after the remainder of their cohort, not being able to participate in the graduation ceremony with their original cohort, and other program and university-related events.

**Withdrawal**

During the course of the Didactic Phase, if a student encounters difficulty meeting course objectives or maintaining acceptable grades due to unexpected illness or other significant problems or impairment **IT IS THE STUDENT'S RESPONSIBILITY TO NOTIFY THE DIDACTIC EDUCATION DIRECTOR AND/OR THE PROGRAM DIRECTOR AS SOON AS POSSIBLE.** The didactic director and/or the program director will meet with the student to discuss the option of **withdrawal** from the program/University.

**Approved By:** Physician Assistant Program

# Appendix C.1 – Faculty Advising Policy {A1.04}[[72]](#endnote-72) {A2.05d, e, f}[[73]](#endnote-73) {A3.10}[[74]](#endnote-74)

**Associated Forms:**

* Student Advisement form\*
* Professional Development Assessment Tool\*

*\*See Program Management Specialist for Associated Forms*

**ARC-PA Associated Standards**:

* **A1.04** - The sponsoring institution must provide academic support and student services to PA students that are equivalent to those services provided to other comparable students of the institution.
* **A2.05 d, e, f** - Principal faculty and the program director must be responsible for, and actively participate in the processes of:

d) evaluating student performance,

e) academic counseling of students,

f) assuring the availability of remedial instruction,

* **A3.10** - The program must define, publish, make readily available and consistently apply written procedures that provide for timely access and/or referral of students to services addressing personal issues which may impact their progress in the PA program.

**Background and Purpose**

The purpose of this policy is to clarify the role of the faculty as an advisor and the expectation of both faculty and student in the advising process.

Physician Assistant Program Faculty Advising

All students who have been accepted into the program will be assigned a principal faculty mentor who will act as their official student advisor. Mentors will officially meet with each of their advisees on a regular schedule as outlined below. Additionally, students or advisors may request unscheduled meetings as the need arises.

For first-year students, the initial advising session should occur during the first two weeks of their first semester to begin the process of establishing a professional relationship with their advisor. Advising will occur after program orientation and be performed by principal faculty.

Faculty advising is designed to be vertically progressive through the course of the curriculum. General advisement begins with such topics as transition to adult learning and differences between undergraduate and graduate education. Over time, there are greater discussions about such topics as readiness for clinical practice and professional development, including faculty and student self-assessment. Student-specific advisement topics will usually include discussion of current course grades and overall GPA, study habits, test-taking skills, and any other aspects of PA education that are particularly difficult for the student. It is critical that any weaknesses or academic problems be identified proactively and interventions initiated to maximize each student’s opportunity for success.

When appropriate, mentors will assist the student in locating helpful resources, and promptly initiate referrals. Both on-campus and off-campus resources may be utilized. Financial responsibility/insurance coverage for the cost of mental health or psychological counseling is solely the responsibility of the individual student. **Under no conditions is the faculty advisor to assume the role of professional provider of needed mental health or counseling services for any student.**

**Student Advisement form**: This form should be used when documenting the advising sessions described by this policy. The completed form should be included with copies of the student’s professionalism evaluations that were discussed during the corresponding advising session. All student advising/counseling sessions will be documented using the student advisement form and filed in the students’ program file. This form should also be used when documenting any additional non-scheduled advisement sessions or other meetings related to student performance, personal issues, or professionalism. The form may be filled out electronically but must be printed for inclusion in student file.

**Advisement schedule:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Session #** | **Semester** | **Week** | **Topics** |
| 1 | Fall I | 2 | Adjustment to adult learning; student strategies |
| 2 | Fall I | 9 | Progression through summer curriculum; student-specific issues |
| 3 | Winter I | 2-4 | Adjustment to increased rigor; student issues; Progression through fall curriculum; student issues |
| 4 | Spring I | 6-8 | Adjustment to progressive curriculum; student burn-out; student strategies; Progression through spring curriculum; student issues |
| 5 | Summer I | 6-8 | Adjustment to progressive curriculum; student vision as provider;  Progression, readiness for SCPEs, student issues |
| 6 | Fall II | varied | All students should meet at least once with advisors during callback days each semester during the clinical year; discuss clinical experiences, preparation for independent practice, student issues |
| 7 | Spring II | varied | All students should meet at least once with advisors during callback days each semester during the clinical year; discuss clinical experiences, preparation for independent practice, student issues |
| 8 | Summer II | varied | All students should meet at least once with advisors during callback days each semester during the clinical year; discuss clinical experiences, preparation for independent practice, student issues |
| 9 | Fall III | varied | Board prep; readiness for practice/expectations of graduates; student issues |

**Approved by:** Physician Assistant Program

# Appendix C.2 – Infection Control, Safety and Personal Security Policy {A1.02g}[[75]](#endnote-75) {A3.07}[[76]](#endnote-76), {A3.08}[[77]](#endnote-77)

**Associated Forms:**

“Notice of Incident” Form\*

*\*See Program Management Specialist for Associated Forms*

**ARC-PA Associated Standards:**

* **A1.02g** The sponsoring institution is responsible for:

1. documenting appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs,

* **A3.07**  - The program must define, publish, make readily available and consistently apply:

1. a policy on immunization and health screening of students. Such policy must be based on then current Centers for Disease Control and Prevention recommendations for health professionals and state specific mandates.
2. written travel health policies based on then current CDC recommendations for international travel for programs offering elective international curricular components.

* **A3.08** - The program must define, publish, make readily available and consistently apply policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities which would place them at risk. Those polices must: a) address methods of prevention, b) address procedures for care and treatment after exposure, and c) clearly define financial responsibility*.*

**Background and Purpose**

To keep students,faculty, staff, preceptors and SCPE-sponsoring institutionsup-to-date on program and University policies and procedures for exposure to bodily fluids, provider safety, and personal security.

**Policy Statement**

**Policy on Safety and Infection Control**

Compliance with all safety practices is not just a good procedure - it is a mark of your professionalism. **Persistent failure to observe and practice Standard Precautions may result in adverse/disciplinary action for unprofessional behavior and referral to the Progress and Promotion Committee**

Students will be required to complete any clinical site-specific safety or security training requirements in preparation for supervised clinical practice rotations.

The safety of all students, faculty, staff, patients and clinical personnel is of primary concern. PA students, staff and faculty must adhere to all established UMES safety policies and all School of Pharmacy and Health Professions safety policies. Didactic students must notify their course instructor and the Didactic Education Director as soon as possible of any exposure to bodily fluids or potentially serious infectious diseases. Clinical students must notify their clinical preceptor and the Clinical Education Director as soon as possible of any exposure to bodily fluids or potentially serious infectious diseases. All faculty, staff and students will utilize **Standard Precautions** during all activities that present a risk of exposure to bodily fluids, potentially serious infectious diseases or chemical hazards. Failure to do so will be grounds for disciplinary action.

**Procedures**

**Standard Precautions**

Standard precautions are the minimum safety and infection prevention practices that apply to **all** patient care, laboratory or technical skills training experiences in any setting where healthcare or healthcare training is delivered. These practices are designed to protect healthcare professionals (HCP) and prevent HCP from spreading infections to others. Students will be instructed in Standard Precautions early in the program during orientation and throughout the didactic phase of the program.

