Provision of Student Instruction

ARC-PA Standard A2.01 All program faculty, including didactic and clinical instructional faculty:

> *a) meet program-defined academic and experiential qualifications to teach in their assigned instructional areas*
>
> *b) are evaluated for effectiveness in their assigned instructional areas*

ARC-PA Standard A2.13 The program does not rely primarily on resident physicians for didactic instruction.

ARC-PA Standard A2.14 All instructional faculty actively serving as supervised clinical practice experience preceptors hold a valid, unrestricted, and unencumbered license to practice.

ARC-PA Standard A3.03 The program publishes, makes readily available, and consistently applies a policy that PA students do not substitute for or function as:

> *a) instructional faculty*
>
> *b) clinical or administrative staff*

The PA principal faculty are responsible for and actively participate in providing student instruction by either working as a course director or a primary instructor in each course. All instructors will be vetted and credentialed to ensure they are qualified through academic preparation and/or experience to teach assigned subjects, knowledgeable in course content, and effective in teaching assigned subjects. The program will not rely primarily on resident physicians for didactic or clinical instruction. Students will not substitute or function as instructional faculty or clinical/administrative staff. In the clinical year, all instructional faculty, to include PAs, physicians, and advanced practice nurses actively serving as supervised clinical practice experience preceptors, must hold or have held board certification and must hold a valid license to practice.

Evaluating Student Performance

ARC-PA Standard A3.14: The program publishes, consistently applies and makes readily available to enrolled and prospective students:

a) *any required academic standards to maintain enrollment and progress in the curriculum*
b) *requirements and deadlines for completion of the program*

Academic standing is determined by final course grade, semester GPA, and cumulative GPA. Additionally, student performance is assessed by professional standards of conduct. All learners must maintain a GPA of 3.0 or higher for each semester. Academic standing is determined at the end of each term and anyone not meeting program requirements will be referred to the Committee on Academic Progress and Standards. The Committee on Academic Progress and Standards may recommend a Program Academic or Professionalism Warning, Program Academic or Professionalism Probation, Dismissal, or other appropriate actions to the program director. Independent of academic performance, unprofessional behavior may be the sole criterion for which a student is referred to the Committee on Academic Progress and Standards. For current physician assistant students, additional details regarding academic standing are located in the student handbook in Canvas.

The PA Program Committee on Academic Progress and Standards (CAPS) will meet and review each student's progress when indicated and at the conclusion of each term to allow the program to identify and address any student deficiencies in a timely manner and to offer support as needed as learners begin the subsequent term. Learners will receive an electronic letter of academic standing from the program director following each term.

Methods of Student Assessment

Students will be assessed using summative and formative methods during the didactic and clinical years. Syllabi contain specific information for each course.

University Grading Scale

Numerical Grade	Letter Grade	Quality Points
93 – 100	A	4
90 – 92	A-	3.7
87 – 89	B+	3.3
83 – 86	B	3.0
80 – 82	B-	2.7
77 – 79	C+	2.3
73 – 76	C	2.0
72 and below	F	0

- A score of 73 is required for courses with the MPA prefix. Course grades earned below the minimum of 73 (72% or less) will be awarded an F. Failing any one didactic course may result in dismissal. Only final course grades are rounded. Rounding will be done at a 0.5 or greater and will go up to the next whole number.
- The cumulative GPA requirement reflects the program's expectation that students demonstrate **consistent academic achievement above the minimum level required to pass an individual course**. It is the determining factor in setting academic standing. The 73% course minimum establishes the threshold for successful completion of a specific course, while the 3.0 cumulative GPA per semester requirement establishes the level of overall academic performance expected for continued progression and successful completion of the program.
- Grade weighting and calculations are listed specifically in each course syllabus.

Program Progression and Completion

ARC-PA Standard A3.14: The program publishes, consistently applies and makes readily available to enrolled and prospective students:

a) *any required academic standards to maintain enrollment and progress in the curriculum*
b) *requirements and deadlines for completion of the program*

Academic Progress:

Due to the lock-step design of the curriculum students are not eligible to repeat courses within the didactic year. PA students must meet minimum professionalism and academic standards each semester and in their cumulative GPA throughout the Program. Students must maintain a cumulative semester GPA of 3.0 and demonstrate professional behavior to be in Good Standing in the Program. The academic progress of all students is tracked each term by the Committee on Academic Progress and Standards (CAPS) to ensure all learners meet program standards.

Progression to the Clinical Year:

Progression to the clinical year requires faculty approval through CAPS review of each student's performance at the conclusion of the didactic year and attainment of the following requirements:

- Completion of didactic year courses.
- Maintenance of a cumulative 3.0 GPA.
- Demonstration of appropriate professional attitudes and behaviors.

If a student does not meet all the above requirements, they will be referred to CAPS and may not be allowed to progress to the clinical year. If CAPS decides the unmet requirements are evidence that the student is unprepared for the rigors of supervised clinical practice experiences (SCPEs), the student may be dismissed from the program.

Program Completion:

To meet graduation requirements, students must meet university requirements.

