



# WEST COAST UNIVERSITY

Master of Physician Assistant Program - Texas  
Student Handbook  
(Didactic & Clinical)  
2026

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# INTRODUCTION

## Message from the MPA Dean/Program Director

On behalf of the leadership, faculty, and associates of West Coast University, it is my privilege to welcome you to the Master of Physician Assistant (MPA) program. I am honored to serve as your Dean and Program Director, and I want you to know how excited we are to walk alongside you in this next chapter of your professional journey.

Becoming a Physician Assistant (PA) is both challenging and deeply rewarding. Our curriculum was designed with intention—drawing from ARC-PA standards (6th Edition), PAEA Core Competencies, and the NCCPA blueprint—to prepare you not just to pass exams, but to thrive in practice as compassionate, skilled, and resilient clinicians. You will be asked to think in new ways, master complex material, and apply your knowledge in demanding settings, but you will never be alone in the process. Our faculty and staff are committed to guiding, supporting, and celebrating you every step of the way.

Our mission is to prepare PAs to care for our communities with extensive practice-ready knowledge, skills, and professional attributes that will prepare you to lead in the changing healthcare landscape. Your time in this program will prepare you to embody this mission—equipped not only to enter clinical practice with confidence, but also to grow as leaders, collaborators, and lifelong learners who can adapt and contribute meaningfully wherever your career takes you.

This handbook is meant to be your guide as you navigate the next 24 months, but it is the relationships you build, the resilience you develop, and the habits you form here that will truly define your success. We are excited to welcome you to the WCU community and look forward to partnering with you on the journey ahead.

Sincerely,



Paul Gonzales, MPAS, PA-C  
Dean/Program Director  
Master of Physician Assistant Program – Texas  
West Coast University

## Student Handbook Purpose

The West Coast University's (WCU) Master of Physician Assistant (MPA) Program informs students of its rules, policies, and guidelines through this student handbook, the MPA program website, course syllabi, and other sources. This handbook serves as a supplement to other university rules, policies, and guidelines found in the WCU Catalog, WCU Student Handbook, and other documents. This handbook has been published for your benefit. *Please read it in its entirety.* Clarification and explanation should be sought from the MPA Dean/Program Director, or designee, if needed.

## Program Handbook Disclosure and Curriculum Design

Please be advised that the WCU Catalog contains policies and procedures that apply to all students and is the primary source of reference.

The Master of Physician Assistant program is designed to help in achieving a passing score on the National Commission on Certification of Physician Assistants (NCCPA) Physician Assistant National Certification Examination (PANCE), which could lead to board certification as a practicing Physician Assistant (PA). Each state has different licensure requirements and practice acts that the student is responsible for researching specific to each state. WCU helps prepare students to take and pass the PANCE, which is commonly required to meet baseline eligibility requirements in all U.S. states. WCU has conducted a review of individual states to determine where the program curriculum meets the state's educational requirements for licensure, which can be found [here](#).

The Master of Physician Assistant – Texas Program curriculum follows a specific sequence. The program encourages an atmosphere of cooperation and non-competitiveness for students to complete the learning outcomes, instructional objectives, competencies, and goals of the program.

## Scope of Policies

These program policies apply to all students, to all principal and instructional faculty, and the MPA program administrators regardless of location. However, clinical facility policies, if different than program policies, will prevail when students are being precepted at clinical facilities.

The MPA Program Student Handbook is available to students in Canvas from any computer. It is the responsibility of the MPA student to obtain, read, and comprehend the purpose, policies, and procedures of the MPA Texas program and West Coast University.

WCU and the MPA Texas program reserves the right, at its discretion, to make reasonable changes in program content, class schedules, policies, procedures, materials and equipment, as it deems necessary in the interest of improving the student's educational experience. When the class size or curriculum warrants, classes may be combined. When federal, state, accreditation, or professional changes occur that affect students currently in attendance, the institution will make the appropriate changes and notify the students accordingly.

In the entirety of this handbook, the terms "University" or "WCU" shall mean West Coast University.

## Accreditation Status (A3.11a)

The ARC-PA has granted **Accreditation-Provisional** status to the **West Coast University Physician Assistant Program** sponsored by **West Coast University**.