**Standard Precautions include:**

* **Hand hygiene.** Good hand hygiene is critical to reduce the risk of spreading infection. Current CDC guidelines recommend use of alcohol-based hand rub for hand hygiene except when hands are visibly soiled (e.g. dirt, blood, body fluids), or after caring for patients with known or suspected infectious diarrhea, in which cases soap and water should be used. Key situations where hand hygiene should be performed include:
  + - Before touching a patient, even if gloves will be worn.
    - Before exiting the patient’s care area after touching the patient or the patient’s immediate environment.
    - After contact with blood, body fluids or excretions, or wound dressings.
    - Prior to performing an aseptic task (e.g. placing an IV, preparing an injection).
    - If hands will be moving from a contaminated-body site to a clean-body site during patient care.
    - After glove removal.
  + **Use of personal protective equipment (PPE):**
    - *Exam gloves* will be worn when there is risk of contact with or when handling blood or body fluids or when there is a potential for contact with mucous membranes, non-intact skin or body orifice areas, or contaminated equipment.
    - *Facial masks, protective eyewear and/or gowns (as well as gloves)* will be worn when performing/assisting procedures with a risk of body fluid or other hazardous material splashes or sprays.
  + **Safe injection practices:**
    - No recapping of needles unless required by the specific procedure being performed.
    - Use of self-sheathing needles and/or needleless systems when available.
    - All needles and other disposable sharps will be placed in designated puncture resistant containers as soon as possible after their use.
  + **Safe handling of potentially contaminated surfaces or equipment:**
    - Environmental cleaning: Areas in which patient care activities are performed will be routinely cleaned and disinfected at the conclusion of the activity as outlined by the laboratory course director/instructor.
    - Medical equipment safety. Reusable medical equipment must be cleaned and disinfected (or sterilized) according to the manufacturer’s instructions. If the manufacturer does not provide guidelines for this process the device may not be suitable for multi-patient use.
  + **Respiratory hygiene/Cough etiquette:**
    - Cover mouth/nose when coughing or sneezing.
    - Use and dispose of tissues.
    - Perform hand hygiene after hands have been in contact with respiratory secretions.
    - Consider using a mask to prevent aerosol spread. Consult with your clinical preceptor regarding specific clinical policy on when masks must be used.
    - Sit as far away from others as possible when ill with respiratory symptoms.

Compliance with all safety practices is not just a good procedure - it is a mark of your professionalism. **Persistent failure to observe and practice Standard Precautions may result in adverse/disciplinary action for unprofessional behavior and referral to the PPC.**

**Safety Training**

Students will be required to complete any clinical site-specific safety or security training requirements in preparation for supervised clinical practice rotations.

**Post-exposure protocols**

Should an exposure to blood and/or other body fluid or a needle stick injury occur, the procedure for obtaining appropriate medical care is as follows:

**When an exposure occurs:**

* Remove soiled clothing and administer immediate aid, including washing skin, flushing eyes 10-15 minutes, etc. Remove contact lenses if eyes are exposed.
* Notify the preceptor immediately. **DO NOT DELAY. GET ASSISTANCE IMMEDIATELY.**
* Immediately report to or contact the designated person/department at the clinical site to receive information and counseling regarding proper protocol and treatment for accidental exposure. In some cases this might be the Employee Health or Occupational Health Services Department. PLEASE NOTE: **Health care entities are not obligated to provide students with treatment all though some may do so.** All UMES students are required to carry health insurance for the duration of the program.
* Should the clinical site not provide you with treatment, students should go to the closest Urgent Care, Family Doctor or Emergency Department for immediate treatment at their own expense. Student injuries are not work related injuries and therefore not covered under Workman’s Compensation Laws.

Following an exposure, once the student has followed the clinical site’s protocol the affected students must contact the Clinical Education Director within 24 hours. The student must also complete the Student Exposure Form (See UMES Clinical Education Handbook) and follow the directions at the top of the form. Please complete the form as accurately and completely as possible. Subsequently, a UMES Accidental Personal Injury Report must be completed by the CED or PMS, and is filed in the PA office for tracking, with a copy sent to UMES Conduct Administrator (<https://wwwcp.umes.edu/conductaffairs/>).

**Insurance:** The student’s insurance identification card should be shown when medical evaluation is needed. Students will be financially responsible for all costs incurred during compliance with this policy. (See Student Health Policy).

**Policy on Personal Security**

Campus Police: The Department of Public Safety and University Police are committed to providing the highest quality of service to the university community and the public. We are constantly striving to meet the needs and rights of students, faculty, staff and our guests. Staff is on duty 24 hours a day, seven days a week. The law enforcement staff of the Department of Public Safety is Maryland Police and Correctional Training Commission certified police officers. Each officer is trained to manage and respond to the needs of the community in a professional and efficient manner. Students are urged to report situations that could threaten the health and/or safety of members of our community. This includes suspicious persons, thefts, assaults, car accidents and unsafe conditions. University Police may be contacted anytime 24 hours a day; you can walk in for assistance or dial the office at ext. 3300 for emergencies and ext. 6590 for non-emergencies. University Police also provide campus escort service, as well as managing security personnel in the residence hall units.

Emergency Services: There are emergency “blue light” telephones strategically located throughout the campus, which are connected to the Department of Public Safety for immediate Campus Police response. Elevators also have emergency phones which are also connected to the Department of Public Safety and can serve as emergency telephones. The Department of Public Safety can be reached for emergency assistance by dialing extensions 3300 or 6590, twenty-four (24) hours a day.

Escort Services

Escort services are provided to students during the evening hours by the Department of Public Safety. Students desiring escort services should contact the Department of Public Safety at 410-651-6590.

Prevention Education

The Department of Public Safety distributes materials specific to UMES campus safety at the Enrollment 101 presentations and New Student Orientation. Flyers are also posted throughout the campus and copies of the safety materials may be requested from the Department of Public Safety or downloaded from the Public Safety website. In addition to the UMES specific safety information, publications recommended by the National Crime Prevention Council and by Maryland Crime Watch on various topics, including general crime prevention, sexual assault/date rape, awareness, self-protection and operation I.D. are available via the Public Safety website and in the Campus Police office. Information is also provided to the University community through lectures, videos, bulletins and workshops conducted throughout the academic year. Officers are available to give presentations on a number of public safety topics as requested.

Emergency Response Plans

The UMES Crisis Management Committee routinely meets to review, exercise and critique the University’s emergency response plans. The plans are published and available from the Department of Public Safety upon request or may be found on the UMES Public Safety Website. Questions or clarification regarding the published plans may be made through the Department of Public Safety at 410- 651-6590.

Emergency Notification

In the event of a campus emergency several methods will be used to make the appropriate notification depending on the type and extent of the emergency. Our policy is that quantity verses quality takes priority, in other words, we will use as many methods as possible to communicate the existence of an emergency, and as quickly as possible. Events which might require use of notification systems are severe weather, HAZMAT spills, fire, flooding, major road closures, criminal activities requiring precautions, etc. Several or all of the listed methods might be used for notification and those methods include: Emergency Siren/Public Address Notification System, text messaging for those students, faculty and staff registered for receiving text messaging, campus wide e-mail notification, campus cable TV, campus electronic message monitors, WESM Radio, and local media channels. For every notification event we ask that you communicate with as many fellow students, co-workers and visitors that an emergency exists and follow any guidance or precautions provided.

The personal safety and security of all Physician Assistant students, faculty and staff are very important. Please observe the following policies regarding activities in the Physician Assistant Department:

The Physician Assistant Program administrative suite is located at Suite 1062, Hazel Hall, Room #1068.

**The Program hours are:**

Monday-Friday 8:00 am - 4:30 pm.

**Hazel Hall is open the following hours:**

Monday-Thursday 7:30 am - 10:00 pm; Friday 7:30 am - 6:00 pm.