In addition to the above university requirements, the PA program requires the following:

- Successful completion of a summative evaluation portfolio review by CAPS. This portfolio is completed by the student during the final four months before graduation and assesses the students' knowledge, skills, and professionalism through various program-defined activities. If CAPS decides that the unmet requirements are

evidence that the student is unprepared for the rigors of clinical practice, the student may be dismissed from the program.

- Minimum Cumulative GPA of 3.0

The PA program encompasses a curriculum that is 24 months in length. Should the need arise, the program completion time may consider extending the program completion time depending on the circumstances, but this period may not extend beyond a four-year general limit.

Policy on Advanced Placement

Associated ARC-PA Standards:

A3.12 The program publishes, consistently applies and makes readily available to enrolled and prospective students any admission and enrollment practices that address:

c)awarding or granting advanced placement

A3.13 The program makes student admission decisions in accordance with clearly defined and published practices of the institution and program.

Background and Purpose:

This policy establishes the PA program's stance on advanced placement and reflects the program's commitment to a lock-step, cohort-based model of education. This policy ensures fairness, curricular integrity, and timely competency development for all students.

Definitions:

Advanced placement is defined by the ARC-PA as "the waiver of required coursework within the PA curriculum for applicants or currently enrolled students, allowing advancement in the program without completing all required curriculum components."

Policy Statement:

The PA program does not allow advanced placement. All PA matriculants are required to complete the full curriculum.

Policy on Allegations of Student Mistreatment and Student Grievances

Associated ARC-PA Standards:

A1.02 *The sponsoring institution is responsible for:*

g) defining, publishing, making readily available, and consistently applying to students its policies and procedures for processing student allegations of harassment and mistreatment

A3.14 *The program publishes, consistently applies, and makes readily available to enrolled and prospective students:*

g) policies and procedures for student grievances

h) policies and procedures for student appeals

Background and Purpose: This policy outlines the standards and procedures to address allegations of student mistreatment and grievances within the PA program and includes both the didactic and clinical year involving any program affiliated individuals. The intent is to ensure a positive and inclusive learning environment where concerns are addressed promptly and fairly.

Policy:

1. Applicability:

- This policy applies to all students, faculty (principal and instructional faculty), staff, clinical preceptors, and all individuals affiliated with the PA program.

2. Definitions:

- **Student Mistreatment:** Behaviors that create a hostile, abusive, or discriminatory environment hindering a student's learning or professional development.
- **Grievance:** A formal concern raised by a student regarding unfair treatment or policy violations.
- **Harassment (defined per ARC-PA)**: "Unwelcome conduct that is based on race, color, religion, sex (including sexual orientation, transgender status, or pregnancy), national origin, older age (beginning at age 40), disability, or genetic information (including family medical history). Harassment is conduct that is severe or pervasive enough to create a work environment that a reasonable person would consider intimidating, hostile, or abusive. Petty slights, annoyances, and isolated incidents (unless extremely serious) do not meet the definition of harassment."

3. Examples of Student Mistreatment:

- Verbal Abuse: Derogatory remarks, belittling, or public humiliation.
- Harassment/Discrimination: Biased treatment based on race, gender, or other protected traits.
- Physical Abuse: Any form of aggression or intimidation.
- Unrealistic Demands: Assigning unrelated tasks, unpaid labor, or overwhelming workloads.
- Sexual Harassment: Unwanted advances or inappropriate comments of a sexual nature.
- Professional Undermining: Withholding opportunities, sabotaging evaluations.

- Emotional Abuse: Threats or manipulation affecting confidence and mental health.
- Unprofessional Relationship: Inappropriate personal relationships that compromise professionalism.
- Abuse of Authority: Misuse of power to control, manipulate, or unfair discipline.
- Abusive and/or Intimidating Behavior: Actions that create a hostile or fearful learning environment.

4. Reporting, Review and Resolution Procedures:

- Students who experience or witness mistreatment during the didactic phase are encouraged to report incidents immediately to their PA program faculty mentor, the Director of Didactic Education, or the Program Director. Any incident occurring during the clinical year should be reported immediately to the Director of Clinical Education.
- To report incidents of sexual harassment or sexual misconduct, follow the procedures outlined in the University's sexual harassment and sexual misconduct policy here.
- For all other allegations of mistreatment and grievances, follow the procedures outlined in the University's Student Grievance Procedures here.

5. Appeals:

- Students dissatisfied with the resolution may appeal to the University's established grievance and appeals processes here.

Policy on Deceleration

A3.14: The program publishes, consistently applies, and makes readily available to enrolled and prospective students:

d) policies and procedures for deceleration,

The purpose of deceleration is to provide students with a structured opportunity to leave their original cohort due to extenuating circumstances and rejoin the program with a later cohort.

Process for Deceleration:

Students may request deceleration for extenuating circumstances while in the program but must be in good academic standing.

A student requesting deceleration must meet with the Program Director to formulate a deceleration plan, which will include an anticipated date of return. If applicable, the deceleration plan should also include conditions of return. If the deceleration was granted for medical reasons, the student will need to submit documentation from the certifying healthcare provider that they are medically cleared to return to the PA program, can meet all the technical standards for enrollment, and can fully participate in all activities.