Accreditation-Provisional 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. The program's accreditation history can be viewed on the ARC-PA [website](#).

## Physician Assistant Professional Role

A Physician Assistant (PA) is a nationally certified and state licensed medical professional. A PA is able to practice medicine in all general and specialized medical environments in teams with physicians and other healthcare providers. PAs manage the full scope of patient care, often handling patients' multiple medical problems. PAs conduct physical exams, diagnose and treat illness, order and interpret tests, assist in surgery, coordinate care, counsel on preventive healthcare, and prescribe medications. PA education requires students to take courses in basic sciences, behavioral sciences, clinical medicine, and more. PA students then complete clinical rotations in Pediatrics, Women's Health, Surgery, Emergency Medicine, Internal Medicine, Behavioral and Mental Health, and Family Medicine.

## Statement of Values of the PA Profession

*(AAPA© Guidelines for Ethical Conduct of the PA Profession)*

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

## The Physician Assistant Oath

*I pledge to perform the following duties with honesty, integrity, and dedication, remembering always that my primary responsibility is to the health, safety, welfare, and dignity of all human beings:*

*I recognize and promote the value of diversity and I will treat equally all persons who seek my care.*

*I will uphold the tenets of patient autonomy, beneficence, non-maleficence, justice, and the principle of informed consent.*

*I will hold in confidence the information shared with me in the course of practicing medicine, except where I am authorized to impart such knowledge.*

*I will be diligent in understanding both my personal capabilities and my limitations, striving always to improve my practice of medicine.*

*I will actively seek to expand my intellectual knowledge and skills, keeping abreast of advances in medical art and science.*

*I will work with other members of the health care team to assure compassionate and effective care of patients.*

*I will uphold and enhance community values and use the knowledge and experience acquired as a PA to contribute to an improved community.*

*I will respect my professional relationship with the physician and act always with guidance and supervision provided by that physician, except where to do so would cause harm.*

*I recognize my duty to perpetuate knowledge within the profession.*

*These duties are pledged with sincerity and honor.*

## **PROGRAM INFORMATION**

### **Program Mission Statement**

The WCU MPA Program prepares students to excel as clinicians and leaders by providing them with opportunities to learn and adopt practice-ready knowledge, skills, and behaviors that are patient-centered, innovative, embracing cultural humility, adaptability, and agility within the evolving, challenging, and ambiguous context of contemporary healthcare. We prepare professionals who will contribute to the advancement of the physician assistant profession through exemplar practice, life-long learning, and service, within and across their healthcare communities.

### **Program Vision Statement**

The WCU MPA Program seeks to be an innovative leader in PA education by offering the medical community intelligent and talented clinical providers who are well-prepared for the rapidly evolving, challenging, and ambiguous nature of contemporary healthcare.

### **MPA Program Learning Outcomes or Competencies for Entry-Level Practice (A3.11g)**

Upon successful completion of the program, the MPA students will be able to:

#### **Medical Knowledge**

1. Demonstrate acquisition of core medical knowledge to provide person-centric care for patients across the lifespan and in various clinical settings.

#### **Clinical Reasoning and Problem-Solving Abilities**

2. Evaluate a patient effectively during a medical encounter through the proper selection and accurate interpretation of laboratory and diagnostic studies.
3. Formulate a differential diagnosis based upon historical information, physical exam, laboratory, and diagnostic study findings.
4. Design person-centric patient therapeutic management plans that consider cost, efficacy, possible adverse reactions, contraindications, monitoring, and referrals.
5. Apply an evidence-based medicine approach that also considers the social determinants of health in patient care decisions.

#### **Clinical and Technical Skills**

6. Elicit an accurate and pertinent medical history from patients.
7. Perform a comprehensive or problem-focused physical exam adapted to the patients' age and care needs.
8. Perform medical and surgical procedures common to general medicine.

### **Interpersonal Skills**

9. Demonstrate interpersonal skills necessary to communicate clearly and effectively with patients/family members, and members of healthcare teams.
10. Communicate the findings of a clinical encounter in appropriate and effective written and oral forms.
11. Deliver evidence-based education and counseling to patients and their family members regarding patient evaluation and care that includes principles of preventive care, public health and health literacy.