Use of PA Graduate Room (Hazel Hall #1056) and Clinical Lab Room (Hazel Hall #1045)

* These study spaces are available during hours that the Hazel Hall is open to students.
* Food and non-alcoholic beverages are allowed as long as students keep a reasonable level of cleanliness and clean up after spills. The privilege of having food in the Physician Assistant Graduate Student Room will be withdrawn if cleanliness is not maintained.
* Campus Labs offer an opportunity to use specialized software that the student may not wish to purchase, but may need to use for a specific class assignment. Visit the UMES IT page <https://www.umes.edu/it> for more information on computing resources we offer.
* The University has both restricted and unrestricted parking areas, please pay close attention when parking on campus. Be aware that you can only parking in designated parking lots where your permit authorizes you to park. Handicapped parking regulations are strictly enforced. Vehicles found parked illegally in these locations will be ticketed and towed. Remember an authorized parking space is a lined designated parking space.

**Failure to follow these rules may result in referral to the Progress and Promotion Committee for disciplinary action.**

**Student safety during SCPEs**

UMES PA program will ensure that appropriate OSHA training is provided to students prior to SCPEs. The facility at which the SCPE takes place shall provide to UMES PA students access to the facility’s rules, regulations, policies and procedures with which the UMES PA students are expected to comply, including, the Facility’s OSHA, personal and workplace security and personal safety policies and procedures and shall address all appropriate safety measures for all UMES PA students and any UMES PA instructors on site. It will be the preceptor’s responsibility to take reasonable steps to ensure personal safety and security of students during the SCPE. This is clearly communicated to preceptors and agreed upon in a signed Preceptor Agreement obtained prior to the SCPEs.

**Approved by:**  Physician Assistant Program

# Appendix D – UMES Physician Assistant Policy - Dress Code Policy {A3.02}[[78]](#endnote-78)

**ARC-PA Associated Standards:**

**A3.02** - The program must define, publish, make readily available and consistently apply its policies and practices to all students.

**Background and Purpose**

Advise students on professional demeanor in regards to dress.

**Policy Statement**

***UMES PA Program Guidelines for Professional Dress***

As a representative of the UMES Physician Assistant Program, a student’s personal appearance is an extension of the School and will, to some degree, determine how customers, patients, and colleagues view the student, the program, and the profession of pharmacy.

*The following standards for attire apply to all students enrolled in the UMES Physician Assistant Program. These standards shall be followed during all hours in which the School is open to the public (generally 8:00 A.M. to 8:00 P.M., Monday through Friday) and covers any Clinical site.*

The School of Pharmacy and Health Professions and Physician Assistant Department has established a business casual dress code to allow our students to work and study comfortably in the classroom, laboratory and clinical settings, as well as project a professional image for their customers/patients, potential employers, and school visitors.

Casual clothing is not suitable for the physician assistant students expect during assessment days; therefore, these guidelines will help you determine what is appropriate to wear to class, laboratory or clinical sites. Clothing that works well for the beach, yard work, dance clubs, exercise sessions, and sports contests are *not appropriate* for a professional appearance. Clothing that reveals cleavage, your back, your chest, your feet, your stomach or your underwear is *not appropriate* for the school. Torn, dirty, or frayed clothing is *unacceptable*. Any clothing that has words, terms, or pictures that may be offensive to other students, faculty or staff is *unacceptable*.

In addition to the above guidelines, a more specific overview of appropriate business casual attire is being provided below. Items that are not appropriate for the office are listed, too. Both lists are all-inclusive and both are open to change. The lists tell you what is generally acceptable as business casual attire and what is generally not acceptable as business casual attire.

No dress code can cover all contingencies so students must exert a certain amount of judgment in their choice of clothing to wear to the program. If you experience uncertainty about acceptable, professional business casual attire for the program, please ask the Program Director or Didactic Education Director.

Slacks, Pants, and Suit Pants

Slacks that are similar to Dockers and other makers of cotton or synthetic material pants, wool pants, flannel pants, dressy Capri, and nice looking dress synthetic pants are acceptable. Inappropriate slacks or pants include jeans (pants which contain rivets), sweatpants, athletic pants, Bermuda shorts, short shorts, shorts, bib overalls, leggings, and any spandex or other form-fitting pants people wear for biking or exercise. Pants must be worn properly at the hips. No student shall dress in a way that his/her underwear is partially or totally exposed and proper undergarments shall be worn.

Skirts, Dresses, and Skirted Suits

Casual dresses and skirts, and skirts that are split at or below the knee are acceptable. Dress and skirt length shall be no shorter than one inch above the knee (when standing). Short, tight skirts that ride halfway up the thigh are inappropriate for the program. Mini-skirts, skorts, sun dresses, beach dresses, and spaghetti-strap dresses are inappropriate for the program.

Shirts, Tops, Blouses, and Jackets

Casual/dress shirts (for males, shirts must have a collar), sweaters, tops, tailored blouses, golf-type shirts, and turtlenecks are acceptable attire for the program. Most suit jackets or sport jackets are also acceptable attire for the program. Inappropriate attire for the program includes tank tops, midriff tops, spaghetti straps, tube tops, swim tops, shirts with potentially offensive words, terms, logos, pictures, cartoons, or slogans, halter-tops, tops with bare shoulders, hoodies, sweatshirts and articles of fleece, and t-shirts unless worn under another blouse, shirt, jacket, or dress. Additionally, students should wear professional lab coats with name tags during school related health fairs and campus activities.

Shoes and Footwear

Conservative athletic or walking shoes, oxfords, loafers, clogs, boots, flats, dress heels, and leather deck-type shoes are acceptable for the program and shall be clean and in good condition. Flashy athletic shoes, thongs, flip-flops, slippers, platforms, work boots, hiking boots, and any non-dress shoe with an open toe are not acceptable in the program. Closed toe and closed heel shoes are required in laboratories.

Hats and Head Covering

Hats, caps, and other head gear may not be worn in the building halls aforementioned during the hours that the dress code is in effect. Only headgear worn for bona fide religious purposes or to honor cultural tradition is permissible.

General Personal Care Standards

Adequate precautions shall be taken to maintain good personal hygiene. These precautions include regular bathing, use of deodorants and regular dental hygiene.

Hair Maintenance

Hair shall be neatly groomed and clean, styled off the face and out of the eyes. If close contact with patients occurs (e.g. physical assessment procedures); hair longer than shoulder length shall be secured. Hair may not be dyed any unnatural hair colors. Spiked hair, including but not limited to faux hawks and Mohawks, is not allowed.

Cologne, Perfume or Aftershave

The use of cologne, perfumes, body sprays, scented body lotions or aftershave shall be used with restraint. It is not recommended in the patient care setting due to patient allergies and sensitivities.

Cosmetics

Cosmetics shall be applied in good taste and moderation.

Skin

No tattoos or body piercings are allowed to be visible (other than earrings).

Nail Maintenance

Nails shall be well groomed, manicured and of short to medium length that will not interfere with the patient care.

Jewelry

Jewelry and accessories shall be non-distracting and in good taste, with limited visible body piercing. Gauges or stretchers are not appropriate.

Dress-down Casual Days

At certain times the program director or designated member of the PA Faculty may declare a dress- down day. Clothing should be in good condition, not torn or worn out. On such days, the guidelines for Business Casual found above remain in effect except that jeans, t-shirts and sweat shirts may be worn. All other restrictions pertaining to casual clothes still apply. The prohibition of potentially offensive words and logos continues, as does the prohibition of tank-tops, shorts and flip-flops.

