



## **Physician Assistant Educational Program**

**2019 - 2020  
STUDENT HANDBOOK  
CLASS OF 2021**

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**\*The PA program policies are in alignment with Heritage University (HU) policies. However, the program handbook supersedes the HU policy handbook. Students must follow all policies and procedures outlined in this handbook.**

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## MISSION, VISION AND GOALS

Heritage University is in a medically underserved area and serves a large minority population which is also medically underserved. Part of the Heritage mission is to enrich the quality of life of its students and the community.

### The Mission of Heritage University

*Heritage University empowers a multi-cultural and inclusive student body to overcome the social, cultural, economic and geographic barriers that limit access to higher education. Rooted in the homeland of the Yakama Nation, we embrace transformational student-centered education that cultivates leadership and a commitment to the promotion of a more just society.*

### Heritage University Core Themes

1. **Access and Equity:** Heritage University strives to identify, recruit, enroll and retain students from a wide range of different types of backgrounds.
2. **Academic Excellence:** Academic excellence includes all aspects of a high-quality liberal arts and career-preparatory educational experience for all students. This encompasses individual courses through completion of the program and professional certification. It includes student satisfaction with courses and student services, employer satisfaction with Heritage students, the percentage of courses taught by full-time faculty and student outcomes (graduation rates, placement rates and course success).
3. **Community Engagement:** Community engagement includes partnerships with various organizations across the regions that Heritage University serves. It embraces an outreach mentality, leading to immersion in local communities to understand and adapt to their educational needs. This then leads students and graduates to give back to their communities.
4. **Instructional Vitality:** Vitality relates to the health of the institution itself, such as its financial sustainability.

### Mission Statement

*The mission of the Physician Assistant Educational Program at Heritage is to increase access to healthcare, particularly in small, rural and underserved areas, by educating future Physician Assistants who will provide high quality medical care in a compassionate and competent manner.*

### Physician Assistant Educational Program Goals

In addition to the Mission, the program's goals are:

1. Actively recruit qualified candidates from diverse cultural backgrounds.
2. Foster intercollegiate relationships to ensure applicants receive the prerequisite education and experience to become successful students.
3. Provide a broad based interprofessional education with an emphasis on primary care, allowing graduates to thrive in a dynamic health care environment.
4. Equip physician assistant students with the knowledge, skills, and attitudes that are essential elements of professional practice and instill a desire for life-long learning

- to provide health care in underserved and rural communities.
5. Provide opportunities for, and encourage involvement in, interprofessional education, community professional activities and organizations that advance the PA profession.

## **Program Philosophy**

The program strives to achieve its mission and goals in all aspects of its operations, including student selection, didactic and clinical curriculum, and graduate outcomes. The focus is on working with small, rural, and underserved areas in order to recruit qualified candidates and provide them with the core knowledge and skills to practice as a Physician Assistant.

The clinical curriculum was specifically designed to return the student to their rural or underserved community. The longitudinal community-based clinical-learning concept will allow the student to obtain their clinical experiences while building relationships within the community. In turn, this will encourage the graduates to remain in the area to provide healthcare where it is most needed.

## **Diversity**

Heritage University has a student body with substantial diversity, which creates an effective learning community where each cultural group is valued. To develop community and concern for the common good, Heritage University and the PA program seeks to provide leadership in supporting cultural pluralism within our own and other communities. Cultural pluralism creates a climate of respect and appreciation by fostering “learning about us” in an interdependent and connected world. Heritage University acts to make its curriculum, staffing, teaching, and other collegiate activities reflect diversity.

## **History of the Physician Assistant Profession**

In the mid-1960s there was a shortage of primary care Physicians, particularly in the rural areas of the United States. In 1965 at Duke University Medical Center, Dr. Eugene Stead developed a program, patterned after the fast-track training of physicians used during World War II, to expand the delivery of quality healthcare. He selected Navy corpsmen, who had medical experience during their military service and during the Vietnam War, and added additional training to round out that experience so they could perform as civilian healthcare providers. “On October 6, 1967, Duke University PA program graduated the first PA (physician assistant) students who went on to start practicing as PAs.”<sup>1</sup>

Physician Assistants (PAs) are healthcare professionals who practice medicine with Physician supervision. They conduct physical exams, diagnose and treat illnesses, order and interpret tests, counsel on preventive healthcare, assist in surgery, and write prescriptions. Their practice may include education, research, and administrative duties.

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<sup>1</sup> American Academy of Physician Assistants (AAPA). (2009) Our history. Retrieved July 8, 2009 from [http://www.aapa.org/the\\_pa\\_profession/history.aspx](http://www.aapa.org/the_pa_profession/history.aspx)

Because PAs are educated in the medical model, they have a close relationship with their supervising physician, which allows them autonomy in medical decision making.

Upon graduation from an accredited program, PAs take a national certification examination developed by the National Commission on Certification of Physician Assistants in conjunction with the National Board of Medical Examiners. To maintain that certification, PAs must log 100 hours of continuing education every two years and recertify every ten years. PAs are licensed in the state in which they practice, or in the case of those employed by the federal government, they are credentialed.

## **ACCREDITATION STATUS**

The Accreditation Review Commission on Education for the Physician Assistant, Inc (ARC-PA) has granted Accreditation - Provisional status to the Physician Assistant Educational Program sponsored by Heritage University.

\*\*\*Accreditation-Provision is an accreditation status granted when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program's ability to meet the ARC-PA Standards or when a program holding Accreditation-Provisional status appears to demonstrate continued progress in complying with the Standards as it prepares for the graduation of the first class (cohort) of students.

Accreditation-Provisional does not ensure any subsequent accreditation status. It is limited to no more than five years from matriculation of the first class.

At its September 2018 meeting, the Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA) extended Accreditation-Probation status for the Heritage University Physician Assistant Program sponsored by Heritage University until its next review in September 2020.

Probation is a temporary status of accreditation conferred when a program does not meet the *Standards* and when the capability of the program to provide an acceptable educational experience for its students is threatened.

Once placed on probation, programs that still fail to comply with accreditation requirements in a timely manner, as specified by the ARC-PA, may be scheduled for a focused site visit and/or risk having their accreditation withdrawn.

Specific questions regarding the Program and its plans should be directed to the Program Director and/or the appropriate institutional official(s).

## COMMUNICATION

### Campus Security

It is the mission of the Campus Security Department to promote public safety, crime prevention and enforcement by providing efficient, effective and professional services while preserving the legal rights of our Heritage University Community.

### Emergency Information

*Immediate threat to health or safety, call 911*

Campus Security	(509) 865-8555
Physical Plant Director	(509) 901-7838
Maintenance	(509) 865-8631
Weekend Facilities Assistance	(509) 728-8147

For additional information, refer to the Emergency Action Plan in the Heritage University Student Catalog, specifically available at: <http://heritage.edu/safety-security/emergency-action-plan/>

### Additional Services available from Campus Security

Heritage University Campus Security offers an array of services such as: escorts to classes, vehicles, or other campus located destinations, assisting with vehicle lockouts, battery jumpstarts and flat tire changes. All services are complementary, thus, no charge will be issued for services provided by the department.

### PROGRAM PERSONNEL

The program's faculty and administrative staff work together as a team to deliver the PA educational curriculum. *Faculty are not required to respond to emails/phone calls after work hours or on weekends unless it is an emergency.* At other times, the faculty should respond within 24-48 hours.

Key contact information about each team member is listed below and will be updated as needed:

<b>Name</b>	<b>Title</b>	<b>Phone</b>	<b>Email</b>
Douglas Berndt	Director of Data Management	Office: 509-865-0702 Ext 3662	<a href="mailto:Berndt_D@heritage.edu">Berndt_D@heritage.edu</a>
Leanne Brink, PA-C	Assistant Professor, Clinical Faculty	Cell: 425-361-5200	<a href="mailto:brink_L@heritage.edu">brink_L@heritage.edu</a>
Jillian Calhoun, PA-C	Assistant Professor, Clinical Faculty		<a href="mailto:Calhoun_J@heritage.edu">Calhoun_J@heritage.edu</a>
Linda Dale, DHed, PA-C	Professor, Program Director	Office: 509-865-0706 Ext 3607	<a href="mailto:dale_L@heritage.edu">dale_L@heritage.edu</a>
Joseph DiMeo, DO	Associate Professor, Medical Director	Office: 509-865-0707 Ext 3620	<a href="mailto:Dimeo_J@heritage.edu">Dimeo_J@heritage.edu</a>
Renee DiMeo, BSN, RN	Workshop Coordinator/Didactic Faculty	Office: 509-865-8661 Ext 3670	<a href="mailto:Dimeo_R@heritage.edu">Dimeo_R@heritage.edu</a>
Sean Hancock, MSPA, PA-C	Assistant Professor, Didactic Faculty	Office: 509-865-0707 Ext 3619	<a href="mailto:hancock_s@heritage.edu">hancock_s@heritage.edu</a>
Judy Hargis, MCHS, PA-C	Assistant Professor, Clinical Faculty	Cell: 503-317-2431	<a href="mailto:hargis_j@heritage.edu">hargis_j@heritage.edu</a>
Bill Hatch, DHed, PA-C	Associate Professor, Academic Coordinator	Office: 509-865-8605 Ext 3606	<a href="mailto:Hatch_B@heritage.edu">Hatch_B@heritage.edu</a>
Dyann Kanzler, MBA/HCM, PA-C	Assistant Professor Didactic Faculty	Office: 509-865-0744 Ext 3605	<a href="mailto:Kanzler_D@heritage.edu">Kanzler_D@heritage.edu</a>
Thomas Miller, DO, MPH	Assistant Professor, Didactic Faculty	Office: 509-865-8532 Ext 3603	<a href="mailto:Miller_T2@heritage.edu">Miller_T2@heritage.edu</a>
Jonathan Neau, MMS, PA-C	Assistant Professor, Clinical Faculty	Cell: 970-708-1423	<a href="mailto:Neau_J@heritage.edu">Neau_J@heritage.edu</a>
Maria Sanchez	Administrative and Admissions Coordinator	Office: 509-865-0733 Ext 3608	<a href="mailto:Sanchez_M2@heritage.edu">Sanchez_M2@heritage.edu</a>
Tony Stephas, DHSc, PA-C	Assistant Professor, Didactic Faculty	Office: 509-865-0728 Ext 3604	<a href="mailto:Stephas_T@heritage.edu">Stephas_T@heritage.edu</a>
Joel Thome, PharmD, BCACP, RPh.	Associate Professor	Office: 509-865-8589 Ext 2348	<a href="mailto:Thome_J@heritage.edu">Thome_J@heritage.edu</a>
Samantha Visaya	Clinical Admin Assistant	Office: 509-865-8526 Ext 3622	<a href="mailto:Visaya_S@heritage.edu">Visaya_S@heritage.edu</a>

## Student Contact Information

It is imperative that the PA program department has current records with regards to name, mailing address, telephone number, and emergency contact information. Typhon and student services in MyHeritage must be updated immediately with any change(s).

## Inclement Weather

The Rave System is a notification system used by Heritage University to send students urgent and/or emergent text and email messages. They are sent by the Physical Plant Department in the Shipping and Receiving Building. When there are school delays or closures due to weather conditions and/or emergencies, the Rave System is activated. If inclement weather prevents a student from attending school on a day that Heritage University is open, students are responsible for making up any work or exams missed.

## GENERAL POLICIES

### Attendance

Attendance at all lectures, labs, discussion groups, clinical rotations and other assigned functions is required and monitored. The student is to arrive **fifteen minutes early to be prepared for lecture or the activity to start immediately at time specified.** There must be an appropriate reason and documentation for any absence. Failure to comply may result in disciplinary action. The determination of absence validity in the academic year is the responsibility of the Academic Coordinator; during the clinical year, it is the responsibility of the Clinical Coordinator. In the clinical year, self-study must be approved, in writing, by the clinical advisor or program director. Lack of attendance, either excused or non-excused, will be recorded in the student's file.

Excused absences will be allowed on a case-by-case basis for such things that are emergent, compassionate, professional, or health related. Unapproved absences include weddings, graduations, anniversaries, personal days, etc. **If the student must miss a class, they must send an email notification to the Course Coordinator responsible for that class as well as their PA advisor.** All notifications need to be in writing. A verbal notification will not be acceptable. **In all circumstances, the student is responsible for any coursework missed.** Students requesting an extended leave of absence should discuss the situation with the Academic Coordinator (or Clinical Coordinator for clinical students) who may opt to take it to the Student Promotions Committee for final consideration. The student must discuss their situation with the appropriate coordinator at least 14 days in advance of a planned leave of absence in order to be considered as excused. In most cases, the Program Director will be consulted regarding the request. Due to the fast pace of the PA education program, it may be recommended that the student withdraw and return the following year. This especially applies to a leave of absence requested during the didactic year.

### Illness

It is paramount that the well-being of the student is considered in any illness. If a student



is absent for more than two days per month, the Academic Coordinator must be notified, and the student may be asked to be seen by a licensed healthcare provider for documentation and for the well-being of the student. In the case of an illness in a clinical student, the Clinical Coordinator and the preceptor must be notified. The student should not hesitate whatsoever to report an illness since the welfare of the student and his/her peer/patient contacts are of prime importance.

### **Professional Meetings/Conferences**

It is felt that participation in professional meetings can greatly enhance a student's professional and personal growth; however, completing the program's curriculum is of utmost importance. Participation in these meetings is a privilege and an honor. Students must formally request permission to attend these meetings and approval will be on a case by case basis. This approval must be obtained from the Academic Coordinator during the student's didactic year and the Clinical Coordinator during the clinical year. Clinical students must complete a Request for Leave form.

### **SAAAPA and WAPA Membership**

All students enrolled in the PA program are encouraged to become student members of the American Academy of Physician Assistants (SAAAPA) and the Washington Academy of Physician Assistants (WAPA) or the academies of the State where they would like to practice as graduates. This membership is important to begin building networking opportunities and relationships with future colleagues and is an important component of truly belonging to the profession.

### **Classroom Conduct**

The goal of the Physician Assistant Educational Program at Heritage University is to foster a classroom environment that is stimulating for the learners but remains a "safe place" to discuss/share issues, learn to think critically, communicate effectively and pursue knowledge on the pathway of their PA education. Behavior that inhibits learning or impedes the goal of the classroom environment will be considered disruptive and therefore subject to sanctions. These sanctions are intended to preserve the classroom as a place to pursue knowledge, exchange ideas, and share opinions in an atmosphere of tolerance.

Students have the responsibility of complying with behavioral standards. Faculty have the professional responsibility to set reasonable limits on the expression of opinions, while treating students with dignity, respect and understanding. Examples of improper behavior include, but are not limited to, the following:

1. Use of cell phones during class;
2. Surfing the internet or responding to emails during class lectures;
3. Studying for exams during class lectures;
4. Arriving after a class, exams, or workshops have begun;
5. Refusal to comply with reasonable instructor directions;
6. Distractive talking or persistently speaking out of turn;

7. Audio or video recording of lectures/classroom discussion or the use of electronic equipment (computers) without the permission of the faculty; and
8. Use of insulting language or gestures, and/or verbal, psychological, or physical threats, harassment, and/or physical violence.

### **Noise Suppression Policy**

During a quiz or written exam if a student feels distracted or unable to concentrate, as a result of classroom noise, they will be allowed the use of soft disposable ear plugs. These ear plugs will be provided by the program. If a student has previously purchased a noise-suppression device, a faculty or staff member must inspect them prior to use. Noise suppression devices having electronic capabilities will not be allowed under any circumstances.

### **Class Interactions**

As adult learners, the amount that the students learn is directly related to what they put in to the experience. Self-motivation is key. Students must take responsibility for their own learning. When attending a university, students are paying for a service. They do not dictate how the service is provided. Participating in the program is a privilege and an honor, not an entitlement. The experience is earned through hard work and outstanding performances. Students have the potential to learn as much from each other as they do from the lecturers, thus diversity in the class is strength. Tolerance and mutual respect for others are important components of professional behavior, thus the PA program expects its students to be respectful, courteous, and non-judgmental when dealing with others, such as instructors, staff, guest lecturers, patients, and peers.

### **Social Media**

The following applies to the use of social media related to Physician Assistant Education Program at Heritage University and the use of social networking sites that include, but are not limited to; Facebook, Instagram, Snap, YouTube, Twitter, LinkedIn, and blogs. While the program attempts to provide reasonable guidelines, as new opportunities and challenges emerge, these guidelines will evolve.

### **Protect confidential and proprietary information**

Do not post confidential or proprietary information during didactic and clinical year about Heritage University PA students, employees, alumni or identifiable things you encounter in your clinical settings. All persons must follow the applicable federal requirements such as FERPA and HIPAA, as well as NAIA regulations. Adhere to all applicable institutional and legal privacy, confidentiality and property policies and laws.

### **Your posting can impact the College and your future career**

Do not post anything that could negatively impact the University. The healthcare community is a well-connected group and your comments about a certain hospital, doctor, preceptor or instructor are not private and can impact you and the University by association. Defamation of the University, the PA program and others is breaking the student code of conduct and appropriate punishment will apply.

### **Use Heritage University properties only with permission**

No user may establish social networking sites such as Quizlet that uses Heritage University logo/text treatment or other intellectual properties such as photography, video, artwork, and publications copyrighted to the University without authorization from the University. It is a violation of social networking site policies to represent an institution without authorization.