### **Professional Behaviors**

12. Demonstrate professionalism including principles of sensitivity, respect, collaboration, accountability, cultural humility, and commitment to excellence in all interactions with patients, families and members of the health care teams.

## **Program Description**

The MPA program is 24 months in length and engages a rigorous graduate-level curriculum resulting in a MPA degree. The MPA program is comprised of preclinical (didactic) and clinical learning experiences. The didactic phase is 12 months in duration consisting of courses that will prepare students for the clinical phase. The clinical training is also 12 months in duration comprising rotations in Pediatrics, Women's Health, Surgery, Emergency Medicine, Internal Medicine, Behavioral and Mental Health, Family Medicine, and one elective rotation.

It is essential to emphasize that eligibility for the PANCE examination, administered by the NCCPA, depends on successfully completing the entire program and achieving all programmatic and institutional graduation requirements. This entails fulfilling both didactic and clinical requirements, as well as successfully completing the summative evaluation.

## **Degree Offered**

Master of Physician Assistant

## **MPA Program Goals (A3.11b)**

Below are the MPA Texas program's goals. For evidence of the program's effectiveness in meeting its program goals, please visit the website [here](#).

**Goal 1 Leadership:** Develop student passion for leading in the delivery of team-based compassionate care evidenced by a commitment to learning, service, collaboration, and resiliency.

How: Audit of the student portfolio for participation in community service or leadership opportunities. Annual faculty survey assessing the cohort's demonstration of commitment to learning, collaboration, and resiliency. The student audit of participation portion of this goal may be met by either community service **or** leadership opportunities to allow students flexibility in how they engage to support the goal. The metric is aligned consistently and is reported as the combined percentage of students who have participated in community service **or** leadership.

The WCU MPA Program strives for 90% of students that have completed a community-service or leadership opportunity prior to graduation, and that 90% of faculty responses reflect that the cohort demonstrates commitment to learning, collaboration, and resiliency.

**Goal 2 Collaboration and Accountability:** Create physician assistant clinical leaders who are entry-level practice-ready and can serve as part of the healthcare team. The MPA faculty set a benchmark for 90% of eligible graduates to be employed as PAs within one year of graduation. The program defines “eligible” as students who have graduated from the program and passed the Physician Assistant National Certification Exam (PANCE).

How: Graduate data from Career Services.

The WCU Master of Physician Assistant Program strives to have 90% of graduates employed as a Physician Assistant within one year of graduation.

**Goal 3 Competency:** Prepare graduates for the Physician Assistant National Certification Examination (PANCE), who demonstrate the knowledge and skills necessary for excellent medical practice.

How: Physician Assistant National Certification Exam (PANCE) first-time taker pass rate. The WCU MPA Program strives to have a PANCE first-time pass rate equal to or greater than the national average. The five-year first-time test taker summary report will be uploaded [here](#) upon completion of the PANCE by our first cohort.

**Goal 4 Innovation and Student Centricity:** Provide an academic and clinical curriculum that delivers an innovative and student-centric program experience to engage students' full capacity as learners that leads to program completion.

How: Program Exit Survey data.

The WCU MPA Program strives for 90% of students graduating from the program and 90% of respondents on the program Exit Survey rate the program as innovative and student centric.

## **MPA TEXAS PROGRAM REQUIREMENTS**

The WCU MPA Program has a responsibility to safeguard the patient and the public by educating competent physician assistant graduates. As such, the program maintains the right to refuse to matriculate or graduate a student, as well as the right to remove a student from a clinical experience or rotation who is deemed by the faculty to be academically, clinically, or professionally incompetent or otherwise unfit or unsuited for continued enrollment in the program. In addition to meeting the required technical skills, completion and grade minimums, prerequisite courses, and a bachelor's degree, all accepted applicants into the MPA program must undergo a background check during enrollment.

Participation in clinical education requires compliance with health, immunization, and screening requirements established by the WCU MPA Program and its affiliated clinical partners. These requirements are part of standard infection control and patient safety practices in healthcare settings.

