

Reference Guide





# About the document

Exxat Prism supports comprehensive reporting based on **Clinical Education Data** for the purpose of accreditation.

## These include:

- Site, Slots, and Placement related reports
- Learning activities reports
- Student performance reports

This document describes the reports that can be useful to address specific standards as well as for inclusion with the corresponding Self Study Report (SSR), as appropriate.



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## Clinical Education Related Reports

## **Accreditation Standard – B3.01**

## Requirement

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The program *must* secure clinical sites and *preceptors* in *sufficient* numbers to allow all clinical students to meet the program's *learning outcomes* for *supervised clinical practice experiences*.

#### **FOCUSED QUESTIONS**

- What are the required and elective rotations?
- How many sites and preceptors (i.e. clinical placements) for the year for each SCPE course are secured?
- Do you have sites and preceptors for all clinical year students to meet the learning outcomes for SCPEs?
- Do you have any overlap of SCPEs (is tne clinical year longer than 12 months)? If yes, how is this handled?

#### **ESSENTIAL EVIDENCE**

- . List of clinical sites and the signed affiliation agreements with facilities that have agreed to accept students for clinical rotations.
- Documentation that identifies the specific number of students each site has agreed to supervise per year.
- Provisional (applicant) program must demonstrate sufficient clinical placements for their requested maximum class size.
- Accredited programs must demonstrate sufficient clinical placements for their current clinical cohort(s) of students.
- Sufficiency must address any overlap of cohorts during the clinical phase of the program.
- Clinical sites must be sufficient in number to allow every student to have experiences needed to meet the program's learning outcomes.

#### Of note:

- The ARC-PA defines supervised clinical practice experiences (SCPEs) as: Supervised student encounters with patients that include comprehensive patient assessment and involvement in patient care decision making and which result in a detailed plan for patient management.
- Programs may be able to use virtual experiences, simulation or other technology to meet some of the program defined learning
  outcomes for SCPEs, but the expectation is that SCPEs will include direct patient care, meet the program defined learning outcomes,
  and be of sufficient breadth and depth to prepare students for the clinical practice of medicine.

## Self Study Report

Can be included in Appendix 11a of the SSR.

## **Best Practice**

- Utilize Exxat Prism's Slot Request functionality to get information on the confirmed slots from your clinical sites for your SCPE scheduling. This way, the 'slots offered' column shows you true confirmed availability.
- Ensure that Affiliation agreements are uploaded on Exxat Prism. If the agreement
  covers multiple programs/departments of the University, ensure that it specifically
  calls out 'PA students' coverage in them. Multiple PA programs have received
  citations on this standard lately due to these agreements covering the medical
  school/allied health school in general and not calling out 'PA program students'
  explicitly.

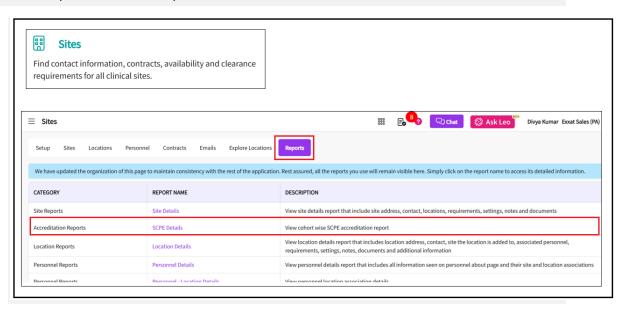
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## **Exxat Prism: Reports**

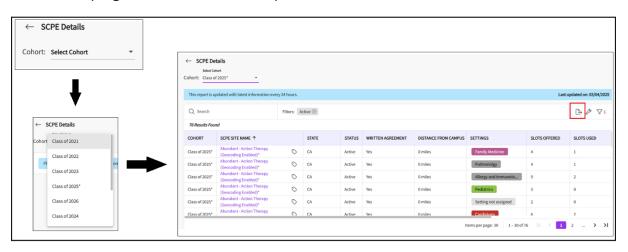
1. SCPE Report

## **Navigation in Exxat Prism**

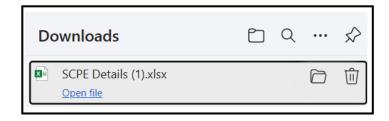
## Sites → Reports → SCPE report



- 1. Select the cohort undergoing the clinical year.
- 2. In the top right of the table, click Export to Excel.

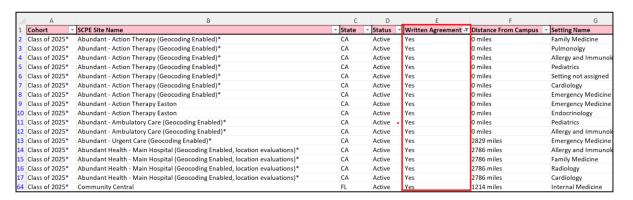


3. Open the downloaded excel file.

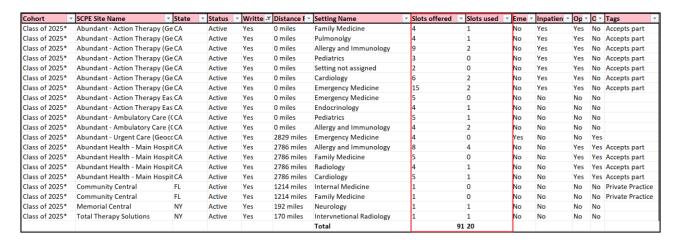


4. In the excel file, filter by Written Agreements marked as Yes.





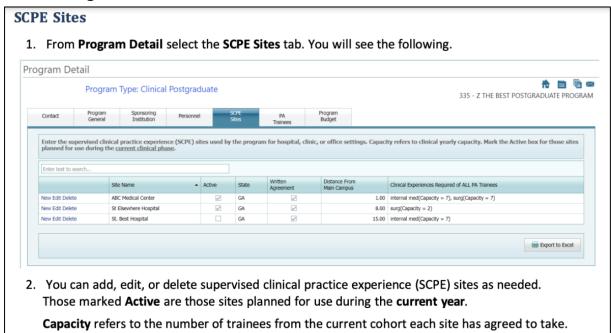
- 5. To demonstrate sufficiency, slots available per setting should be more than slots used to place students in that setting for a given cohort. To get this, on the SCPE downloaded Excel report:
  - a. Filter by Setting name and
  - b. Manually run the total number of slots given versus used for each setting.



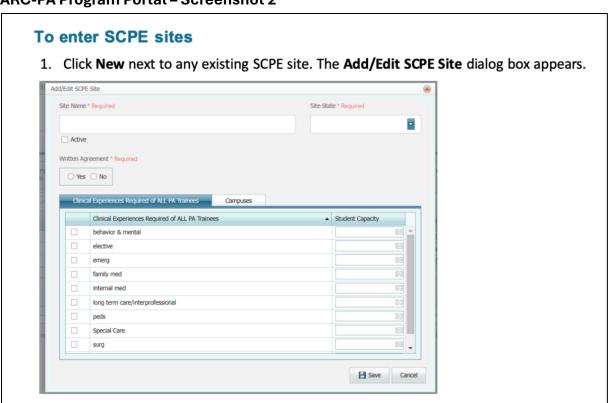
This SCPE report can be used to enter SCPE data on the ARC-PA program portal.



## ARC-PA Program Portal - Screenshot 1



## ARC-PA Program Portal - Screenshot 2



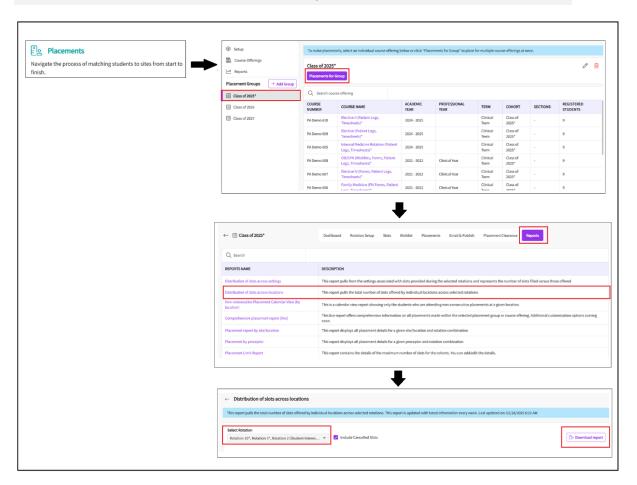
## 2. Distribution of slots by location

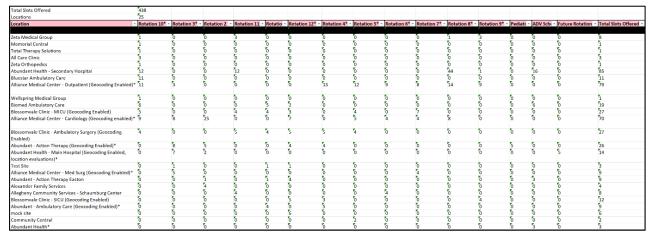
This is another report that provides total slots and total locations for a cohort.

## **Navigation in Exxat Prism**



Placements → Placement group → Reports → Distribution of slots across locations → Select Rotation → Download report





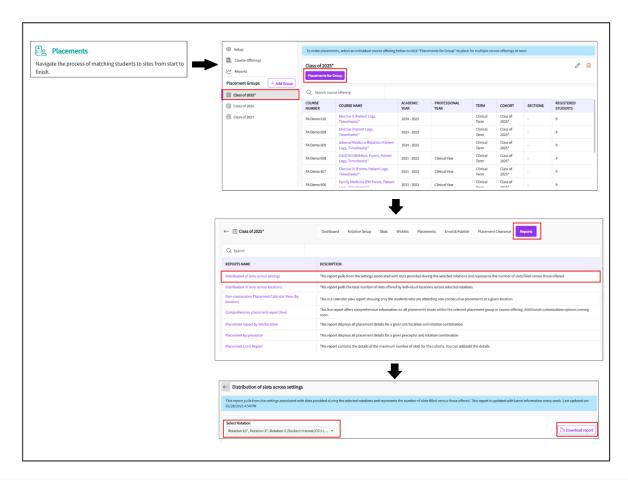
## 3. Distribution of slots by setting

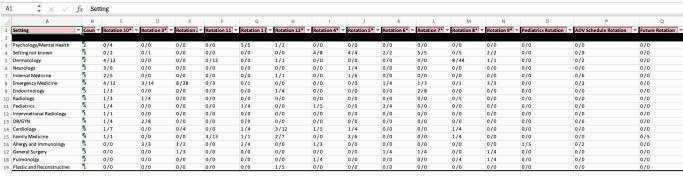
This report provides settings associated with slots provides during the selected rotations and represents the number of slots filled versus those offered.