Heritage University is committed to creating and maintaining an environment where persons can work together in an atmosphere free of all forms of abusive or demeaning communication. Heritage University acknowledges the individual right of expression within the bounds of courtesy, sensitivity, and respect. Disciplinary action will be taken against individuals found to have engaged in prohibited use of the Heritage University electronic communications resources. For additional information about policies and procedures pertaining to electronic communications, contact the Information Technology Department.

### **Dress Code**

PA students will, at all times, be dressed appropriately with awareness to personal hygiene, cleanliness, professional demeanor and professional dress. Visible body piercing, other than ear lobes, and tattooing are not acceptable and must be covered at all times. Clothing must be clean and in good repair, not torn, wrinkled, or dirty. **Scrubs are not considered appropriate** unless specifically allowed by the instructor/preceptor, such as for workshops or a specific rotation. If the dress code is not followed students may be asked to leave.

During the clinical year, you will meet new staff, patients and people on a daily basis. It is here that first impressions will carry significant weight. How you are dressed and present yourself will go miles in determining as to what and how people will think of you. How you dress will be a reflection of whom you are and who you represent. A significant element of patient care will be determined by how much the patient trusts you. That patients' trust is often based upon your appearance and presentation to them.

A general rule to consider during the clinical year is to call ahead and ask your clinical preceptor what the dress code is. If in doubt dress conservative and professional. Always have your lab coat available. **Remember, if you are not appropriately dressed, your clinical preceptor has the right to send you home.**

Business casual attire will be required for all PA program activities including classroom lectures. Lab coats and name badges will be required for all workshops unless otherwise notified. No perfumes, scented lotions, colognes, or after shave is allowed in the classroom or when seeing patients.

Business casual attire is:



**Not Acceptable**



	<b>Acceptable</b>	<b>Prohibited</b>
<b>For female students:</b>	<ul style="list-style-type: none"> <li>• <b>Classic tailored slacks, dress pants, or trousers</b></li> <li>• <b>Skirts or dresses with hemlines no higher than 2” above the knee when standing,</b></li> <li>• <b>Tops that are conservative and does not bare the midriff or show cleavage; jacket/blazers</b></li> </ul>	<p>Capris, jeggings, walking shorts, denim material jeans of any color, short skirts (shorter than mid-thigh), spandex wear, leggings, sweat pants/exercise wear, revealing clothing</p> <p>Tank tops (narrow shoulder straps, plunging neckline, and tight fitting), T-shirts, bare midriff, clothing with logos, sweats,</p>

<b>For male students:</b>	<b>Slacks, collared shirts, ties (not required during lecture), sweaters, and jacket/blazers</b>	Denim material jeans, spandex, skin tight leggings/bicycle wear, sweat pants/exercise wear  Tank tops, T-shirts, clothing with logos, sweats,
<b>Shoes</b>	<b>Close toed shoes clean and in good repair worn with socks</b>	Flip-flops, sandals, open toed shoes, sneakers, slippers
<b>Hair/nails</b>	<b>Hair should be clean, kempt, and of a naturally appearing color. Longer hair must be secured to avoid interference with patients or workshop activities. Nails will be clean and cut short. False nails are not allowed.</b>	Caps or hats indoors; unnatural colors or distracting hairstyles.
<b>Facial Hair</b>	<b>Facial Hair must be short, neatly trimmed and maintained.</b>	Excessive beard or mustache styles
<b>Jewelry and tattoos</b>	<b>Conservative jewelry is acceptable but must not be distracting in class or interfere with general duties in clinic.</b>	Body piercing other than earlobes; visible tattoos; dangling bracelets or necklaces that are noisy, knock against the desks or could contaminate a sterile field.

## PROFESSIONALISM

### Professional Behavior Standards

PA students must adhere to standards of professional behavior consistent with the principles of medical ethics and state and federal laws. This is to ensure the student becomes a safe, competent provider, an effective health care team member, one who upholds the integrity of the PA profession, and one who will be a steward of health care, public safety, and wellness for their community. Students are expected to develop and demonstrate these behaviors, attitudes, and attributes of a physician assistant throughout the program and their professional careers.

Prior to arriving on campus, the students complete an online Orientation Reflective Assignment that asks the students to respond to specific questions regarding professional attributes of the PA profession. This assignment sets the student's expectations/plan for their actions and development as a leader throughout the program. The student's academic and clinical advisors review these documents with the student at the first advisor/advisee meeting.

The faculty evaluate the student's professional behavior throughout the curriculum, including behavior in the classroom; interactions with peers, faculty and staff; participation in seminars; and conduct in clinical settings. The faculty advisors provide constructive feedback regarding minor lapses in professional behavior, using the student's reflective assignment as a guide.

If a major concern arises, the student should expect a review by the Student Progress Committee (SPC). After evaluation of the situation the SPC, the student may be absolved, placed on warning, probation or dismissed from the program for professional issues.

The Program expects the students to adhere to the Statement of Values of the Physician Assistant Profession as outlined in the *Guidelines for Ethical Conduct for the Physician Assistant Profession* (Appendix B)

Physician assistant students must:

- Hold as their primary responsibility the health, safety, welfare, and dignity of all human beings.
- Uphold the tenets of patient autonomy, beneficence, non-maleficence, and justice.
- Recognize and promote the value of diversity.
- Treat equally all persons who seek their care.
- Hold in confidence the information shared in the course of practicing medicine.
- Assess their personal capabilities and limitations, striving always to improve their medical practice.
- Actively seek to expand their knowledge and skills, keeping abreast of advances in medicine.
- Work with other members of the health care team to provide compassionate and effective care of patients.
- Use their knowledge and experience to contribute to an improved community.
- Respect their professional relationship with physicians.
- Share and expand knowledge within the profession.

### **Examples of Unprofessional Behaviors**

Examples of student conduct which violate professional standards and will lead to disciplinary action by the Program include but are not limited to:

- Intentionally interfering with classes, research, administration, patient care, movement of other people, or any school function
- Showing a lack of respect towards other students, patients, faculty, staff, administration, or other school personnel
- Being mentally or constitutionally unable to follow the directions provided by faculty, staff, administration, or other school personnel
- Academic dishonesty, including cheating, plagiarism, attempting to pass examinations by improper means, or assisting another student in such an act or simply tolerating it in others
- Intentionally providing false information to the school or officers of the school, altering records, or refusing to comply with the directions of school officials



- Intentional damage or theft of any school property or property of any school employee or visitor
- Practicing or appearing to practice medicine without a license (such as engaging in clinical activity without the direct supervision of a licensed Physician or PA) or accepting any form of reimbursement, payment, or gift for performance of clinical duties
- Sexual or physical harassment of any other student, employee, or visitor to the school
- The use, distribution, sale, or possession of illegal drugs or non-prescribed substances.
- Any intentional action in violation of local, state, or federal law or being indicted by a local, state, or federal court system for a felony.

In addition to disciplinary action through the PA program, students are held to the University standards of conduct. Please [view the Heritage University Student Handbook](#)

## **Employment**

The curriculum content and time required for completion of the PA education program is such that any outside employment by the student is strongly discouraged. PA students will not be required to work for the program or substitute for or function as instructional faculty. During clinical experiences, PA students must not be used to substitute for clinical or administrative staff. (ARC-PA: A3.04 - .06).

## **ONLINE RESOURCES**

This handbook serves as the primary resource for information, services, policies and procedures; however, there are several other places to obtain pertinent information and updates. A user ID and password will be provided to access information posted on additional websites.

- **MyHeritage** is the University website that includes courses, grades, student accounts, and communications with PA faculty.
- **Typhon** and **ExamSoft** are web-based platforms used by the PA Program during the didactic and clinical year.
- **Castle Branch** is the web-based platform used to track and verify all students' immunizations, health record, health insurance, background checks, and drug screens.
- All communication and important information will be routed to the student Heritage email account. Network access is permitted at any computer lab or laptop with internet connection.

Contact the Help Desk at 509-865-8579 or <https://myheritage.heritage.edu> for technical assistance.

### **Use Of University Equipment, Supplies & Assets.**

All business conducted on University property, using University equipment, supplies, or assets must be for approved University purposes. This includes such things as printing, copying, and/or distributing materials that are not for University approved purposes.

## **PROGRAM STRUCTURE AND ORGANIZATION**

The Physician Assistant Educational Program is a department in the College of Arts and Sciences and is under the leadership of the Program Director. The PA Program Director directly reports to the Dean of the College of Arts and Sciences who then reports to the Provost. The Program Director supervises the Medical Director and all faculty and staff in all activities that directly relate to the PA program.

### **Program Committees**

The program's governance and self-assessment is conducted by the following committees:

- Core Faculty/Staff – Department Meetings - chaired by the Program Director  
The core faculty meet at least monthly to review issues of day-to-day operation. Issues that require analysis and recommendations for action are referred to one of the other standing committees described below. Most actions regarding admissions and students are made by the Core Faculty/Staff Committee, based on recommendations of other standing committees. The program director and/or upper administration are responsible for actions regarding faculty and staff evaluation and budget-related resource issues.

The Core Faculty/Staff Committee conducts an annual retreat to analyze graduate outcomes and the program's educational effectiveness. Retreat agendas are set by the program director to assure that the program meets the minimum standards for accreditation and to pursue the program's goal of educational excellence. Core faculty are defined as those who are involved in the full scope of program operations, including admissions, teaching, committee work and student advising. The Medical Director is included in the core faculty.

- Curriculum Review Committee (CRC) – chaired by the Academic Coordinator  
The Curriculum Review Committee evaluates didactic and clinical courses, utilizing student evaluations, instructor observations and student performance as criteria. The committee makes course and/or curricular modifications as needed and reports those changes to the Core Faculty/Staff Committee.

The CRC analyzes student course and instructor evaluations, student performance, preceptor surveys, exit surveys, graduate surveys, PANCE data, and graduate outcomes to monitor the curriculum for educational effectiveness. The committee utilizes national benchmarks for comparison with the program's curricular content and sequence. The CRC includes the Core Faculty, the Program Director, and Medical Director. Adjunct faculty and clinical faculty attend when possible and



their input is sought when pertinent to the issues.

- Student Progress Committee (SPC) – chaired by the Medical Director  
The Student Progress Committee reviews each student’s performance throughout each term academic and professional performance to determine the student’s disposition. With input from the course chairs and other appropriate faculty, the committee makes decisions about students who must remediate, decelerate, or be withdrawn.

At the end of the program, the SPC recommends students to the program director for graduation based on successful completion of the graduation and the summative evaluation requirements including professionalism standards. The summative evaluation is in the form of the student’s individual portfolio.

The SPC analyzes aggregate student data related to attrition, deceleration, remediation, and performance in didactic and clinical courses. The committee utilizes national/regional benchmarks and analyzes trends in student data in the context of admissions demographics and curricular changes.

- Admissions Committee – co-chaired by the Program Director and the Academic Coordinator  
The Admissions Committee is responsible for setting policy for the programs admissions process, including prerequisites, screening of applicants, the interview process, and student selection.

The Admission Committee reviews admissions policies and procedures, and assures the accuracy and consistency of admissions publications (web site, brochures). The committee reviews and evaluates admissions requirements, including prerequisite courses, to assure adequate applicant preparation for the program’s curriculum. The committee analyzes trends in the applicant pool and student enrollment, using national and/or regional benchmarks.

In addition to the Program Director and Academic Coordinator, the Admissions Committee consists of the Medical Director, Clinical Coordinator, and core faculty.

- Emergency Response Committee – co-chaired by the Academic and Clinical Coordinator  
The purpose of this committee is to establish and maintain a system in which program affiliated faculty, students, or staff may be notified in an efficient and effective manner and to respond to any situation that may adversely affect a student, faculty, or staff member.

## **Program Governance**

The above standing committees form the governance structure of the program. Matters related to financial and personnel are reserved for the program director and/or upper level

administration. The program director may convene an executive committee, consisting of the Medical Director, Academic Coordinator, and Clinical Coordinator as needed for general guidance or advice on strategic planning issues.

### **Additional Requirements for Accepted Students**

The program will provide each student with the Castle Branch website link and a code to access their services for the criminal background check, drug screen, immunizations and health history.

**All requirements to be completed by May 1<sup>st</sup> to start class and must be kept current for the remainder of the program.**

### **Criminal Background Check**

Prior to admission and prior to starting a clinical rotation with a contracted/affiliated hospital or healthcare facility, students are required to undergo a criminal background check to enhance patient safety and protection. CastleBranch is the contracted company with the PA Program to complete the search and provide a summary report of the eligibility screenings. This is a requirement placed on the healthcare facilities by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

#### **A. The Physician Assistant Educational Program has adopted the following policy for the Criminal Background Checks (CBC):**

1. The Physician Assistant Educational Program at Heritage University requires that all students prior to admission undergo a CBC. The student will assume the cost of the CBC prior to admission. No student will be allowed to participate in any classroom activities without proof of a CBC given to the PA Program Office.
2. PA Program requires that all students will undergo a second CBC prior to the commencement of clinical rotations. The student will assume the cost of the CBC prior to the clinical-year matriculation. The CBC will be performed at least three months prior to commencement of the clinical rotation with the CBC record on file with the PA Program Office.
3. The entity, CastleBranch is approved and licensed to perform background checks. The company is selected at the sole discretion of Heritage University.
4. The CBC search may include, but not be limited to:
  - a. Social Security Number Trace
  - b. Residency History
  - c. State Criminal Background check
  - d. U.S. County Criminal Records for all counties in the past seven years
  - e. Nationwide Database Search (Criminal Records & Nationwide Sex Offender Registry)

- f. HS/OIG list of excluded individuals, GSA list of Parties Excluded from Federal Programs Consumer report information related to character, general reputation and credit that may be subject to the Fair Credit Reporting Act
- g. Nationwide Healthcare Fraud & Abuse Registry (FACIS Level III)
- h. Anti-Terrorism, USA PATRIOT Act

## **B. Criminal Background Check Process**

1. Heritage University will notify all newly admitted students of the requirement that they must have an approved Criminal Background Check (CBC) prior to matriculation. A student who is challenging any part of the CBC may enroll if he/she acknowledges that the challenge *must be cleared prior to attending classes*.
2. Heritage University will notify all students of the requirement that they must have an approved Criminal Background check at least three months prior to commencement of the clinical rotation. Students will be referred to the CBC website to complete the directions. A summary report will be sent to PA Program Office.
3. A fully detailed copy of the report will be delivered directly to the student with a copy to the Program Director with the student's prior approval.
4. Any questionable or adverse information provided through the CBC will be referred to the Student Progress
5. Committee for further evaluation. An adverse or questionable report may result in the denial of admission or dismissal from Heritage University.

## **C. Challenged Results of the Criminal Background Check**

1. Students who question the accuracy of the report should immediately send a brief written statement regarding the area they believe to be incorrect to the entity that performed the CBC.
2. All disputes pertaining to the CBC findings must be communicated in writing directly to the entity that conducted the CBC.
3. Re-verification will be made if the entity determines that reasonable grounds exist and that the request is not frivolous or irrelevant.
4. If parts of the report are deleted or changed because of re-verification, Heritage University and the student will receive a corrected report.
5. If the student does not challenge the questionable or adverse information from the entity that conducted the CBC and when the CBC findings are such that the student does not meet the healthcare site's CBC requirement, the student will be referred by the PA Program Director to the Student Progress Committee for further evaluation.

6. Any adverse decision by the Student Progress Committee may have a final appeal through the Dean of Arts and Science, then the Provost, if requested.

Notification from Heritage University that a prospective student is denied enrollment or a currently enrolled student is denied participation in clinical rotations due to CBC findings will be provided by certified letter to the student from the PA Program Director explaining why the student cannot matriculate or continue in the program.

### **Duty to Report Criminal Charges/Determinations**

*Students have the responsibility to report certain criminal charges/determinations:*

1. Criminal Charges
  - a. Any student of the Physician Assistant Educational Program who is charged with a crime (other than a minor traffic offense and/or civil ordinance violation) shall report having been charged to the Program Director and Advisor within 3 days of becoming aware of such charge.
  - b. The student shall report the crime(s) he/she has been charged with and provide documentation of the charges upon request.
  - c. Within 3 days of receiving the notice from the student, the Program Director will decide to what action, if any, is immediately warranted.
2. Criminal Determinations
  - a. Within three (3) days of the student receiving a determination of criminal charges (e.g. dismissal, plea, and/or sentencing) he/she will notify the Program Director and Advisor and provide a copy of the court documents supporting the decision.
  - b. Within 3 days of receiving the documents from the student, the Program Director will make a determination to what action, if any, is immediately warranted.

### **Drug Screening**

The nature of clinical medicine requires that students and practitioners be of sound mind at all times while interacting with patients. For this reason, it is the policy of many health care institutions that all those participating in the medical treatment of patients be free from the effects of intoxicating substances. To ensure that the Physician Assistant Educational Program at Heritage University (Program) and its students are in compliance with applicable rules and regulations regarding the use of intoxicants, physician assistant students will be required to successfully undergo drug testing prior to participating in any clinical experience.