Clinical sites determine their own requirements, which may include required vaccinations (including COVID-19 vaccination), tuberculosis screening, drug screening, and other health

documentation. As guests of these clinical sites, students must comply with all site-specific requirements. While WCU may review exemption requests in accordance with applicable law, approval of an exemption by WCU does not guarantee acceptance or approval of the exemption for purposes of clinical placement. Clinical partners may decline to accept students who do not meet their requirements. In the event a clinical site that will accept a requested exemption is not available when a student is due to be placed, the student will be withdrawn from the University.

The WCU MPA program verifies required documentation on behalf of its clinical partners. Students who are unable or unwilling to meet clinical site requirements may be denied placement. Inability to secure required clinical rotations may result in delayed progression, interruption of clinical education, or dismissal from the MPA Texas program. Any resulting additional costs incurred are at the expense of the student.

Students are responsible for maintaining all required immunizations and health clearances by published deadlines throughout the program. Because certain vaccinations (including COVID-19 vaccination) may involve a multi-month series, students must initiate required vaccinations well in advance of the start of clinical rotations.

Students accepted, but not yet matriculated, who fail to meet published deadlines, or fail to comply with any written requests for required information from WCU personnel by the deadline provided in the request, may have their offer of admission rescinded prior to the start of the program. The decision to rescind an offer of admission is not subject to appeal. Students may be eligible to reapply for the next start date.

### **Technical Standards for the PA Profession (A3.12e)**

Physician Assistant education is recognized as a broad-based process that requires the acquisition of general knowledge in all fields of medicine and the basic skills required for the practice of medicine, regardless of specialty.

The education of a PA in the WCU MPA Program requires assimilation of knowledge, acquisition of skills, and development of judgment. This is accomplished through patient care experiences that help prepare the student to make appropriate decisions of a semi-autonomous nature required of medical providers trained at this level. The current practice of medicine emphasizes a team approach to health care delivery with collaboration among physicians and other allied healthcare professionals in conjunction with patients and their families.

The PA Programs' standards and essential functions of medical education shape the requirements for admission, retention, and graduation of applicants and students. Students must be capable of meeting the standards described herein.

The Standards, along with the WCU PA Program policies, procedures, and processes for the admission and education of PA students, resonate with current and future PA practice to inform and guide the decisions of the WCU PA Program leadership and faculty. All students of medicine, including PA students, must possess those intellectual, ethical, physical, and emotional capabilities essential for success within our program and set the best trajectory for clinical practice.

1. The Technical Standards for the MPA Texas program are as follows:
  - a. Candidates must be able to observe and participate in demonstrations and experiments in the basic sciences.

- b. Candidates must have sufficient use of the sensory, vision, hearing, motor, and somatic sensation necessary to perform a physical examination including point-of-care techniques.
- c. Candidates must be able to perform examination activities such as palpation, auscultation, percussion, the administration of intravenous medication, the application of pressure to stop bleeding, the opening of obstructed airways, and the movements, equilibrium, and functional use of the sense of touch and vision.
- d. Candidates must be able to learn to respond with precise, quick, and appropriate action in emergency situations.
- e. Candidates must have the interpersonal skills necessary to communicate with accuracy, clarity, efficiency, and sensitivity.
- f. Candidates must have the skills to be able to analyze and synthesize information, solve problems, and reach diagnostic and therapeutic judgments.
- g. Candidates must be able to acknowledge evaluation and respond appropriately.
- h. Candidates must possess the interpersonal skills to develop rapport and positive relationships with patients.
- i. Candidates must possess basic technology and digital literacy.
- j. Candidates are expected to possess the perseverance, diligence, and consistency to complete the PA program curriculum. Candidates, therefore, must be able to tolerate physically taxing workloads, to function effectively under stress, to adapt to changing environments, to display flexibility, and to function in the face of uncertainties inherent in the clinical problems of many patients.

## **Background Check & Drug Screen**

Students must complete a background check during enrollment, before entering the first year, and then again prior to beginning clinical rotations. A 10-panel drug screen will need to be completed within 3 weeks prior to the clinical year. Some clinical sites require an additional background check and/or drug screen (including alcohol) immediately prior to the start of the rotation; therefore, students may be required to complete multiple screens throughout enrollment. Any additional costs that result from the screenings required by clinical site(s), including background checks and/or drug screens (including alcohol), while in training, are the sole responsibility of the student.

