



Accreditation Review Commission on Education
for the Physician Assistant, Inc.

March 31, 2020

Statement from ARC-PA regarding COVID-19

The COVID-19 pandemic situation continues to dominate medical efforts in the United States. Medical providers are struggling across the country and there are notable deficits in numbers of health care workers in multiple states, especially in New York, California, and Washington.

The ARC-PA has had many email exchanges and understands that institutions and faculty members are working diligently to find ways to continue the education of their students during this difficult time. There have been some stellar education plans from programs submitted to the ARC-PA with innovative measures to progress students through the program, while assuring that program-defined competencies are met. Bravo! Faculty are making great strides in this way. The ARC-PA and PAEA will work collaboratively to continue to find alternative pathways to assure excellence in education while maintaining compliance with the standards.

Over the past weeks, there have been some frequently asked questions, so we'd like to reiterate some ideas provided in our statement from March 20, 2020 and address other matters that have come about in the past few days.

Student Safety

Q: Should students be allowed to go back to clinical rotations (if they were pulled or sent away from clinical sites)?

- Due to safety reports that indicate a lack of proper personal protection equipment (PPE) for healthcare providers, including PA students, *the Commission strongly supports programs removing students from clinical sites until the assurance of proper PPE is available.*

Q: Should students be encouraged to assist as volunteer health care workers in hard hit areas.

- Each region of the country has varying levels of COVID-19 cases and need for medical professionals. ARC-PA is aware of the Executive Order from Governor Andrew Cuomo in New York. His order stated, "Any healthcare facility is authorized to allow students, in programs to become licensed in New York State to practice as a healthcare professional,

to volunteer at the healthcare facility for educational credit as if the student had secured a placement under a clinical affiliation agreement, without entering into any such clinical affiliation agreement.” There are points that ARC-PA believes is important to emphasize:

- Students may choose to *volunteer* their services at a healthcare facility, but student volunteer hours do not count towards educational credit when there is no affiliation agreement to outline expected responsibilities of all parties, and no vetting of the clinical experience the student will have. For example, some medical students are simply entering patient data into computer systems or restocking equipment. Programs should work very closely with their legal counsel before suggesting students volunteer for public service.
- Messaging from program and institutional leadership must emphasize volunteering is for humanitarian reasons only and ensure students do not feel pressure to participate.
- It is also imperative to note that volunteerism is not typically covered by malpractice insurance. Again, programs should consult legal counsel related to student malpractice coverage.

Supervised Clinical Practice Experiences (SCPES) and Student Progression

Some programs have made adjustments to their clinical rotations schedule and posed the following questions:

Q: Our faculty conducted a gap analysis based on clerkship learning outcomes, program competencies, and logging of patient encounters based on required setting (inpatient, outpatient, operating room, and emergency department), care across the life span, and level of care (preventive, emergent, acute, and chronic). For the final rotation, we looked to see if we felt the student met the competencies/learning outcomes for their assigned rotation even if they were achieved in a previous rotation. If we determine they did, they will receive either an abbreviated clinical rotation and/or alternative learning activities most likely delivered online. Is this acceptable?

YES! The ARC-PA believes many programs have flexibility in how requirements for SCPEs are met (this is not new). For example, many programs do not have a behavioral medicine/psychiatry rotation, but students are getting the patient exposures in other rotations, work with appropriate preceptors and have experiences in the appropriate settings over the course of their SCPE experiences. It is up to programs to track each student’s experiences and then to assess student competency against program-defined expectations.

Q: AAMC has allowed for flexibility in graduation requirements? Why won't ARC-PA do that? Can "online rotations" substitute for SCPEs.?

The ARC-PA has received this question more than any other. There are a couple of points that must be noted. First, the AAMC is *not* an accrediting body. It is one of the sponsors of LCME (which is the accrediting body). LCME clearly stated in its March 25, 2020 statement <https://lcme.org/wp-content/uploads/filebase/March-25-2020-LCME-Guidance-for-Medical-Schools-Considering-Early-Graduation-Option.pdf> "The medical school should review its educational program objectives (EPOs), the learning objectives of its required courses and clerkships, and required clinical experiences and skills. If students have met these requirements and been assessed on these required learning objectives, they may be eligible for early graduation." The ARC-PA agrees with this statement.

Second, some programs have informed their students that the ARC-PA has limited their ability to graduate as scheduled but have not considered alternatives to *their own program-required content* not mandated by ARC-PA Standards. Other programs have completed assessments and have made minor adjustments to SCPEs (most often to elective rotations) that allow students to either complete or come very near to completing all graduation and competency requirements as determined by the program. The ARC-PA has never mandated graduation requirements. That is left to the program and the institution, but those requirements are expected to align with the ARC-PA standards. Programs may change their graduation requirements (without a 6 month approval from ARC-PA). Programs are encouraged to work within their institutions to determine whether graduation requirements can be temporarily adjusted, while staying in compliance with the standards, including those related to fair practices.

Also, please remember that most medical students will graduate and attend a residency. Most PA students do not enter post-graduate residencies. It is imperative that there are not drastic 'short-cuts' made to PA education that may release graduates who are not ready for practice. This will ultimately reflect poorly on the program and the PA profession and compromise patient safety. It is the responsibility of the program to assess students to determine they have met program-required competencies prior to graduation.

ARC-PA's response

Q: What can ARC-PA do to help programs?

The ARC-PA has been monitoring the COVID-19 situation and is in constant communication with our cross-organization leadership colleagues (AAPA, NCCPA, and PAEA). We will continue to collaborate with PAEA to address issues related to PA education and COVID-19. We will continue to meet to determine potential solutions for assisting programs in understanding the accreditation standards and what flexibility the program may have in delivery of its educational components.

Q: Our institution plans to make changes to our matriculation date for the next cohort of students. Will we have to wait 6 months receive ARC-PA approval for this?

Programs are submitting their plans for changes to the ARC-PA and those requests are being expedited. The average time for a response is 1-2 weeks. All change forms are found on the ARC-PA website.

As always, the ARC-PA appreciates the dedication of programs to provide quality PA education. We extend our hope for your safety and wellness during the COVID-19 pandemic.

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