Policy on Dismissal

Associated ARC-PA Standards:

A3.14f: The program publishes, consistently applies and makes readily available to enrolled and prospective students:

f) policies and procedures for dismissal

Background and Purpose:

This policy defines the criteria and procedures for dismissing students from the Physician Assistant Program, ensuring that program standards are maintained while providing a fair and transparent process. It also outlines the appeals process, granting students the opportunity to address any concerns regarding their dismissal. By establishing clear guidelines and due process, the policy upholds the program's academic and professional integrity.

Policy:

1. Dismissal:

Students may be recommended for dismissal from the PA program at any time during their enrollment. Such action is not taken lightly and is reserved for serious infractions or a demonstrated lack of readiness for clinical practice as a Physician Assistant.

Recommendation of dismissal will be made by CAPS for review by the Program Director and Campus President, and the student will be notified of dismissal electronically of the decision.

2. Dismissal Criteria:

- Students may be recommended for dismissal from the Program for multiple reasons including:
    - Professionalism infraction
    - Failure of a didactic course
    - Failure of a clinical year course
    - Failure to complete the conditions of a remediation
    - Failure of a course remediation (applies to clinical year only)
    - Cumulative GPA <3.0 for 2 semesters
    - Unmet requirements for progression from the didactic to the clinical year
    - Removal of student from SCPE by preceptor/site

The program reserves the right to make decisions on recommendations for student dismissal for other egregious infractions.

3. Appeals Process:

- Dismissal appeals should be directed to the Program Director and Campus President. The Academic Review Board (ARB) and/or Judicial Review Board (JRB) will promptly review all appeals and will inform students of its decision in writing. The decision of the ARB and/or JRB committee may be appealed with the Campus President.

Policy on Dress Code and Personal Appearance

Associated ARC-PA Standards:

A3.01 Program policies are published, readily available, and consistently applied to all students, principal faculty, staff, and the program director regardless of their location.

A3.04 The program publishes, makes readily available, and consistently applies a policy that requires PA students to be clearly identified in the clinical setting to distinguish them from other health profession students and practitioners.

Background and Purpose: This policy establishes guidelines for student dress and personal appearance to maintain professionalism in both academic and clinical environments. Adherence to these guidelines fosters a positive representation of the PA program and the medical profession.

Policy:

1. General Appearance:

- Students should dress in business casual attire and short white coat unless directed to wear university issued scrubs.
- Clothing should be clean, wrinkle-free, and free from stains.
- Students must maintain appropriate personal hygiene, including clean hair, nails, and body. Hair and nails should be kept neat to ensure patient and personal safety. Nails should be kept short. Artificial fingernails and eyelashes are prohibited. If performing physical exams or procedures, hair should be tied back away from the face and patient/sterile field.
- Noxious odors: A noxious odor is any odor that is unreasonably strong and likely to cause significant discomfort or disruption to others within the university environment. This includes, but is not limited to, odors from: cannabis/marijuana, tobacco, excessive use of perfumes, incense, or colognes, unwashed clothing, and body odor.
- Unless head coverings are required for religious or cultural reasons, hats or other head coverings are prohibited.
- Body piercings and tattoos – Body art and body piercing, which may be acceptable in some social situations, should not be worn or displayed by students in professional settings. Tattoos should be covered to the extent possible. Piercings, other than ear piercings, should be covered or removed in professional settings.
- Exceptions for religious or cultural reasons may be made on a case-by-case basis.

2. Professional Attire:

Didactic Year:

- Business casual with white coat. No jeans, leggings, jeggings, or athletic wear.
- Students are required to wear ECPI University-issued scrubs when directed. Uniforms must fit modestly and allow for ease of movement.
- Closed-toe shoes with heels no higher than two inches are required.
- When seated, skirts must not fall above the knee.
- Shirts must not gape when bending forward such that cleavage remains non-visible.
- There may be exceptions to dress code which will be announced by the program, as required.

Clinical Year:

- Students must wear business casual attire unless directed otherwise by their preceptor.
- If directed to wear scrubs, students may wear ECPI University-issued scrubs with an embroidered ECPI University logo, or personal/hospital issued scrubs.
- A white lab coat with the University logo and University ID must be worn unless the preceptor specifies otherwise.
- Lab coats must be laundered weekly or when soiled.
- Students must adhere to specific site dress codes as directed by the clinical preceptor or site policies.
- In all sites, learners must wear appropriate badging for identification.

3. Additional Requirements:

- Gym-type attire is required during designated lab sessions, including gym shorts (minimum six inches in length) and loose-fitting T-shirts. Females are required to wear sports bras during such sessions.
- Attire restrictions:
    - No tank tops, halters, tube, strapless or spaghetti strap shirts or dresses
    - No torn, tattered clothing including cutoff shorts or pants
    - No spandex, swimwear. No jeans.