## **Health Insurance**

WCU MPA students are required to maintain and be able to document health insurance throughout the entirety of the program. The student will provide their medical insurance card if treatment is needed. Students are also responsible for the costs associated with any medical treatment needed, including but not limited to health evaluation following exposure to bloodborne pathogens or other communicable diseases or other accidental injuries sustained during the program. MPA students are responsible for all personal healthcare costs incurred while enrolled in the program. Personal healthcare costs may include fees related to immunizations, tuberculosis screenings, and laboratory or diagnostic studies.

Students must upload the front and back of their insurance card to Exxat. The student's name must be on the card, unless the student is a dependent or is not the primary insured. In this case, the student must provide documentation that proves they are a plan member on the identified health plan held by the person identified on the insurance card. If a student is in the process of changing or securing new insurance, they may request an extension of time. Requests must be submitted in writing via email to the MPA Dean/Program Director or designee for approval, which shall be granted at their sole discretion.

## Minimum Immunization and Health Screening Requirements (A3.09a)

Before matriculation, all students are required to provide proof of immunization to the program's third-party reviewer, Exxat. All forms are reviewed, and no student health records, with the exception of meeting immunization requirements via Exxat, will be reviewed by program personnel (A3.18). Students are responsible for maintaining their immunizations required by WCU throughout the duration of the program. Newly matriculated students who have not completed immunization requirements and have not met immunization deadlines, as designated by the program, may not be permitted to matriculate or proceed in the program.

Specified immunizations and health screenings are required for all MPA students as a condition of enrollment and progression unless a medical or religious exemption is approved. Medical exemptions must be supported by appropriate health care provider documentation consistent with CDC-recognized contraindication guidelines. Students requesting an immunization exemption must obtain and submit the required exemption form with all supporting documentation to the Director of Student Services by program established deadlines. Approval of an exemption by the University does not guarantee approval by clinical partner sites, as clinical sites maintain independent immunization requirements and may decline to accept University approved exemptions.

Within 30 days of offer acceptance, students must submit documentation of completed immunizations or formally initiate the exemption request process; failure to do so may result in rescission of the offer of admission. Students who are not yet fully vaccinated must demonstrate timely initiation of required vaccine series (as determined by the program) and provide documentation of a plan to complete all remaining doses and titers. Failure to meet immunization or exemption requirements or deadlines may result in delayed progression, inability to complete required clinical rotations, or withdrawal or dismissal from the program if no clinical site willing to accept an exemption can be reasonably secured. Students must complete all required immunizations or have approved exemption documentation on file no later than 90 days prior to the start of the first clinical rotation; for vaccines requiring multiple doses, students must demonstrate timely initiation of the series and a documented plan for completion.

To request an immunization exemption form, students must contact the campus Student Affairs office and identify the type of exemption being requested to obtain the correct form (religious or medical). The completed form and supporting documents must be submitted to the University Director, Student Affairs (Sherry Koshi) at [skoshi@westcoastuniversity.edu](mailto:skoshi@westcoastuniversity.edu). Students are advised that approval of an exemption by the program is separate from and does not guarantee clinical site approval of a requested exemption. If the exemption is not approved by an existing clinical affiliate site and if no acceptable clinical site proposed by the student for review by the program in advance will approve an immunization exemption prior to the start of the clinical year, this will result in dismissal from the program, due to the student's inability to complete the clinical requirements of the MPA program.

WCU will not collect any student health records (A3.18). The MPA program utilizes the services of an external provider (Exxat) to maintain the immunization records for each MPA student. The Exxat portal allows MPA students to upload records directly. Further, Exxat provides updates and communication to program personnel and students when immunizations are expiring. The MPA program requires students to sign a **Consent of Release** form allowing release of the information to WCU and for the WCU MPA Texas Program to provide clinical sites/preceptors with the status or result of immunizations, drug screening, certifications, and background checks. By submitting immunization records, the student authorizes WCU to release information

in the WCU records to affiliated hospitals or clinics where a student will be, or is assigned to, for clinical learning experience (A3.18).