The Program will determine when drug testing must be successfully completed. Testing will occur prior to admission and/or the initiation of clinical activities. In addition, the student may be subjected to additional testing at any point during the program as

determined by the Program Director, the majority of members of the Student Progress Committee (SPC), or the clinical site.

The drug screening process typically involves a urine drug screen for commonly used drugs of abuse; however, the Program may alter the type of specimen and/or the scope of substances screened at any time in order to meet requirements of clinical education sites.

Any questionable or adverse findings revealed through the urine drug screen of an accepted student will be referred to the Admissions Committee for further evaluation. An adverse or questionable finding in a current student will be referred to the SPC for review. Depending on the findings of the committees, the offer of admission may be rescinded or the current student may be removed from clinical training or from the physician assistant program entirely. Castle Branch is the entity contracted with the Heritage University to complete the drug screening.

**A. The Physician Assistant Educational Program has adopted the following drug screening (DS) policy:**

1. The student will assume the cost of the DS prior to admission. No student will be allowed to participate in any classroom activities without the submission of a DS report to the program.
2. DS will be performed at least three months prior to commencement of the clinical rotation with the DS record on file with the PA Program.
3. Heritage University PA program, at its sole discretion and at the cost to the University, may require a random DS at any time.
4. The entity, CastleBranch, is approved and licensed to perform background checks. The company is selected at the sole discretion of Heritage University.

**B. Medicinal Use of Screened Substances**

If a student tests positive for a substance and its use is medicinal in nature, it is the responsibility of the student to provide reasonable proof that the substance was used for its intended purpose. Documents to support medicinal use could include a current prescription, a letter from the treating medical clinician, or a current prescription bottle issued in the name of the student. Of note, cannabis is considered by the Federal Government to be a Schedule I controlled substance; therefore, “medicinal marijuana” use does not fall under this section.

The program recognizes that while certain intoxicants including alcohol and cannabis may be legal to consume in the State of Washington, clinical sites can limit access to their facility and to patients to those under the influence of any intoxicating substance. Additionally, while the program is in a state that allows for the recreational and medicinal use of cannabis, the Federal Government and many surrounding states (where clinical sites may be located) continue to prohibit all use. Due to this fact, the

program must ensure that our students are in compliance with federal and state laws. It should be noted that it is not the intent of the program to pass judgment, but simply to ensure compliance with our partners in clinical education.

### **C. Drug Screen Process**

1. Heritage University PA program will notify all newly admitted students of the requirement that they must have an approved drug screen prior to matriculation. A student who is challenging any part of the DS may enroll if he/she acknowledges that the challenge must be cleared prior to attending classes.
2. Students will be referred to CastleBranch for the drug screen. Students may petition to the PA program Director to have an alternative site selection for the drug screen for convenience or expense; however, the ultimate site approval is at the sole discretion of the Heritage University.
3. A detailed copy of the DS will be delivered directly to student's email profile account within the CastleBranch system. The clinical administrative assistant will receive a copy of the results with the student's prior approval.
4. Any questionable or adverse findings revealed through the drug screen of an accepted student will be referred to the Admissions Committee for further evaluation. An adverse or questionable finding in a current student will be referred to the Student Progress Committee for review. Any adverse or questionable DS may result in the denial of admission or dismissal from the program.

### **D. Drug Screen-Challenged Results**

1. Students who question the accuracy of the report should immediately send a brief written statement regarding the area they believe to be incorrect to the private company that performed the DS.
2. All disputes pertaining to the DS findings must be communicated in writing directly to the entity that conducted the DS.
3. Re-verification will be made if the entity determines that reasonable grounds exist and that the request is not frivolous or irrelevant.
4. If parts of the report are deleted or changed because of re-verification, the program and the student will receive a corrected DS report.
5. If the student does not challenge the questionable or adverse information from the entity that conducted the DS and when the DS findings are such that the student does not meet the program standards, the student will be referred by the PA Program Director to the Admissions Committee for further evaluation.

Any adverse decision by the Admissions Committee may have a final appeal through the Dean of Arts and Science, then the Provost, if needed.

## Medical History and Immunizations

Applicants accepted for admission are required to submit a medical history and physical examination form that has been completed and signed by a licensed health care professional prior to matriculation.

- A. **The following immunizations must be current while the student is enrolled in the PA program. All requirements must be completed by May 1<sup>st</sup> to start class and then kept current for the remainder of the program.**
1. PPD testing yearly (chest radiography every three years if PPD is positive), prior to the first day of class the student must complete a two-step PPD test:
    - a. 1<sup>st</sup> test – tuberculin skin test (TST) given, read and recorded
    - b. If 1<sup>st</sup> test is positive, refer to PCP for chest x-ray to rule out active disease
    - c. If 1<sup>st</sup> test is negative, repeat TST in 1–2 weeks.
    - d. If the 2<sup>nd</sup> test is positive as defined by induration increases by 6mm, refer to PCP for chest x-ray to rule out active disease.
    - e. If the 2<sup>nd</sup> test is negative, annual TST will be sufficient and any positive reaction would be considered a new infection.
  2. Hepatitis B immunization established by three reported dates of immunization or by documented testing of antibody titer or HBSAB titer
  3. Tetanus, Diphtheria, Pertussis (Tdap) immunization once after the age of 19 then booster with Tetanus/Diphtheria (Td) or Tdap every ten years
  4. MMR immunization documentation showing two doses at recommended schedule or by documented antibody titer (negative titers need MMR, two-step vaccine 4 weeks apart, followed by another titer 6-8 weeks later with documentation of immunity)
  5. Varicella status by, positive titer, or two-step vaccine 4 weeks apart with repeated IgG Titer
  6. Polio vaccination (OPV or IPV), or by documented testing of antibody titer
  7. Influenza immunization annually
  8. Other immunizations required by clinic or site

The medical history and physical examination forms and the immunization records will be reviewed and approved/clarified by the Physician Assistant Program's contracted reviewers. The PA program faculty and staff will not have access to the medical history and physical examination forms except for the immunization records, which may be maintained and released with written permission from the student.

## Health Insurance

PA program students must present proof of personal health insurance at registration and maintain personal health insurance throughout the educational program. The student is solely responsible for his/her medical bills. The University assumes no responsibility to seek reductions or waivers.



## **Health Maintenance**

Heritage University does not have a student health center at this time. Principle faculty, the Program Director, and the Medical Director cannot participate as routine health care providers for students. The Office of the Program Director may assist students in obtaining a health care provider in the area during the educational period.

## **Deferment**

PA Program does not usually defer admission, but in unusual circumstances, it may be considered. Requests submitted to the Admission Committee will be reviewed and a recommendation made to the Program Director.

## **Blood Borne Pathogen/Communicable Disease Exposure**

### **A. Overview**

The Blood Borne Pathogen (BBP) policy includes 3 components:

1. Education/prevention.
2. Immediate post-mishap evaluation of exposure risk, as outlined by current Center for Disease Control and Prevention guidance and recommendations.
3. Appropriate follow-up. The goals of this policy are to insure the immediate cleansing of the exposure site, reporting of the incident, and when indicated, immediate appropriate post-exposure prophylactic treatment be started using CDC guidelines within two hours or less of the exposure and that appropriate laboratory work-up, counseling, and follow-up be provided.

### **B. Education/Prevention**

All first and second year PA students will complete an instructional module on HIV/AIDS and Universal Precautions annually that will address CDC current relevant universal exposure precautions, the post-exposure reporting process, prophylactic treatment of BBP and other transmitted diseases as indicated.

1. Prevention includes:
  - a. good hand washing,
  - b. wearing personal protective equipment (PPE)
  - c. using safe injection practices
  - d. using safe techniques to handle contaminated equipment or surfaces

### **C. BBP/HIV/AIDS Exposure**

All students with medical education related BBP/HIV/AIDS exposure through another person's blood or body fluids by injury caused by a sharp object or exposure to mucous membranes or skin will take the following steps immediately:



1. Perform Basic First Aid: Immediately clean the wound and skin with soap and running water. Flush any mucous membranes or eyes with copious amounts of water or normal saline for several minutes. Blood should be allowed to flow freely from the wound but should not be squeezed or “milked.”
2. Immediately notify your preceptor. Any PA students with medical education related BBP/HIV/AIDS exposure will be immediately released from his/her preceptor/rotation to go the nearest affiliated hospital Emergency Department (ED). If no affiliated hospital is in the area, go the nearest hospital with an ED.
3. Notify your Clinical Advisor, the Clinical Coordinator, or Program Director immediately.
  - a. University Faculty will work with student to begin the proper incident reporting process.
  - b. In the event that the student declines medical assessment/treatment, an incident form must still be completed indicating the students’ declination of assessment and/or treatment.
4. The goal of the student reporting to the ED for BBP/HIV/AIDS exposure is to allow for immediate assessment and treatment based on CDC Guidelines.
5. The student may call the Post Exposure Prophylaxis Hotline at: 888-448-4911 for additional information

#### **D. Other Communicable Disease Exposure**

If a student is exposed to some other communicable disease, they should follow the facilities exposure plan and/or report to the local ER or health department. Recommendations regarding communicability will be managed on a case by case basis and in concert with local authorities. Some disease exposures, such as tuberculosis, may result in clinical privileges being temporarily halted at the request of the site or university.

\*\*Note: Expenses related to the exposure or injury are the financial responsibility of the student (ARC-PA: A3.08).

### **Environmental/Chemical Hazards**

Students must be alert to any environmental or chemical hazards that might be encountered during their clinical education. Material Safety Data Sheets (MSDS) are required by law to be readily available where chemicals are used. Each clinic may keep these information sheets in different locations. It is the student’s responsibility to find out where the MSDS information is housed for any chemicals they use, or may be exposed to, in each clinic/hospital site where they are rotating.

Post-exposure care is dictated by the type of chemical and the type of exposure. The clinical preceptor or the student safety officer is responsible for providing care in the case of any

emergency. It is imperative that the student notify the preceptor immediately following an exposure and follow the MSDS instructions for treatment. Expenses related to the exposure or injury are the financial responsibility of the student. (ARC-PA: A3.08)

## **CURRICULUM OVERVIEW**

The curriculum is consistent with the mission and goals of the program and is structured around the following competencies of the PA profession (Appendix A):

### **1. Medical Knowledge**

The PA graduate will recognize and explain health problems based upon current scientific knowledge or understanding. The graduate will develop a plan for intervention that uses scientific understanding for optimum results. The graduate will be aware of his/her personal knowledge and experience and have an intellectual interest in general education and medical science. The graduate will actively set clear learning goals, pursue them, and continually apply the new knowledge.

### **2. Interpersonal and Communication Skills**

The PA graduate will listen and communicate effectively with patients, co-workers and staff. He/she will learn team and leadership skills and effectively communicate through accurate, up-to-date medical records. Graduates will demonstrate interpersonal and communication skills that enable them to establish and maintain professional relationships with patient's families and other members of the health care team.

### **3. Patient Care**

The Physician Assistant Educational Program graduate will demonstrate the ability to effectively treat patients from diverse populations, providing them medical care that incorporates the education for the prevention of common health problems exhibited in individuals, families, and communities. In addition, they will demonstrate patient empathy and awareness of behavioral issues.

### **4. Professionalism**

The PA graduate will uphold the principles of medical ethics, promote advocacy and patient welfare, collaborate with health professionals, exhibit lifelong learning, and show sensitivity to a diverse patient population. The graduate will be prompt and professional in appearance.

### **5. Practice-Based Learning and Improvement**

The PA graduate will demonstrate the ability to critically evaluate their methods of clinical practice, integrate evidence-based medicine into patient care, show an understanding of research methods, and improve patient care practices.

### **6. Systems-Based Practice**

The PA graduate will demonstrate an understanding of health delivery systems, provide effective and qualitative patient care within the system, and practice cost-effective medicine. They will participate in interprofessional collaborative practice as a way to provide the most complete, cost effective, patient-centered care.

The following chart indicates the required coursework for the Master of Science, Physician Assistant degree.

**Curriculum Grid:**

<b>Didactic Summer Term</b>	<b>Cr</b>	<b>Didactic Fall Term</b>	<b>Cr</b>	<b>Didactic Spring Term</b>	<b>Cr</b>	<b>Total</b>	<b>Total hours</b>
Behavioral Medicine I: PAM 500	1	Behavioral Med II: PAM 505	3	Behavioral Med III: PAM 510	3	7	120
Master's Research Project I: PAM 515	2	MRP II: PAM 520	2	MRP III: PAM 525	2	6	90
Professional Issues for PAs I: PAM 530	1	PIPA II: PAM 535	2	PIPA III: PAM 540	1	4	60
		Procedures & Diagnostics I: PAM 550	5	Procedures & Diagnostics II: PAM 555 A	5	10	156
				Spanish for Medical Professionals: SPAN 570	3	3	48
Intro to Primary Care & Normal Patient: PAM 545	8	Integrated Primary Care: PAM 560 A	14	Integrated Primary Care: PAM 565 A	14	36	540
<b>TOTAL</b>	<b>12</b>		<b>26</b>		<b>28</b>	<b>66</b>	<b>1014</b>
<b>Clinical Summer Term</b>	<b>Cr</b>	<b>Clinical Fall Term</b>	<b>Cr</b>	<b>Clinical Spring Term</b>	<b>Cr</b>	<b>Total</b>	<b>Total hours</b>
Master's Research Project IV (online): PAM 615	1	MRP V (online) : PAM 620	2	MRP VI (online): PAM 625	1	4	60
Community Based Clinical Experience I: PAM 600	12	Community Based Clinical Exp. II: PAM 605	20	Community Based Clinical Exp. III: PAM 610	18	50	2000
<b>Total</b>	<b>13</b>		<b>22</b>		<b>19</b>	<b>54</b>	<b>2060</b>

**Total credits for MSPA: 120 (70 didactic and master's project + 50 clinical credits representing approximately 2000 clinical hours)**

## **COURSE DESCRIPTIONS**

**The following courses are a required component of the didactic education for the degree of Master of Science, Physician Assistant (MSPA).**

### **Professional Issues for Physician Assistants I, II, III (PAM 530, PAM 535, PAM 540)**

This course continues throughout the three terms of the didactic year. The students will learn the necessary skills to search, interpret, and evaluate the medical literature in order to maintain a current and critical knowledge of new medical findings that are pertinent to their patients. They will also learn the basic principles of evidence-based medicine, including its application to individualized patient care. Some learning modules will focus on the history of the PA profession; the health care team; professional organizations; cultural issues and their impact on health care policy; confidentiality, privilege and HIPAA; and personal and professional ethics. Discussions will include professional responsibility and a commitment to the patient's welfare; health care delivery systems and policy; reimbursement; billing and coding; quality assurance and risk management; political and legal issues; and PA certification, licensing, and credentialing.

### **Master's Research Project I, II, III, IV, V, VI (PAM 515, PAM 520, PAM 525, PAM 615, PAM 620, PAM 625)**

The Master's Research Project continues throughout the full two-year program and begins as an on-campus course where the students are introduced to research design, validity, reliability, and ethics as well as data collection, analysis, and interpretation as they develop their research project. The course then moves into a totally online format where, during the next three terms, the students will incorporate independent study and formative feedback to move through to completion and presentation of their research projects. The applied projects are chosen by the students, approved by the course director, and must be a health promotion, disease prevention issue that is pertinent for a specific patient population and health care team.

### **Introductory Spanish for Medical Professionals (Span 570)**

This combination lecture and laboratory/skills course introduces essential medical vocabulary, practical reference information, and medical notes from a cross-cultural perspective. Basic language skills needed to conduct an interview with a Spanish speaking patient. Vocabulary, grammar, pronunciation, and pertinent cultural issues will be explored as well as techniques for eliciting information and sample interview questions. Guest lecture speakers from the Medical community will address a variety of practical issues.

### **Behavioral Medicine I, II, III (PAM 500, PAM 505, PAM 510)**

Behavioral Medicine will cover the knowledge, skills and sensitivity needed in order to intervene effectively for a variety of psychiatric, emotional, and social concerns which impact upon the health and well-being of patients. Students will gain skills in the

evaluation, counseling, diagnosis, and management of patients with mental illness, issues of aging, and other psychosocial situations.

**Introduction to Primary Care and the “Normal” Patient  
(PAM 545)**

This course will introduce the physician assistant student to primary care and the “normal” patient from the newborn to the geriatric patient. The student will learn what is “normal,” i.e. the general molecular chemistry of life, including genetics; growth and development; basic screening exams for adults, newborns, and children; principles of pharmacology, pharmacodynamics and pharmacokinetics, and how to take accurate and complete histories on all types of patients. Health promotion and disease prevention will be addressed as well as immunology, infectious diseases, and antibiotics.

**Integrated Primary Care I, II  
(PAM 560 A, PAM 565 A)**

Continuing through fall and spring terms, this course provides students with instruction in patient assessment of the most common clinical problems seen by primary care practitioners. This course includes a review of human anatomy/physiology and pathophysiology and instruction in: generation of differential diagnoses; ordering and interpreting appropriate diagnostic studies, such as radiography and electrocardiography; written documentation and oral presentation of patient data; and appropriate referral of patients. Using an organ systems approach, essential information is provided in regards to the diagnosis and management of the most common acute, emergent, and chronic clinical problems seen by primary care providers in their pediatric as well as adult patients. Management methods discussed will include medical, surgical, pharmacologic, and rehabilitative modalities. The students will be able to develop an understanding of major drug classifications, their mechanism of action, the major side effects, and commonly used drugs in each category. Information is presented using lectures, labs, online assignments, and small group activities then enhanced with case studies, standardized patient encounters, and simulation mannequin experiences.