## **Navigation in Exxat Prism**

Placements  $\rightarrow$  Placement group  $\rightarrow$  Reports  $\rightarrow$  Distribution of slots across settings  $\rightarrow$  Select Rotation  $\rightarrow$  Download report

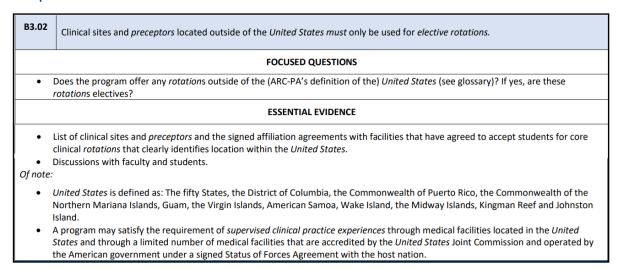






## Accreditation Standard - B3.02

## Requirement



## Self Study Report

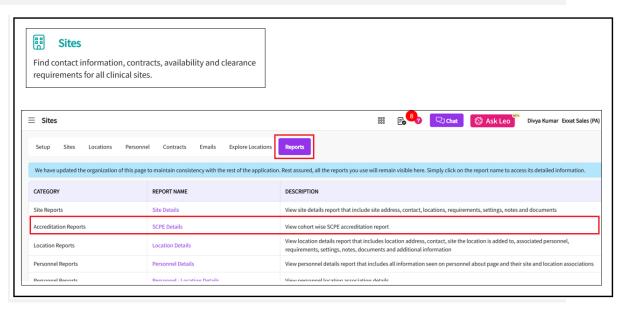
Can be included in Appendix 11a of the SSR.

## **Exxat Prism: Reports**

1. SCPE Report

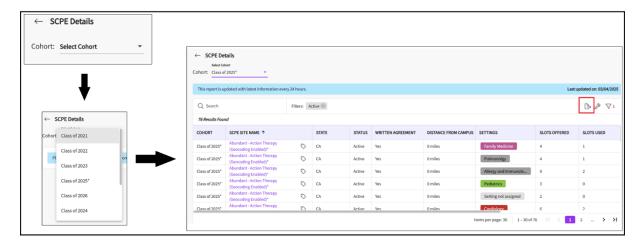
## **Navigation in Exxat Prism**

## Sites → Reports → SCPE report



- 1. Select the cohort undergoing the clinical year.
- 2. In the top right of the table, click Export to Excel.

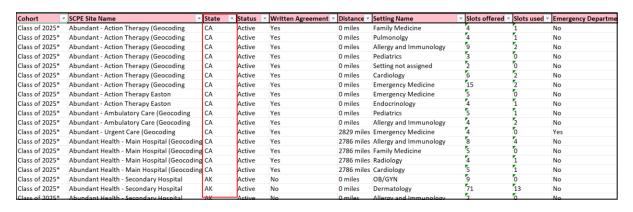




3. Open the downloaded excel file.



4. In the excel file, filter by state.





## Accreditation Standard – B3.03 a-e

## Requirement

**B3.03a** Supervised clinical practice experiences must enable all students to meet the program's learning outcomes:

a) for preventive, emergent, acute, and chronic patient encounters,

#### **FOCUSED QUESTIONS**

- What are the program's learning outcomes for preventive patient encounters?
- What are the program's learning outcomes for emergent patient encounters?
- · What are the program's learning outcomes for acute patient encounters?
- What are the program's learning outcomes for chronic patient encounters?
- How does the program verify that all students were able to meet the program's learning outcomes?

#### **ESSENTIAL EVIDENCE**

- Program has clearly defined for students and preceptors, the learning outcomes (the medical knowledge, interpersonal, clinical and technical skills, professional behaviors, clinical reasoning and problem-solving abilities) that must be attained by each student at the completion of each supervised clinical practice experience (SCPE).
- The learning outcomes, at minimum, address the requirements of the standard.
- Learning outcomes for patient encounters addressing all aspects of the sub-standards are listed in rotation syllabi or appendix to the
  syllabi (i.e. clinical handbook, preceptor handbook, learning management system, etc.) that are available to students and preceptors.
- The program must have a process to evaluate sites for the experiences needed for students to meet the learning outcomes.
- The program must have a process to evaluate preceptors' ability to meet the learning outcomes. Specific details about preceptor evaluation will be addressed in B3.07a-g.
- The program must state how it will determine the SCPE has enabled the student to meet each program required learning outcomes
  specific to each substandard. This could include assessment of the learning outcomes or other means to determine the SCPE enabled
  the student to meet the learning outcomes. Specific details about outcome assessment will be addressed in B4.01.

**B3.03b** Supervised clinical practice experiences must enable all students to meet the program's learning outcomes:

b) across the life span, to include infants, children, adolescents, adults, and the elderly,

#### **FOCUSED QUESTIONS**

- What are the program's learning outcomes for infants?
- · What are the program's learning outcomes for children?
- What are the program's learning outcomes for adolescents?
- What are the program's learning outcomes for adults?
- What are the program's learning outcomes for the elderly?
- How does the program verify that all students were able to meet the program's learning outcomes?

#### **ESSENTIAL EVIDENCE**

- Program has clearly defined for students and preceptors, the learning outcomes (the medical knowledge, interpersonal, clinical and technical skills, professional behaviors, clinical reasoning and problem-solving abilities) that must be attained by each student at the completion of each supervised clinical practice experience (SCPE).
- The learning outcomes, at minimum, address each component of the standard.
- Learning outcomes for patient encounters addressing all aspects of the sub-standards are listed in rotation syllabi, clinical handbook, preceptor handbook and/or other documents available to both students and preceptors.
- Learning outcomes for patient encounters addressing all aspects of the sub-standards are listed in rotation syllabi or appendix to the syllabi (i.e. clinical handbook, preceptor handbook, learning management system, etc.) that are available to students and preceptors.
- The program must have a process to evaluate sites for the experiences needed for students to meet the learning outcomes.
- The program *must* have a process to evaluate *preceptors*' ability to meet the *learning outcomes*. Specific details about *preceptor* evaluation will be addressed in B3.07a-g.
- The program must state how it will determine the SCPE has enabled the student to meet each program required learning outcomes
  specific to each substandard. This could include assessment of the learning outcomes or other means to determine the SCPE enabled
  the student to meet the learning outcomes. Specific details about outcome assessment will be addressed in B4.01.

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B3.03c Supervised clinical practice experiences must enable all students to meet the program's learning outcomes:

c) for women's health (to include prenatal and gynecologic care),

#### **FOCUSED QUESTIONS**

- What are the program's learning outcomes for women's health?
- What are the program's learning outcomes specific to prenatal care?
- What are the program's learning outcomes specific to gynecological care?
- How does the program verify that all students were able to meet the program's learning outcomes?

#### **ESSENTIAL EVIDENCE**

- Program has clearly defined for students and preceptors, the learning outcomes (the medical knowledge, interpersonal, clinical and technical skills, professional behaviors, clinical reasoning and problem-solving abilities) that must be attained by each student at the completion of each supervised clinical practice experience (SCPE).
- The learning outcomes, at minimum, address each component of the standard.
- Learning outcomes for patient encounters addressing all aspects of the sub-standards are listed in rotation syllabi or appendix to the syllabi (i.e. clinical handbook, preceptor handbook, learning management system, etc.) that are available to students and preceptors.
- The program must have a process to evaluate sites for the experiences needed for students to meet the learning outcomes.
- The program must have a process to evaluate preceptors' ability to meet the learning outcomes. Specific details about preceptor evaluation will be addressed in B3.07a-g.
- The program must state how it will determine the SCPE has enabled the student to meet each program required learning outcomes specific to each substandard. This could include assessment of the learning outcomes or other means to determine the SCPE enabled the student to meet the learning outcomes. Specific details about outcome assessment will be addressed in B4.01.

B3.03d

Supervised clinical practice experiences must enable all students to meet the program's learning outcomes:

d) for conditions requiring surgical management, including pre-operative, intra-operative, post-operative care, and

#### **FOCUSED QUESTIONS**

- What are the program's learning outcomes for conditions requiring surgical management?
- What are the program's learning outcomes specific to pre-operative care?
- What are the program's learning outcomes specific to intra-operative care?
- What are the program's learning outcomes specific to post-operative care?
- How does the program verify that all students were able to meet the program's learning outcomes?

#### **ESSENTIAL EVIDENCE**

- Program has clearly defined for students and preceptors, the learning outcomes (the medical knowledge, interpersonal, clinical and technical skills, professional behaviors, clinical reasoning and problem-solving abilities) that must be attained by each student at the completion of each supervised clinical practice experience (SCPE).
- The learning outcomes, at minimum, address each component of the standard.
- Learning outcomes for patient encounters addressing all aspects of the sub-standards are listed in rotation syllabi or appendix to the syllabi (i.e. clinical handbook, preceptor handbook, learning management system, etc.) that are available to students and preceptors.
- The program must have a process to evaluate sites for the experiences needed for students to meet the learning outcomes.
- The program must have a process to evaluate preceptors' ability to meet the learning outcomes. Specific details about preceptor evaluation will be addressed in B3.07a-g.
- The program must state how it will determine the SCPE has enabled the student to meet each program required learning outcomes specific to each substandard. This could include assessment of the learning outcomes or other means to determine the SCPE enabled the student to meet the *learning outcomes*. Specific details about outcome assessment will be addressed in B4.01

B3.03e

Supervised clinical practice experiences must enable all students to meet the program's learning outcomes:

e) for behavioral and mental health conditions

#### **FOCUSED QUESTIONS**

- What are the program's learning outcomes for behavioral and mental health conditions?
- How does the program verify that all students were able to meet the program's learning outcomes?

#### **ESSENTIAL EVIDENCE**

- Program has clearly defined for students and preceptors, the learning outcomes (the medical knowledge, interpersonal, clinical and technical skills, professional behaviors, clinical reasoning and problem-solving abilities) that must be attained by each student at the completion of each supervised clinical practice experience (SCPE).
- The *learning outcomes*, at minimum, address each component of the standard.
- Learning outcomes for patient encounters addressing all aspects of the sub-standards are listed in rotation syllabi or appendix to the syllabi (i.e. clinical handbook, preceptor handbook, learning management system, etc.) that are available to students and preceptors.
- The program must have a process to evaluate sites for the experiences needed for students to meet the learning outcomes.
- The program must have a process to evaluate preceptors' ability to meet the learning outcomes. Specific details about preceptor evaluation will be addressed in B3.07a-g.
- The program must state how it will determine the SCPE has enabled the student to meet each program required learning outcomes specific to each substandard. This could include assessment of the learning outcomes or other means to determine the SCPE enabled the student to meet the learning outcomes. Specific details about outcome assessment will be addressed in B4.01.