Vaccines not specifically listed below are not required by the MPA Texas program (e.g., polio, meningococcal). Additional immunization and/or health screening requirements beyond those mandated by the program may still be required by a clinical site. If so, students will be made aware of additional requirements and will need to ensure compliance at their own expense, as necessary. Immunization and health screening requirements will be reviewed annually by the program to ensure students minimally meet the program's requirements, CDC recommendations (as recommended by the program), state-specific mandates, and affiliate policies. Immunization requirements are subject to change, and students are required to be in compliance with any updates or changes. Students will be notified in advance via e-mail of changes to the immunization policy and given direction on how to complete any additional requirements, as necessary. The program may elect to provide extensions for meeting vaccination requirements on a case-by-case basis, in the sole discretion of the MPA Dean/Program Director or designee.

All students will need to provide proof of adequate immunization/immunity for the following:

- **Measles, Mumps, Rubella (MMR)**
  - Documentation of 2 doses of MMR vaccine **OR** positive IgG antibody titer for all 3 components (Measles, Mumps, Rubella) required (Lab report required).
  - **Quantitative** (not qualitative) IgG antibody titer must be within the past 1 year. IgM testing is not accepted.
  - If the titer shows negative/low/equivocal result, then the student must repeat the series/ booster dose as recommended by PCP. The student will then need to repeat the titer 1-2 months after the final dose is administered.
  - Documented history of having measles, mumps, or rubella is not accepted in lieu of this requirement.
  - **Expiration Date Entry in Exxat:** Students must enter a completion date as the date of the titer result.
  - Immunization documentation must at minimum include the student's name, date of birth, vaccine name, and date(s) of vaccine administration.
- **Varicella**
  - Documentation of 2 doses of varicella vaccine **OR** positive varicella IgG antibody titer are required (Lab report required).
  - Documented history of having chickenpox with a positive varicella IgG antibody titer is **not** an acceptable alternative.
  - Quantitative (not qualitative) varicella IgG antibody titer must be within the past 1 year.
  - If the titer shows negative/low/equivocal result then the student must repeat the series/ booster dose as recommended by PCP. Repeat titer is required 1-2 months after final dose is administered.
  - **Expiration Date Entry in Exxat:** Students must enter a completion date as the date of the titer result.
  - Immunization documentation must at minimum include the student's name, date of birth, vaccine name, and date(s) of vaccine administration.
- **Hepatitis B**
  - Documentation of a 2-dose series (Hepilisav-B) at 0 and 1-month **OR** 3-dose series (Recombivax HB, Engerix-B, or Twinrix) at 0, 1, and 6-months **AND** positive titer required (Lab report required).

- **Quantitative** (not qualitative) hepatitis B surface antibody titer must be within the past 1 year. If hepatitis B surface antibody titer is at least 10 mIU/mL (positive), the student is immune. No further serologic testing or vaccination is recommended.
- If titer shows negative/low/equivocal, then the student must repeat 2 dose series (if Heplisav-B) **OR** 3 dose series (if Recombivax HB, Engerix-B, or Twinrix) as recommended by PCP. A repeat titer will be required 1-2 months after the final dose is administered.
- All students who cannot produce documentation of previous complete vaccination series for hepatitis B must receive either a 2-dose series (Heplisav-B at 0 and 1 month) **OR** a 3-dose series (Engerix-B, Recombivax HB, or Twinrix at 0, 1, and 6 months). Students should be tested for hepatitis B surface antibody (anti-HBs) 1–2 months after dose #2 (Heplisav-B) or dose #3 (Engerix-B, Recombivax HB, or Twinrix) to document immunity.
- If hepatitis B surface antibody is less than 10 mIU/mL (negative), the student is not protected from hepatitis B virus (HBV) infection, and should receive another 2-dose **OR** 3-dose series of HepB vaccine on the routine schedule, followed by hepatitis B surface antibody titer testing 1–2 months later. A student whose titer remains less than 10 mIU/mL after 2 complete series is considered a “non-converter” or “non-responder.”
- If you are a non-converter, please upload documentation from your PCP stating that you are a non-converter.
- **Expiration Date Entry in Exxat:** Students must enter a completion date as the date of the titer result.
- Immunization documentation must at minimum include the student’s name, date of birth, vaccine name, and date(s) of vaccine administration.
- **Tuberculosis (TB) Screening**
  - **One** of the following completed within 3 months prior to matriculation:
    - One-step TB skin test (must be documented as “negative”; induration reading alone is insufficient) **OR**
    - QuantiFERON-TB Gold blood test (lab report required) **OR**
    - T-SPOT.TB blood test (lab report required)
  - Students with a current or prior positive result must submit all the following:
    - Documentation of the positive TB test result.
    - Documentation of completed TB treatment, if applicable.
    - Documentation of a normal two-view chest x-ray within the past 12 months (radiology report required)
    - A completed Texas Department of State Health Services TB Symptom Questionnaire confirming that the student has been symptom-free for the past 12 months. The required form is available in Exxat under View Template/Sample
  - **Annual TB Screening Requirements**
    - Students with a prior negative TB result must complete annual TB screening using **one** of the following:
      - One-step TB skin test **OR**
      - QuantiFERON-TB Gold blood test (lab report required) **OR**
      - T-SPOT.TB blood test (lab report required)
    - Students with a prior positive TB test result must submit the TB symptom questionnaire annually in lieu of repeat skin or blood testing, unless otherwise required by a clinical site.

