

Policy: Supervision	Effective Date: 27-02-2024
Policy Number:	Policy Version: V1
Scope: All GME Applicants & trainees	Next Review Date: TBA

I. Purpose of the Policy

The purpose of this policy is to outline the general structure and components of supervision of postgraduate trainees within various Lebanese American University (LAU) Graduate Medical Education (GME) programs along with the respective roles of supervising faculty, postgraduate trainees. Postgraduate training is a period where postgraduate trainees gain progressive and increasing levels of patient-related responsibility that culminates in their graduation as competent, professional, and autonomous practitioners, equipped with skills of continuous life-long learning.

This policy does not replace specific guidelines that pertain to supervision within different programs as deemed appropriate per postgraduate year level. Hence, each program should have specific guidelines of supervision that are also clearly stated within the curriculum.

II. Policy Scope

The policy applies to postgraduate trainees in all graduate medical education programs.

III. Definitions

- Postgraduate (PG) trainee: refers to both residents and fellows enrolled in various LAU GME programs or visiting trainees from other institutions on electives or completing part of their training within LAU medical center.
- Attending/ Supervisor: refers to faculty members in the LAU school of medicine with direct responsibility of supervising the postgraduate trainee. This faculty member may be the:
 - Attending of record
 - Consultant physician
 - On-call physician
- Regardless of the registration status of the postgraduate trainee in the Lebanese Order of Physicians, all physicians in training within GME programs are postgraduate trainees and require supervision by a supervisor faculty in the school of medicine.

IV. Principles

- The practice of postgraduate trainees, supervisors, and entire faculty should be guided by the standards of professional behavior (<https://medicine.lau.edu.lb/files/standards-professional-behavior.pdf>) and Graduate Medical Education Goals and Principles

(<https://medicine.lau.edu.lb/files/goals-principles-2016.pdf>), with specific emphasis on but not limited to:

- Patients' safety and wellbeing
- Recognizing limitations, seeking help when needed, and adhering to the recommendations of the physician of record.
- Each patient should have an appropriately credentialed attending physician responsible and accountable for their care. The attending of record bears the ultimate decision-making and responsibility of the patient. This responsibility cannot be delegated to postgraduate trainees.
- The educational environment should be safe, conducive to learning, healthy and professional discussions, acknowledgement of limitations, and reporting of errors and near misses.
- Faculty and residents should be educated on identifying the signs of fatigue and burn-out.
- The graduated delegation of responsibility should follow the ACGMEI foundational program requirements. The levels of supervision are classified as follows:
 1. Direct Supervision – the supervising physician is physically present with the resident and patient.
 2. Indirect Supervision: (a) with Direct Supervision immediately available – the supervising physician is physically within the hospital or other site of patient care, and is immediately available to provide Direct Supervision (b) with Direct Supervision available – the supervising physician is not physically present within the hospital or other site of patient care, but is immediately available by means of telephonic and/or electronic modalities, and is available to provide Direct Supervision.
 3. Oversight – the supervising physician is available to provide review of procedures/encounters with feedback provided after care is delivered.

V. Policy Statement

- **Responsibility of Postgraduate Trainee Supervisor**
 - Establish a supportive learning environment with open communication.
 - Assess, review, document and provide feedback on postgraduate trainee competence in accordance with program specific policies and delegate graduated responsibilities for patient care guided by the milestones. It is expected that the PG trainee supervisor will review the postgraduate trainee findings, diagnosis and management plan in a timely fashion. This should be documented on the patient record.
 - Ensure postgraduate trainees under their supervision are aware of their responsibilities.
 - Advise patients, or their designate, that postgraduate trainees may be involved in their care and obtain consent for such participation.
 - When not available in person, the supervisor should be available by phone, respond in a timely manner and be available to attend to the patient in an emergency. When not immediately available, ensure that an appropriate alternate PG trainee supervisor is available and has agreed to provide supervision.

- When delegating specific responsibility for a diagnostic or therapeutic procedure, the PG trainee supervisor must specifically consider the need for direct observation, supervision and/or assistance.
 - Except in an emergency, when a postgraduate trainee is performing a procedure or act without direct observation, the trainee should be responsible for the process of informed consent.
 - The responsibility for supervising junior trainees may be delegated to a more senior resident. The PG trainee supervisor must assess trainee competence and delegate supervisory responsibility with the same care and consideration as delegation of clinical responsibility.
- **Responsibility of Postgraduate Trainees**
 - Trainees must acknowledge and put the welfare of patients ahead of all other interests.
 - Trainees must be aware of their status and respect and make best use of hierarchy.
 - Trainees must introduce themselves and advise patients or designates that they are working under the supervision of the supervising physician.
 - Specifically notify supervisor/ attending of record about:
 - New admissions
 - Any changes in the status of patients
 - Any emergencies
 - Concerns about patient status
 - Plans of discharge
 - Discuss with the supervisor/consultant or attending of record the contemplated plan of management.
 - Provide supervision of junior trainees and students.
 - Notify seniors if they are unable to carry out their responsibilities for any reason (ahead of time if possible).
 - Report any signs of burnout in oneself or other team members.
 - Know limitations and seek help.
- **Responsibility of the Program Director**
 - Make trainees and faculty aware of the supervision policy.
 - According to specific program requirements, make modifications as needed for that discipline and distribute them to trainees and faculty.
 - Establish a mechanism for trainees to report concerns about supervision at any level.
 - Investigate and attend to the complaints about supervision.
- **Responsibility of the GME office**
 - Monitor the quality of supervision and provide feedback about the quality of supervision to the Dean.
 - In conjunction with the GME development committee and the Associate Dean of the Office of Faculty Affairs and Development (OFAD), provide needed workshops and educational material as needed.

VI. Procedure for breach of adequate supervision

- If trainees identify an issue with supervision, they are asked to report the problem to their program director.
- The Program Director has the authority of removing the trainee from the particular placement if supervision is inadequate and/or may jeopardize or constitute possible hazard over patient care.
- Such decisions to remove trainees from a specific placement or rotation should be communicated with the DIO/Assistant Dean of GME, chair of department, and the designated coordinator of rotation or training site.
- The above parties would agree on the most appropriate remediation action that may include specific counseling of supervisor faculty, conducting needed training workshops, all the way to interruption of a given rotation or severing an affiliation agreement.