Student professional dress and conduct should, at all times, reflect the dignity and standards of the medical profession. It is important that physician assistant students dress in a manner that is respectful to their professors, classmates, patients, and other interprofessional and administrative colleagues. The FSU Department of Physician Assistant Medicine and the College of Liberal Arts and Sciences has the authority to set dress code requirements for students admitted to the program.

The dress code at various clinical sites may be more or less rigorous than the guidelines outlined below. If the culture of a particular clinical setting supports a specific dress code that is inconsistent with the policy outlined below, the student should discuss this with a the Clinical Education Director to determine proper dress behavior for the student (see “Style” below).

**Clinical Setting**

Identification in the Clinical Setting

Proper identification must be clearly displayed identifying that the student is a UMES Physician Assistant Student. UMES PA Student ID badges must be worn at all times. The Professional ID badge must be worn so that it is easily readable by patients and hospital/clinic personnel. ID badges must not be obscured or altered in any manner except as determined by clinical necessity, (e.g. special stickers for newborn nursery access).

White Coats

Student-style white coats are required for clinical settings and during certain laboratory sessions, simulation exercises, competency evaluations and any other times as designated by the Course Director; they must be clean and neat. They will possess the UMES Physician Assistant Student patch. Exceptions to this rule are at the discretion of the clinical preceptor and must be approved by the Clinical Education Director. If wearing scrubs outside the operating area, a clean white coat should be worn over scrubs.

Scrubs

In general, scrubs should not be worn outside of the hospital or clinic. Scrubs are expected to be clean when worn in a public area and should be covered with a white coat. The ID Badge must be worn outside the white coat. Scrubs may be worn only as delineated by individual clinical sites.

Shoes

Footwear must be clean, in good condition, and appropriate. For safety reasons, open-toed shoes and sandals are not allowed in patient care areas or designated laboratory components of didactic courses.

Style

No sweatshirts or shirts with messages, lettering or logos (except FSU). No shorts, cut-offs, etc. *Jeans are not to be worn even if it is clinical site policy to allow providers to wear jeans!* A tie is recommended for men, unless described as optional in specific policy for that clinical setting.

Fragrance

No wearing of colognes, perfumes or scented lotions in clinical settings as patients may be sensitive to fragrances.

Hands

Fingernails must be clean and short to allow for proper hand hygiene, use of instruments, prevention of glove puncture and injury to the patient. Artificial nails and decorative nail designs are prohibited. Some clinics/hospital settings do not permit any colored polish.

Hygiene

Daily hygiene must include personal cleanliness, including use of deodorant. Clothing should be clean, pressed, and in good condition, including the white coat.

Hair

Mustaches, hair longer than chin length, and beards must be clean and well-trimmed. Students with long hair who participate in patient care should wear hair tied back to avoid interfering with performance of procedures or having hair come into contact with patients.

Jewelry

Jewelry should not be functionally restrictive or excessive. Students should avoid wearing long or dangling earrings for their own and for patient safety. There should be no visible jewelry in body piercings with the exception of earrings. In the case of religious requirement, certain piercings may be acceptable. Please consult the Program Director or the Program Director’s designee if you have a religious requirement for piercings. No other facial jewelry (e.g., tongue, eyebrow piercings, etc.) is allowed.

Tattoos

Tattoos shall be appropriately covered when possible.

**Dress Code Violations and other Non-academic Violations**

Students are to adhere to the dress code policy during school hours (8:00 AM-8:00 PM). Exceptions (e.g. dress down days) are permitted and students should follow the guidelines outlined in the dress code policy. Students may report dress code and other non-academic violations of other students to faculty, preceptors, or staff.

Once aware of the violation, faculty, preceptors and staff may choose to first counsel the accused student. The student may be asked to leave the class if the behavior is disruptive, sent home to change into appropriate attire, or referred to the Didactic and/or Clinical Education Director. However, in all cases the incident should be documented and submitted to the PPC and the Office of Student Affairs for inclusion in the student’s file. Minor non-academic violations will generally be resolved through the Didactic and Clinical Education Directors. However, both the Directors and Program Directors can refer students to the PPC for repeated or severe non-academic violations of the professionalism policy.

**Approved by:** Physician Assistant Program

# Appendix E – Student Employment Policy {A3.04}[[79]](#endnote-79) {A3.05}[[80]](#endnote-80) {A3.14}[[81]](#endnote-81)

**ARC-PA Associated Standards:**

* **A3.04** - The program must define, publish, make readily available and consistently apply a policy that PA students must not be required to work for the program.
* **A3.05** - The program must define, publish, make readily available and consistently apply a policy that PA students must not substitute for or function as: a) instructional A3.10A3.10 and b) clinical or administrative staff.
* **A3.14** The program must make student admission decisions in accordance with clearly defined and published practices of the institution and program.

**Background and Purpose**

The purpose of this policy is to clearly articulate the program’s expectations regarding student employment while in the program and ensure that the students’ role as a student is maintained in all academic and clinical education environments.

**Student Employment Policy**

Employment is **strongly discouraged**. The Physician Assistant curriculum has been designed to be a full-time activity for students. It consists of a very demanding course load with a great deal of time spent in class and in clinical experiences. There are also many special seminars, films and guest lecturers that may be available to students on relatively short notice. We encourage you to seek outside sources of financial support (scholarships, loans, etc.) so that you may devote as much time as possible to your professional education.

Physician Assistant students may not perform service work within the Physician Assistant Program and will not be substituted for regular staff. Students are prohibited from substituting for clerical and/or clinical personnel during clinical experiences and clinical rotations. While enrolled in the program, no student may serve as a formal instructor to other enrolled students.

**Approved by:** Physician Assistant Department

# Appendix F – Technical Standards {A3.15}[[82]](#endnote-82)

Applicants to the University of Maryland Eastern Shore Master of Medical Science in Physician Assistant Studies (MMS-PAS) program are selected on the basis of their academic, personal and extracurricular attributes. Applicants must also have the intellectual, physical and emotional capabilities to meet the requirements of their program’s curriculum and of a successful career in medicine.

These standards specify the attributes and behaviors considered essential for successfully completing PA training and enabling each graduate to enter clinical practice. Because these standards describe the essential functions that students must demonstrate to meet the requirements of PA training within a generalist education model, they are prerequisites for admission, continuation and graduation.

UMES will consider for admission any applicant who meets its academic and nonacademic criteria and who demonstrates the ability to perform skills listed in this document, with or without reasonable accommodations, consistent with the Americans with Disabilities Act and the Rehabilitation Act. Our institution is committed to considering all qualified applicants without discrimination or based on any protected characteristics such as race, sex, age, religion, national origin, disability, sexual orientation, gender identity, or veteran status. It is the policy of the PA Program that all students must possess the intellectual, physical and emotional capabilities necessary to undertake the required curriculum in a reasonably independent manner without having to rely on intermediaries and that all students must be able to achieve the levels of competence required by the faculty. All candidates for admission, those both with and without disabilities, are expected to be competitive with others in the applicant pool across defined cognitive and non-cognitive factors. The institutional policy is to make admissions on a case-by-case basis and the basis of each applicant’s qualifications to contribute to UMES’s PA Program educational mission. For purposes of this document and unless otherwise defined, the term “applicant” or “candidate” means applicants for admissions to the PA program as well as enrolled PA students who are candidates for promotion and graduation.