B3.03 a-e standard requires you to define the program outcomes for each of the above categories, make stakeholders aware, describe the process, methods, and data that students have achieved the learning outcomes in the categories called out in the standard. This requires assessment data based on evaluation by preceptors/faculty.

## **Best practice**

- Define Program learning outcomes covering all the above categories from a-e.
- These learning outcomes should be listed in the course syllabi as well as rotation evaluations.
- Course syllabi should be shared with students and preceptors in Exxat Prism

## Self Study Report

Can be included in Appendix 14D of the SSR.

## Exxat Prism: Reports

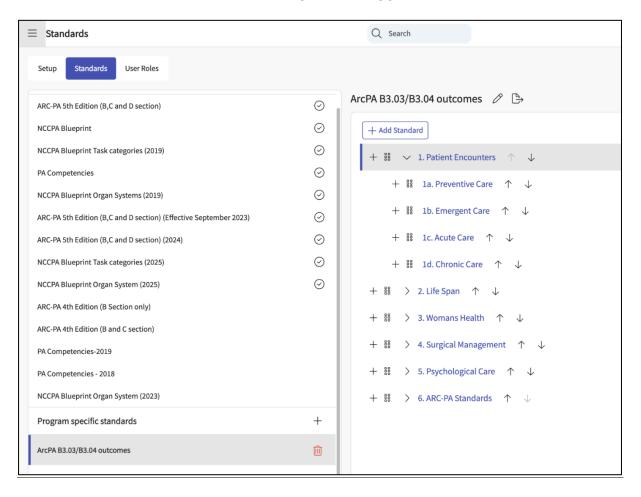
## 1. Competency tracking report

Exxat Prism's Competency tracking report based on evaluations demonstrates achievements.

#### Setup

a) Create a program specific standard and name it **ARC-PA B3.03/ B3.04 outcomes**. The ARC-PA B3.03/ B3.04 outcomes program covers the requirements categories a-e mentioned in the Accreditation Standard #B3.03 a-e.





- b) Map evaluation questions to the requirements categories a-e.
- c) View student performance on each of the requirement categories a-e.

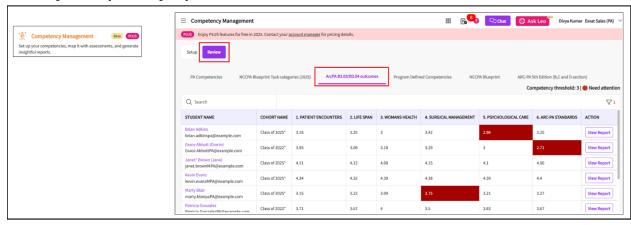
For more information see, <u>Competency Framework Configuration and Management guide</u>

## **Navigation in Exxat Prism**

Competency Management → Review → Select competency -ArcPA B3.03/B3.04 outcomes

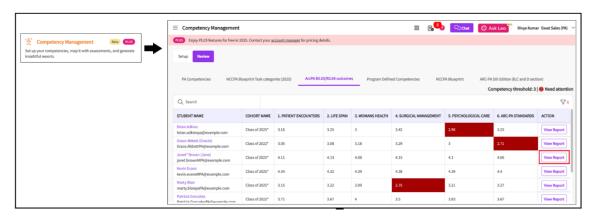


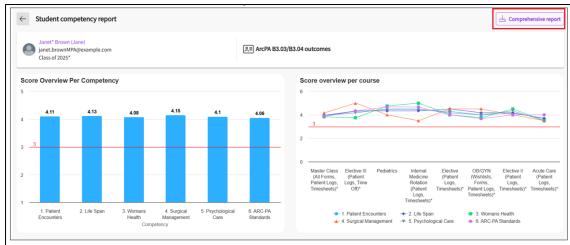
## Birds eye competency report at cohort level



## Competency report per student

Click on the View Report button for the student.







zirian iai janetio	rownMPA@example.com											
		Master Class T	(All Forms, Pairmesheets)*		Elective III (Patient Logs, Time Off)*	Pediatrics	Internal Medicine Rotation (Patient Logs, Timesheets )*	Elective (Patient Logs, Timesheets)	OB/GYN (Wishlists, Forms, Patient Logs, Timesheets	Elective II (Patient Logs, Timesheet	Acute Care (Patient Logs, Timesheets)	
	Competencies	Preceptor Evaluation of Student - Emergency medicine (Score hidden from Preceptor and Student)	Preceptor Evaluation of Student - Emergency medicine (Scoring - Sum of Question Scores)	Preceptor Evaluation of Student (Emergency	Preceptor Evaluation of Student (Emergenc y Medicine)	Preceptor Evaluation	Evaluation of Student	Preceptor Evaluation of Student (Emergency Medicine)	Evaluation of Student (Emergenc y	у		No. of times evaluated
	1a(4.16)	3.8	4			4.4	4.4	4.4	4.2	4.4	3.4	5
4/4 22)	1b(4.03)	3.83	3.86	4	4.17	4.33	4.5	4.17	3.83	4.17	3.5	6
1(4.11)	1c(4.08)	3.6	4.17	3.8	4.6	4.4	4.2	4.2	4	4	3.8	
	1d(4.23)	3.33	4.25	4.67	4.67	4.33	4	4.33	4.67	4.33	3.67	
	2a(4.13)	4	4.25	4.67	4.33	4	4	4.67	4	4	3.33	
	2b(4.05)	4	3.5	4.5	4.25	4	4.25	4.5	4	4	3.5	
2(4.13)	2c(4.04)	4	3.5	4.2	4.2	4.2	4.4	4.4	4	4.2	3.4	
	2d(4.04)	4	3.4	4.2	4.2	4.2	4.4	4.4	4	4.2	3.4	
	2e(4.03)	4	3.75	4.67	4	4	4.33	4.33	4	4.33	3	
3(4.08)	3a <b>(4.2)</b>	4	3.5		0.0		5	4.5	4	4.5		
3(4.00)	3b(4.08)	3.75	3.75		0170	4.75	5	4	3.75	4.5		
	4a(4.15)	3.5	4.5			4	3.5	4.5	4.5	4	3.5	
4(4.15)	4b(4.15)	3.5	4.5	4.5	5	4	3.5	4.5	4.5	4	3.5	
	4c()	0	0	0	C	0	0	0	0	0	0	
6(4.1)	5a <b>(4.2)</b>	3.25	4		4.25	5	4.75	4	4.25	4.5	4	
/(¬·±)	5b <b>(4.03)</b>	4	3.5			4.25	4.5	4.25	4	4.5	3	
<u> </u>	6a(4.06)	3.67	4.17	3.33	4.33	4.67	4.67	4	3.67	4	4	
	6b(4.23)	4	4.25	4	5	4	4	5	4	3	5	
			4.2	3.33	4.33	4.67	4,67	4	3,67	4	4	
6(4.06)	6c(4.06)	3.67	4.2	3,33	4.55	4.07	4.07	4	3.07	4	4	

## Course based report at a student level

	COURSES AND ASSESSMENTS	1. PATIENT ENCOUNTERS	2. LIFE SPAN	3. WOMANS HEALTH	4. SURGICAL MANAGEMENT	5. PSYCHOLOGICAL CARE	6. AR
>	Master Class (All Forms, Patient Logs, Timesheets)*	3.95	3.95	3.83	4.17	3.94	3.85
>	Elective III (Patient Logs, Time Off)*	4.29	4.33	3.75	5	4.17	4.33
>	Pediatrics	4.43	4.33	4.75	4	4.5	4.67
>	Internal Medicine Rotation (Patient Logs, Timesheets)*	4.43	4.33	5	3.5	4.5	4.67
>	Elective (Patient Logs, Timesheets)*	4.29	4.5	4	4.5	4.17	4
>	OB/GYN (Wishlists, Forms, Patient Logs, Timesheets)*	4	4.17	3.75	4.5	4	3.67
>	Elective II (Patient Logs, Timesheets)*	4.14	4.17	4.5	4	4.33	4
>	Acute Care (Patient Logs, Timesheets)*	3.71	3.67	3.5	3.5	3.5	4

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## Accreditation Standard - B3.04 a-d

## Requirement

B3.04a	Supervised clinical practice experiences must occur in the following settings:
	a) emergency department,
	FOCUSED QUESTIONS
•	Do all students have a SCPE with designated time in the emergency department? How is that verified for every student?
	ESSENTIAL EVIDENCE
I ,	List(s) of clinical sites with settings compared to the clinical <i>rotation</i> schedule for planned <i>rotation</i> s (or case tracking for those who completed this) showing emergency department experiences.  Faculty and student evaluations of SCPEs.
Of note:	
	Urgent care centers may be used for <i>supervised clinical practice experiences</i> but do not replace the requirement to have students in an emergency department setting.

B3.04b	Supervised clinical practice experiences must occur in the following settings:						
	b) inpatient,						
	FOCUSED QUESTIONS						
•	Do all students have a SCPE in an inpatient setting? How is that verified for every student?						
	ESSENTIAL EVIDENCE						
	List(s) of clinical sites with settings compared to the clinical <i>rotation</i> schedule for planned <i>rotations</i> (or case tracking for those who completed this) showing inpatient experiences. Faculty and student evaluations of SCPEs.						

B3.04c	Supervised clinical practice experiences must occur in the following settings:  c) outpatient, and						
	FOCUSED QUESTIONS						
•	Do all students have a SCPE in an outpatient setting? How is that verified for every student?						
	ESSENTIAL EVIDENCE						
	List(s) of clinical sites with settings compared to the clinical <i>rotation</i> schedule for planned <i>rotation</i> s (or case tracking for those who completed this) showing outpatient experiences. Faculty and student evaluations of SCPEs.						

B3.04d	Supervised clinical practice experiences must occur in the following settings:							
	d) operating room.							
	FOCUSED QUESTIONS							
•	Do all students have a SCPE with designated experience in the operating room? How is that verified for every student?							
	ESSENTIAL EVIDENCE							
	List(s) of clinical sites with settings compared to the clinical <i>rotation</i> schedule for planned <i>rotation</i> s (or case tracking for those who completed this) showing operating room experiences. Faculty and student evaluations of SCPEs.							

B3.04 a-d standard requires programs to demonstrate the placement schedules for each student across all four settings. This can be showcased via four different reports. Data on patient encounters logged by students under the above settings, data from students

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## **Exxat Prism-Reports to Support PA Accreditation**

evaluating the sites and preceptors, and School admin/faculty assessing the sites and locations. Data collected from all these four mechanisms together can be a robust demonstration of adequate exposure across the above settings.