- No shorts, capris must be below knee and sit at waist
- No clothing with obscene or offensive language
- No bare midriffs, bare feet, or flip flops (sandals must have straps to secure shoes to front and back of feet for safety purposes)
- No visible undergarments, including undershirts worn as outer wear.)
- Jewelry needs to be subtle and not interfere with clinical duties or stethoscope, should not interfere with cleanliness.

4. Hospital Scrubs:

- Hospital-issued scrubs are to be worn only in specific patient care areas and are not to be defaced, altered, or removed from the hospital. The student is responsible for any costs associated with damage or failure to return hospital-issued scrubs.
- Personal protective equipment (PPE), such as masks and booties, must be removed upon leaving clinical areas.

5. Violations:

- Dress code violations may result in referral to the Committee on Academic Progress and Standards for further action.

Policy on Immunization and Health Screening of Students

Associated ARC-PA Standards:

A3.09 The program publishes, makes readily available to current and prospective students, and consistently applies policies based on current CDC health professionals' recommendations and applicable state or country mandates for:

a) minimum immunization and health screening of students

b) international travel (for programs offering international curricular components)

Background and Purpose: This policy ensures the health and safety of students, faculty, and patients by requiring compliance with immunization and health screening standards. These measures align with state and federal health guidelines for healthcare professionals.

Policy:

1. Requirements Prior to Matriculation:

- All students must complete a physical examination and submit the PA Program Physical Examination form before matriculation. This document will be provided to the students after they accept their offer of admission.
- Documentation of required immunizations must be provided as per ECPI University's Immunization Policy. The PA program requires that students adhere to the Virginia Department of Health laws and regulations for Healthcare Personnel vaccinations, and Tuberculosis Screening and Testing and the current Adult Immunization Schedule by Medical Condition and Other Indication (Addendum updated July 2, 2025) | Vaccines & Immunizations | CDC
- A medical history and updated physical examination are required for readmission after withdrawal due to medical reasons.

2. Immunization Requirements:

- *Tetanus/Diphtheria/Pertussis (Tdap):* One dose with a booster within 10 years.
- *Hepatitis B:* Positive Hepatitis B Surface Antibody Titer with documentation of a completed Hep B vaccination series. Negative titers require a full repeat series and a repeat titer.
- *Influenza:* Annual vaccination.
- *Measles, Mumps, Rubella (MMR):* Each, measles, mumps and rubella, must have proof of 2 immunizations OR a positive titer. Negative titers require a new vaccination series and a repeat titer.
- *Varicella:* Must have proof of 2 immunizations OR a positive titer. Negative titers require a new vaccination series and a repeat titer.

- *Poliovirus:* The CDC recommends adults to be vaccinated (3 doses). *COVID-19:* Vaccination is not required by ECPI University for matriculation. Due to the evolving nature of these recommendations, the PA program encourages students to refer to the most recent CDC recommendations for guidance. Note: Clinical year supervised clinical practice experience (SCPE) sites may have specific requirements for COVID-19 vaccination.

4. Tuberculosis:

- *Pre-Matriculation:* Proof of TB risk assessment, symptom screen AND Initial Screen.
    - Initial Screen: (for students without documented prior TB disease or latent TB infection):
        - TB Individual Risk assessment and symptom screen questionnaire
        - Whole blood interferon gamma release assay (IGRA) test (QuantiFERON-TB Gold Plus or T-Spot)

    - Based on the results of the testing, additional evaluation may be required prior to obtaining clearance, as determined by current guidelines.
    - A student with a documented prior positive test for TB infection must provide documentation of the positive test, documentation of the follow-up evaluation and treatment, AND a chest x-ray taken within the previous 6 months. Students with prior BCG vaccination must undergo both chest X-ray and IGRA testing.

- *Pre-Clinical Placement*: Proof of annual TB education, risk assessment, and symptom screen questionnaire.
    - Additional testing may be required based on clinical site requirements

5. Compliance Monitoring:

- Students must maintain compliance with all immunization and health screening requirements throughout the program.
- Non-compliance will result in administrative holds, affecting clinical placements or progression.
- A clinical site may require immunizations beyond the University requirements, or deny a student based on an approved vaccination exemption.
- Special supervised clinical practice experiences (SCPE) scheduling arrangements will not be made to accommodate individual student vaccination choices. Refusal to adhere to vaccination mandates as outlined above may affect clinical placements and progression in the program.

6. Financial Responsibility:

- Students are responsible for all costs associated with immunizations, health screenings, and related follow-ups unless otherwise stated by the program.

7. Provision for religious or medical exemptions:

- Students with appropriate documentation for religious or medical exemptions will be considered on a case-by-case basis. Clinical site immunization requirements supersede program immunization policy determinations.

Policy on Incidental Findings

Associated ARC-PA Standards:

A3.05 The program publishes, makes readily available, and consistently applies policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities that would place them at risk. Those policies:

a) address methods of prevention

b) address procedures for care and treatment after exposure

c) clearly define financial responsibility

Background and Purpose: Medical education routinely involves the use of students as models for demonstrating clinical skills teaching and learning. This policy provides guidance for addressing incidental findings discovered during training. It aims to protect student confidentiality while ensuring appropriate follow-up care.