**Technical standards for PA program admission, continuation, and graduation**

A candidate for the Master of Medical Science (MMS-PAS) degree earned after successful completion of the PA Program must have abilities and skills in the five functional areas described below and must have the physical and emotional stamina and capacity to function in a competent manner, and consistent with these standards, in the classroom and in clinical and laboratory settings, including settings that may involve heavy workloads, long hours and stressful situations.

1. **Observation**

* Observe demonstrations and conduct experiments in the basic sciences.
* Observe a patient accurately at a distance and close at hand, noting non-verbal as well as verbal signals. This ability requires functional vision, hearing, and somatic sensation.

1. **Communication**

* Relate effectively with patients, conveying a sense of respect, compassion, and empathy. A student must be able to communicate clearly with and observe patients in order to elicit information, accurately describing changes in mood, activity and posture, and perceive verbal as well as non-verbal communications.
* Communicate with patients, their family members, and the health care team through oral, written, and electronic forms.

**3. Sensory and Motor Coordination or Function**

* Demonstrate sufficient sensory and motor function to perform a physical examination utilizing palpation, auscultation, percussion, and other diagnostic maneuvers.
* Execute prompt, precise, and appropriate responses to provide general and emergency care to patients.
* Manipulate equipment and instruments to perform medical procedures required to attain curricular goals and patient care (e.g. needles, stethoscope, ophthalmoscope, tongue blades, intravenous equipment, gynecologic speculum, and scalpel).
* Perform basic laboratory tests (urinalysis, complete blood count, etc.), and diagnostic and therapeutic procedures (phlebotomy, arterial blood gas drawings, lumbar puncture, arthrocentesis, etc.).

**4. Cognitive, Integrative and Quantitative Abilities**

* Conceptualize, integrate and qualitatively analyze information derived empirically and rationally for problem solving and decision-making.  This includes abilities to reason, calculate, analyze, measure and synthesize information in a variety of settings, including those that may be urgent with increased transient stress and distractions.
* Comprehend three-dimensional relationships and spatial relationships of structures, including anatomical structures.
* Collect, organize, prioritize, analyze and assimilate large amounts of technically detailed and complex information within a limited time frame. This information will be presented in a variety of educational settings, including lectures, small group discussions, and individual clinical settings.

**5. Behavioral and Social Attributes**

1. Demonstrate empathy, integrity, honesty, concern for others, good interpersonal skills, interest and motivation as these personal qualities are all required during the educational training process and in patient care.
2. Possess the emotional health required for full use of their intellectual abilities, that include the exercise of good judgment, prompt of all educational and clinical responsibilities, and the development of mature, sensitive and effective professional relationships with patients and member of the medical team.
3. Possess adequate endurance to tolerate mentally and physically taxing workloads and adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients.be able to use supervision appropriately and act independently, when indicated.

**Process for assessing the applicant’s compliance with the technical standards**

Applicants are required to attest at the time they apply and accept an offer to matriculate that they meet these technical standards and thereafter must attest on an ongoing basis that they continue to meet these standards. These standards are not intended to deter any student who might be able to complete the requirements of the curriculum with reasonable accommodations. An accommodation is not reasonable if it poses a direct threat to the health or safety of self and/or others, if making it requires a substantial modification in an essential element of the curriculum, if it lowers academic standards or if it poses an undue administrative or financial burden. Requests from applicants for reasonable accommodations in meeting the technical standards will be reviewed and considered by an officer appointed by the University to evaluate student requests for accommodations. Information required within a request for accommodations includes, at a minimum, the following, and these required elements must be provided at the applicant’s expenses:

* Documentation of the disability from a licensed professional
* The diagnosis of the disability using standard nomenclature
* A description of the student’s functional limitations due to the disability
* Copies of the evaluation report(s) on or accompanied by a letter on the evaluating professional’s letterhead
* A description of the requested accommodation
* For additional information about the University’s process for assessing an applicant’s compliance with the technical standards, please contact the PA Program.

**Approved by:** Physician Assistant Department

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# Appendix G - Student Request (Didactic)for Time Off Form

Name: Today’s Date:

Requested Dates for Time Off:

Scheduled Course and Location:

Steps for Requesting Time Off:

Request form for time off must be submitted to the Didactic Education Director.

DED must review form and will approve or deny the request.

**Student Illness or Emergency:** Students should immediately notify the Didactic Education Director directly, student should also notify the course instructor. Email and text messages to advisors are NOT acceptable for leave approval. Student should submit the Request Form for Time Off within 24 hours of illness or emergency. Didactic faculty can require this time to be made up if it exceeds two days.

Please indicate the dates you will miss and courses you will miss:

**Non-Urgent Personal Reasons**: Requests for time off for non-urgent personal reasons should be for *major life events only* and are **NOT** guaranteed to be approved by the DED. Requests can be reviewed if you submit a request form for time off. Please keep in mind when asking for this time:

* These requests must be submitted at least 2 weeks in advance.
* This will count as a discretionary day
* Justify of this event

Student Signature:

Date

Didactic Education Director Signature:

Date

Action Taken:  Denied  Approved

# Student Signature Sheet {A3.02}[[83]](#endnote-83)

I attest that I have received, read, fully understand, and agree to comply with all policies and procedures set forth in the **UMES Physician Assistant Program Handbook (2022–2024).**

**I understand the following:**

1. I acknowledge that I have received and read the 2022-2024 University of Maryland Eastern Shore Physician Assistant Program Handbook. I have had an opportunity to have any questions answered with regard to its content. I agree to abide by the policies and procedures contained therein.
2. I have been made aware that, as a student enrolled in the University Maryland Physician Assistant Program, I am required to comply with the Program's policies on Health and Immunization and Student Health Insurance.
3. I acknowledge that I must abide by the Academic Integrity Policy of the University of Maryland Eastern Shore.
4. I attest that I meet the University of Maryland Eastern Shore PA Program Technical Standards.
5. I have also been made aware that I am bound by policies and procedures contained in the University of Maryland Eastern Shore Student Handbook.

Printed Name Student Signature Date

**This form must be returned to Admissions Coordinator**

## ARC-PA References

Accreditation Standards for Physician Assistant Education, Fifth Edition, First Published September 2019, Effective September 2020, With clarifications as of 11.8.19

1. A3.15 The program must define, publish, consistently apply and make readily available to students upon admission:

   1. any required academic standards,
   2. requirements and deadlines for progression in and completion of the program,
   3. policies and procedures for remediation and deceleration,
   4. policies and procedures for withdrawal and dismissal,
   5. policy for student employment while enrolled in the program,
   6. policies and procedures for allegations of student mistreatment, and
   7. policies and procedures for student grievances and appeals.

   [↑](#endnote-ref-1)
2. A3.13 The program must define, publish, consistently apply and make readily available to prospective students, policies and procedures to include:

   1. admission and enrollment practices that favor specified individuals or groups (if applicable),
   2. admission requirements regarding prior education or work experience,
   3. practices for awarding or granting advanced placement,
   4. any required academic standards for enrollment, and
   5. any required technical standards for enrollment.

   [↑](#endnote-ref-2)
3. A3.14 The program must make student admission decisions in accordance with clearly defined and published practices of the institution and program. [↑](#endnote-ref-3)
4. A3.15 The program must define, publish, consistently apply and make readily available to students upon admission:

   1. any required academic standards,
   2. requirements and deadlines for progression in and completion of the program,
   3. policies and procedures for remediation and deceleration,
   4. policies and procedures for withdrawal and dismissal,
   5. policy for student employment while enrolled in the program,
   6. policies and procedures for allegations of student mistreatment, and
   7. policies and procedures for student grievances and appeals.