## Self Study Report

Can be included in Appendix 14D (Effectiveness of clinical curriculum) of the SSR.

## **Exxat Prism: Reports**

## 1. Patient log aggregate report

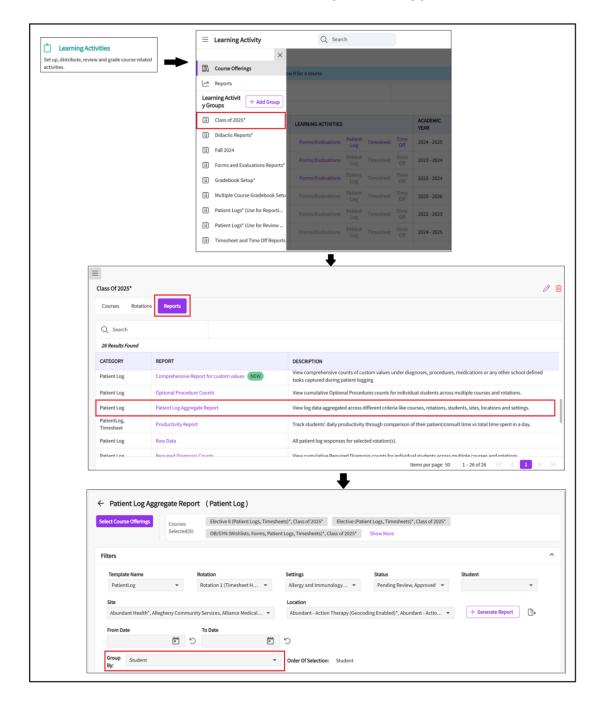
Exxat Prism's Patient log aggregate report demonstrates patient encounters in the above settings. Patient log aggregate report shows the number of patient encounters across ARC-PA settings and type of encounters, lifespan, women's health, and similar.

## **Navigation in Exxat Prism**

Learning Activities → Learning Activity group → Reports → Patient log aggregate report

Users can apply the appropriate Group by option to get the following reports.



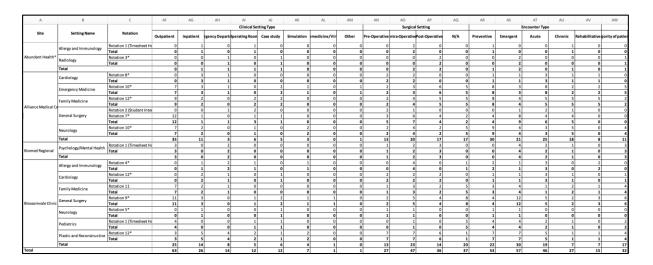




## a. Student based report (all students received sufficient exposure)

N	A	В	AE	AF	AG	AH	Al	AJ	AK	AL	AM	AN	AO	AP	AQ	AR	AS	AT	AU
1		Clinical Setting Type									Surgica	Setting		Encounter Type					
2	Student	Setting Name	Outpatient	Inpatient	gency Depart	perating Rooi	Case study	Simulation	medicine/Vi	Other	Pre-Operative	ntra-Operativ	Post-Operativ	N/A	Preventive	Emergent	Acute	Chronic	Rehabilitative
3		Psychology/Ment	3	0	2	0	0	0	0	0	1	2	3	0	0	4	2	1	. 0
4		Radiology	0	0	1	0	1	0	0	0	0	0	2	0	0	2	0	0	0
5		Total	3	0	3	0	1	0	0	0	1	2	5	0	0	6	2	1	. 0
6		Allergy and Immu	0	1	0	1	0	0	0	0	0	2	0	0	1	0	0	1	. 0
7	Adkins, Brian	Cardiology	0	3	1	0	0	0	0	0	2	2	0	0	1	1	3	1	. 1
8		Neurology	5	1	0	0	0	0	0	0	2	4	1	0	5	2	0	4	. 0
9		Total	5	5	1	1	0	0	0	0	4	8	1	0	7	3	3	- 6	1
10		Cardiology	0	2	1	0	1	0	0	0	2	2	2	0	1	1	3	1	. 0
11	Blair, Marty	Family Medicine	0	2	0	0	0	0	0	0	0	1	1	0	0	1	0	1	. 0
12	Diani, marcy	General Surgery	0	0	1	2	0	0	0	0	2	1	0	0	0	1	2	1	. 0
13		Total	0	4	2	2	1	0	0	0	4	4	3	0	1	3	5	3	. 0
14		Emergency Medic	7	3	1	0	2	1	0	1	2	3	6	5	8	3	8	2	. 2
15		Family Medicine	7	0	1	0	0	0	0	0	1	2	1	5	3	3	1	1	. 1
16	Brown, Janet*	General Surgery	23	4	0	2	3	1	1	0	5	11	8	10	8	20	9	6	, 3
17		Plastic and Recon		5	4	2	1	2	0	0	7	7	6	1	7	7	5	1	. 1
18		Total	40	12	6	4	6	4	1	1	15		21	21	26	33		10	
19		Allergy and Immu	0	1	2	1	0	1	0	0	0	4	0	1	2	1	3	0	2
20	Dixon, oma	Total	0	1	2	1	0	1	0	0	0	4	0	1	2	1	3	0	2
21		Family Medicine	9	2	0	2	2	0	0	0	2	4	5	5	8	4	5	5	. 5
22	Evans, Kevin	Neurology	2	2	0	1	1	2	0	0	1	1	1	5	5	3	3	1	. 0
23		Pediatrics	4	0	0		1	0	0	0	0	1	0	5	4	4	2	1	. 0
24		Total	15	4	0		4	2	0	0	3	6	6	15					,
25	Total		63	26	14	12	12	7	1	1	27	47	36	37	53	57	46	27	15

# b. Clinical Experience, Site and Setting-based report (All sites combined were able to cover experiences across all settings)



## 2. Student evaluates the preceptor report

## **Best Practice**

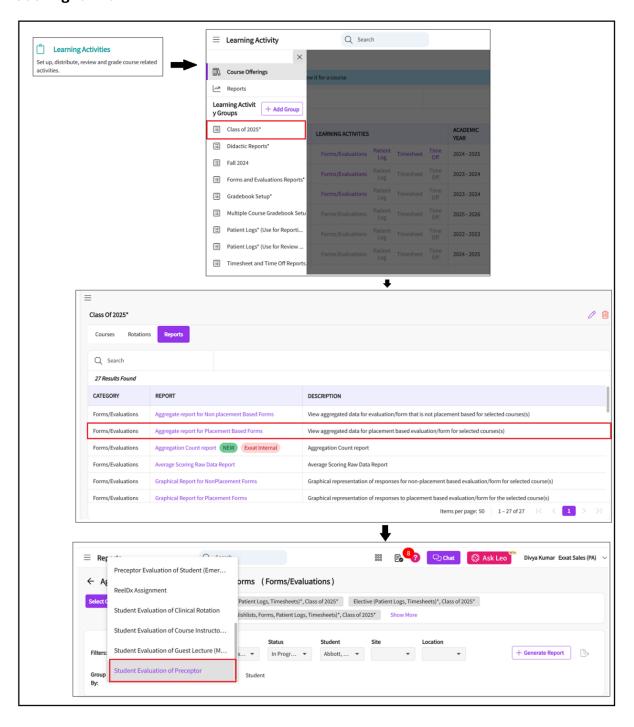
Setting up this form as a score-based form (rather than qualitative) allows schools to quantitate preceptor performance. It is possible to assign scores in the backend while still showing qualitative labels to students.

## **Navigation in Exxat Prism**

- For scoring forms: Learning Activities → Learning Activity Groups → Reports → Aggregate reports for placement based forms → Select Student evaluation of Preceptor form.
- For non-scoring forms: Learning Activities → Learning Activity Groups → Reports → Raw Data

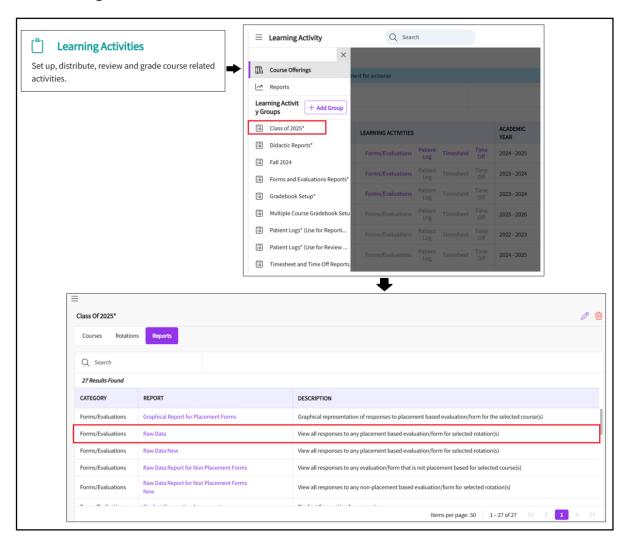


## **Scoring forms**





## Non-scoring forms



Students provide feedback on whether they received adequate training under the said preceptor. This report can be based on qualitative responses or score based depending on the response scale set by the program. Data collected depends on what questions are asked on the evaluation.