Policy:

1. Definition of Incidental Findings:

- An incidental finding refers to a potentially abnormal medical finding noted during curricular activities involving peer or faculty demonstrations of clinical skills.

2. Procedures for Notification and Follow-up:

- The supervising faculty member must inform the student of the incidental finding in a confidential matter and in writing and recommend follow-up with a primary care provider or emergency services as appropriate.
- Upon request, the faculty member will provide relevant information about the finding to the student's healthcare provider.

3. Financial Responsibility:

- Any costs related to the diagnosis or treatment of incidental findings are the sole responsibility of the student and not the University.

4. Confidentiality:

- Faculty and students must maintain strict confidentiality regarding incidental findings.

Policy on Infectious and Environmental Hazard Exposure

Associated ARC-PA Standards:

A3.05 The program publishes, makes readily available, and consistently applies policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities that would place them at risk. Those policies:

a) address methods of prevention

b) address procedures for care and treatment after exposure

c) clearly define financial responsibility

Background and Purpose: This policy outlines prevention and response protocols for student exposure to infectious and environmental hazards during the program. It emphasizes student safety and compliance with OSHA guidelines.

See the ECPI University Bloodborne Pathogen and Exposure Form for full procedure in case of exposure.

Policy:

1. Prevention Training:

- Students receive training on bloodborne pathogen exposure and standard precautions during orientation and the Clinical Preparation course.
- Students must follow Occupational Safety and Health Administration (OSHA) Guidelines for Standard Precautions in the classroom, laboratory, and clinical sites when the potential for exposure to hazardous materials or bodily fluids exists.
- Appropriate personal protective equipment (PPE) is provided for on-campus activities.

2. Immediate Response:

- PA students may be exposed to infectious agents during their education through contact, inhalation, or percutaneous routes. Definitions and the process through

which students should seek evaluation and treatment for occupational exposures is outlined below.

- Exposures: An accidental puncture injury, mucous membrane, or non-intact skin exposure to blood/body fluids should be considered potentially infectious, regardless of the source.
- Exposures to contaminative substances should also be seen as potentially dangerous and managed appropriately.

- **Immediately after exposure**, students must:
  - Perform appropriate first aid measures (e.g., wound cleaning, flushing mucous membranes with water/saline for 15 minutes, antiseptic applied, remove contaminated clothing).
  - Notify the clinical preceptor or supervising faculty and appropriate site staff.

- Follow the affiliated site's exposure protocol. This should include appropriate source patient testing/notification, when possible. If the protocol is unknown or unable to be obtained in a timely manner by the preceptor, the student should access the site's emergency department (as applicable) for testing, any applicable treatment, and counseling as soon as possible. If the student is at an ambulatory location, the student accesses the nearest urgent care. ***Important: High-risk exposure requires immediate post-exposure prophylaxis treatment. Do not delay seeking care.***

3. Financial Responsibility:

- Students are responsible for costs associated with exposure evaluation and treatment, including follow-up testing/treatment.
- Any coverage not provided by the student's health insurance can be filed as a claim to ECPI University. Students should contact the program director for the appropriate forms.

4. Documentation:

- The event must be reported immediately to the Director of Clinical Education and Program Director and documented using the ECPI University Bloodborne Pathogen and Exposure Form.

Policy on Remediation in the Clinical Year

Associated ARC-PA Standard:

A3.14c: The program publishes, consistently applies, and makes readily available to enrolled and prospective students:

c) policies and procedures for remediation,

Background and Purpose: The ARC-PA defines remediation as "the program defined and applied process for addressing deficiencies in a student's knowledge and skills, such that the correction of these deficiencies is measurable and can be documented."

This policy provides guidelines for addressing academic or clinical deficiencies through remediation, ensuring student success while maintaining program integrity.

Policy Statement:

The remediation process will be initiated by direct communication from the Director of Clinical Education. Students will meet with the Director of Clinical Education to complete the PA Program Remediation Contract which details the indication for remediation, remediation assignment, due date, expected remediation outcomes and whether those outcomes are met. If indicated, remediation documents will be submitted to CAPS for recommendation, and then to the Program Director for review. The student will then receive a letter of standing and documents will be filed in the student's confidential academic record.

Successful completion of remediation is required to continue in the program.

There is a limit of one course remediation in the Clinical Year. Mitigating circumstances may be considered. Failure of a Clinical SCPE may result in the need to repeat the SCPE and delay in graduation.

Policy on Remediation in the Didactic Year

Associated ARC-PA Standard:

A3.14c: The program publishes, consistently applies, and makes readily available to enrolled and prospective students:

c) policies and procedures for remediation,

Background and Purpose: The ARC-PA defines remediation as "the program defined and applied process for addressing deficiencies in a student's knowledge and skills, such that the correction of these deficiencies is measurable and can be documented."

This policy provides guidelines for addressing academic or clinical deficiencies through remediation, ensuring student success while maintaining program integrity.