**Procedures & Diagnostics I, II  
(PAM 550 A, PAM 555 A)**

The Procedures and Diagnostics courses will allow the student to apply their knowledge by experiencing clinical situations with a simulation mannequin, standardized patient, or actual clinical patients. Skills, including but not limited to techniques of patient interviewing; performing physical exams across the ages, suturing, casting, splinting, intravenous line insertion, and airway insertion, will be presented in a lab or workshop environment. Observational experiences and case studies will be used to enhance learning. The subject sequence is organized around the Integrated Primary Care course.

**The following courses are a required component of the clinical education for the degree of Master of Science, Physician Assistant.**

**Community-Based Clinical Experience I, II, III  
(PAM 600, PAM 605, PAM 610)**

The clinical component of this educational program will be based in rural and/or underserved communities. The students will be based in a home community, a Clinical Learning Center, and will participate in supervised, integrated, clinical practice experiences in emergency medicine, family medicine, general internal medicine, general surgical/operative care, geriatrics, pediatrics, prenatal and women's health care, and psychiatry and/or behavioral medicine. Students will rotate through outpatient, emergency, inpatient, and long-term care settings throughout the clinical year as they gain experience and meet the objectives of the course.

The Clinical Learning Centers will be in communities with critical access hospitals, which will have an active emergency room, essential specialists, and a strong family medicine and/or internal medicine base. **Students will be required to live in the community as they rotate through the clinical year**, while maintaining a continuity presence in a family medicine clinic. Students may be required to attend short intensive rotations outside of their home community for specific required experiences.

During the clinical year, students may choose two elective clinical rotations, up to 320 hours combined. These rotations may or may not be in their home community. All elective rotations must have clear educational objectives and be approved by the Clinical Coordinator or, in his/her absence, the Program Director.

## **Program Assessment**

### **Evaluations for Didactic Year**

Typhon Evaluation – Student Evaluation of Courses

1. Completed at the end of every term for each course you are enrolled in.
  - a. Summer term –
    - PAM 500 – Behavioral Medicine I
    - PAM 515 – Master's Research Project I
    - PAM 530 – Professional Issues for Physician Assistants I
    - PAM 545 – Introduction to Primary Care and the Normal Patient
  - b. Fall term –
    - PAM 505 – Behavioral Medicine II
    - PAM 520 – Master's Research Project II
    - PAM 535 – Professional Issues for Physician Assistants II
    - PAM 550a – Procedures and Diagnostics I
    - PAM 560 – Integrated Primary Care I
  - c. Spring term –
    - PAM 510– Behavioral Medicine III
    - PAM 525 – Master's Research Project III
    - PAM 540 – Professional Issues for Physician Assistants III

PAM 555a – Procedures and Diagnostics II  
PAM 565 – Integrated Primary Care II  
SPAN 570 – Spanish for Medical

This does not take away the requirement of the Heritage University evaluation completed in MyHeritage.

Typhon Evaluation – Student Evaluation of Instructor

1. Completed by students in Typhon at the end of each semester.
2. The instructors are our faculty in the 500 level PAM courses.

Typhon Evaluation – Student Evaluation of Guest Lecturer

1. Completed by students in Typhon.
2. You will be notified that there is a Guest Lecturer evaluation available in Typhon by email when the lecturer has given their last lecture for the semester.

Typhon Evaluation – Student Selection of Outstanding Guest Lecturer Award

1. Completed by students in Typhon.

### **Evaluations for Clinical Year**

Typhon Evaluation – Student Evaluation of Courses

1. Completed at the end of every term for each course you are enrolled in.
  - a. Summer term –
    - PAM 600 – Community-based Clinical Experience I
    - PAM 615 – Master’s Research Project IV
  - b. Fall term –
    - PAM 605 – Community-based Clinical Experience II
    - PAM 620 – Master’s Research Project V
  - c. Spring term –
    - PAM 610– Community-based Clinical Experience III
    - PAM 625 – Master’s Research Project VI

This does not take away the requirement of the Heritage University evaluation completed in MyHeritage.

Typhon Evaluation – Clinical Student Evaluation of Clinical Instructor

1. Completed by students in Typhon at the end of each semester.
2. The instructors are clinical faculty in the 600 level PAM courses.

Typhon Evaluation – Clinical Student Evaluation of Preceptors and Rotations

1. Completed by students in Typhon.
2. You will be notified that there is an evaluation available in Typhon by email at the end of each rotation.



## CLINICAL YEAR INTRODUCTION

**Students need to be aware and understand that they will be placed in rural and underserved areas at the sole discretion of the University.**

The Heritage University Physician Assistant Educational Program curriculum is based on principles of adult learning and body systems-based modules. The module system of the didactic year allows students to learn the basic medical sciences, physical and diagnostic assessment skills and how a disease presents in an adult, child, or in an emergent situation.

The clinical year is a community-based education concept whereas the student is placed in a central community for the duration of the clinical year. In most cases, the community will be rural, underserved, and/or underrepresented locations in the region; however, may be in other parts of the country at the discretion of the program faculty. The student will live in the community they are assigned to by the Clinical Coordinator. Each student is required to update current records with regards to name, mailing address, telephone number, and emergency contact information in Typhon and with student services.

Each student will receive supervised clinical practice experiences in emergency medicine, family medicine, inpatient medicine, surgery/operative care, geriatrics, pediatrics, prenatal and women's health care, and behavioral medicine. While in the community, the student will be placed in a primary care clinic for two or three days per week during the entire clinical year. The remaining days will be spent rotating through specialty rotations of pediatrics, women's health, inpatient medicine, surgery, emergency medicine and behavioral medicine in the community that is assigned to the student. Of note, the specialty rotations may be adjusted based availability of certain patient populations within the primary clinical site. For example, if pediatrics and obstetrical patients are managed within the primary site, those specialty rotations may be omitted.

During the clinical year, the Physician Assistant (PA) student, will have the opportunity to demonstrate, augment the knowledge, and skills that was acquired during the didactic year of the Physician Assistant Educational Program. Each student will be assigned to clinical settings which will promote the development of a greater understanding of the health care environment and patient management.

The responsibility entrusted to a clinical PA student is significant. Therefore, commitment to a high level of professionalism and clinical skill is an integral part of the student's obligation to the patients, clinical facilities, and PA profession.

The clinical year is where students have the opportunity to put it all together. During the didactic portion of the education, students studied medicine in a relative sterile environment. The didactic year of education has provided a basic set of skills required to make clinical decisions. The relative vacuum environment of didactic learning provided the concepts of medicine, logical correlations, simulated patients, and patient management



problems. Students will have a variety of patients to learn from, examine, make decisions about, educate, and support.

Students begin to develop the framework on which to hang all the abstract concepts learned in the classroom and have a chance to tailor their own style of patient management. It is common for first year PA students to be completely overwhelmed by all that had to be remembered in the didactic year of education. Having a real patient with a real problem makes remembering much easier.

The preceptor is responsible to their patients first and to the student second. Students will now morph into more of an apprentice than student. The preceptors have been chosen for their willingness and expertise in educating new colleagues. They have been briefed in the PA role, objectives of the clinical experience, and evaluation tools. The clinical rotation is a fast-paced practice where the preceptor usually will not get to know the student in-depth for quite some time. Each student must take an active role in defining the educational goals and creating an educational experience in which to achieve the goal of preparing and passing the national board exams.

Clinical learning experiences and flexibility vary from site to site. To maximize the clinical experience be aware that:

- A student may be permitted a full range of participation in patient care activities.
- Other sites may impose restrictions relative to chart documentation, certain clinical procedures, administration of medication, on-call, etc.
- Restrictions are usually based on institutionally mandated protocols but in some cases preceptors will restrict activity if they have reservations about the student's ability or professional conduct.
- It is the student's professional obligation to augment clinical experiences with a daily review of the medical literature. Developing a disciplined approach to reading the literature will help build the foundation of medical knowledge. This will not only enhance the student's personal development, but will serve as preparation for end of semester written examinations and the national certification examination.

### **Entrance into the Clinic year**

- A. To enter the clinical year of the program, each student must meet the following criteria:
1. Successfully complete all didactic year classes as outlined in the Physician Assistant Educational Program Student Handbook.
  2. Achieve an overall cumulative average of 3.0 GPA.
  3. Complete drug screening and criminal background check in accordance with policy outlined in the Clinical and Student Handbook.
  4. Have current immunizations, titers, and/or tests as required by the PA program and the clinical sites. These include, but are not limited to: MMR, tetanus, diphtheria, pertussis, hepatitis A, hepatitis B, varicella, polio, and influenza.

Tuberculosis screening must also be completed, which may include skin testing and/or radiological examination. The program has a contract with CastleBranch to verify all immunizations and tests.

5. Complete the PACKRAT examination.
6. Demonstrate competent physical examination and clinical reasoning skills as determined by clinical skills problems via mock patient, objective examinations, or other simulations, administered by the program faculty.
7. Demonstrate compliance with the PA code of ethics.
8. Conform to professional behavior guidelines in this document.
9. Have read the Clinical Year Handbook.
10. *Obtain residency within the community where you are assigned and provide documentation to the clinical coordinator for verification.*

### **Clinical sites:**

If a rotation site is not yet approved or established with the PA program, the student may take the initiative to contact the site and relay contact information to the program. The Clinical Coordinator or other approved faculty will then facilitate the development and confirmation of the site. Do not make arrangements or promises with the site in regard to clinical rotations.

For liability purposes, unassigned (personally arranged) clinical experiences are not covered by student malpractice insurance. All clinical sites must be program approved prior to the start of the rotation.

The Clinical Coordinator reserves the right to deny a clinical site if the site doesn't meet minimum standards or program mission / objectives.

Until a clinical rotation is confirmed, the Clinical Coordinator has the authority to change any rotation site.

It is the student's responsibility to pay all travel costs related to program requirements, including clinical assignments.

## **GRADUATION REQUIREMENTS**

### **Competencies for the PA Profession**

The purpose of this program is to train physician assistants who will provide high quality medical care in a compassionate and competent manner in a dynamic health care environment. Furthermore, this program has the duty and responsibility to the public to assure that its graduates are fully competent physician assistants who will follow the decree: "First, do no harm." The curriculum goals are based upon the *Competencies for the Physician Assistant Profession* document as composed by the American Academy of Physician Assistants (AAPA), the National Commission on Certification of Physician Assistants (NCCPA), the Association of Physician Assistant Programs (now the Physician

Assistant Education Association, PAEA), and the Accreditation Review Commission for Education of the Physician Assistant (ARC-PA).

These competencies emphasize the knowledge, skills, and attitudes required to recognize and treat acute, chronic, emergent or surgical conditions that are commonly found in primary care patients of all ages. The *Competencies for the Physician Assistant Profession*, Appendix A outlines specific competencies in 1) medical knowledge, 2) interpersonal and communication skills, 3) patient care, 4) professionalism, 5) practice-based learning and improvement, and 6) systems-based practice.

The Physician Assistant Educational Program at Heritage graduates are expected to demonstrate these competencies by:

1. Gathering an accurate history, performing a competent physical exam, diagnosing physical and psychosocial health problems, and formulating a treatment plan for patients across the life span and in acute, chronic, emergent, and long-term settings. (Competencies: 1,2,3,4)
2. Accurately evaluating pertinent diagnostics such as ECGs, radiographs, and laboratory findings. (Competencies: 1,2,3)
3. Competently performing technical skills including but not limited to: casting, splinting, suturing, and venipuncture. (Competencies: 1,2)
4. Understanding the principles of scientific inquiry and research design, as well as the ability to apply these principles to critically read and interpret the literature leading to enhanced delivery of health care and life-long learning. (Competencies: 2,3)
5. Incorporating the basic principles of health promotion and disease prevention into programs that benefit the patient, the patient's family, and the community. (Competencies: 1,2,3,4,5,6)
6. Demonstrating effective listening and communication skills with patients, peers, and supervisors. (Competencies: 1,2,4)
7. Accurately and expeditiously documenting patient information while maintaining patient/provider confidentiality. (Competencies: 1,2,4)
8. Demonstrating sensitivity to individual differences such as age, gender, culture, and disabilities. (Competencies: 1,4,5)
9. Integrating ethical behavior and professionalism into the practice of medicine including intellectual honesty and respect for self and others. (Competencies: 1,4,5)
10. Establishing personalized involvement in professional activities and organizations that advance the physician assistant profession and provide service to the community. (Competencies: 5,6)
11. Participating in a team and community-oriented approach to the delivery of health care utilizing appropriate modern technology for the benefit of the patient, the patient's family, and the community. (Competencies: 1,2,3,4,5,6)
12. Establishing and maintaining an awareness of the health care system while advocating for quality patient care. (Competencies: 5,6)

## Additional graduation requirements

A student who has fulfilled all the academic requirements will be granted the Master of Science, Physician Assistant (M.S.P.A.) degree provided the student:

1. Has complied with all the curricular, legal, and financial requirements of the Department, such as:
  - a. passing grade of 80% or better in each required course/assessment in the curriculum,
  - b. the successful completion of the Summative Evaluation , and
  - c. complete payment of all tuition, fees, and library charges;
2. Has demonstrated suitability for the practice of medicine as evidenced by: meeting the competencies for the PA profession, the assumption of responsibility for patient care, and acknowledges self-limitations (evidenced in portfolio);
3. Has demonstrated ethical behavior, professionalism, and integrity during the didactic and clinical activities by adhering to the principles and values detailed in the *Guidelines for Ethical Conduct for the Physician Assistant Profession*, Appendix B or accessed through the American Academy of Physician Assistants web site at:  
<https://www.aapa.org/workarea/downloadasset.aspx?id=815> ); and
4. Has obtained approval from the PA faculty, Student Progress Committee, Program Director, and the Heritage University Registrar's Office.

## ACADEMIC PERFORMANCE

### Grades

Grade	Percentage	GPA value
<b>A</b>	95-100	4.0
<b>A-</b>	90-94	3.5
<b>B</b>	85-89	3.0
<b>B-</b>	80-84	2.5

Grading policies for each individual course will be provided with the course syllabus; however, 80% is the minimum acceptable passing grade for all courses in the PA program. Below 80% will be considered failing. It is up to the course coordinator of each course to decide if incompletes will be made up and how they would be graded. In most circumstances, workshops will not be made up. Students must pass all courses before advancing to the next term.

### Academic Status Report

Students may access their grade report from My Heritage within 7 days of each graded evaluation during a term and at the close of every academic term. The student will receive a letter of Academic Standing if they are placed on academic warning or conditional status.

Students, who are identified as failing one or more course modules, which could be exams, assignments or written essays, are to receive the appropriate letter from the Student Progress Committee (SPC) with copies sent to their advisors.

1. First failed exam → Receives an Academic Warning status letter with tutoring highly recommended.
2. Second failed exam → Receives an Academic Probation status letter, tutoring required, and a scheduled meeting with SPC
3. Third failed exam → Receives a Conditional Status letter with tutoring required once a week, a scheduled meeting with the SPC with possible dismissal from the program as determined by SPC.
4. Fourth failed exam → Automatic dismissal from the program.

The Student Progress Committee will make the final determination if the student in question will be removed from the program after the student is able to present their case.

Conditional Status or dismissal may also be required by the Program for any student who fails to:

1. Maintain ethical, moral, personal, or professional conduct,
2. Abide by Heritage University policies, rules and regulations, or
3. Fulfill legal or financial obligations

Students on Academic Probation will receive a study plan at the discretion and permission of the course chair and the SPC. The SPC will regularly review the progress of students on Academic Probation and may recommend Conditional Status at any time.

Students who are on Conditional Status are not eligible for PA program sanctioned travel and cannot hold elected office. At the discretion of the SPC, Conditional Status may include additional restrictions from activities the Committee deems detrimental to academic performance. Since academic grades are only one criterion for Conditional Status, the Student Progress Committee may recommend Conditional Status at any time even though a student's average grade is 80% or higher.

The records of all students on Conditional Status or Academic Probation will be reviewed for academic and professionalism difficulty following each significant testing period to evaluate the student's potential for continuance.

At the end of the academic year, the Student Progress Committee may recommend that students on Academic Probation or Conditional Status designations be placed into one of three categories with possible restrictions and modification:

1. Intense remediation or competency examinations,
2. Repeating the academic year in full, or
3. Dismissal from the program.

## **Academic Enhancement or Remediation**

If a student is in academic difficulty, indicated by scores below 80% on performance exams, written assignments, quizzes, or exams, the course coordinator will submit a proposed program of Academic Enhancement to the Student Progress Committee (SPC) with copies to the Program Director. This plan may include tutoring, online reviews, or other tools as deemed appropriate. Implementation of this proposal is the decision of the SPC. Once the plan has been accepted, it will be presented to the student.

If the student is identified only after the failure of the exams/assessments, the Academic Enhancement plan will be implemented prior to remediation of the information failed in the course. In the case of clinical rotation failures, the Clinical Coordinator shall act as course coordinator.