## Student evaluates preceptor (qualitative report)

A	8	С	D	E	F	G	Н	1	J	K	L.	М	N
Student	Location	Setting	Rotation	Rotation Start Date	RotationEnd Date	Course	Select Preceptor	The preceptor understood the clinical rotation's objectives identified in the syllabus.	There were adequate opportunities to discuss patient encounters with the preceptor.	3. The preceptor provided constructive feedback.	4. I was comfortable with the level of responsibility I was given.	5. I received adequate supervision by this preceptor.	Day to day issues and concerns were satisfactorily resolved through communication and coordination with the preceptor.
Brian Adkins	Alexander Family Services		Rotation 1 (Timesheet Hours)*	06/03/2024		Master Class (All Forms, Patient Logs, Timesheets)*		Strongly agree	Agree	Agree	Agree	Neither Agree nor Disagree	Strongly agree .
Brian Adkins	Alliance Medical Center - Cardiology (Geocoding enabled)*	Neurology	Rotation 10*	03/02/2025		Elective II (Patient Logs, Timesheets)*		Agree	Strongly agree	Strongly agree	Agree	Strongly agree	Strongly agree
Janet* Brown	Blossomvale Clinic - SICU (Geocoding Enabled)	Plastic and Reconstructive	Rotation 12*	05/01/2025	05/30/2025	Master Class (All Forms, Patient Logs, Timesheets)*		Disagree	Strongly agree	Agroe	Strongly agree	Agree	Agree
	Blossomvale Clinic - Ambulatory Surgery (Geocoding Enabled)		Rotation 2 (CEU credit hours)*	11/07/2022		Acute Care (Patient Logs, Timesheets)*		Strongly agree	Agree	Strongly agree	Strongly agree	Neither Agree nor Disagree	Agree .
Janet* Brown	All Care Clinic	Emergency Medicine	Rotation 6*	03/06/2023	12/31/2025	Internal Medicine Rotation (Patient Logs, Timesheets)*		Strongly agree	Agree	Agree	Strongly agree	Neither Agree nor Disagree	Agree
Janet* Brown	Alliance Medical Center - Cardiology (Geocoding enabled)*	Emergency Medicine	Rotation 10*	03/02/2025		Elective III (Patient Logs, Time Off)*		Strongly agree	Neither Agree nor Disagree	Agroe	Agroe	Strongly agree	Agree
Janet* Brown	Blossomvale Clinic - SICU (Geocoding Enabled)	General Surgery	Rotation 9*	02/03/2025	02/28/2025	Family Medicine (FM Forms, Patient Logs, Timesheets)*		Strongly agree	Agree	Agree	Strongly agree	Strongly agree	Agree
Janet* Brown	Adaptial - Wellington	Cardiology	Rotation 3*	12/05/2022		Elective IV (Forms, Patient Logs, Timesheets)*		Strongly agree	Strongly agree	Strongly agree	Strongly agree	Strongly agree	Strongly agree
Janet* Brown	Alliance Medical Center - Cardiology (Geocoding enabled)*	Family Medicine	Rotation 5*	10/04/2024		OB/GYN (Wishlists, Forms, Patient Logs, Timesheets)*		Strongly agree	Agroe	Agree	Strongly agree	Strongly agree	Agree

## Student evaluates preceptor (score based report)

Preceptor	No. of Forms completed	1. The preceptor understood the clinical rotation's objectives identified in the syllabus.	2. There were adequate opportunities to discuss patient encounters with the preceptor.
Alice Li	6	4.83	4
Amy Baker	1	5	4
Anthony Budge	1	5	5
George Bailey	3	4.67	4
John Smith	2	5	4
Kanthi Kalidindi	1	5	4
Mock Infinity	1	5	4
Skylar Ford	5	4.2	4.2
Terri Pierce	1	5	4
Average	22	4.73	4.1

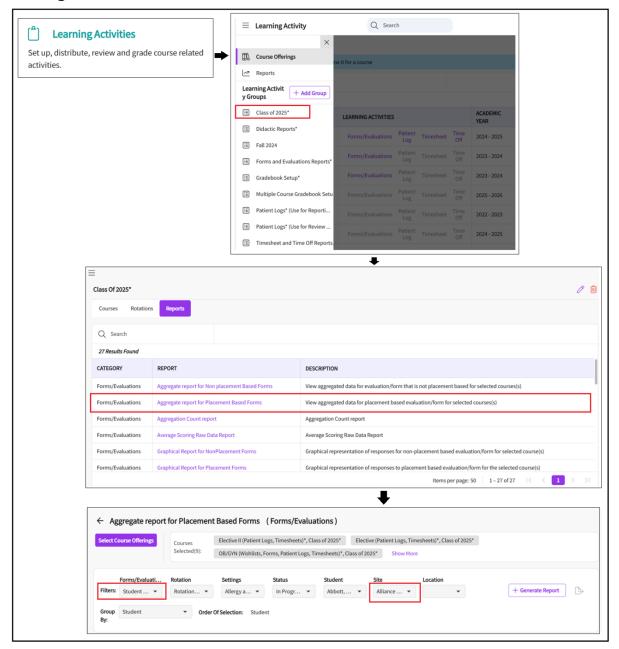
## 3. Student evaluates the site report

## **Navigation in Exxat Prism**

- For scoring forms: Learning Activities → Learning Activity Groups → Reports → Aggregate reports for placement based forms → Select Student evaluation of Preceptor form.
- For non-scoring forms: Learning Activities → Learning Activity Groups → Reports → Raw Data

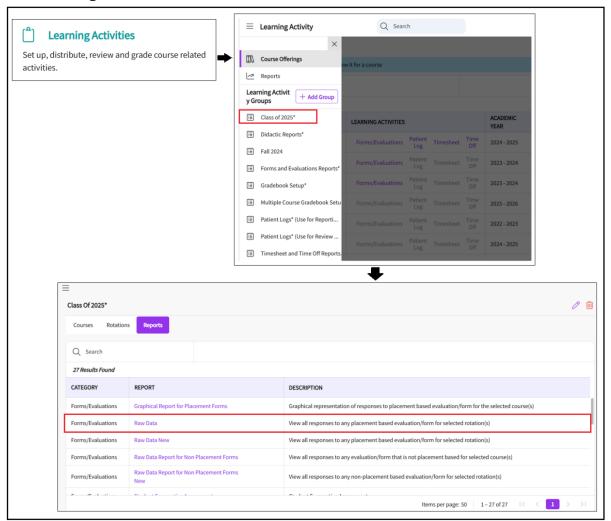


Scoring forms

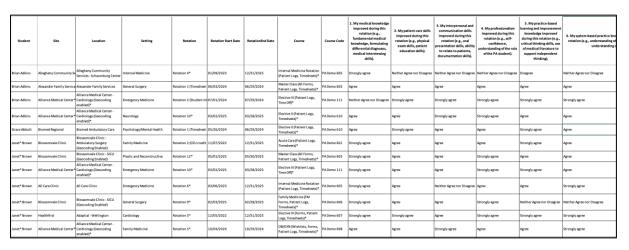




Non-Scoring Forms



Students provide feedback on whether they received adequate training under the placed location. This report can be based on qualitative responses or score based depending on the response scale set by the program. Data collected depends on what questions are asked on the evaluation.

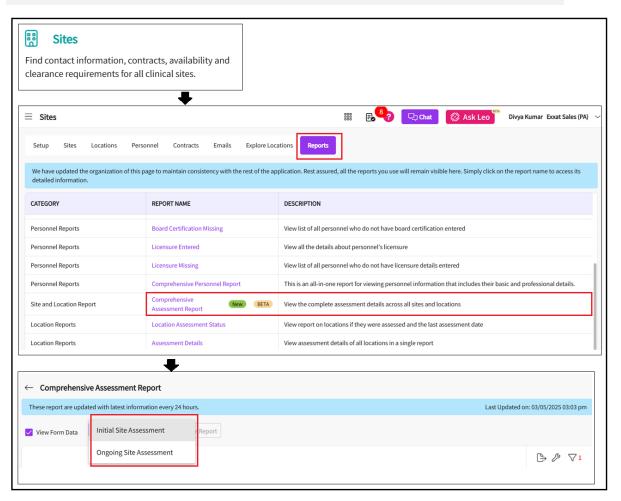


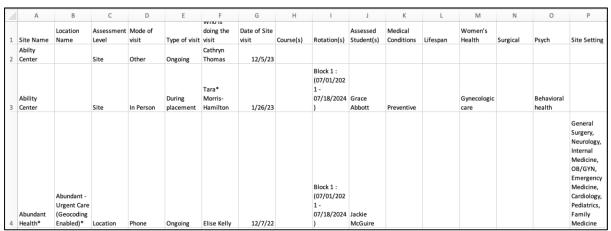
## 4. Site assessment report

School faculty/Admin has assessed that the locations provide the required exposure to students. The report can either be based on initial site visit or when student is in rotation at the location.

## **Navigation in Exxat Prism**

Sites  $\rightarrow$  Reports  $\rightarrow$  Comprehensive assessment report  $\rightarrow$  Select form





www.exxat.com 27 | Reference Guide: v1.0

## **Accreditation standard B3.05**

## Requirement

B3.05	Instructional faculty for the supervised clinical practice portion of the educational program must consist primarily of practicing physicians and PAs.							
	FOCUSED QUESTIONS							
	Are more than 50% of SCPE <i>preceptor</i> s physicians and PAs? What percent of <i>preceptor</i> s are physicians? PAs? Other?							
	ESSENTIAL EVIDENCE							
•	List of current <i>preceptors</i> including their credentials.							

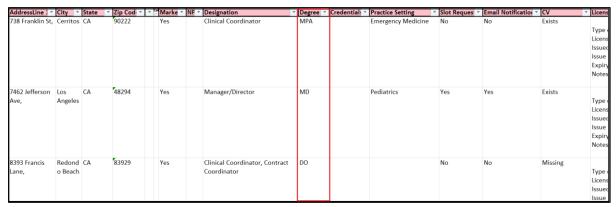
## **Exxat Prism: Reports**

1. Comprehensive personnel report

## **Navigation in Exxat Prism**

## Sites → Reports → Comprehensive personnel report





<u>www.exxat.com</u> **28** | Reference Guide: v1.0



## Accreditation Standard – B3.06 a-c

## Requirement

_		
В	3.06a	Supervised clinical practice experiences should occur with:
		a) physicians who are specialty board certified in their area of instruction,

#### **FOCUSED QUESTIONS**

- · Are all physician preceptors board certified in their area of instruction?
- What is the program process used to verify board certification of physician preceptors?
- If not BC, what are the circumstances unique to the program for using non-board certified physician *preceptors*? What compelling reason for their use in lieu of a board-certified *preceptor should* be presented to the Commission?
- If not BC, what is the process used by the program to evaluate physician preceptors to ensure they are appropriate instructors?

#### **ESSENTIAL EVIDENCE**

- List of all active licensed physicians, who currently precept the supervised clinical practice experiences/rotations, their area of
  instruction, and name of their associated clinical site. For each preceptor, provide current license type and expiration and board
  certification type (ABIM, ABFM, etc.) and expiration.
- If applicable, documentation of program evaluation of physician preceptors who are not board certified or not board certified in their
  area of instruction, to determine whether each is appropriate for the specified area of instruction.
- The ARC-PA will only consider supervised clinical practice experiences occurring with physician preceptors who are not board certified, or
  not board certified in their area of instruction, when those physicians are evaluated and determined by the program faculty to be
  appropriate for the specified area of instruction, under circumstances unique to the program, and a compelling reason for their use is
  provided to the Commission.
- If non-board certified preceptors are utilized, a comparison of outcomes from students precepting with board certified versus non-board certified physician preceptors is expected.

#### Of note:

See Glossary - the term should designates requirements so important that their absence must be justified by the program with a
compelling reason, acceptable to the Commission.