Policy:

The remediation process for a summative assessment score below 73% will be initiated in writing by the Course Director. Students will meet with the Course Director to complete the PA Program Remediation Contract which details the instructions for remediation, remediation assignment, due date, expected remediation outcomes and the criteria with which the remediation outcomes are met. If indicated, including end of term exams and non-passing remediation exams, remediation documents will be submitted to CAPS for recommendation, and then to the Program Director for review. The student will then receive a letter of standing following each Term and documents will be filed in the student's confidential academic record. Successful completion of remediation, as indicated on the remediation contract, defined as 73% or above is a requirement to increase the score of the assessment. The highest grade awarded for successful remediation is a replacement of the original score to 73%. A failed remediation may impact academic standing.

Students who receive a failing score in any one course during the didactic year may be dismissed from the program.

Policy on SCPE Travel

Associated ARC-PA Standards

A3.14j The program publishes, consistently applies, and makes readily available to enrolled and prospective students: j) policy for student travel to required rotation sites

- The ECPI University PA Program assigns all Supervised Clinical Practice Experiences (SCPEs) in accordance with ARC-PA Standards. Students may not arrange their own rotations.

SCPE Locations

- SCPE sites are considered local if they are within 60 miles of the Virginia Beach campus.
- Rotations may occur in urban, suburban and rural areas across the region.
- Students may be assigned to up to five sites within 300 miles of the program to meet educational and accreditation requirements.

- Students may be assigned to up to five sites greater than 300 miles of the program to meet educational and accreditation requirements.
- Local placement is not guaranteed.

Allowing students to request to travel to distant SCPE sites is not restricted to the above if placements are deemed appropriate by the program.

Student Financial Responsibility

Students are responsible for all costs associated with SCPEs, including travel, housing, food, gas, parking, and child/animal care.

Travel Expectations

- Students must maintain reliable transportation, arrive on time for all clinical activities, and plan proactively for commuting or temporary relocation. Travel challenges do not excuse absences or professionalism concerns.

Special Considerations

- Requests related to disability accommodation or significant documented needs may be reviewed but cannot override accreditation or placement requirements.

Policy on Services Addressing Personal Issues

Associated ARC-PA Standard:

A3.07 The program publishes, makes readily available, and consistently applies written procedures that ensure timely access and timely referral of students to services addressing personal issues that may impact their progress in the PA program.

Background and Purpose:

The demands of the Physician Assistant program can be both academically rigorous and personally challenging. Recognizing that personal issues may arise and impact students' well-being or academic progress, the program has established a structured approach for identifying and addressing these concerns. By requiring students to complete an Academic Mentoring Self-Evaluation each semester and offering a clear referral process to support services, this policy aims to ensure timely access to resources. Through proactive identification of needs, prompt referrals to support services, and ongoing follow-up by those

services, students are better equipped to maintain their health, well-being, and academic success throughout the program.

Policy:

During each required mentoring meeting, the student is required to complete an Academic Mentoring Self-Evaluation form first and discuss it with the faculty mentor. This form includes a section for the student to evaluate their needs for additional support services for personal issues.

At any time, students may self-refer or request assistance with a referral from their mentor, any PA faculty member, or the campus Student Success Coordinator.

If a student has a concern about a classmate's wellness and/or personal issues, they are encouraged to first report this concern to program faculty or the campus Student Success Coordinator. If the student does not feel comfortable reporting to faculty or the Student Success Coordinator, they may also anonymously report concerns using MyECPI. Every student has free, unlimited access to **MyECPI**, an anonymous and confidential incident reporting system. This beneficial service is available 24 hours a day, 7 days a week via a toll-free number 1-800-716-9007 or on the internet at **MyECPI.**

For more information, visit: https://catalog.ecpi.edu/student-services#my-ecpi1

Procedure for Timely Access and/or Referral to Student Support Services

1. Identification of Need
    - Faculty, staff, or students may identify that a student is experiencing personal issues affecting academic performance, attendance, or general well-being. Students are encouraged to self-identify if they feel they need support.
2. Initial Consultation
    - The student will meet with a designated program mentor or Student Success Coordinator within two business days of requesting assistance or being referred. This initial consultation will assess the students' needs and determine appropriate support or referral.
3. Referral to Services
    - Based on the consultation, the mentor or Student Success Coordinator will refer the student to relevant resources.

- In urgent cases, immediate assistance or crisis intervention will be provided by contacting the appropriate support service on behalf of the student.

4. Follow-Up and Monitoring
    - A program mentor or Student Success Coordinator will follow up with the student within one week of the referral to ensure they have accessed the recommended services and address any ongoing needs.
    - Continued monitoring will occur as appropriate, with additional check-ins scheduled to support the students' well-being and academic progress.
5. Documentation
    - All consultations, referrals, and follow-ups will be documented in the students' confidential file to ensure continuity and provide necessary information should further assistance be required.

Personal student support services may be initiated by the student at any time using WellConnect (**www.wellconnectbysrs.com**).