Immediately at the end of each term, or at a time designated by the SPC during the term, students who have failed a course exam/assessment during that term will be remediated. Students must pass with an 80% or better in order to pass the course. The grade recorded from the retest will be no greater than 80%. If the student fails remediation, and thus the course, the SPC may recommend one of the following:

1. ***Intensive Remediation:*** Upon recommendation of the Student Progress Committee, failures may be removed by passing a remedial examination given on or before three days prior to the commencement of the next term. The grade recorded from the remediated course can in no case be greater than 80%. Students who fail remediation are subject to dismissal. Even with a cumulative course grade above 80%, if one exam/assessment is failed and not successfully rectified through tutoring and remediation, the student will fail the course and thus be removed from the program.

2. ***Repeat Academic Year:*** The student may remediate by repeating an academic year in full. The recommendation is based on the sole discretion of the Student Progress Committee, but may be offered to a student with one or two courses or remediation failures.

In this instance, the student must retake and pass all courses regardless of previous performance. Students repeating their first year who are on Conditional Status are considered to be “admitted with conditions.” Those conditions are that any failure of any subject would be grounds for dismissal and will be referred to the Student Progress Committee for recommendations. Conditional Status will be removed at the end of the year when all classes are successfully completed.

3. ***Dismissal:*** The student is dismissed from the PA program with no possibility of readmission. The recommendation is based on the sole discretion of the Student Progress Committee, but may occur when a student has failed a course, failed remediation or committed a serious violation of ethical or professional behavior.

## Student Appeals of Student Progress Committee Decision

**Academic Enhancement Plan:** A student who wishes to appeal the course coordinator's or the Student Progress Committee's plan for Academic Enhancement should submit an alternative plan that is tailored for the specific course (including laboratory requirements, if any) in a timely manner. The appeal should detail the student's plan of study, establish deadlines for course completion, identify a qualified instructor, and include a means of evaluation. Adoption of the alternative plan is at the discretion of the Student Progress Committee in consultation with the course coordinator. This written appeal should also include:

1. **Causative Factors:** The written justification must clearly state the compelling reasons or extenuating circumstances which directly contributed to the student's academic or clinical problems. These factors should be substantive, immediate (having occurred during the academic year), and well documented. Letters, receipts, court documents, and medical reports are some common types of documents.
2. **Remedies and Solutions:** The student is obligated to specify in the written justification those measures that he/she has taken to correct the causative factors. The remedies should offer a reasonable assurance that the student will be successful in the future. All remedies should be detailed and well documented and state a time line for completion. In the written justification, the student should propose a solution to his/her dilemma which will allow the student to successfully continue his/her academic studies and professional development in the program. The student should also acknowledge the consequences of the failure to perform to the covenants of the proposal. More than one proposal may be suggested.

The Student Progress Committee will review the written justification and then schedule a meeting with the student. Such meetings are private and confidential including, but not limited to, the names of participants, proceedings, discussion, minutes, and findings. The following are prohibited in all Student Progress Committee meetings unless otherwise authorized in writing by the Program Director and Student Progress Committee chairperson: (1) electronic recording of the meeting, except for official minutes; (2) legal counsel; and (3) uninvited individuals. All final decisions regarding the pathway of Academic Enhancement will be made at a separate Student Progress Committee meeting in which the student is absent.

**Repeat of Academic year or Dismissal:** If the student is not in agreement with the decision of the Student Progress Committee pertaining to the student's dismissal or repeating the academic year, he/she will have seven (7) calendar days to appeal the decision directly to the Dean of the College of Arts and Sciences. The Dean may confer with the Provost/Vice President for Academic Affairs. This appeal shall be written and causative/mitigating circumstances and remedies and solutions should also be included. During the appeal process, the student will only have access to recorded panopto lectures.



## **Student Performance**

At the end of the academic year, the Chair of the Student Progress Committee (SPC), the Academic Coordinator and Program Director will evaluate student performance. This “executive committee” will determine if the student has:

1. Fulfilled all academic requirements by passing all didactic courses with 80% or better and adheres to the principles and responsibilities of professionalism, as outlined by the program, by demonstrating a commitment to:
  - a. Professional competence
  - b. Honesty with patients
  - c. Patient confidentiality
  - d. Maintaining appropriate relations with patients
  - e. Remaining current with scientific knowledge
  - f. Maintaining trust by managing conflicts of interest
  - g. Professional responsibilities
3. Demonstrated ethical behavior and integrity during the educational activities by adhering to the principles and values detailed in the *Guidelines for Ethical Conduct for the Physician Assistant Profession* (Appendix B)
4. Met the financial and legal requirements of the Program. The SPC certifies the student’s eligibility for promotion to the succeeding year or graduation from the program.

Eligibility for promotion to the next year to start clinical rotations is determined by the student’s successful completion of the appropriate academic, professional, and financial requirements of Heritage University. This committee also considers reports concerning attendance, conduct, and potential professional attributes. Students with failures or incompletes are not eligible for promotion.

## **Academic Honesty Policy**

### **Heritage University Academic Honesty**

The pervading spirit underlying the mission and goals of Heritage University is the pursuit of justice and truth in every aspect of a student’s education. Honesty and integrity are expected of all members of the academic community and are essential to the learning process. Professors must demonstrate, by precept and example, the necessity of rigorous honesty in the use of sources and of utter respect for the work of others.

All students are responsible for upholding academic integrity at Heritage University. Academic integrity is based on the belief that all people, including members of the Heritage community, take credit only for their original ideas and credit others for the work that they have created. Academic dishonesty is defined as intent to deceive, particularly regarding the originality of academic work.



Any instance of violation of the Academic Honesty Policy must be reported to the Provost/Office of Academic Affairs. The Provost's Office will track violations. Note that certain academic programs may have their own policies that supersede this regarding Academic Honesty; please check with your department if another policy exists.

Academic dishonesty includes plagiarism, fabrication, cheating, and academic misconduct.

### Plagiarism

Plagiarism is the inclusion of someone else's words, ideas, images, or data as one's own. When a student submits academic work that includes another's words, ideas, images, or data, whether published or unpublished, the source of that information must be acknowledged with complete and accurate references, and if verbatim statements are included, with quotation marks as well. By submitting work as one's own, a student certifies the originality of all material not otherwise acknowledged.

### Fabrication

Fabrication is the act of falsifying research or other findings. Fabrication includes, but is not limited to:

- The false citation or acknowledgment of a direct or secondary source, including the documentation of a source.
- The citation, in a bibliography or other list of references, of sources that were not used to prepare the academic work.
- The inclusion in an academic work of falsified, invented, or fictitious data or information, or the deliberate and knowing concealment or distortion of the data.
- Making false statements or creating documentation defer, delay, or receive an extension on a due date, or be excused from a test or presentation.

### Cheating

Cheating is an act or an attempted act of deception by which a student seeks to misrepresent that he or she has mastered information that has not been mastered.

Cheating includes, but is not limited to:

- Copying all or any portion of someone else's work and submitting it, in part its entirety, as one's own.
- Allowing another student access to work already completed.
- The unauthorized collaboration with any other person on an academic exercise, including collaboration on a take-home or makeup academic exercise unless permitted.
- The unauthorized use of electronic instruments, such as computers, tablets, cell phones, or translators to access or share information.

### Academic Misconduct

Academic misconduct includes any act that disrupts the educational process, such as:

- The unauthorized possession, copying, distribution, sale, or other transfer of materials, assignments, tests, or resources to students without the permission of the faculty member.
- Attempting to change a grade on an assignment to change the grade of record.
- Accessing University computers, and using screen capture or other devices to obtain answers to tests or assignments.
- Failing to adhere to standards of professional behavior established by a faculty member, an academic program, or the University.

### Group Work

Students are often expected to work in groups. Students working in groups that submit a group assignment are confirming the authenticity of the entire work, including that of their peers. If a violation of the Academic Honesty Policy is determined, all students working on that project or assignment will share responsibility, unless the identity of individuals involved in the dishonesty can be determined. Students who suspect another student of academic dishonesty should confront the issue, and if necessary, seek guidance or assistance from the faculty member.

### **Violation of the Academic Honesty Policy**

Heritage students have a responsibility to adhere to academic honesty in all their educational endeavors. Faculty members have a responsibility to model academic honesty and to prevent dishonesty, as well as to detect and confront students who violate the policy.

Academic dishonesty is serious offense and will carry appropriate sanctions, ranging from a written record of the violation being placed in the student's file to course failure and even to suspension or dismissal from the University. Academic dishonesty includes, but is not limited to, cheating, plagiarism, and all other behavior inconsistent with academic integrity and honesty.

When a faculty member has reasonable cause to believe that academic dishonesty has occurred, the following procedures shall be followed:

1. The faculty member will confer with the student concerning the violation and discuss the course of action to be pursued.
2. The faculty member will file a short report of the incident and consult with the Provost/Vice President for Academic Affairs regarding the sanction.
3. For cases involving academic theft, alteration of data, unauthorized access, or fraud, the Provost/Vice President for Academic Affairs will confer with the student to determine the nature of the offense, the involvement of the student, and the course of action to be pursued. The appropriate sanction will be imposed. The Provost/Vice President for Academic Affairs shall make the decision based on the merits of the case. The reasons for the decision shall be put in writing and given within 10 days to the student faculty member involved.
4. A student or faculty member may appeal a decision by requesting a hearing, following the University's Academic Grievance Process.

## **Academic Grievance Process**

Students who feel that an academic decision affecting them should be re-examined, may present their case according to the following grievance process. These steps are followed until the concern is resolved:

1. A student confers with the instructor/faculty concerned.
2. If the student believes the matter has not been satisfactorily resolved, the student confers with the department chair or department director.
3. If the student believes the matter has not been resolved, the student confers with the college dean to seek assistance in resolving the concern.
4. A student makes an appointment with the Provost/Vice President for Academic Affairs to seek assistance in resolving the concern.
5. The student and the Provost/Vice President for Academic Affairs may request a hearing committee to review the matter.
6. The Provost/Vice President for Academic Affairs communicates the decision to the concerned student.

## **Physician Assistant Educational Program Academic Honesty Policy**

### **Plagiarism**

Submitting another person's work, whether in total or paraphrased, without proper citation of the source, is considered plagiarism and will not be tolerated. Plagiarism is the presentation of another's work as if it were one's original. Proper and complete citation and reference, in accordance with AMA style guidelines, is required for all student work. Specific examples of plagiarism include, but is not limited to:

- Cutting and pasting or re-entering information from another's work into a document without correct citation or attribution
- Information is attributed to a source other than the original
- Material authored by someone else is submitted as original work
- Turning in previously prepared work, in part or in whole, is considered self-plagiarism and is unacceptable. In instances where it may be appropriate to include prior work, the student must obtain permission from the instructor to include the prior work.
- **Information is properly cited but the paraphrasing is not substantively different from the original source, except direct quotations**
- **An assignment based on a string of quotations without appropriate critical thinking, analysis, or synthesis**
- Infrequent or missing citations

### ***Plagiarism Sanctions***

Assignments submitted for a grade are subject to review for plagiarism. The consequences of plagiarism vary based on whether the incident is a first, second, or third

occurrence. As stated in the Heritage University's Academic Honesty Policy provided above, a student may request a hearing in accordance with the procedures stated in the Heritage University Academic Grievance Process.

**First occurrence:** A first instance of plagiarism is generally believed to result from a lack of familiarity and inexperience using AMA guidelines and is perceived as a misuse of sources.

The sanctions for a first offense generally include, but are not limited to:

- Required completion of the "Proper use of Resources Tutorial" and 500 word reflection written assignment
- A grade of zero on the assignment
- Resubmission of the assignment for maximum grade of 80%
- Students who choose not to participate in the tutorial or fail to complete the tutorial will receive a grade of zero on the assignment
- Heritage University's Academic Honesty Policy numbers one and two will be followed

**Second occurrence:** A second occurrence of plagiarism is a more serious academic offense and is not attributed to naiveté, ignorance of guidelines, or a misunderstanding of what constitutes acceptable graduate scholarship for Physician Assistants Students.

The sanction for a second plagiarism offense can include, but is not limited, to:

- Referral to SPC
- A grade of zero for the assignment
- Heritage University's Academic Honesty Policy number three will be followed

**Third occurrence:** A third occurrence of plagiarism is seen as a student's chronic inability or refusal to produce acceptable graduate-level scholarship.

The sanction for a third plagiarism offense can include, but is not limited, to:

- Referral to SPC
- Expulsion from the Program

## **Intellectual Property**

Intellectual property is defined as "all materials developed by the intellect." Thus, all course materials developed by faculty are intellectual property. Course materials can include; course outlines, course notes, lectures, power point presentations/slides, drawings, study aids, tests and exams. All such work is copyrighted and should not be shared without the permission of the copyright holder.

**For example students are allowed to:**

- Share course notes, provided they are prepared in their own words.

- Copy a short excerpt of someone else’s material. A short excerpt is generally considered to be less than 10% of the text. Diagrams, charts, drawings, graphs, photos and other standalone works are not considered short excerpts.

***Students are allowed to do the following only if they have received permission from the instructor:***

- Audio record or video record a lecture
- Alter or modify course materials unless it is for their own personal use
- Share recordings of or more than a short excerpt of other copyrighted material

Students should be aware of the serious implications of uploading or otherwise sharing such course materials to “note sharing” websites, such as Course Hero, Study Blue, One Class, Grade Guru, and Quizlet, or providing course materials to private tutoring agencies without proper permission.

### ***Sanctions for Intellectual Property infractions***

Unauthorized “sharing” of any intellectual material will be considered a premeditated act with the intent to defraud the author. The student will immediately be referred to the SPC for sanctions, which could include dismissal.

## **ADVISING AND COUNSELING**

Each student is assigned advisors for the duration of the program. The student’s academic advisor will be a PA faculty member whose responsibility is to mentor the student regarding academic issues, thus will be assigned to the student for the full length of the program. The student’s clinical advisor will be a clinical faculty member whose responsibility is to help the student obtain clinical experiences in order to complete the clinical objectives of the program. The student is responsible for contacting their advisors to set up appointments. Students will be informed of how best to contact their advisors; by phone, email, or text messaging and meetings will be set up as needed. The Core Faculty will assign the advisors. If the student feels uncomfortable with the advisor they have been assigned, they are instructed to discuss the situation with the program director who may reassign them to another advisor if indicated. **For additional services please contact the Office of Student Affairs**

- **Heritage Counseling Services**  
Students who are currently enrolled at Heritage University who are experiencing personal issues impacting their academic performance can work with a licensed mental health counselor.

These services are free and totally confidential. Students may contact the Northwest Employee Assistance Program/Student Assistance Program (SAP) at (509) 575-4313 or Joyce Staley, Ph.D., at (509) 966-7246 to schedule an appointment.

### **Contact Information**

On campus: Student Affairs

Phone: 509-865-0440 Fax: 509-865-8659

Email: <mailto:studentaffairs@heritage.edu>

Students are asked to schedule appointments at times which do not conflict with their classes. However, the student may request permission to meet with the Student Assistance Program (SAP) counselors during school hours. If the student lives outside the service area, they will arrange for the student to be seen in the area in which they live.

The use of the SAP is confidential. No one at Heritage University or the PA program will know that a student or any members of their family are using the program. Only information specifically authorized by the student or family member through a signed release of information may be shared by anyone.

- **Disabilities Act**

If a student declares a disability, but still meets the technical standards for matriculation to the PA program, appropriate and reasonable efforts will be made to meet that student's accommodations while ensuring educational equivalency of course content and assessment methods.

### ***Americans with Disabilities Act of 1990 (ADA Policy)***

*The current law of the Americans with Disabilities Act of 1990, states that "a disability can be a physical or mental impairment that substantially limits one or more major life activities of an individual." The ADA law prohibits discrimination and ensures that individuals with disabilities have "the same opportunities to participate in the mainstream of American life - to enjoy employment, education, to purchase goods, to participate in State and local government programs and services." As an institution of higher education, Heritage University committed to provide reasonable accommodations for students with disabilities.*

If you believe you have a disability which may warrant you an accommodation, the first step is to contact the Office of Ability Services to schedule an appointment at: 509-865-8544 or e-mail [OfficeofAbilityServices@heritage.edu](mailto:OfficeofAbilityServices@heritage.edu)

For more information about disability services online, please click on the hyperlink below: <http://heritage.edu/university-policies/61-access-and-accommodations-for-persons-with-disabilities/>

## **ADMISSIONS/REGISTRATION OFFICE**

Acts as the primary agent for the acceptance of applicants and has an admissions program that responds to student and University needs. The office is also responsible for all transcripts and academic records.

## TUITION AND FEES REFUNDS

All requests for withdrawals must be made on an official add/drop form or online for refunds to be granted. Submittal must be made to the Registrar's Office by the appropriate day and approved before refund requests are granted. Forms must be submitted on the previous business day if the cut-off day is a non-business workday.

The tuition and fees refund shall be prorated as per PA program policy:

### All Terms

Student Withdraws	Percentage of Refund
Prior to 10% of the total contact hours of the course	100%
Prior to 20% of the total contact hours of the course	50%
Prior to 25% of the total contact hours of the course	25%
After 25% of the total contact hours of the course	0%

Students must return all PA program materials upon notification of withdrawal.