B3.06b	Supervised clinical practice experiences should occur with:										
	b) NCCPA certified PAs, or										
	FOCUSED QUESTIONS										

## Are all PA preceptors NCCPA certified?

- What is the program process used to verify NCCPA certification of PA preceptors?
- If not NCCPA certified, what are the circumstances unique to the program for using non-certified PA preceptors? What compelling reason
  for their use in lieu of a certified preceptor should be presented to the Commission?
- If not certified, what is the process used by the program to evaluate PA preceptors to ensure they are appropriate instructors?

#### **ESSENTIAL EVIDENCE**

- List of all active licensed PAs, who currently precept the supervised clinical practice experiences/ rotations, their area of instruction, and name of their associated clinical site. For each preceptor, provide current licensure and certification information, including expiration
- The ARC-PA will only consider supervised clinical practice experiences occurring with PA preceptors who are not NCCPA certified when
  those PAs are evaluated and determined by the program faculty to be appropriate for the specified area of instruction, under
  circumstances unique to the program.
- If non-board certified preceptors are utilized, a comparison of outcomes from students precepting with board certified versus non-board certified PA preceptors is expected.

#### Of note:

See Glossary - the term should designates requirements so important that their absence must be justified by the program with a
compelling reason, acceptable to the Commission.

www.exxat.com 29 | Reference Guide: v1.0

B3.06c Supervised clinical practice experiences should occur with: c) other licensed health care providers qualified in their area of instruction. **FOCUSED QUESTIONS** What other licensed health care providers are used as preceptors during the SCPEs? Are these other licensed health care providers certified (if available) in their area of instruction? What is the process used by the program to evaluate other licensed health care providers to ensure they are qualified preceptors in the area of instruction? **ESSENTIAL EVIDENCE** · List of all active licensed health care providers, who currently precept the supervised clinical practice experiences/ rotations, their area of instruction, and name of their associated clinical site. For each preceptor, provide current licensure and certification information, including expiration dates. The ARC-PA will only consider supervised clinical practice experiences occurring with other licensed health care provider preceptors when those health care providers are evaluated by the program's specific criteria for that discipline and determined by the program faculty to be appropriate and qualified for the specified area of instruction. Of note: Other licensed health care providers refers to any licensed provider (other than a physician or PA). This may include NPs, psychologists, midwives, etc. The standard states that these providers may be utilized as preceptors. However, they should be qualified in their area of instruction with supporting documentation. Nurse practitioners have specific areas of certification (WHNP, FNP, etc.) that should be reported and considered when evaluating the preceptor. See Glossary - the term should designates requirements so important that their absence must be justified by the program with a compelling reason, acceptable to the Commission.

## **Exxat Prism: Reports**

## 1. Comprehensive personnel report

## **Navigation in Exxat Prism**

## Sites → Reports → Comprehensive personnel report





Last Name	First Name	Email v	Marked as CI	Degree 🔻	Practice Setting	CV ▼	Licensure Details	Certification Details
A	Pratiksha	prat@test.com	Yes	MPA	Emergency Medicine	Exists	Type of license: PALicense License Number: 48923809203 Issued By: CA Issue Date: 06/16/2024 Expiry Date: 06/30/2025 Notes:	Accreditation Body: NCCPA Certification Number: 3820838 Area of practice: CT Surgery Certification Date: 02/03/2025 Expiration Date: 10/28/2026 Notes:
Alvarado	Laurie	laurie.alvarado@exxat.com	Yes	MD	Pediatrics	Exists	Type of license: License Number: 4506 Issued By: NC Issue Date: 12/03/2018 Expiry Date: 12/31/2021 Notes:	Accreditation Body : PA-C Certification Number : 0691911 Area of practice : Certification Date : 05/01/2017 Expiration Date : 05/31/2021 Notes:
Anderson	Jack	jackando@email.com	Yes	DO		Missing	Type of license: Physician Assistant License License Number: 48920392 Issued By: CA Issue Date: 05/01/2024 Expiry Date: 03/31/2027 Notes:	Accreditation Body: NCCPA Certification Number: 47839482784 Area of practice: Cardiology, Endocrinology Certification Date: 12/01/2024 Expiration Date: 11/30/2026 Notes:
Bailey	George	erik.steen@exxat.com	Yes	MPA	Cardiology	Exists	Type of license: Physician Assistant License Number: 8293892 Issued By: CA Issue Date: 08/02/2024 Does not expire Notes:	Accreditation Body : NCCPA Certification Number : 392039 Area of practice : Endocrinology Certification Date : 01/01/2025 Expiration Date : 11/30/2026 Notes:
Baker	Amy	amy.baker@exxat.com	Yes	MD		Exists	Type of license: Physician Assistant License Number: MD059222L Issued By: MI Issue Date: 01/02/2012 Expiry Date: 11/13/2030 Notes:	Accreditation Body : Family Medicine Certification Number : Area of practice : Certification Date : Expiration Date : 12/30/2022 Notes:
Barton	Gwendolyn	gwendolyn.barton@exxat.co m	No			Not Applicable	Type of license: License Number: 015359 Issued By: IA Issue Date: 01/07/2013 Expiry Date: 01/31/2023 Notes:	Accreditation Body : Family Medicine Certification Number : ABMSUID - 200150 Area of practice : Certification Date : 01/05/2009 Expiration Date : 01/31/2022 Notes:



## Accreditation Standard - B3.07 a-g

## Requirement

B3.07a

## The quite of the control of the cont

a) family medicine,

#### **FOCUSED QUESTIONS**

Supervised clinical practice experiences must occur with preceptors who enable students to meet program defined learning

- Does each student have a SCPE with a preceptor in family medicine?
- Do these preceptors enable students to meet the program defined learning outcomes for family medicine?

#### **ESSENTIAL EVIDENCE**

- · Lists of preceptors currently providing supervised clinical practice experiences, and their area of practice.
- Clinical rotation schedule including supervising preceptor area of practice.
- Results of evaluation demonstrating students can meet program defined learning outcomes when assigned to supervised clinical
  practice experiences with the preceptors listed (Note: this is more than verifying preceptor's board certification in specialty area).
- Program has clearly defined for students and preceptors, the learning outcomes (the medical knowledge, interpersonal, clinical and technical skills, professional behaviors, clinical reasoning and problem-solving abilities) that must be attained by each student at the completion of each supervised clinical practice experience (SCPE).

#### Of note:

Standard B3.07 is about the preceptors and not the types of patients that may be seen in certain practices.

## **B3.07b** Supervised clinical practice experiences must occur with preceptors who enable students to meet program defined learning outcomes for:

b) emergency medicine,

#### 2FOCUSED QUESTIONS

- Does each student have a SCPE with a preceptor in emergency medicine?
- Do these preceptors enable students to meet the program defined learning outcomes for emergency medicine?

#### **ESSENTIAL EVIDENCE**

- Lists of preceptors currently providing supervised clinical practice experiences, and their area of practice.
- Clinical rotation schedule including supervising preceptor area of practice.
- Results of evaluation demonstrating students can meet program defined learning outcomes when assigned to supervised clinical
  practice experiences with the preceptors listed (Note: this is more than verifying preceptor's board certification in specialty area).

#### Of note:

• Standard B3.07 is about the preceptors and not the types of patients that may be seen in certain practices.

## **B3.07c** Supervised clinical practice experiences must occur with preceptors who enable students to meet program defined learning outcomes for:

c) internal medicine,

#### FOCUSED QUESTIONS

- · Does each student have a SCPE with a preceptor in internal medicine?
- Do these preceptors enable students to meet the program defined learning outcomes for internal medicine?

#### **ESSENTIAL EVIDENCE**

- Lists of preceptors currently providing supervised clinical practice experiences, and their area of practice.
- Clinical rotation schedule including supervising preceptor area of practice.
- Results of evaluation demonstrating students can meet program defined learning outcomes when assigned to supervised clinical
  practice experiences with the preceptors listed (Note: this is more than verifying preceptor's board certification in specialty area).

#### Of note:

• Standard B3.07 is about the preceptors and not the types of patients that may be seen in certain practices.



B3.07d	Supervised clinical practice experiences must occur with preceptors who enable students to meet program defined learning outcomes for:										
	d) surgery,										
	FOCUSED QUESTIONS										
II.	Does each student have a SCPE with a <i>preceptor</i> in surgery?  On these <i>preceptor</i> s enable students to meet the program defined <i>learning outcomes</i> for surgery?										
	ESSENTIAL EVIDENCE										
• 1	ists of preceptors currently providing supervised clinical practice experiences, and their area of practice.										
• (	<ul> <li>Clinical rotation schedule including supervising preceptor area of practice.</li> </ul>										
II.	Results of evaluation demonstrating students can meet program defined learning outcomes when assigned to supervised clinical practice experiences with the preceptors listed (Note: this is more than verifying preceptor's board certification in specialty area).										

#### Of note:

• Standard B3.07 is about the preceptors and not the types of patients that may be seen in certain practices.

B3.07	7e Supervised clinical practice experiences must occur with preceptors who enable students to meet program defined learning outcomes for:
	e) pediatrics,
	FOCUSED QUESTIONS
•	Does each student have a SCPE with a preceptor in pediatrics?
	Do these <i>preceptors</i> enable students to meet the program defined <i>learning outcomes</i> for pediatrics?
	ESSENTIAL EVIDENCE
•	Lists of preceptors currently providing supervised clinical practice experiences, and their area of practice.
	Clinical rotation schedule including supervising preceptor area of practice.
	Results of evaluation demonstrating students can meet program defined learning outcomes when assigned to supervised clinical
1	practice experiences with the preceptors listed (Note: this is more than verifying preceptor's board certification in specialty area).
Of no	te:
•	Standard B3.07 is about the preceptors and not the types of patients that may be seen in certain practices.

	B3.07f	Supervised clinical practice experiences must occur with preceptors who enable students to meet program defined learning
l		outcomes for:

f) women's health including prenatal and gynecologic care, and

## FOCUSED QUESTIONS

- Does each student have a SCPE with a preceptor in women's health which includes prenatal and gynecologic care?
- Do these preceptors enable students to meet the program defined learning outcomes for women's health which includes prenatal and gynecologic care?

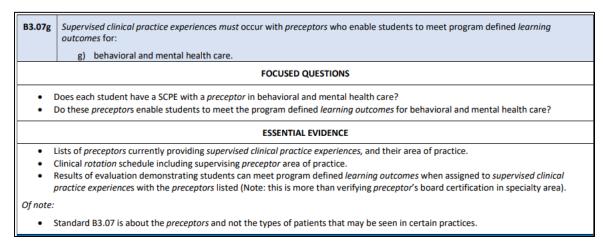
#### **ESSENTIAL EVIDENCE**

- Lists of preceptors currently providing supervised clinical practice experiences, and their area of practice.
- Clinical rotation schedule including supervising preceptor area of practice.
- Results of evaluation demonstrating students can meet program defined learning outcomes when assigned to supervised clinical
  practice experiences with the preceptors listed (Note: this is more than verifying preceptor's board certification in specialty area).