Policy on Student Appeals

Associated ARC-PA Standard:

A3.14 The program publishes, consistently applies, and makes readily available to enrolled and prospective students:

h) policies and procedures for student appeals

The purpose of this policy is to establish a clear, equitable, consistent, and timely process through which students may appeal academic grades, student grievance decisions, and dismissal decisions. The policy is intended to ensure students understand the appropriate level of appeal, the required documentation, applicable timelines, and the final authority for resolution.

The PA Program is committed to providing an educational experience which is conducive to the personal and professional growth of each student in a student-oriented environment. As part of that commitment, the PA Program has developed a policy to ensure students have an opportunity to pursue grievances, whether the grievance relates to an academic matter, a non-academic matter or any other facet of their student experience. This policy is as follows:

Students are encouraged to make every possible effort to resolve a grievance on an informal basis through discussion(s) with the faculty or staff member whom the student believes will be most knowledgeable about the matter at hand. (see Appendix A) If a student has a dispute with a staff or faculty member, the student is expected to meet with the Program Director if the issue is not resolved. Listed below is the appropriate chain of command or steps to resolve any such dispute, complaint, or issue.

1st step..... Faculty
2nd step..... Director of Education or Director of Clinical Education
3rd step..... Program Director
4th step..... Campus President
5th step..... Dean of the College of Health Science

The Dean for the College of Health Science will have final decision-making authority regarding academic issues. If the grievance remains unresolved, see the University Catalog for Student Grievance Procedures.

Grade Appeals

A student seeking an appeal should use the grade challenge form, and:

- Clearly identify the decision or grade being appealed;
- State the specific basis for the appeal;
- Provide relevant supporting documentation;
- Identify the resolution being requested; and
- Follow the appeal sequence established by this policy and applicable University policy.

Student Grievance Appeals

Students who have a grievance concerning a Program, faculty member, staff member, student, or other matter not specifically addressed through the grade appeal process shall follow the **University's established Student Grievance Policy and procedures**.

Grievance Procedures

Academics Policies | ECPI University Catalog

Student Dismissal Appeals

A student who receives a dismissal decision from the Physician Assistant Program shall follow the **University's established policy and procedures governing student dismissal and dismissal appeals**.

University Policies | ECPI University Catalog

Policy on Student Health Care

Associated ARC-PA Standard:

A3.06 The program publishes, makes readily available, and consistently applies policies that preclude the program director, medical director, and principal faculty from participating as healthcare providers for students in the program, except in emergency situations.

Background and Purpose:

This policy preserves professional boundaries between faculty and students, ensuring an unbiased learning environment. It also emphasizes the importance of maintaining personal health care and wellbeing by requiring students to have active health insurance. Many Supervised Clinical Practice Experience (SCPE) sites require proof of coverage before allowing student participation.

Policy:

1. Program faculty, the Program Director, the Medical Director, and clinical instructional faculty (preceptors) are not permitted to provide medical care to students unless in the event of an emergency.
2. Program faculty, the Program Director, and the Medical Director cannot access student health records at any time or for any reason other than in the event of an emergency.
3. Students are encouraged to establish health care services with a local licensed healthcare provider for routine health needs.
4. Students are required to have an active health insurance policy for the entire duration of the PA program.

5. SCPE scheduling will not be adjusted based on an individual student's health insurance status. If a student is unable to attend a SCPE due to lack or loss of health insurance, this may result in delay of graduation.

Policy on Student Identification

Associated ARC-PA Standard:

A3.04 The program publishes, makes readily available, and consistently applies a policy that requires PA students to be clearly identified in the clinical setting to distinguish them from other health profession students and practitioners.

Background and Purpose:

This policy ensures that Physician Assistant students are clearly identified as learners, promoting transparency, professionalism, and compliance with institutional requirements. Proper identification helps patients and staff understand students' roles, fosters trust, and maintains a safe and accountable clinical and academic environment.

Policy:

1. Physician Assistant students must display the ECPI University Physician Assistant Program student identification badge while on campus or participating in any program or university-related activities, including those at clinical sites like clinics, hospitals, or medical institutions. IDs should be displayed at or above the level of the waist and be clearly visible.
2. During the Clinical year, the student must wear the ECPI University Physician Assistant Program student identification badge and, if issued, a hospital/clinical site-specific badge identifying the individual's "student" status.
3. Students must verbally identify themselves as a Physician Assistant student when introducing themselves to hospital employees, staff members, patients, and members of a patient's family.

Clinical Placement Additional Professionalism Requirements:

All entries that a student makes in a patient's medical records must be signed with their name followed by "PA-Student." The clinical preceptor must countersign all entries. A student must not make entries or dictate notes for transcription into hospital charts or medical records unless he/she is given clear authorization from the preceptor to do so.

Clinical students must adhere to the host site's institutional policies and procedures regarding documentation.

Consequences:

The program considers infractions of the student identification policy as outlined above to be serious and potentially harmful to patients and the reputation of the University. All infractions will be referred to the CAPS for disposition which may include warning, probation, or dismissal.

Policy on Student Work and Shadowing

Associated ARC-PA Standards:

A3.02 The program publishes, makes readily available, and consistently applies a policy that PA students are not required to work for the program.