No course, clerkship, or rotation will be credited toward promotion, graduation, or subsequent credit if a student has not paid the required tuition and fees, including any additional tuition incurred by repeating any portion of the regular program.

Refunds will be available to the student approximately four weeks after an official withdrawal form is submitted to and approved by the Registrar's Office. An additional two weeks are required to process refund requests made by mail. Debts owed to the university must be paid in full before any tuition refund is issued. These debts include, but are not limited to, payments owed to the bookstore, the Emergency Loan Fund, and tuition and fees. First-time students on financial aid shall be accorded prorated refunds, per U.S. Department of Education regulations. All inquiries concerning the above policies should be directed to the Office of Admissions. *For financial questions please contact Financial Aid and the Business Office.*

### Financial Aid

The purpose of the Office of Financial Aid at Heritage University is to provide counseling and assistance to students regarding securing funding to help meet the costs of education. Although the Office of Financial Aid assists students with funding for their education, it is the student's primary responsibility to secure this financing. This means that such things as supplying personal documentation, supplying family documentation, and ensuring that a student qualifies for loans by having a favorable credit report are the student's obligations. All documents requested must be received before financial aid will be processed. All disbursements will be made via direct deposit. (A1.05, A3.10)



Health professions education is expensive. During schooling, most students are required to live at a modest level. The primary obligation for financing education lies with the student and the student's parents/spouse. The federal and private agencies that make funds available for borrowing do so with the understanding that a student must sacrifice in order to achieve their degree.

Students accepted by Heritage University and requiring financial aid must file the Free Application for Federal Student Aid (FAFSA) with the appropriate federal processor to assess aid eligibility. The needs analysis system set by the federal government ensures equity of treatment among all applicants. The University uses this needs analysis system to determine the amount of need-based financial assistance, loan amounts, and scholarship awards for which a student is eligible.

Financial aid as awarded or borrowed under the federal or private programs cannot exceed the Heritage University standardized budget. Funding is available for a student's direct and indirect educational costs while he or she receives an education, but the student must be a good money manager and carefully monitor their budgets.

## **Loans**

As a rule, most people believe it is easier to borrow money than pay it back. As a health care student, certain special loan programs may be available, the primary sources being the Stafford Loan Programs and the Graduate PLUS loan program.

A student may not be eligible for the full amount based on his/her federal needs analysis, the Heritage University standardized budget, or prior student loan indebtedness. The amount a student can borrow is based on the cost of his/her education and potential personal contributions, not on the student's desire for capital.

The Subsidized Stafford Loan is a low-interest program, and the government pays the interest while the student borrower is in school. It is the loan of first choice. The Unsubsidized Stafford Loan accrues interest from disbursement date. Borrowers must consider the repayment implications and avoid excessive borrowing. Heritage University has a federally mandated obligation to keep a student's indebtedness to a minimum. A student will frequently receive counseling through the Office of Financial Aid many times while in school about the nature of his or her debt and the projected payment schedule.

Borrowing money from these programs is a privilege, not a right; regulations controlling these programs change periodically. A loan is not a gift or grant; it must be repaid. Student loans are only to be used for related educational expenses and personal living expenses.

Default is the failure of a borrower to make an installment payment when due or to meet other terms of the promissory note. If this happens, it is reasonable to conclude that the borrower no longer intends to honor the obligation to repay. Defaulted loans are reported to national credit agencies, thus affecting credit ratings and future ability to borrow money. Over-borrowing can cause defaulting on a student loan. This is why educational debt

management is essential. Heritage University encourages students to learn some basic budgeting techniques, how to cut costs, and how to live with less.

If a student's loan goes into default, the University, the organization that holds the loan, the state, and the federal government can all take action to recover the money. The federal government and the loan agencies can deny a school's participation in the student loan programs or charge a school or its students a higher origination fee if the school's default rate is too high. The University will withhold the transcript of any individual if that individual is in arrears or in default under any loan or loan program, when such arrears or default adversely affects the University in any way.

### **Scholarships and Grants**

The Office of Financial Aid will provide students with information on scholarship notices that are sent to the office. As the program becomes aware of scholarships become available we will notify the student body.

### **Transcripts and Records**

Permanent education records maintained by Heritage University are the responsibility of the Registrar's Office. Transcripts of academic records will contain only information regarding academic status. In cases where disciplinary action leads to the student's ineligibility for re-enrollment (dismissal), disciplinary action will become a part of the permanent academic record. Disciplinary records or information from such records will be made available to persons outside of Heritage University only on the formal written request of the student involved or as otherwise allowed by law or regulation.

Academic records and financial aid records will be used by Heritage University personnel who have legitimate responsibility for the student's personal welfare and when necessary to discharge their official duties. Except for the purpose of official audits, financial aid records will be made available to persons outside the University only upon the formal written request of the student (or graduate) involved or as otherwise allowed by law or regulation.

Student health records, except for immunization records and tuberculosis screening results, will be maintained by Heritage University as prescribed by professional ethics and federal and state laws. The immunization and tuberculosis screening records will be maintained by the PA program and released to clinic rotation sites as needed.

An official copy (signed and sealed) of a transcript of record will be transmitted directly to a legitimate educational institution, hospital, or governmental or non-governmental agency on written request of the student (graduate) involved.

Unofficial copies of a transcript of record are available to the student (graduate) from the My Heritage portal. A fee is charged for each requested official copy. For more information on ordering transcripts, contact the Registrar's Office in the Student Services Center.

Phone: 509.865.8506  
Fax: 509.865.8659  
Email: [registrar@heritage.edu](mailto:registrar@heritage.edu)

Students who have not fulfilled their financial and other obligations to Heritage University shall not have transcripts or recommendations made available until such obligations are met.

If the University has knowledge that a student or graduate is in default on a federal, state, outside agency, or institutional loan or service obligation, the University will withhold all official transcripts, National Board scores, and letters of recommendation for internships, residencies, employment, staff privileges, specialty certification, and licensing. Students who have not received a diploma due to failure to satisfactorily fulfill their obligations to the University prior to the date of graduation and who have failed to do so following graduation shall not have the privilege of receiving transcripts, other records, or recommendations sent to any institution or entity until such debts are paid.

Questions or concerns regarding records and grades should be brought to the Academic Coordinator.

### **Record Retention Procedures<sup>2</sup>**

The record retention procedures for the University include but are not limited to:

1. Non-academic records of disciplinary actions will be maintained by the University as the responsibility of the Office of Student Affairs. These actions are maintained as part of the student's permanent record.
2. In cases where disciplinary action leads to a student's dismissal/ineligibility or re-enrollment, the record becomes a part of the permanent academic file and transcript.
3. Financial aid records will be maintained by the University for 3 years after the end of the award year in which the student last attended.

The Physician Assistant Educational Program retains student records in a secured location. These records pertain to program specific information regarding admission criteria, health screening and immunization compliance, student performance while enrolled in the PA program, remediation efforts and outcomes, documentation that the student has met program completion requirements, and summaries of formal disciplinary actions taken against a student, as mentioned above.

### **LIBRARY**

Heritage University Library and Pacific Northwest University of Health Sciences (PNWU) Medical Library integrates traditional resources with innovative programming

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<sup>2</sup> The full policy is available in the Registrar Office.

for medical education and research.

Heritage University librarians and PNWU Medical Library staff members provide reference service, group and individual bibliographic instruction, database searches, and general computer assistance to faculty, staff, students, and to members of the general public seeking medical information.

The Heritage University Library and the PNWU Medical Library maintain a growing collection of up-to-date books, multimedia resources, and periodicals. The periodical collection emphasizes journals of interest to primary care practitioners and students preparing for careers in primary care. A variety of electronic databases, some with linked full-text journals and books, are available for use by medical library staff and patrons. The Heritage University Library participates in local, regional, and national library cooperatives to ensure timely access to materials through interlibrary loan (document delivery is free to Heritage University faculty, staff, and students).

## **HERITAGE UNIVERSITY CAMPUS SERVICES**

### **Virtual Bookstore**

Textbooks for Heritage classes are available online through the Virtual Bookstore, powered by eCampus. You may order books online, by mail, telephone, or fax. Payment can be made by credit card, check, or, if you are eligible, through your financial aid.

Textbooks for the program may also be available at other online vendors, however, financial aid credit

### **Dining Services**

Owned and operated by Heritage University; the Eagle's Café and Espresso are available to all students, faculty, staff, and their guests. The Eagle's Café provides healthy menu options as well as a full grill and deli menu. Breakfast specials, soups and the featured lunch item of the day are available to view online via [www.heritage.edu](http://www.heritage.edu). Simply roll your mouse over the "Campus Locations" tab, then select "Toppenish" and click on "The Eagle's Café" link to view the menu. Vending machines are also available in the dining commons.

The Eagle's Café hours of operation are Monday through Friday, 8:00 a.m. to 5:30 p.m.  
Breakfast Served - 8:00 a.m. - 10:00 a.m. Lunch Entrée Served - 11:00 a.m. - 2:00 p.m.  
Grill, Deli and Salad Bar - 11:00 a.m. - 5:30 p.m.

For more information, contact the Heritage University Eagle's Café at (509) 865-8616

### **Housing**

Students must secure their own housing. Heritage University may provide a list of housing information to students in their search for appropriate, affordable housing.

## **Child Care Center**

Heritage University's Early Learning Center strongly believes in providing a healthy, safe and developmentally appropriate learning environment for all children and peace of mind for parents. It is our mission to teach the children values of compassion, honesty and responsibility. The Early Learning Center provides daycare services for children ages 1 year through 5 years. Students wishing to enroll their children must preregister. Space is limited and services are provided on a first-come- first-serve basis. Parents may inquire with the Financial Aid Office for scholarship opportunities for childcare at the Early Learning Center. For more information, contact the Heritage University Early Learning Center at (509) 865-8630.

## **Campus Facilities**

A map of the campus illustrating the location of various offices, classrooms, and laboratories, is available in the Student Services Center and online. Tours of Heritage University are provided to interested persons upon request.

## **Parking**

Parking for students and guests is located in the main parking lot off of Fort Road near the Student Services Center. Students of Heritage University, their families, and guests are welcome to use the facilities of the campus in accordance with the guidelines issued by local campus administrators.

## **Identification Badges**

Student ID cards ensure the safety and identity of the students, faculty, and staff. Students attending the main campus need to get a student ID card because it serves as a convenient and secure way to identify you when you attend campus events and classes. You will also use your ID card, when ordering books, working with the Business Office or as identification during possible emergency procedures.

To obtain your student photo I.D. card or if you have questions visit the IT Help Center or call (509) 865-8579.

## **Lost and Found**

Heritage University Campus Security maintains and monitors lost and found items for the university. If you are looking for or would like to turn in a lost item(s) please contact the Campus Security Officer at (509) 961-4674.

## **Inclement Weather**

Heritage University has partnered with Rave Mobile Safety to provide an emergency alert and notification system capable of delivering messages to Heritage University staff, faculty and students' email addresses; as well as land line and cell phones. These messages include campus emergencies such as inclement weather and closures as they pertain to the entire campus community. We encourage everyone to join the Rave Mobile Safety alert system.

Register at [www.heritage.edu](http://www.heritage.edu), scroll over to the “About Heritage” tab and click on “Campus Security” tab then select the “RAVE Alert” tab.

## **HERITAGE UNIVERSITY POLICY ON HARASSMENT**

Heritage University is committed to creating a safe learning and working environment. Harassment is defined as conduct which threatens, intimidates, alarms, or puts a person in fear of his or her safety. Harassment is unwanted, unwelcomed and uninvited behavior that demeans, threatens or offends the victim and results in a hostile environment for the victim. Harassing behavior may include, but is not limited to, epithets, derogatory comments or slurs and lewd propositions, assault, blocking movement, offensive touching and visual insults, such as derogatory posters or cartoons. Students experiencing harassment regarding a staff, faculty member, or third party vendor of Heritage University are encouraged to contact the Office of Human Resources as soon as possible. If the harassment involves another student, please contact the Office of Student Affairs to report the problem and seek assistance.

### **Regarding a Staff or Faculty Member**

Students are encouraged to provide constructive feedback by first sharing the concern directly with the staff/faculty member involved. If the matter is not considered resolved, the student may then approach that person’s supervisor. Students may contact the Office of Human Resources to determine the appropriate supervisor and contact information.

### **Regarding Another Student**

Students are expected to communicate concerns in a direct and respectful manner. If it is not feasible to approach another student directly, then the student with the concern should contact the Office of Student Affairs for assistance with resolving the matter.

### **Heritage University Informal Procedures**

The complainant may seek an informal resolution by:

- Where possible and comfortable, informing the offending person of perception of their words, actions, and/or behaviors;
- Consulting with administrators who oversee the respondent;
- Initiating formal procedures through the Human Resources Department.

### **Title IX**

Any student, faculty or staff member that is witness to, or made aware of sexual misconduct of any nature either must report the incident immediately to one of the two designated Title IX Coordinators, even if the event occurs off campus. Victims/students are also encouraged to contact local law enforcement outside of regular business hours. All Title IX allegations will be investigated.

### **Designated Title IX Coordinators:**

Melissa Hill  
Assistant Vice President for Student Affairs  
509-969-4013 Cell Phone

509-865-0411 Office Phone  
Hill\_m@heritage.edu

Yovana Cook  
Mental and Social Health Counselor / ADA Coordinator  
509-865-8544 Office Phone  
Cook\_y@heritage.edu

## **Discrimination Harassment & Anti-Discrimination**

Discriminatory Harassment & Anti-Discrimination Heritage University allows the free inquiry into all ideas and the free expression of opinions by those within the University community as a part of the basic process of education. In the presence of harassing behavior, a person's learning or working ability may be impaired. This discriminatory harassment policy acknowledges protection of free speech, which is guaranteed by the First Amendment of the United States Constitution, while at the same time requiring that the dignity, worth and respect of each individual be nurtured and protected. The University will not tolerate discrimination on the basis of race, color, gender, sexual identity, age, disability, national origin or religion. Every student, employee, or third party person (e.g. contractor, consultant, visitor, guest, etc.) in the University community has the responsibility to avoid engaging in any unlawful discrimination and further to avoid inappropriate conduct that is disrespectful or unprofessional. Title IX Sexual Assault and Harassment HU takes seriously our commitment to promoting a safe environment free of Harassment and is committed to working with students. Any student or applicant for admission who has concerns about sex discrimination, including but not limited to acts of sexual harassment, sexual assault or sexual violence, is encouraged to seek the assistance of the Title IX Coordinator. For more information please contact the Office of Student Affairs at 509-865-0411 and ask for the Title IX coordinator.

## **Other Resources**

If internal complaint processes have not resolved the issue, contact any of the following:

### **GENERAL COMPLAINTS:**

Washington State Office of the Attorney General  
1125 Washington Street SE  
PO Box 40100  
Olympia, WA 98504  
Phone: (360) 753-6200  
[http://www.atg.wa.gov/contactus.aspx#By\\_phone](http://www.atg.wa.gov/contactus.aspx#By_phone)

### **Academic Complaints:**

Northwest Commission on Colleges and Universities  
(NWCCU)  
8060 165th Avenue N.E. Suite 100  
Redmond, WA 98052  
Phone: (425) 558-4224



Fax: (425) 376-0596

**Physician Assistant Program:**

Accreditation Review Commission on Education  
For the Physician Assistant  
12000 Findley Road, Suite 275  
Johns Creek, GA 30097  
Phone: (770) 476-1224  
Fax: (770) 476-1738

**STUDENT/PATIENT/FACULTY RELATIONSHIPS**

PA program students are held to both the program and Heritage University standards of conduct, processes, and sanctions. The code is instituted for all Heritage University campuses and program locations.

The relationship between a student and faculty or patients shall always be kept on a professional basis. A student shall not date or become intimately involved with faculty or a patient. Conduct in such an unprofessional manner shall be considered improper behavior and will be grounds for disciplinary action, including dismissal from Heritage University.

**HERITAGE UNIVERSITY STUDENT POLICIES AND PROCEDURES**

All students admitted to the PA program and thus to Heritage University are required to conduct themselves in a professional and ethical manner.

**Heritage University: My Heritage, My Future Catalog**

The Heritage University catalog provides detailed information on student policies and procedures; general information, such as, health and safety issues related to campus; and resources for students, faculty, advisors and staff.

**Heritage University Code of Conduct**

The Heritage University Student Code of Conduct is designed to promote the University mission and protect the rights of students, faculty and staff. The official University rules and regulations are contained in the University catalog. The most current version of the Student Code of Conduct may be found online.

As a learning process, rather than a criminal proceeding, Heritage University uses the “preponderance of evidence” standard for disciplinary proceedings. This means that a final determination is based on whether the accused is more likely than not to have committed the act. There is not a requirement of physical evidence nor does the alleged violation have to be witnessed. Congruent with classroom participation, this process focuses on student learning and the development of rigorous critical reflection and self-advocacy skills. Therefore, it is not intended to include direct participation or intervention by parents or

other external parties. Heritage University may exercise its right to review video surveillance, key card access information, or network access as part of the investigation.

### **Heritage University Hearing Process**

The typical hearing process is as follows for allegations which are not criminal in nature:

#### **Concerns raised and Investigation**

The student will be informed by the Judicial Officer that a concern has been raised and a response by the student is necessary. The University then conducts an initial review of the facts to determine how to proceed.