#### Of note:

• Standard B3.07 is about the preceptors and not the types of patients that may be seen in certain practices.





## Self Study Report

Can be included in Appendix 14D (Effectiveness of clinical curriculum) of the SSR.

## **Exxat Prism: Reports**

'List of preceptors currently providing supervised clinical practice experiences, and their area of practice.'

## 1. Comprehensive personnel report

## **Navigation in Exxat Prism**

Sites → Reports → Comprehensive personnel report

'Clinical rotation schedule including supervising preceptor area of practice.'





Last Name	First Name	Email	Marked as CI	Degree 🔻	Practice Setting =	cv	Licensure Details	▼ Certification Details ▼
A	Pratiksha	prat@test.com	Yes	MPA	Emergency Medicine	Exists	Type of license : PA License License Number : 48923809203 Issued By : CA Issue Date : 06/16/2024 Expiry Date : 06/30/2025 Notes :	Accreditation Body: NCCPA Certification Number: 3820838 Area of practice: CT Surgery Certification Date: 02/03/2025 Expiration Date: 10/28/2026 Notes:
Alvarado	Laurie	laurie.alvarado@exxat.com	Yes	MD	Pediatrics	Exists	Type of license: License Number: 4506 Issued By: NC Issue Date: 12/03/2018 Expiry Date: 12/31/2021 Notes:	Accreditation Body: PA-C Certification Number: 0691911 Area of practice: Certification Date: 05/01/2017 Expiration Date: 05/31/2021 Notes:
Anderson	Jack	jackando@email.com	Yes	DO		Missing	Type of license: Physician Assistant License License Number: 48920392 Issued By: CA Issue Date: 05/01/2024 Expiry Date: 03/31/2027 Notes:	Accreditation Body: NCCPA Certification Number: 47839482784 Area of practice: Cardiology, Endocrinology Certification Date: 12/01/2024 Expiration Date: 11/30/2026 Notes:
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Barton	Gwendolyn	gwendolyn.barton@exxat.com	No			Not Applicable	Type of license : License Number : 015359 Issued By : IA Issue Date : 01/07/2013 Expiry Date : 01/31/2023 Notes :	Accreditation Body : Family Medicine Certification Number : ABMSUID - 200150 Area of practice : Certification Date : 01/05/2009 Expiration Date : 01/31/2022 Notes:

## 2. Preceptor based placement report

Copy the practice settings from the above report into the following preceptor-based placement report. This allows schools to demonstrate that all placements (planned and completed) happened under preceptors with the required area of practice.

Preceptor Name	Preceptor Email	Rotation 1 (Timesheet Hours)*	Rotation 2 (Student Interest/CEU credit hours)*	Rotation 3*
. The state of th		▼ (05/26/2024 - 06/29/2024)	▼ (07/01/2024 - 07/29/2024)	▼ (08/01/2024 - 08/30/2024) ▼
Alice Li	aliceli@email.com		Brian Adkins, Marty Blair,	Spencer Dawson, Omar Dixon,
			Janet* Brown (Jane), William Page,	Teri Bailey
			Kevin Evans, Omar Dixon,	
			Grace Abbott (Gracie)	
Alice Li	Alicelii@email.com	Brian Adkins	Teri Bailey	Janet* Brown (Jane), Grace Abbott (Gracie)
Alicia Inagram			Spencer Dawson	Kevin Evans, Marty Blair, Brian Adkins
Amee Jotangiya [Added by student]	amee.j@exxat.com			
Amelia Perry [Added by student]	ameliaperry@test.com			
Amy Baker	amy.baker@exxat.com			
Anamika Singh	anamika.singh@exxat.com			Grace Abbott (Gracie)
Anthony Budge [Added by student]	Abudge@email.com			
Cathy Hopkins				
Ellen Griffin				
Geraldine Larson	geraldine.larson@exxat.com	Teri Bailey, Grace Abbott (Gracie), Spencer Dawson, Omar Dixon, William Page		
Jack Anderson	jackando@email.com			
Joanna Perry	joannanicole81@gmail.com	Janet* Brown (Jane)		William Page
John Smith	john.smith@example.com	Kevin Evans		
Peter Mentor	mentorteacher@example.com			Janet* Brown (Jane)
Skylar Ford	skylarford@email.com	Kevin Evans, Teri Bailey		
sky reddy [Added by student]	skyler.reddy@gmail.com			
skyler reddy [Added by student]	skyler.reddy@exxat.com			

Show the preceptor practice setting as a column on the above report.

# Exxat

## **Exxat Prism-Reports to Support PA Accreditation**

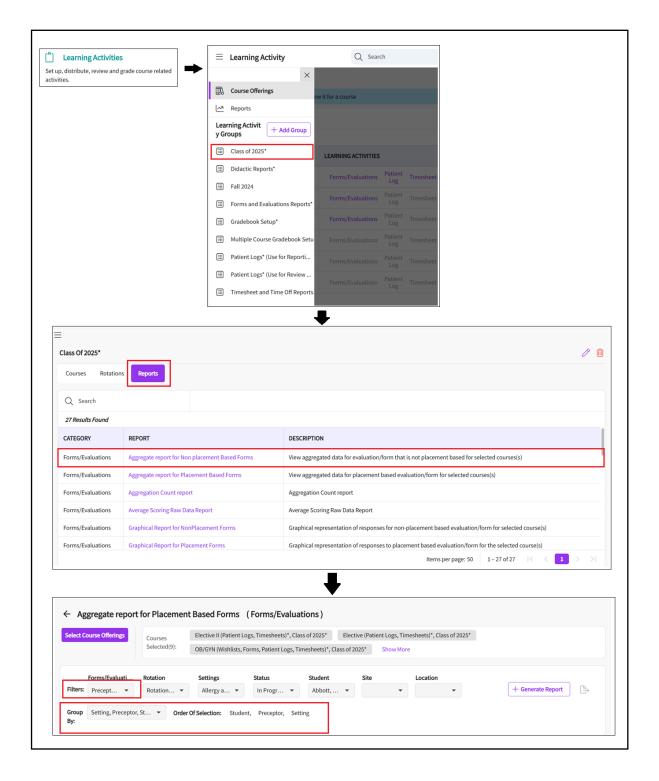
'Results of evaluation demonstrating students can meet program defined learning outcomes after having supervised clinical practice experiences with the preceptors listed.'

## 3. Aggregate report for evals

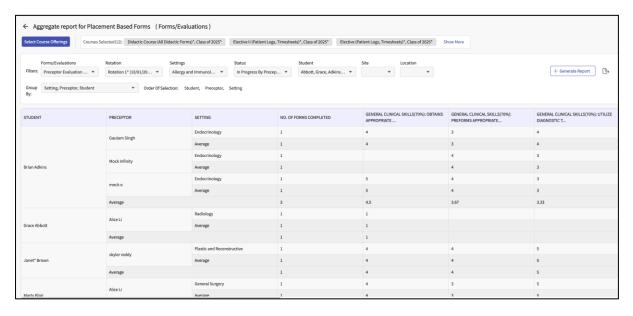
## **Navigation in Exxat Prism**

Learning Activities  $\rightarrow$  Learning Activities Group  $\rightarrow$  Reports  $\rightarrow$  Aggregate report for placement-based forms  $\rightarrow$  Preceptor Evaluation of student  $\rightarrow$  Group by Student, Preceptor, and Setting

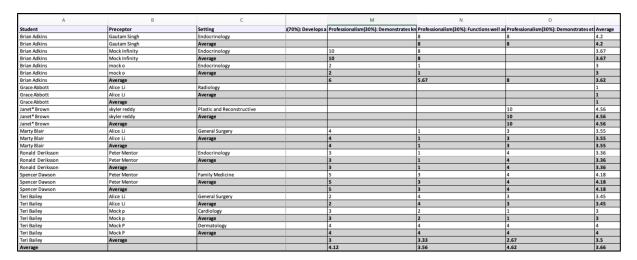








## **Export to Excel**





## Accreditation Standard - B4.01b

## Requirement

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The program *must* conduct *frequent*, objective and documented evaluations of student performance in meeting the program's *learning outcomes* and *instructional objectives* for both didactic and *supervised clinical practice experience* components. The evaluations *must*:

b) allow the program to identify and address any student deficiencies in a timely manner

#### **FOCUSED QUESTIONS**

- How does the program identify student deficiencies?
- What is the timing of identification of student deficiencies?
- Once deficiencies are identified, how are they addressed in the didactic year?
- Once deficiencies are identified, how are they addressed in the clinical year?

#### **ESSENTIAL EVIDENCE**

- Assessments allow for the timely identification of specific student deficiencies in achieving the program defined learning outcomes and instructional objectives so they can be addressed.
- Assessment tools include evaluation items that are not complex in nature (one outcome is assessed at a time) and allow the evaluator
  to readily identify a specific learning deficiency.
- The program has a process for the review of student evaluations and a process to address individual student deficiencies (i.e. remediation process).
- Records of student performance in each course.
- Student files indicating means of remediation employed and outcomes of remediation are timely and are as described in program
  policy and procedures.
- Discussions with faculty and students.

## **Exxat Prism: Reports**

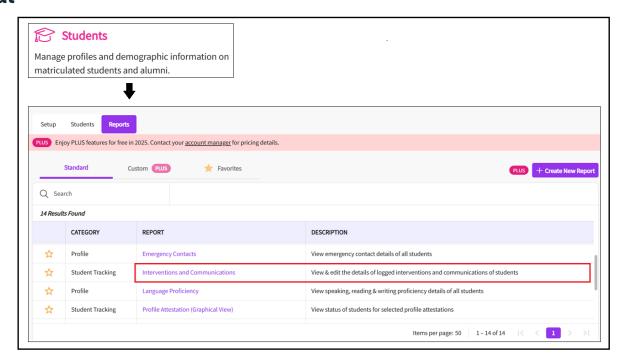
1. Student intervention and communication report

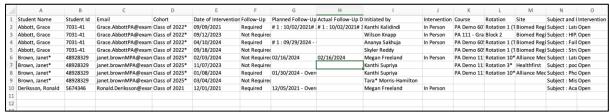
## **Navigation in Exxat Prism**

Students  $\rightarrow$  Reports  $\rightarrow$  Interventions and Communications

'Clinical rotation schedule including supervising preceptor area of practice.'

Remediation plans can be uploaded. Follow ups for meetings between advisor-student are supported. Methodology used for meetings is also noted.