ARC-PA Standard A3.03a-b - The program publishes, makes readily available, and consistently applies a policy that PA students do not substitute for or function as:

a) instructional faculty
b) clinical or administrative staff

ARC-PA Standard A3.14 The program publishes, consistently applies, and makes readily available to enrolled and prospective students:

i) policy for student employment while enrolled in the program

Background and Purpose:

This policy is established to safeguard the integrity of the Physician Assistant program and ensure the highest standards of academic excellence and patient safety.

Policy:

1. Students are not required to work for the program and may not substitute for or function as instructional faculty or clinical or administrative staff at the program or at any clinical site.
2. Given the academic rigor and time demands of the program, students are strongly encouraged not to seek employment while enrolled.
3. The program schedule will not be adjusted for student work commitments.

4. “Shadowing” in clinical settings that is not arranged or authorized by the program is not allowed. This is to ensure that students do not violate health care facility policies, open themselves to potential malpractice litigation, and are not put in a situation where they are expected to provide patient care for which they do not have appropriate training.

Policy on Supervised Clinical Practice Experiences (SCPE) Solicitation and Assignments

Associated ARC-PA Standards:

ARC-PA Standard A3.08 The program publishes, makes readily available to current and prospective students, and consistently applies a policy stating that PA students are not required to provide or solicit clinical sites or preceptors.

Background and Purpose: This policy outlines the expectations and procedures for clinical rotations, ensuring consistent and fair site assignments.

Policy Statement:

1. Site Initiation

- Students are not required to provide or solicit clinical sites or preceptors.
- Students are prohibited from contacting and planning for their own clinical placement sites beyond the requirements of this policy.
- Students may suggest potential new preceptors and/or clinical sites to program faculty, that are not already affiliated with program; however, there is no direct or implied guarantee on the part of the program that the student will be assigned a rotation with any requested preceptor or clinical site, including those already affiliated with the program.
- It is important for students to understand that not all recommendations will be pursued or implemented beyond the initial evaluation of the merits of the proposed site or preceptor.
- Requests for specific sites/preceptors will be obtained for up to two clinical placements in the six months preceding the clinical year, with requests not implying that the placement will occur.
- The Director of Clinical Education and Program Director decide whether the preceptor and/or clinical site are deemed appropriate for use in Supervised Clinical Practice Experiences.
- A student may not begin with any clinical site/preceptor if all required Program and Site documents and visits are not completed.

2. Site Assignments

- The PA Program acquires, evaluates, and coordinates all supervised clinical practice experience (SCPE) sites and preceptors for the learners. This is to ensure that all clinical sites and preceptors meet program expectations and policies.
- Supervised Clinical Practice Experience (SCPE) sites are considered local within 60 miles of the campus and may also be in rural and urban areas across the region.
- Clinical sites may also be at more distant locations, including other states, when necessary.
- Students are responsible for any costs associated with clinical placements, including but not limited to travel, accommodation, food, gas, parking, and child/animal care.
- Assignment of SCPE sites is determined by the Director of Clinical Education through a lottery system utilizing Exxat.
- Exxat will be used to place all students, with entered preferences not guaranteed. This process is utilized to place students fairly and evenly without bias and to achieve the educational objectives of the clinical phase for all students.
- Clinical sites are assigned based upon site and preceptor availability, student educational needs, and program requirements.
- Considerations such as student personal demographics (home location, children, marriage status, etc.) will not guarantee any alterations in the clinical rotation placement of students but will be ascertained as part of the planning process.
- Any provided schedule is subject to change during the clinical year for a variety of reasons, some of which may not be controlled by the PA Program.
- The elective rotation may be changed if the student is not meeting minimum patient encounters in a designated category.
- Any repeat placement or completion placement due to any circumstance must be repeated at the end of the rotation sequence or as determined by the Director of Clinical Education and the Committee on Academic Progress and Standards, delaying the completion of the program.
- Additional placements will be dependent on preceptor and site availability.
- The student is responsible for any costs associated with a delayed completion.
- Students are not allowed to use Elective rotations in lieu of a placement required to be repeated.

Policy on Withdrawal

Associated ARC-PA Standards:

A3.14e: The program publishes, consistently applies and makes readily available to enrolled and prospective students:

e) policies and procedures for withdrawal

Background and Purpose:

This policy clarifies the process for students who choose to withdraw from the Physician Assistant (PA) Program, aligning with the University's official withdrawal procedures. By outlining the steps for submitting written notification and encouraging students to consult with their mentors or the Student Success Coordinator, the policy ensures that students receive the guidance and support they need to make informed decisions about their academic path.

Policy Statement:

The PA Program follows the University withdrawal process. If a student wishes to withdraw for personal reasons, refer to the Student-Initiated Withdrawals section:

Academics Policies | ECPI University Catalog Any student wishing to complete a student-initiated withdrawal from the PA Program is highly encouraged to first speak with their faculty mentor or the campus Student Success Coordinator.

Withdrawals must include a written notification of withdrawal submitted to the PA Program Director.