#### **Student Conduct Meeting**

Student Conduct Meetings are held after an investigation has been conducted, if evidence and/or allegations warrant further action. The student conduct meeting serves the same purpose as a hearing but is less formal. A Student Conduct Meeting will be held at the earliest mutually agreeable time for the student and Judicial Officer. The meeting is held with only the student and the Judicial Officer present, unless the student requests in writing that a member of the University community serve as a SAFE Mentor (see Student Rights and Responsibilities). During the meeting, the student will be informed of the concern and provided an opportunity to respond and discuss the matter. The student may present additional evidence during the meeting. At any time during the disciplinary process, the student may choose to accept responsibility for his or her involvement in the incident involving a code violation.

This informal method is the preferred intervention for the University because it allows for resolution in a more productive and less adversarial manner. Within 10 normal business days of the Student Conduct Meeting, if a student denies any involvement in the incident, or chooses not to accept any responsibility and subsequent actions, s/he must formally request, in writing, for the University to hold a Student Conduct Hearing. A student may request a SAFE Mentor (see Student Rights and Responsibilities).

Student Conduct Meetings that do not end with a mutual agreement are then moved through the Student Conduct Hearing process.

#### **Student Conduct Hearing**

A Student Conduct Hearing will be scheduled for a student who denies any involvement in the incident, or chooses not to accept any responsibility and/or respond to any subsequent actions or disciplinary sanction imposed by the Judicial Officer. The student will be notified in advance of the date, time, and location of the hearing. If the student chooses not to attend the hearing, it may be held in his or her absence, and any decisions made are not eligible for appeal.

Student Conduct Hearings are formal administrative hearings attended by a minimum of three University officials as designated by the Chief Judicial Officer.

Students will be given reasonable time to prepare a case and review related documentation. A student may request a SAFE Mentor (see Student Rights and Responsibilities) to attend

the hearing. Parents may attend the Student Conduct Hearing. However, parents and mentors may not participate in the process. If the parent happens to be an attorney, he or she must disclose that information and may not act as legal counsel. Support persons may not speak or participate directly in the hearing unless invited to do so by the hearing officer.

Requests for a SAFE Mentor (see Student Rights and Responsibilities) to attend the meeting must be made in writing to the Judicial Officer 24 hours prior to the meeting. Any additional documentation or information related to the allegations should also be shared in advance of the hearing.

A student may have an opportunity to present written information or witnesses with relevant information to present his or her side of the story. During the hearing, the committee will hear the case, ask questions, and review relevant information. The Judicial Office is responsible for answering questions or responding to inquiries. The student will be informed of the committee's decision and any actions imposed within five normal business days following the Student Conduct Hearing.

Victims of a crime will be notified of the outcome of the hearing.

## **THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)**

The Family Educational Rights and Privacy Act (FERPA) of 1974 is a federal law governing access to student education records. FERPA stipulates conditions for release of information from education records and affords students the opportunity to review and seek revision of those records. Heritage University and the Physician Assistant Educational Program accord all the rights provided by the law and reserve the right to use and release student education records under the conditions specified by the law.

**Education records**, as defined by FERPA, include admission, academic, financial aid, placement records, and other information directly related to students with the exception of:

- Criminal background information;
- Student health records that are created and used solely in connection with the provision of health care;
- Employment records that relate exclusively to individuals in their capacities as employees

FERPA regulations apply only to records held for institutional use concerning students who enroll at the University; they do not govern records of applicants who are denied admission or who choose not to attend the University. Nor do they govern records kept by a University official that are the sole possession of the maker and are not normally revealed to anyone else except a temporary substitute (e.g., temporary reminder notes).

FERPA stipulates that institutions may not disclose personally identifiable information contained in education records without a student's written consent, except under conditions specified by FERPA. Information is considered personally identifiable if it contains a

student's name or the name of family members, a student's local or family address, an identification number, or descriptions or data sufficient to identify an individual.

FERPA permits access to student education records for school officials with legitimate educational interests. A school official is a person employed by the University in an administrative, supervisory, academic, research, or other staff position (including those in law enforcement and health care); a person serving on the Board of Trustees; or an individual or organization with whom the University has contracted to serve as its agent or to provide services in support of its operations (examples include attorneys, auditors, collection agents, and the National Student Clearinghouse). Student employees, students serving on official committees, and students serving in other positions in which they assist a University employee in performing her or his official tasks are also considered school officials. A school official has a legitimate educational interest in a student education record if the official needs to review the record in order to fulfill her or his professional responsibilities or official tasks.

With certain exceptions allowed by the law and listed below, no persons outside the University shall have access to, nor will the institution disclose any information from, a student's education record without the written consent of the student. FERPA permits information to be released from education records without written consent of the student to the following officials and agencies:

- officials of other institutions to which students are applying to enroll
- persons or organizations providing financial aid
- individuals and organizations charged with oversight of the University, or of federal or state programs in which the University participates
- accrediting agencies
- parents of any student under the age of 21, regardless of the student's dependency status, in cases where the student has violated laws or University rules governing alcohol or controlled substances
- persons as directed by a judicial order or lawfully issued subpoena, provided the University makes a reasonable attempt to notify the student in advance of compliance (unless directed by judicial authorities not to disclose the existence of an order or subpoena)
- persons in an emergency to protect the health or safety of students or other persons
- the Immigration and Naturalization Service under the terms and provisions of immigration law

With the exception of alcohol and drug violations of a minor student, Heritage University does not release information from student education records to parents without the written consent of students.

FERPA permits the University to release information concerning violent crimes and non-forcible sex offenses (statutory rape or incest) committed by its students. Victims of an alleged violent crime or non-forcible sex offense may be informed of the final results of University disciplinary hearings concerning the allegation. When a student is an alleged

perpetrator of a violent crime or a non-forcible sex offense and the University concludes with respect to that allegation that the student has violated University rules, the University may release to the public the name of the student, the offense committed, and the sanction the University imposes against the student.

FERPA further allows student education records to be released to individuals or organizations performing research on behalf of, or in cooperation with, the University. When education records are released for research purposes, FERPA requires the University and its research partners to implement procedures to safeguard their confidentiality. In addition, records released for research must be returned or destroyed when the research is completed, and research findings may not be presented in a manner that makes it possible to identify confidential data from an individual's education record. Heritage University will release information from student education records to outside researchers only under the conditions specified by FERPA and only to those that agree in writing to safeguard the confidential information contained therein.

At its discretion, The PA program may publish or release *directory information* in accordance with the provisions of FERPA. Directory information includes student name, University and permanent home address and telephone number, e-mail address, a photograph, date of birth, dates of attendance, class, major fields of study, previous institutions attended, awards and honors (including honor roll), degrees conferred (including dates), and participation in officially recognized activities. Students may withhold directory information by giving written notification to the office of the Program Director within two weeks after the beginning of the semester. Requests for non-disclosure of directory information will be honored until graduation unless students submit a written request to have the block on their directory information removed. Students who wish to withhold directory information after they graduate, which would include their dates of attendance and degrees conferred, must submit another written request to the Program Director.

FERPA provides students with the right to inspect and review information contained in their education records, to challenge the content and accuracy of those records, to have a hearing if the outcome of the challenge is unsatisfactory, and to submit explanatory statements for inclusion in their files if they disagree with the decisions of the hearing panel. The Program Director has been designated by Heritage University to establish procedures by which students may review their education records.

Students wishing to review their education records should submit a written request, clearly specifying the records of interest, to the official responsible for maintaining those records. The Program Director will assist in identifying the appropriate official. The responsible official will then make arrangements for the student to inspect the records within 45 days of the request and will notify the student of the time and place of inspection. Students may have copies made of their records with certain exceptions (e.g., students may not have a copy of academic records for which a financial "hold" exists, or a transcript of an original or source document produced by another institution or by a person not employed by Heritage University). Copies will be made at the student's expense at prevailing rates.

Only records covered by FERPA, as delineated in the above paragraph defining “education records,” will be made available for inspection. (However, students may have their health records reviewed by their own physicians.) Furthermore, the University is permitted or required to withhold from students the following sorts of records: financial information submitted by their parents, confidential letters of recommendation to which students have waived their rights of inspection, and education records containing information about more than one student. In the latter case, the institution will permit access only to the parts of education records that pertain to the inquiring student.

Students who believe their education records contain information that is inaccurate, misleading, or held in violation of privacy rights or other rights, may ask the University to amend a record. In such cases, the student should write to the University official responsible for the record, identify the parts of the record the student believes should be changed, and indicate the reasons it should be changed. If University officials agree with the student’s request, the appropriate records will be amended. If the University decides not to amend the record as requested by the student, the student will be notified and advised of her or his right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing. FERPA confers to the student the right to challenge grades only in cases where the grade has been miss-recorded. However, Heritage University has other procedures for appealing grades (please Policy on Student Grievances listed above).

Students who believe their FERPA rights have been violated may also file complaints with The Family Policy Compliance Office, U. S. Department of Education, 400 Maryland Avenue S.W., Washington, DC 20202-4605 (<http://www.ed.gov/offices/OM/fpco/>).

**APPENDIX: A**  
**Competencies for the Physician Assistant Profession**  
**Policy of the American Academy of Physician Assistants**  
**(Originally adopted 2005; revised 2012)**

**Preamble**

Between 2003-2004, the National Commission on Certification of Physician Assistants (NCCPA) led an effort with three other national PA organizations (Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), American Academy of Physician Assistants (AAPA), and Physician Assistant Education Association (PAEA) -- formerly Association of Physician Assistant Programs (APAP)) to define PA competencies in response to similar efforts conducted within other health care professions and the growing demand for accountability and assessment in clinical practice. The resultant document, *Competencies for the Physician Assistant Profession*, provided a foundation from which physician assistant organizations and individual physician assistants could chart a course for advancing the competencies of the PA profession.

This document was updated in 2012 and then approved in its current form by the same four organizations.

**Introduction**

This document serves as a map for the individual PA, the physician-PA team, and organizations committed to promoting the development and maintenance of professional competencies among physician assistants. While some competencies will be acquired during formal PA education, others will be developed and mastered as physician assistants progress through their careers. The PA profession defines the specific knowledge, skills, attitudes, and educational experiences requisite for physician assistants to acquire and demonstrate these competencies.

The clinical role of PAs includes primary and specialty care in medical and surgical practice settings. Professional competencies for physician assistants include the effective and appropriate application of medical knowledge, interpersonal and communication skills, patient care, professionalism, practice-based learning and improvement, and systems-based practice.

Patient-centered, physician assistant practice reflects a number of overarching themes. These include an unwavering commitment to patient safety, cultural competence, quality health care, lifelong learning, and professional growth. Furthermore, the profession's dedication to the physician-physician assistant team benefits patients and the larger community.

**PHYSICIAN ASSISTANT COMPETENCIES**

**MEDICAL KNOWLEDGE**

Medical knowledge includes the synthesis of pathophysiology, patient presentation, differential diagnosis, patient management, surgical principles, health promotion, and disease prevention. Physician assistants must demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care in their area of practice. In addition, physician assistants are expected to demonstrate an



investigative and analytic thinking approach to clinical situations. Physician assistants are expected to understand, evaluate, and apply the following to clinical scenarios:

- evidence-based medicine
- scientific principles related to patient care
- etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions
- signs and symptoms of medical and surgical conditions
- appropriate diagnostic studies
- management of general medical and surgical conditions to include pharmacologic and other treatment modalities
- interventions for prevention of disease and health promotion/maintenance
- screening methods to detect conditions in an asymptomatic individual
- history and physical findings and diagnostic studies to formulate differential diagnoses

### **INTERPERSONAL & COMMUNICATION SKILLS**

Interpersonal and communication skills encompass the verbal, nonverbal, written, and electronic exchange of information. Physician assistants must demonstrate interpersonal and communication skills that result in effective information exchange with patients, patients' families, physicians, professional associates, and other individuals within the health care system. Physician assistants are expected to:

- create and sustain a therapeutic and ethically sound relationship with patients
- use effective communication skills to elicit and provide information
- adapt communication style and messages to the context of the interaction
- work effectively with physicians and other health care professionals as a member or leader of a health care team or other professional group
- demonstrate emotional resilience and stability, adaptability, flexibility, and tolerance of ambiguity and anxiety
- accurately and adequately document information regarding care for medical, legal, quality, and financial purposes

### **PATIENT CARE**

Patient care includes patient- and setting-specific assessment, evaluation, and management. Physician assistants must demonstrate care that is effective, safe, high quality, and equitable. Physician assistants are expected to:

- work effectively with physicians and other health care professionals to provide patient-centered care
- demonstrate compassionate and respectful behaviors when interacting with patients and their families
- obtain essential and accurate information about their patients
- make decisions about diagnostic and therapeutic interventions based on patient information and preferences, current scientific evidence, and informed clinical judgment
- develop and implement patient management plans

- counsel and educate patients and their families
- perform medical and surgical procedures essential to their area of practice
- provide health care services and education aimed at disease prevention and health maintenance
- use information technology to support patient care decisions and patient education

### **PROFESSIONALISM**

Professionalism is the expression of positive values and ideals as care is delivered. Foremost, it involves prioritizing the interests of those being served above one's own. Physician assistants must know their professional and personal limitations. Professionalism also requires that PAs practice without impairment from substance abuse, cognitive deficiency or mental illness. Physician assistants must demonstrate a high level of responsibility, ethical practice, sensitivity to a diverse patient population and adherence to legal and regulatory requirements. Physician assistants are expected to demonstrate:

- understanding of legal and regulatory requirements, as well as the appropriate role of the physician assistant
- professional relationships with physician supervisors and other health care providers
- respect, compassion, and integrity
- accountability to patients, society, and the profession
- commitment to excellence and on-going professional development
- commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- sensitivity and responsiveness to patients' culture, age, gender, and abilities
- self-reflection, critical curiosity and initiative
- healthy behaviors and life balance
- commitment to the education of students and other health care professionals

### **PRACTICE-BASED LEARNING AND IMPROVEMENT**

Practice-based learning and improvement includes the processes through which physician assistants engage in critical analysis of their own practice experience, medical literature and other information resources for the purpose of self- and practice improvement. Physician assistants must be able to assess, evaluate and improve their patient care practices. Physician assistants are expected to:

Analyze practice experience and perform practice-based improvement activities using a systematic methodology in concert with other members of the health care delivery team

- locate, appraise, and integrate evidence from scientific studies related to their patients' health
- apply knowledge of study designs and statistical methods to the appraisal of clinical literature and other information on diagnostic and therapeutic effectiveness
- utilize information technology to manage information, access medical information, and support their own education

- recognize and appropriately address personal biases, gaps in medical knowledge, and physical limitations in themselves and others

### **SYSTEMS-BASED PRACTICE**

Systems-based practice encompasses the societal, organizational, and economic environments in which health care is delivered. Physician assistants must demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that balances quality and cost, while maintaining the primacy of the individual patient. PAs should work to improve the health care system of which their practices are a part. Physician assistants are expected to:

- effectively interact with different types of medical practice and delivery systems
- understand the funding sources and payment systems that provide coverage for patient care and use the systems effectively
- practice cost-effective health care and resource allocation that does not compromise quality of care
- advocate for quality patient care and assist patients in dealing with system complexities
- partner with supervising physicians, health care managers, and other health care providers to assess, coordinate, and improve the delivery and effectiveness of health care and patient outcomes
- accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care
- apply medical information and clinical data systems to provide effective, efficient patient care
- recognize and appropriately address system biases that contribute to health care disparities
- apply the concepts of population health to patient care

*Adopted 2012 by ARC-PA, NCCPA, and PAEA Adopted 2013 by AAP*

## **APPENDIX: B**

## **Guidelines for Ethical Conduct for the Physician Assistant Profession (Adopted 2000, amended 2004, 2006, 2007, 2008, reaffirmed 2013)**

### **INTRODUCTION**

The physician assistant profession has revised its code of ethics several times since the profession began. Although the fundamental principles underlying the ethical care of patients have not changed, the societal framework in which those principles are applied has. Economic pressures of the health care system, social pressures of church and state, technological advances, and changing patient demographics continually transform the landscape in which PAs practice.

Previous codes of the profession were brief lists of tenets for PAs to live by in their professional lives. This document departs from that format by attempting to describe ways in which those tenets apply. Each situation is unique. Individual PAs must use their best judgment in a given situation while considering the preferences of the patient and the supervising physician, clinical information, ethical concepts, and legal obligations.

Four main bioethical principles broadly guided the development of these guidelines: autonomy, beneficence, nonmaleficence, and justice.

Autonomy, strictly speaking, means self-rule. Patients have the right to make autonomous decisions and choices, and physician assistants should respect these decisions and choices.

Beneficence means that PAs should act in the patient's best interest. In certain cases, respecting the patient's autonomy and acting in their best interests may be difficult to balance.

Nonmaleficence means to do no harm, to impose no unnecessary or unacceptable burden upon the patient.

Justice means that patients in similar circumstances should receive similar care. Justice also applies to norms for the fair distribution of resources, risks, and costs.