   [↑](#endnote-ref-4)
5. A3.14 The program must make student admission decisions in accordance with clearly defined and published practices of the institution and program. [↑](#endnote-ref-5)
6. A3.14 The program must make student admission decisions in accordance with clearly defined and published practices of the institution and program. [↑](#endnote-ref-6)
7. B1.01 The curriculum must:

   1. be consistent with the mission and goals of the program,
   2. be consistent with program competencies,
   3. include core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care, and
   4. be of sufficient breadth and depth to prepare the student for the clinical practice of medicine.

   [↑](#endnote-ref-7)
8. B1.03 For each didactic and clinical course (including required and elective rotations), the program must define and publish learning outcomes and instructional objectives, in measurable terms that can be assessed, and that guide student acquisition of required competencies. [↑](#endnote-ref-8)
9. [↑](#endnote-ref-9)
10. B3.01 The program must secure clinical sites and preceptors in sufficient numbers to allow all students to meet the program’s learning outcomes for supervised clinical practice experiences. [↑](#endnote-ref-10)
11. B3.02 Clinical sites and preceptors located outside of the United States must only be used for elective rotations. [↑](#endnote-ref-11)
12. B3.03 Supervised clinical practice experiences must enable all students to meet the program’s learning outcomes:

    1. for preventive, emergent, acute, and chronic patient encounters,
    2. across the life span, to include infants, children, adolescents, adults, and the elderly,
    3. for women’s health (to include prenatal and gynecologic care),
    4. for conditions requiring surgical management, including pre-operative, intra-operative, postoperative care, and
    5. for behavioral and mental health conditions.

    [↑](#endnote-ref-12)
13. B3.04 Supervised clinical practice experiences must occur in the following settings:

    1. emergency department,
    2. inpatient,
    3. outpatient, and

    operating room. [↑](#endnote-ref-13)
14. B3.05 Instructional faculty for the supervised clinical practice portion of the educational program must consist primarily of practicing physicians and PAs. [↑](#endnote-ref-14)
15. B3.06 Supervised clinical practice experiences should occur with:

    1. physicians who are specialty board certified in their area of instruction,
    2. NCCPA certified PAs, or
    3. other licensed health care providers qualified in their area of instruction.

    [↑](#endnote-ref-15)
16. B3.07 Supervised clinical practice experiences must occur with preceptors who enable students to meet program defined learning outcomes for:

    1. family medicine,
    2. emergency medicine,
    3. internal medicine,
    4. surgery,
    5. pediatrics,
    6. women’s health including prenatal and gynecologic care, and
    7. behavioral and mental health care.

    [↑](#endnote-ref-16)
17. A3.03 The program must define, publish, make readily available and consistently apply a policy for prospective and enrolled students that they must not be required to provide or solicit clinical sites or preceptors. [↑](#endnote-ref-17)
18. B3.02 Clinical sites and preceptors located outside of the United States must only be used for elective rotations. [↑](#endnote-ref-18)
19. B3.03 Supervised clinical practice experiences must enable all students to meet the program’s learning outcomes:

    1. for preventive, emergent, acute, and chronic patient encounters,
    2. across the life span, to include infants, children, adolescents, adults, and the elderly,
    3. for women’s health (to include prenatal and gynecologic care),
    4. for conditions requiring surgical management, including pre-operative, intra-operative, postoperative care, and

    for behavioral and mental health conditions. [↑](#endnote-ref-19)
20. B3.04 Supervised clinical practice experiences must occur in the following settings:

    1. emergency department,
    2. inpatient,
    3. outpatient, and
    4. operating room.

    [↑](#endnote-ref-20)
21. A3.02 The program must define, publish, make readily available and consistently apply its policies and practices to all students. [↑](#endnote-ref-21)
22. A3.15 The program must define, publish, consistently apply and make readily available to students upon admission:

    1. any required academic standards,
    2. requirements and deadlines for progression in and completion of the program,
    3. policies and procedures for remediation and deceleration,
    4. policies and procedures for withdrawal and dismissal,
    5. policy for student employment while enrolled in the program,
    6. policies and procedures for allegations of student mistreatment, and

    policies and procedures for student grievances and appeals. [↑](#endnote-ref-22)
23. B4.01 The program must conduct frequent, objective and documented evaluations of student performance for both didactic and supervised clinical practice experience components. The evaluations must align with what is expected and taught, as defined by the program’s instructional objectives and learning outcomes. [↑](#endnote-ref-23)
24. B4.03 The program must conduct and document a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including:

    1. clinical and technical skills,
    2. clinical reasoning and problem-solving abilities,
    3. interpersonal skills,
    4. medical knowledge, and
    5. professional behaviors.

    [↑](#endnote-ref-24)
25. B4.04 The program must document equivalency of student evaluation methods and outcomes when instruction is:

    1. conducted at geographically separate locations and/or

    provided by different pedagogical and instructional methods or techniques for some students. [↑](#endnote-ref-25)
26. A3.15 The program must define, publish, consistently apply and make readily available to students upon admission:

    1. any required academic standards,
    2. requirements and deadlines for progression in and completion of the program,
    3. policies and procedures for remediation and deceleration,
    4. policies and procedures for withdrawal and dismissal,
    5. policy for student employment while enrolled in the program,
    6. policies and procedures for allegations of student mistreatment, and

    policies and procedures for student grievances and appeals. [↑](#endnote-ref-26)
27. A3.02 The program must define, publish, make readily available and consistently apply its policies and practices to all students. [↑](#endnote-ref-27)
28. A2.05 Principal faculty and the program director must be responsible for, and actively participate in the processes of:

    1. developing, reviewing and revising as necessary the mission statement, goals and competencies of the program,
    2. selecting applicants for admission to the PA program,
    3. providing student instruction,
    4. evaluating student performance,
    5. academic counseling of students,
    6. assuring the availability of remedial instruction,
    7. designing, implementing, coordinating, and evaluating the curriculum, and

    evaluating the program. [↑](#endnote-ref-28)
29. A3.10 The program must define, publish, make readily available and consistently apply written procedures that provide for timely access and/or referral of students to services addressing personal issues which may impact their progress in the PA program. [↑](#endnote-ref-29)
30. A3.11 The sponsoring institution and program’s announcements and advertising must accurately reflect the program offered. [↑](#endnote-ref-30)
31. A3.17 Student academic records kept by the sponsoring institution or program, in a paper or electronic format, must be readily accessible to authorized program personnel and must include documentation:

    1. that the student has met published admission criteria including advanced placement if awarded,
    2. that the student has met institution and program health screening and immunization requirements,
    3. of student performance while enrolled,
    4. of remediation efforts and outcomes,
    5. of summaries of any formal academic/behavioral disciplinary action taken against a student, and

    that the student has met requirements for program completion. [↑](#endnote-ref-31)
32. A3.10 The program must define, publish, make readily available and consistently apply written procedures that provide for timely access and/or referral of students to services addressing personal issues which may impact their progress in the PA program. [↑](#endnote-ref-32)
33. B4.01 The program must conduct frequent, objective and documented evaluations of student performance for both didactic and supervised clinical practice experience components. The evaluations must align with what is expected and taught, as defined by the program’s instructional objectives and learning outcomes. [↑](#endnote-ref-33)
34. A3.10 The program must define, publish, make readily available and consistently apply written procedures that provide for timely access and/or referral of students to services addressing personal issues which may impact their progress in the PA program. [↑](#endnote-ref-34)
35. A1.02 The sponsoring institution is responsible for:

    1. supporting the planning by program faculty of curriculum design, course selection, and program assessment,
    2. hiring faculty and staff,
    3. ensuring effective program leadership,
    4. complying with ARC-PA accreditation Standards and policies,
    5. conferring the credential and graduate level academic degree which documents satisfactory completion of the educational program,
    6. ensuring that all PA personnel and student policies are consistent with federal, state, and local statutes, rules and regulations,
    7. documenting appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs,
    8. teaching out currently matriculated students in accordance with the institution’s regional accreditor or federal law in the event of program closure and/or loss of accreditation,
    9. defining, publishing, making readily available and consistently applying to faculty, its policies and procedures for processing faculty grievances and allegations of harassment,
    10. defining, publishing, making readily available and consistently applying to students, its policies and procedures for processing student allegations of harassment, and

    defining, publishing, making readily available and consistently applying to students, its policies and procedures for refunds of tuition and fees. [↑](#endnote-ref-35)
36. A3.07 The program must define, publish, make readily available and consistently apply:

    1. a policy on immunization and health screening of students. Such policy must be based on then current Centers for Disease Control and Prevention recommendations for health professionals and state specific mandates.

    written travel health policies based on then current CDC recommendations for international travel for programs offering elective international curricular components. [↑](#endnote-ref-36)
37. A3.08 The program must define, publish, make readily available and consistently apply policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities which would place them at risk. Those polices must:

    1. address methods of prevention,
    2. address procedures for care and treatment after exposure, and

    clearly define financial responsibility. [↑](#endnote-ref-37)
38. A1.02 The sponsoring institution is responsible for:

    1. supporting the planning by program faculty of curriculum design, course selection, and program assessment,
    2. hiring faculty and staff,
    3. ensuring effective program leadership,
    4. complying with ARC-PA accreditation Standards and policies,
    5. conferring the credential and graduate level academic degree which documents satisfactory completion of the educational program,
    6. ensuring that all PA personnel and student policies are consistent with federal, state, and local statutes, rules and regulations,
    7. documenting appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs,
    8. teaching out currently matriculated students in accordance with the institution’s regional r or federal law in the event of program closure and/or loss of accreditation,
    9. defining, publishing, making readily available and consistently applying to faculty, its policies and procedures for processing faculty grievances and allegations of harassment,
    10. defining, publishing, making readily available and consistently applying to students, its policies and procedures for processing student allegations of harassment, and
    11. defining, publishing, making readily available and consistently applying to students, its policies and procedures for refunds of tuition and fees.

    [↑](#endnote-ref-38)
39. A3.01 Program policies must apply to all students, principal faculty and the program director regardless of location. A signed clinical affiliation agreement or memorandum of understanding may specify that certain program policies will be superseded by those at the clinical site. [↑](#endnote-ref-39)
40. A1.02 The sponsoring institution is responsible for:

    1. supporting the planning by program faculty of curriculum design, course selection, and program assessment,
    2. hiring faculty and staff,
    3. ensuring effective program leadership,
    4. complying with ARC-PA accreditation Standards and policies,
    5. conferring the credential and graduate level academic degree which documents satisfactory completion of the educational program,
    6. ensuring that all PA personnel and student policies are consistent with federal, state, and local statutes, rules and regulations,
    7. documenting appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs,
    8. teaching out currently matriculated students in accordance with the institution’s regional accreditor or federal law in the event of program closure and/or loss of accreditation,
    9. defining, publishing, making readily available and consistently applying to faculty, its policies and procedures for processing faculty grievances and allegations of harassment,
    10. defining, publishing, making readily available and consistently applying to students, its policies and procedures for processing student allegations of harassment, and
    11. defining, publishing, making readily available and consistently applying to students, its policies and procedures for refunds of tuition and fees.

    [↑](#endnote-ref-40)
41. A3.15 The program must define, publish, consistently apply and make readily available to students upon admission:

    1. any required academic standards,
    2. requirements and deadlines for progression in and completion of the program,
    3. policies and procedures for remediation and deceleration,
    4. policies and procedures for withdrawal and dismissal,
    5. policy for student employment while enrolled in the program,
    6. policies and procedures for allegations of student mistreatment, and

    policies and procedures for student grievances and appeals. [↑](#endnote-ref-41)
42. A3.15 The program must define, publish, consistently apply and make readily available to students upon admission:

    1. any required academic standards,
    2. requirements and deadlines for progression in and completion of the program,
    3. policies and procedures for remediation and deceleration,
    4. policies and procedures for withdrawal and dismissal,
    5. policy for student employment while enrolled in the program,
    6. policies and procedures for allegations of student mistreatment, and

    policies and procedures for student grievances and appeals. [↑](#endnote-ref-42)
43. A3.15 The program must define, publish, consistently apply and make readily available to students upon admission:

    1. any required academic standards,
    2. requirements and deadlines for progression in and completion of the program,
    3. policies and procedures for remediation and deceleration,
    4. policies and procedures for withdrawal and dismissal,
    5. policy for student employment while enrolled in the program,
    6. policies and procedures for allegations of student mistreatment, and

    policies and procedures for student grievances and appeals. [↑](#endnote-ref-43)
44. A1.09 The sponsoring institution must provide the program with access to instructional and reference materials needed to operate the educational program and support evidence-based practice. [↑](#endnote-ref-44)
45. A3.10 The program must define, publish, make readily available and consistently apply written procedures that provide for timely access and/or referral of students to services addressing personal issues which may impact their progress in the PA program. [↑](#endnote-ref-45)
46. A1.08 The sponsoring institution must provide the program with the physical facilities to operate the educational program in accordance with the Standards and to fulfill its obligations to matriculating and enrolled students. [↑](#endnote-ref-46)
47. A1.09 The sponsoring institution must provide the program with access to instructional and reference materials needed to operate the educational program and support evidence-based practice. [↑](#endnote-ref-47)
48. A1.09 The sponsoring institution must provide the program with access to instructional and reference materials needed to operate the educational program and support evidence-based practice. [↑](#endnote-ref-48)
49. ARC-PA Standards, 5th ed. edition first published September, 2019 with clarifications as of 11.8.19, <http://www.arc-pa.org/wp-content/uploads/2020/07/Standards-5th-Ed-Nov-2019.pdf> [↑](#endnote-ref-49)
50. . AAPA. (2013). Guidelines for Ethical Conduct for the Physician Assistant Profession. Retrieved May 15, 2014 from <http://www.aapa.org/WorkArea/DownloadAsset.aspx?id=815> [↑](#endnote-ref-50)
51. A3.02 The program must define, publish, make readily available and consistently apply its policies and practices to all students. [↑](#endnote-ref-51)
52. A3.15 The program must define, publish, consistently apply and make readily available to students upon admission:

    1. any required academic standards,
    2. requirements and deadlines for progression in and completion of the program,
    3. policies and procedures for remediation and deceleration,
    4. policies and procedures for withdrawal and dismissal,
    5. policy for student employment while enrolled in the program,
    6. policies and procedures for allegations of student mistreatment, and

    policies and procedures for student grievances and appeals. [↑](#endnote-ref-52)
53. A3.17 Student academic records kept by the sponsoring institution or program, in a paper or electronic format, must be readily accessible to authorized program personnel and must include documentation:

    1. that the student has met published admission criteria including advanced placement if awarded,
    2. that the student has met institution and program health screening and immunization requirements,
    3. of student performance while enrolled,
    4. of remediation efforts and outcomes,
    5. of summaries of any formal academic/behavioral disciplinary action taken against a student, and

    that the student has met requirements for program completion. [↑](#endnote-ref-53)
54. A3.18 PA students and other unauthorized persons must not have access to the academic records or other confidential information of other students or faculty. [↑](#endnote-ref-54)
55. A3.19 Student health records are confidential and must not be accessible to or reviewed by program, principal or instructional faculty or staff except for immunization and screening results, which may be maintained and released with written permission from the student. [↑](#endnote-ref-55)
56. A3.02 The program must define, publish, make readily available and consistently apply its policies and practices to all students. [↑](#endnote-ref-56)
57. A3.15 The program must define, publish, consistently apply and make readily available to students upon admission:

    1. any required academic standards,
    2. requirements and deadlines for progression in and completion of the program,
    3. policies and procedures for remediation and deceleration,
    4. policies and procedures for withdrawal and dismissal,
    5. policy for student employment while enrolled in the program,
    6. policies and procedures for allegations of student mistreatment, and

    policies and procedures for student grievances and appeals. [↑](#endnote-ref-57)
58. A3.17 Student academic records kept by the sponsoring institution or program, in a paper or electronic format, must be readily accessible to authorized program personnel and must include documentation:

    1. that the student has met published admission criteria including advanced placement if awarded,
    2. that the student has met institution and program health screening and immunization requirements,
    3. of student performance while enrolled,
    4. of remediation efforts and outcomes,
    5. of summaries of any formal academic/behavioral disciplinary action taken against a student, and

    that the student has met requirements for program completion. [↑](#endnote-ref-58)
59. A3.18 PA students and other unauthorized persons must not have access to the academic records or other confidential information of other students or faculty. [↑](#endnote-ref-59)
60. A3.19 Student health records are confidential and must not be accessible to or reviewed by program, principal or instructional faculty or staff except for immunization and screening results, which may be maintained and released with written permission from the student. [↑](#endnote-ref-60)
61. A1.04 The sponsoring institution must provide academic support and student services to PA students that are equivalent to those services provided to other comparable students of the institution. [↑](#endnote-ref-61)
62. A3.07 The program must define, publish, make readily available and consistently apply:

    1. a policy on immunization and health screening of students. Such policy must be based on then current Centers for Disease Control and Prevention recommendations for health professionals and state specific mandates.

    written travel health policies based on then current CDC recommendations for international travel for programs offering elective international curricular components. [↑](#endnote-ref-62)
63. A3.09 The program must define, publish, make readily available and consistently apply policies that preclude principal faculty, the program director and the medical director from participating as health care providers for students in the program, except in an emergency situation. [↑](#endnote-ref-63)
64. A3.18 PA students and other unauthorized persons must not have access to the academic records or other confidential information of other students or faculty. [↑](#endnote-ref-64)
65. A3.19 Student health records are confidential and must not be accessible to or reviewed by program, principal or instructional faculty or staff except for immunization and screening results, which may be maintained and released with written permission from the student. [↑](#endnote-ref-65)
66. A2.05 Principal faculty and the program director must be responsible for, and actively participate in the processes of:

    1. developing, reviewing and revising as necessary the mission statement, goals and competencies of the program,
    2. selecting applicants for admission to the PA program,
    3. providing student instruction,
    4. evaluating student performance,
    5. academic counseling of students,
    6. assuring the availability of remedial instruction,
    7. designing, implementing, coordinating, and evaluating the curriculum, and

    evaluating the program. [↑](#endnote-ref-66)
67. A3.02 The program must define, publish, make readily available and consistently apply its policies and practices to all students. [↑](#endnote-ref-67)
68. A3.15 The program must define, publish, consistently apply and make readily available to students upon admission:

    1. any required academic standards,
    2. requirements and deadlines for progression in and completion of the program,
    3. policies and procedures for remediation and deceleration,
    4. policies and procedures for withdrawal and dismissal,
    5. policy for student employment while enrolled in the program,
    6. policies and procedures for allegations of student mistreatment, and

    policies and procedures for student grievances and appeals. [↑](#endnote-ref-68)
69. A3.17 Student academic records kept by the sponsoring institution or program, in a paper or electronic format, must be readily accessible to authorized program personnel and must include documentation:

    1. that the student has met published admission criteria including advanced placement if awarded,
    2. that the student has met institution and program health screening and immunization requirements,
    3. of student performance while enrolled,
    4. of remediation efforts and outcomes,
    5. of summaries of any formal academic/behavioral disciplinary action taken against a student, and

    that the student has met requirements for program completion. [↑](#endnote-ref-69)
70. B4.03 The program must conduct and document a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including: a) clinical and technical skills,

    1. clinical reasoning and problem-solving abilities,
    2. interpersonal skills,
    3. medical knowledge, and

    professional behaviors. [↑](#endnote-ref-70)
71. B4.04 The program must document equivalency of student evaluation methods and outcomes when instruction is:

    1. conducted at geographically separate locations and/or

    provided by different pedagogical and instructional methods or techniques for some students. [↑](#endnote-ref-71)
72. A1.04 The sponsoring institution must provide academic support and student services to PA students that are equivalent to those services provided to other comparable students of the institution. [↑](#endnote-ref-72)
73. A2.05 Principal faculty and the program director must be responsible for, and actively participate in the processes of:

    1. evaluating student performance,
    2. academic counseling of students,
    3. assuring the availability of remedial instruction,

    [↑](#endnote-ref-73)
74. A3.10 The program must define, publish, make readily available and consistently apply written procedures that provide for timely access and/or referral of students to services addressing personal issues which may impact their progress in the PA program. [↑](#endnote-ref-74)
75. A1.02g The sponsoring institution is responsible for:

    1. documenting appropriate security and personal safety measuresmaintenance of certification and licensure and

    professional development directly relevant to PA education. [↑](#endnote-ref-75)
76. A3.07 The program must define, publish, make readily available and consistently apply:

    1. a policy on immunization and health screening of students. Such policy must be based on then current Centers for Disease Control and Prevention recommendations for health professionals and state specific mandates.

    written travel health policies based on then current CDC recommendations for international travel for programs offering elective international curricular components. [↑](#endnote-ref-76)
77. A3.08 The program must define, publish, make readily available and consistently apply policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities which would place them at risk. Those polices must:

    1. address methods of prevention,
    2. address procedures for care and treatment after exposure, and

    clearly define financial responsibility. [↑](#endnote-ref-77)
78. A3.02 The program must define, publish, make readily available and consistently apply its policies and practices to all students. [↑](#endnote-ref-78)
79. A3.04 The program must define, publish, make readily available and consistently apply a policy that PA students must not be required to work for the program. [↑](#endnote-ref-79)
80. A3.05 The program must define, publish, make readily available and consistently apply a policy that PA students must not substitute for or function as:

    * 1. instructional faculty and
      2. clinical or administrative staff.

    [↑](#endnote-ref-80)
81. A3.14 The program must make student admission decisions in accordance with clearly defined and published practices of the institution and program. [↑](#endnote-ref-81)
82. A3.15 The program must define, publish, consistently apply and make readily available to students upon admission:

    1. any required academic standards,
    2. requirements and deadlines for progression in and completion of the program,
    3. policies and procedures for remediation and deceleration,
    4. policies and procedures for withdrawal and dismissal,
    5. policy for student employment while enrolled in the program,
    6. policies and procedures for allegations of student mistreatment, and
    7. policies and procedures for student grievances and appeals.

    [↑](#endnote-ref-82)
83. A3.02 The program must define, publish, make readily available and consistently apply its policies and practices to all students. [↑](#endnote-ref-83)