THE THREE "C"s OF CLINICAL EDUCATION

Courtesy, Communication & Collaboration

PAEA Committee on Clinical Education

Clinical training is a challenge for all health professions, made even more complicated by the changing patient care environment and the rapid growth in health professions education. In the years ahead, the successful recruitment and retention of clinical training opportunities for PA students may rest heavily on a collaborative mentality between programs. In light of this, the Physician Assistant Education Association (PAEA) challenges its members to assess their level of communication and collaboration with other physician assistant (PA) programs, discuss the potential benefits of collaboration among their faculty, reach out to faculty at other programs, and explore with each other the potential benefits and challenges of collaboration.

BACKGROUND

Effective recruitment and retention of preceptors and clinical sites is essential to the core functioning of every PA program and to the long-term health of the PA profession. Unfortunately, the number of available clinical training sites for students has not been able to keep up with demand and has become a major issue across all health professions.¹ Clinical coordinators first formally addressed this issue at the 1998 Association of Physician Assistant Programs (APAP) Education Forum in Orlando (APAP's name was changed to PAEA in 2003). The concern was great enough that in 1999 the APAP Board of Directors approved

a document called *Guidelines of Courtesy Regarding Collaboration on the Use of Clinical Training Sites*, or the "Gentleman's Agreement." This was published in *Perspective on Physician Assistant Education* in the summer of 1999² and republished in the spring of 2001.³

Over a decade later and amid the United States' rapidly growing demand for health care providers, insufficient clinical training capacity remains a significant concern. PAEA's current strategic plan lays out the specific goal to "develop a broad range of innovative clinical training opportunities sufficient to provide for the burgeoning numbers of PA students across the country" (PAEA Strategic Plan, August 2013). Now, more than ever, there is a need for programs to build relationships with each other, at the clinical coordinator, program director, and institutional leadership levels, fostering a value of collaboration by working together with clinical training sites rather than competing against one another.

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GUIDELINES OF COURTESY

PAEA, through its Committee on Clinical Education, recognizes and endorses the following voluntary guidelines on collaboration between PA programs regarding the use of clinical training sites:

- 1 PAEA member programs and their entire faculty and staff, including program directors and clinical faculty, agree to a value of cooperation and collaboration in the use of clinical training sites and preceptors.
- Programs should recognize the need for communication among their program directors and clinical faculty, and the need for all clinical training sites and preceptors to be asked by clinical faculty if they are or have been preceptors for other PA programs. If so, these programs should communicate in order to seek out cooperative and collaborative arrangements.
- Programs that use a clinical training site and preceptor who has been identified as having been previously used by other programs should follow up with those programs concerning the quality of the experience.
- 4 Programs and clinical faculty agree to be sensitive to the issue of preceptor burnout when collaborating on the use of clinical training sites and preceptors.
- Programs collaborating on the use of clinical training sites should consider innovative clinical training opportunities such as team-based training models and other new and alternative experiences.

As clinical faculty strive to meet their goals of securing the necessary training sites and quality preceptors, it is important to remember the fundamental aspect of professionalism instilled in PA students – **teamwork**. It is crucial that programs demonstrate teamwork, not just within their own program, but with other programs as well. If faculty overlook the value of teamwork and lose the sense of basic courtesy, students will recognize the discrepancy between what is taught and what is actually done in practice in educational settings.

RECOMMENDATIONS

Understanding the guidelines and knowing how to put them into practice are two completely different things. To help aid faculty in adhering to the guidelines, members from **PAEA's Committee on Clinical Education** have developed the following suggestions:

HOW TO IMPROVE COMMUNICATION AMONG PROGRAMS

 Participation in regional clinical coordinator groups or retreats provides excellent opportunities for networking, mentoring, and discussions on topics of importance to clinical educators in your area. Though these guidelines were initially developed well over a decade ago, their core values remain just as relevant, if not more so, in today's rapidly changing health care and education environment. The idea behind these guidelines is simple:

Working together in a courteous, collaborative manner will benefit students, programs, and the PA profession as a whole.



- Contact other clinical educators directly via email or telephone to discuss opportunities for collaboration and clinical site sharing. Contact information can be accessed via the Faculty Directory on the PAEA website or through the PA program's website.
- If contacted by **students from other programs** for assistance with clinical rotation placements, inform students that such requests must originate from their program's clinical coordinator. Following this process reduces miscommunication and duplication of efforts.
- Programs should communicate about open slots. If a program has 10 open slots in
 a location or specialty but can only fill eight of those slots, the program could offer
 those other extra training opportunities to programs in the area that may be looking
 for training slots.