Physician assistants are expected to behave both legally and morally. They should know and understand the laws governing their practice. Likewise, they should understand the ethical responsibilities of being a health care professional. Legal requirements and ethical expectations will not always be in agreement. Generally speaking, the law describes minimum standards of acceptable behavior, and ethical principles delineate the highest moral standards of behavior.

When faced with an ethical dilemma, PAs may find the guidance they need in this document. If not, they may wish to seek guidance elsewhere – possibly from a supervising physician, a hospital ethics committee, an ethicist, trusted colleagues, or other AAPA policies. PAs should seek legal counsel when they are concerned about the potential legal consequences of their decisions.

The following sections discuss ethical conduct of PAs in their professional interactions with patients, physicians, colleagues, other health professionals, and the public. The "Statement of Values" within this document defines the fundamental values that the PA profession strives to uphold. These values provide the foundation upon which the guidelines rest. The guidelines were written with the understanding that no document can encompass all actual and potential ethical responsibilities, and PAs should not regard them as comprehensive.

### **STATEMENT OF VALUES OF THE PHYSICIAN ASSISTANT PROFESSION**

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

### **THE PA AND THE PATIENT**

#### **PA Role and Responsibilities**

Physician assistant practice flows out of a unique relationship that involves the PA, the physician, and the patient. The individual patient–PA relationship is based on mutual respect and an agreement to work together regarding medical care. In addition, PAs practice medicine with physician supervision; therefore, the care that a PA provides is an extension of the care of the supervising physician. The patient–PA relationship is also a patient–PA–physician relationship.

The principal value of the physician assistant profession is to respect the health, safety, welfare, and dignity of all human beings. This concept is the foundation of the patient–PA relationship. Physician assistants have an ethical obligation to see that each of their patients receives appropriate care. PAs should be sensitive to the beliefs and expectations of the patient. PAs should recognize that each patient is unique and has an ethical right to self-determination

Physician assistants are professionally and ethically committed to providing nondiscriminatory care to all patients. While PAs are not expected to ignore their own personal values, scientific or ethical standards, or the law, they should not allow their personal beliefs to restrict patient access to care. A PA has an ethical duty to offer each patient the full range of information on relevant options for their health care. If personal moral, religious, or ethical beliefs prevent a PA from offering the full range of treatments available or care the patient desires, the PA has an ethical duty to refer a patient to another qualified provider. That referral should not restrict a patient's access to care. PAs are obligated to care for patients in emergency situations and to responsibly transfer patients if they cannot care for them.

Physician assistants should always act in the best interests of their patients and as advocates when necessary. PAs should actively resist policies that restrict free exchange of medical information. For example, a PA should not withhold information about treatment options simply because the option is not covered by insurance. PAs should inform patients of financial incentives to limit care, use resources in a fair and efficient way, and avoid arrangements or financial incentives that conflict with the patient's best interests.

### **The PA and Diversity**

The physician assistant should respect the culture, values, beliefs, and expectations of the patient.

### **Nondiscrimination**

Physician assistants should not discriminate against classes or categories of patients in the delivery of needed health care. Such classes and categories include gender, color, creed, race, religion, age, ethnic or national origin, political beliefs, nature of illness, disability, socioeconomic status, physical stature, body size, gender identity, marital status, or sexual orientation.

### **Initiation and Discontinuation of Care**

In the absence of a preexisting patient–PA relationship, the physician assistant is under no ethical obligation to care for a person unless no other provider is available. A PA is morally bound to provide care in emergency situations and to arrange proper follow-up. PAs should keep in mind that contracts with health insurance plans might define a legal obligation to provide care to certain patients.

A physician assistant and supervising physician may discontinue their professional relationship with an established patient as long as proper procedures are followed. The PA and physician should provide the patient with adequate notice, offer to transfer records, and arrange for continuity of care if the patient has an ongoing medical condition. Discontinuation of the professional relationship should be undertaken only after a serious attempt has been made to clarify and understand the expectations and concerns of all involved parties.

If the patient decides to terminate the relationship, they are entitled to access appropriate information contained within their medical record.

## **Informed Consent**

Physician assistants have a duty to protect and foster an individual patient's free and informed choices. The doctrine of informed consent means that a PA provides adequate information that is comprehensible to a competent patient or patient surrogate. At a minimum, this should include the nature of the medical condition, the objectives of the proposed treatment, treatment options, possible outcomes, and the risks involved. PAs should be committed to the concept of shared decision making, which involves assisting patients in making decisions that account for medical, situational, and personal factors.

In caring for adolescents, the PA should understand all of the laws and regulations in his or her jurisdiction that are related to the ability of minors to consent to or refuse health care. Adolescents should be encouraged to involve their families in health care decision making. The PA should also understand consent laws pertaining to emancipated or mature minors. (See the section on *Confidentiality*.)

When the person giving consent is a patient's surrogate, a family member, or other legally authorized representative, the PA should take reasonable care to assure that the decisions made are consistent with the patient's best interests and personal preferences, if known. If the PA believes the surrogate's choices do not reflect the patient's wishes or best interests, the PA should work to resolve the conflict. This may require the use of additional resources, such as an ethics committee.

## **Confidentiality**

Physician assistants should maintain confidentiality. By maintaining confidentiality, PAs respect patient privacy and help to prevent discrimination based on medical conditions. If patients are confident that their privacy is protected, they are more likely to seek medical care and more likely to discuss their problems candidly.

In cases of adolescent patients, family support is important but should be balanced with the patient's need for confidentiality and the PA's obligation to respect their emerging autonomy. Adolescents may not be of age to make independent decisions about their health, but providers should respect that they soon will be. To the extent they can, PAs should allow these emerging adults to participate as fully as possible in decisions about their care. It is important that PAs be familiar with and understand the laws and regulations in their jurisdictions that relate to the confidentiality rights of adolescent patients. (See the section on *Informed Consent*.)

Any communication about a patient conducted in a manner that violates confidentiality is unethical. Because written, electronic, and verbal information may be intercepted or overheard, the PA should always be aware of anyone who might be monitoring communication about a patient.

PAs should choose methods of storage and transmission of patient information that minimize the likelihood of data becoming available to unauthorized persons or organizations. Computerized record keeping and electronic data transmission present



unique challenges that can make the maintenance of patient confidentiality difficult. PAs should advocate for policies and procedures that secure the confidentiality of patient information.

### **The Patient and the Medical Record**

Physician assistants have an obligation to keep information in the patient's medical record confidential. Information should be released only with the written permission of the patient or the patient's legally authorized representative. Specific exceptions to this general rule may exist (e.g., workers compensation, communicable disease, HIV, knife/gunshot wounds, abuse, and substance abuse). It is important that a PA be familiar with and understand the laws and regulations in his or her jurisdiction that relate to the release of information. For example, stringent legal restrictions on release of genetic test results and mental health records often exist.

Both ethically and legally, a patient has certain rights to know the information contained in his or her medical record. While the chart is legally the property of the practice or the institution, the information in the chart is the property of the patient. Most states have laws that provide patients access to their medical records. The PA should know the laws and facilitate patient access to the information.

### **Disclosure**

A physician assistant should disclose to his or her supervising physician information about errors made in the course of caring for a patient. The supervising physician and PA should disclose the error to the patient if such information is significant to the patient's interests and well-being. Errors do not always constitute improper, negligent, or unethical behavior, but failure to disclose them may.

### **Care of Family Members and Co-workers**

Treating oneself, co-workers, close friends, family members, or students whom the physician assistant supervises or teaches may be unethical or create conflicts of interest. For example, it might be ethically acceptable to treat one's own child for a case of otitis media but it probably is not acceptable to treat one's spouse for depression. PAs should be aware that their judgment might be less than objective in cases involving friends, family members, students, and colleagues and that providing "curbside" care might sway the individual from establishing an ongoing relationship with a provider. If it becomes necessary to treat a family member or close associate, a formal patient-provider relationship should be established, and the PA should consider transferring the patient's care to another provider as soon as it is practical. If a close associate requests care, the PA may wish to assist by helping them find an appropriate provider.

There may be exceptions to this guideline, for example, when a PA runs an employee health center or works in occupational medicine. Even in those situations, the PA should be sure they do not provide informal treatment, but provide appropriate medical care in a formally established patient-provider relationship.

### **Genetic Testing**

Evaluating the risk of disease and performing diagnostic genetic tests raise significant ethical concerns. Physician assistants should be informed about the benefits and risks of genetic tests. Testing should be undertaken only after proper informed consent is obtained. If PAs order or conduct the tests, they should assure that appropriate pre- and post-test counseling is provided.

PAs should be sure that patients understands the potential consequences of undergoing genetic tests – from impact on patients themselves, possible implications for other family members, and potential use of the information by insurance companies or others who might have access to the information. Because of the potential for discrimination by insurers, employers, or others, PAs should be particularly aware of the need for confidentiality concerning genetic test results.

### **Reproductive Decision Making**

Patients have a right to access the full range of reproductive health care services, including fertility treatments, contraception, sterilization, and abortion. Physician assistants have an ethical obligation to provide balanced and unbiased clinical information about reproductive health care.

When the PA's personal values conflict with providing full disclosure or providing certain services such as sterilization or abortion, the PA need not become involved in that aspect of the patient's care. By referring the patient to a qualified provider who is willing to discuss and facilitate all treatment options, the PA fulfills their ethical obligation to ensure the patient's access to all legal options.

### **End of Life**

Among the ethical principles that are fundamental to providing compassionate care at the end of life, the most essential is recognizing that dying is a personal experience and part of the life cycle.

Physician Assistants should provide patients with the opportunity to plan for end of life care. Advance directives, living wills, durable power of attorney, and organ donation should be discussed during routine patient visits.

PAs should assure terminally-ill patients that their dignity is a priority and that relief of physical and mental suffering is paramount. PAs should exhibit non-judgmental attitudes and should assure their terminally-ill patients that they will not be abandoned. To the extent possible, patient or surrogate preferences should be honored, using the most appropriate measures consistent with their choices, including alternative and non-traditional treatments. PAs should explain palliative and hospice care and facilitate patient access to those services. End of life care should include assessment and management of psychological, social, and spiritual or religious needs.

While respecting patients' wishes for particular treatments when possible, PAs also must weigh their ethical responsibility, in consultation with supervising physicians, to withhold futile treatments and to help patients understand such medical decisions.

PAs should involve the physician in all near-death planning. The PA should only withdraw life support with the supervising physician's agreement and in accordance with the policies of the health care institution.

## **THE PA AND INDIVIDUAL PROFESSIONALISM**

### **Conflict of Interest**

Physician assistants should place service to patients before personal material gain and should avoid undue influence on their clinical judgment. Trust can be undermined by even the appearance of improper influence. Examples of excessive or undue influence on clinical judgment can take several forms. These may include financial incentives, pharmaceutical or other industry gifts, and business arrangements involving referrals. PAs should disclose any actual or potential conflict of interest to their patients.

Acceptance of gifts, trips, hospitality, or other items is discouraged. Before accepting a gift or financial arrangement, PAs might consider the guidelines of the Royal College of Physicians, “Would I be willing to have this arrangement generally known?” or of the American College of Physicians, “What would the public or my patients think of this arrangement?”

### **Professional Identity**

Physician assistants should not misrepresent directly or indirectly, their skills, education, professional credentials, or identity. Physician assistants should uphold the dignity of the PA profession and accept its ethical values.

### **Competency**

Physician assistants should commit themselves to providing competent medical care and extend to each patient the full measure of their professional ability as dedicated, empathetic health care providers. PAs should also strive to maintain and increase the quality of their health care knowledge, cultural sensitivity, and cultural competence through individual study and continuing education.

### **Sexual Relationships**

It is unethical for physician assistants to become sexually involved with patients. It also may be unethical for PAs to become sexually involved with former patients or key third parties. Key third parties are individuals who have influence over the patient. These might include spouses or partners, parents, guardians, or surrogates.

Such relationships generally are unethical because of the PA's position of authority and the inherent imbalance of knowledge, expertise, and status. Issues such as dependence, trust, transference, and inequalities of power may lead to increased vulnerability on the part of the current or former patients or key third parties.

### **Gender Discrimination and Sexual Harassment**

It is unethical for physician assistants to engage in or condone any form of gender discrimination. Gender discrimination is defined as any behavior, action, or policy that adversely affects an individual or group of individuals due to disparate treatment, disparate impact, or the creation of a hostile or intimidating work or learning environment. It is unethical for PAs to engage in or condone any form of sexual harassment. Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature when:

- Such conduct has the purpose or effect of interfering with an individual's work or academic performance or creating an intimidating, hostile or offensive work or academic environment, or
- Accepting or rejecting such conduct affects or may be perceived to affect professional decisions concerning an individual, or
- Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's education or professional position.

## **THE PA AND OTHER PROFESSIONALS**

### **Team Practice**

Physician assistants should be committed to working collegially with other members of the health care team to assure integrated, well-managed, and effective care of patients. PAs should strive to maintain a spirit of cooperation with other health care professionals, their organizations, and the general public.

### **Illegal and Unethical Conduct**

Physician assistants should not participate in or conceal any activity that will bring discredit or dishonor to the PA profession. They should report illegal or unethical conduct by health care professionals to the appropriate authorities.

### **Impairment**

Physician assistants have an ethical responsibility to protect patients and the public by identifying and assisting impaired colleagues. "Impaired" means being unable to practice medicine with reasonable skill and safety because of physical or mental illness, loss of motor skills, or excessive use or abuse of drugs and alcohol.

PAs should be able to recognize impairment in physician supervisors, PAs, and other health care providers and should seek assistance from appropriate resources to encourage these individuals to obtain treatment.

### **PA–Physician Relationship**

Supervision should include ongoing communication between the physician and the physician assistant regarding patient care. The PA should consult the supervising physician

whenever it will safeguard or advance the welfare of the patient. This includes seeking assistance in situations of conflict with a patient or another health care professional.

### **Complementary and Alternative Medicine**

When a patient asks about an alternative therapy, the PA has an ethical obligation to gain a basic understanding of the alternative therapy being considered or being used and how the treatment will affect the patient. If the treatment would harm the patient, the PA should work diligently to dissuade the patient from using it, advise other treatment, and perhaps consider transferring the patient to another provider.

## **THE PA AND THE HEALTH CARE SYSTEM**

### **Workplace Actions**

Physician assistants may face difficult personal decisions to withhold medical services when workplace actions (e.g., strikes, sick-outs, slowdowns, etc.) occur. The potential harm to patients should be carefully weighed against the potential improvements to working conditions and, ultimately, patient care that could result. In general, PAs should individually and collectively work to find alternatives to such actions in addressing workplace concerns.

### **PAs as Educators**

All physician assistants have a responsibility to share knowledge and information with patients, other health professionals, students, and the public. The ethical duty to teach includes effective communication with patients so that they will have the information necessary to participate in their health care and wellness.

### **PAs and Research**

The most important ethical principle in research is honesty. This includes assuring subjects' informed consent, following treatment protocols, and accurately reporting findings. Fraud and dishonesty in research should be reported so that the appropriate authorities can take action.

Physician assistants involved in research must be aware of potential conflicts of interest. The patient's welfare takes precedence over the desired research outcome. Any conflict of interest should be disclosed.

In scientific writing, PAs should report information honestly and accurately. Sources of funding for the research must be included in the published reports.

Plagiarism is unethical. Incorporating the words of others, either verbatim or by paraphrasing, without appropriate attribution is unethical and may have legal consequences. When submitting a document for publication, any previous publication of any portion of the document must be fully disclosed.

### **PAs as Expert Witnesses**

The physician assistant expert witness should testify to what he or she believes to be the truth. The PA's review of medical facts should be thorough, fair, and impartial.

The PA expert witness should be fairly compensated for time spent preparing, appearing, and testifying. The PA should not accept a contingency fee based on the outcome of a case in which testimony is given or derive personal, financial, or professional favor in addition to compensation. Guidelines for Ethical Conduct for the Physician Assistant Profession.

## **The PA and Society**

### **Lawfulness**

Physician assistants have the dual duty to respect the law and to work for positive change to laws that will enhance the health and well-being of the community.

### **Executions**

Physician assistants, as health care professionals, should not participate in executions because to do so would violate the ethical principle of beneficence.

### **Access to Care / Resource Allocation**

Physician assistants have a responsibility to use health care resources in an appropriate and efficient manner so that all patients have access to needed health care. Resource allocation should be based on societal needs and policies, not the circumstances of an individual patient-PA encounter. PAs participating in policy decisions about resource allocation should consider medical need, cost-effectiveness, efficacy, and equitable distribution of benefits and burdens in society.

### **Community Well Being**

Physician assistants should work for the health, well-being, and the best interest of both the patient and the community. Sometimes there is a dynamic moral tension between the well-being of the community in general and the individual patient. Conflict between an individual patient's best interest and the common good is not always easily resolved. In general, PAs should be committed to upholding and enhancing community values, be aware of the needs of the community, and use the knowledge and experience acquired as professionals to contribute to an improved community.

### **Conclusion**

The American Academy of Physician Assistants recognizes its responsibility to aid the PA Profession as it strives to provide high quality, accessible health care. Physician assistants wrote these guidelines for themselves and other physician assistants. The ultimate goal is to honor patients and earn their trust while providing the best and most appropriate care possible. At the same time, PAs must understand their personal values and beliefs and recognize the ways in which those values and beliefs can impact the care they provide.