## 2. Low score indicators

Low score indicators (red highlight) for timely identification of struggling students

### **Best practice**

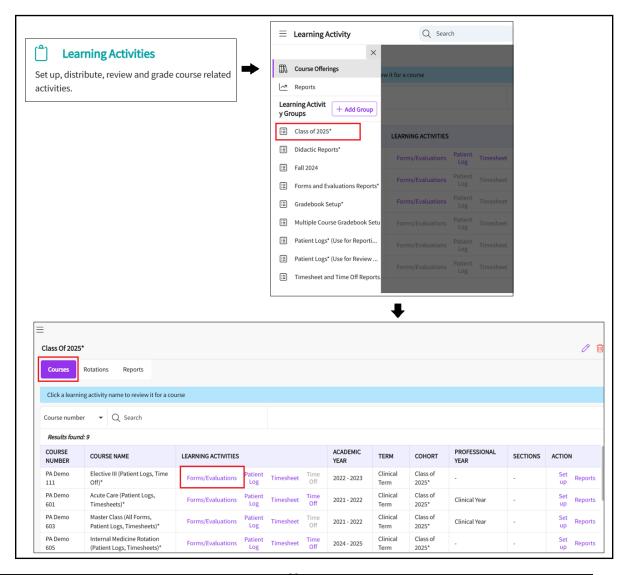
Set up low score threshold and related email alerts for evaluation questions. This feature allows you to get email alerts every time a student scores below the set threshold. Since each evaluation question is tied to program learner outcome, low score indicators (red highlight) enable timely identification of struggling students in real time throughout the rotation.

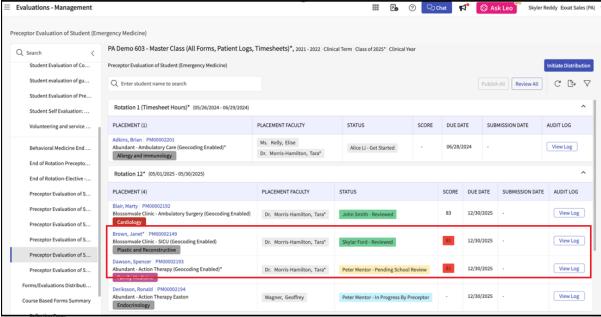
ARC-PA programs can avoid receiving citation in this area by utilizing the above feature.

## **Navigation in Exxat Prism**

Learning Activity → Learning Activity Group → Select course → Form and evaluations → select form







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## Accreditation Standard – B4.03

## Requirement

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,
- b) clinical reasoning and problem-solving abilities,
- c) interpersonal skills,
- d) medical knowledge, and
- e) professional behaviors

#### **FOCUSED QUESTIONS**

- What are the program's competencies? Do they cover topics within the categories of a-e of this standard?
- How are each of the program's competencies assessed in the final four months of the program?
- Where is this documented?

#### **ESSENTIAL EVIDENCE**

- The evaluation instrument/s correlate/s with the program's competencies (not just the topic list a-e).
- Mapping of program competencies to the assessments in the program's summative evaluation.
- Instruments used for summative evaluation clearly and identifiably address each of the program's competencies.
- Results of the summative evaluation of each student are documented.
- The summative evaluation occurs within the final four months of program completion.

#### Of Note:

- Every aspect of the competencies and sub-competency must be addressed by the summative evaluation.
- The summative evaluation is a separate evaluation and not a review of student's previous performance/evaluations.

## Self Study Report

Can be included in Appendix 14E (Preparation of Graduates to Achieve Program Defined Competencies) of the SSR.

## Set up:

Create program specific standard called 'Program defined competencies' and create a competency framework by mapping eval questions to these competencies to get the below report.

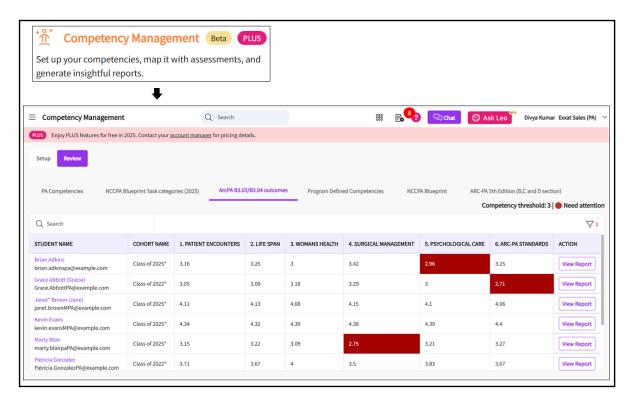
## **Exxat Prism: Reports**

1. Student competency report based on the above categories.

## **Navigation in Exxat Prism**

Competency Management → Select Competency (program defined competencies)





Alternatively, schools can fill in a summative evaluation per student for program competencies as part of a placeholder course or last rotation. This can be a milestone qualitative evaluation done by DCE/faculty based on overall student performance. End of rotation evaluations, Patient log minimums for diagnosis and procedures, PAEA end of year exam scores, OSCEs, and other assessments based on school rubric can be used by faculty. **Evaluation Aggregate Report** can be utilized with this setup.

# Exxat

## **Exxat Prism-Reports to Support PA Accreditation**

## Accreditation Standard – C2.01 a-c

## Requirement

	C2.01a	The program must define and maintain effective processes and document the initial and ongoing evaluation of all sites and
ı		preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with
ı		access to:

a) physical facilities,

#### **FOCUSED QUESTIONS**

- What is the process for initial evaluation of sites and preceptors?
- What is the process for ongoing evaluation of sites and preceptors?
- Do these evaluations include students' access to physical facilities?
- Do these evaluations ensure students are able to fulfill the program learning outcomes?
- Where are these documented?

#### **ESSENTIAL EVIDENCE**

- Description of the process used for the initial clinical site and preceptor evaluation, including the format and timing of evaluations.
- Description of the process used for the ongoing clinical site and preceptor evaluation, including the format and timing of evaluations.
- Documentation noting effectiveness in identifying sites that do not meet program expectations for learning outcomes.
- Documentation of evaluation of students access to physical facilities.
- · Completed initial and ongoing evaluations of sites used.
- · Discussions with preceptors, students, and faculty.

# C2.01b The program must define and maintain effective processes and document the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to:

b) patient populations, and

#### **FOCUSED QUESTIONS**

- What is the process for initial evaluation of sites and preceptors?
- What is the process for ongoing evaluation of sites and preceptors?
- Do these evaluations include students' access to patient populations?
- Do these evaluations ensure students are able to fulfill the program learning outcomes?
- Where are these documented?

#### **ESSENTIAL EVIDENCE**

- Description of the process used for the initial clinical site and preceptor evaluation, including the format and timing of evaluations.
- Description of the process used for the ongoing clinical site and preceptor evaluation, including the format and timing of evaluations.
- Documentation noting effectiveness in identifying sites that do not meet program expectations for learning outcomes.
- Documentation of evaluation of students' access to patient populations.
- Completed initial and ongoing evaluations of sites used.
- Discussions with preceptors, students, and faculty.

C2.01c	The program must define and maintain effective processes and document the initial and ongoing evaluation of all sites and
	preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with
	access to:

c) supervision.

#### **FOCUSED QUESTIONS**

- What is the process for initial evaluation of sites and preceptors?
- What is the process for ongoing evaluation of sites and preceptors?
- Do these evaluations include students' access to supervision?
- Do these evaluations ensure students are able to fulfill the program learning outcomes?
- Where are these documented?

#### **ESSENTIAL EVIDENCE**

- Description of the process used for the initial clinical site and preceptor evaluation, including the format and timing of evaluations.
- Description of the process used for the ongoing clinical site and preceptor evaluation, including the format and timing of evaluations.
- Documentation noting effectiveness in identifying sites that do not meet program expectations for *learning outcomes*.
- Documentation of evaluation of students' access to supervision.
- Completed initial and ongoing evaluations of sites used.
- Discussions with preceptors, students, and faculty.



## Self Study Report

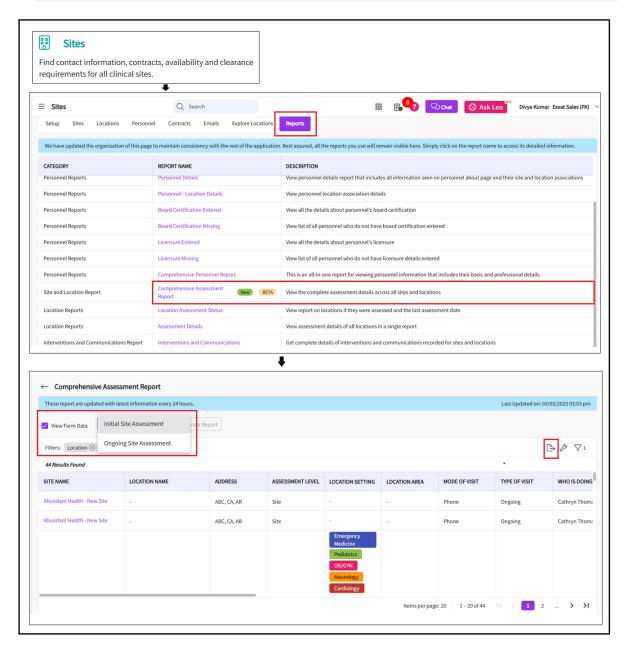
Can be included in Appendix 15 of the SSR.

## **Exxat Prism: Reports**

## 1. Site assessment report

## **Navigation in Exxat Prism**

Sites  $\rightarrow$  Reports  $\rightarrow$  Comprehensive assessment report  $\rightarrow$  select form



School faculty/Admin has assessed that the locations provide the required exposure to students. The report can either be based on initial site visit or when student is in rotation at the location.



	A	В	С	D	E	F	G	Н	1	J	K	L	M	N	0	Р
1	Site Name	Location Name	Assessment Level	Mode of visit	Type of visit	doing the	Date of Site visit	Course(s)	Rotation(s)	Assessed Student(s)	Medical Conditions	Lifespan	Women's Health	Surgical	Psych	Site Setting
2	Abilty Center		Site	Other	Ongoing	Cathryn Thomas	12/5/23									
3	Ability Center		Site	In Person	During placement	Tara* Morris- Hamilton	1/26/23		Block 1: (07/01/202 1- 07/18/2024 )	Grace Abbott	Preventive		Gynecologic care		Behavioral health	
	Abundant	Abundant - Urgent Care (Geocoding							Block 1: (07/01/202 1- 07/18/2024	Jackie						General Surgery, Neurology, Internal Medicine, OB/GYN, Emergency Medicine, Cardiology, Pediatrics, Family
4	Health*	Enabled)*	Location	Phone	Ongoing	Elise Kelly	12/7/22		)	McGuire						Medicine

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