HOW TO IMPROVE COLLABORATION AMONG PROGRAMS

- Avoid clinical site placement practices that would knowingly displace students from other PA programs or restrict those programs' ability to successfully place their students.
- If you are the gatekeeper for PA students at your facility or health care system, **simplify onboarding steps** for other programs interested in sharing or collaborating with you. This could be as simple as creating a checklist, including contact information, that another clinical educator could follow in order to satisfy your facility's onboarding requirements.
- Consider sharing with other programs clinical sites that you use infrequently or occasionally, perhaps due to distance from your program or specialized elective rotations. This is a win-win-win situation because preceptors at these sites often request more students, and other programs that are struggling to place students will be most appreciative of your assistance. This value of congeniality could foster a relationship with that program to involve reciprocity in the future.
- Avoid placing students with professionalism or academic issues at shared clinical sites or sites with which you are considering collaborative efforts. Keep in mind that students with "poor interpersonal skills, lack of interest and enthusiasm, rudeness, disrespectfulness, and unpreparedness can actually deter preceptors from precepting." (from "Tales from the Trenches")
- Include preceptors in the conversation about collaborating with other PA programs. Ask if they are currently precepting students from other programs, and inform preceptors of your interest in contacting those programs in the value of collaboration. This is critical to avoid potential preceptor burnout; if a preceptor becomes burned out and they stop taking students, then everyone loses.
- **Develop and promote your student participation** in educational opportunities between PA programs before and during clinical rotations. Encouraging these activities sends a message that cooperation between programs is important to students, faculty, alumni, and administration.



- Consider partnering with a neighboring program when negotiating for potential clinical sites. This strategy can be especially helpful when your own negotiation efforts have stalled, and neighboring programs may have ongoing positive relationships with the clinical site in question.
- Consider joining organizations, both private and statewide, that offer centralized scheduling systems for clinical site placements. These organizations may be administered by regional consortia or collaboratives.
- **Engage the program director**, medical director, and clinical coordinator in collaborative efforts.

WHERE TO FIND FACULTY DEVELOPMENT OPPORTUNITIES AND PEER-TO-PEER MENTORING AS A CLINICAL COORDINATOR

- Take advantage of the PAEA Listserv! Seeking advice and feedback from both experienced and new clinical educators can save time and effort when struggling with unfamiliar situations. You will find the CCE Listserv to be a welcoming, supportive, and friendly community!
- Attend the PAEA Education Forum. The annual Forum always proves to be a wonderful opportunity for networking, mentoring, and sharing ideas with other clinical educators.
- **Sign up for a Pando™ workshop.** PAEA offers both basic and enhanced clinical coordinator faculty development workshops. These workshops offer an excellent way to network and collaborate with other PA faculty, as well as an opportunity to discuss challenges and share solutions.
- Consider volunteering for the Committee on Clinical Education, which is responsible for developing and overseeing resources and initiatives related to the clinical phase of entry-level PA education. The committee has created resources such as the Clinical Educator's Handbook and the Preceptor Handbook, and is constantly looking at and discussing the trends and innovations in clinical education.
- **Share your expertise** and best practices with others via publications (e.g., *Journal of Physician Assistant Education*), presentations at Education Forums and conferences, and as a mentor to new clinical educators.
- **Disseminate successful collaboration models** through publications, Networker articles, and Forum presentations.



SOURCE LIST

¹ Association of Colleges of Nursing, American Association of Colleges of Osteopathic Medicine, Association of American Medical Colleges, Physician Assistant Education Association, "Recruiting and Maintaining U.S. Clinical Training Sites: Joint Report of the 2013 Multi-Discipline Clerkship/Clinical Training Site Survey" (2014).

² Jeff Nichols, "Guidelines of Courtesy Regarding Collaboration on the Use of Clinical Training Sites," *Perspective on Physician Assistant Education*, 10, no. 3 (1999): 143.

³Jeff Nichols, "Voluntary Guidelines for Program Collaboration on Clinical Training Sites," *Perspective on Physician Assistant Education*, 12, no. 2 (2001): 111.

⁴Nicholas M. Hudak, Patrick J. Enking, Carol Gorney, Rosana Gonzalez-Colaso, "Tales from the Trenches: Physician Assistants' Perspectives About Precepting Students" *Journal of Physician Assistant Education*, 25, no. 1 (2014): 12-19.