- **Expiration Date Entry in Exxat**
  - For PPD Skin test: enter the expiration date as one year from the date the test was read
  - For blood test and chest x-rays: expiration date will be auto-populated according to program guidelines.
- **Tetanus, Diphtheria, & Pertussis (Tdap)**
  - Tdap within the last 10 years.
  - If student has never received a dose of Tdap or unsure if they have previously received a dose of Tdap, then the student should receive a dose as soon as feasible, without regard to the interval.
  - Td is not accepted to meet this requirement. A history of childhood DTaP or DTP does not replace the adult Tdap requirement.
  - A titer is not accepted in lieu of this requirement.
  - **Expiration Date Entry in Exxat:** expiration date will be auto-populated as per program guidelines.
- **COVID-19 Vaccine (Ages 12 years and older)**
  - If unvaccinated for COVID-19: 1 dose of an updated\* mRNA COVID-19 vaccine (i.e., Moderna, Pfizer-BioNTech) OR 2 doses of updated\* Novavax vaccine.
  - If previously received 1 or more original monovalent or bivalent mRNA vaccine doses: 1 dose of any updated\* COVID-19 vaccine (i.e., Moderna, Novavax, Pfizer-BioNTech). Must also provide documentation of original vaccine series.
  - If previously received 1 or more doses of original monovalent Novavax vaccine, alone or in combination with any original monovalent or bivalent mRNA vaccine doses: 1 dose of any updated\* COVID-19 vaccine (i.e., Moderna, Novavax, Pfizer-BioNTech). Must also provide documentation of original vaccine series.
  - If previously received 1 or more doses of Johnson & Johnson vaccine, alone or in combination with any original monovalent or bivalent mRNA vaccine or original monovalent Novavax doses: 1 dose of any updated\* COVID-19 vaccine (i.e., Moderna, Novavax, Pfizer-BioNTech).
  - Documentation must at minimum include the patient's name and date of birth, vaccine manufacturer, date of vaccine administration, and lot number or expiration date.
  - **Expiration Date Entry in Exxat:** enter completion date as the date of the last dose administered for the booster.
- **Influenza Vaccine**
  - Documented updated\* influenza vaccination.
  - Documentation must indicate that the vaccination you received is from a batch for the current flu season.
  - Prescriptions/receipts are not accepted.
  - **Expiration Date Entry in Exxat:** enter completion date as the date of the last dose administered for the booster.
  - Documentation must at minimum include the patient's name and date of birth, date of vaccine administration, vaccine type/route of administration, & facility/clinic name.

\*Updated reflects most current dosing available (e.g., 2025-2026)

Reference Center for Disease Control and Prevention Adult Immunization Schedule: [https://www.cdc.gov/vaccines/hcp/imz-schedules/adult-age.html?CDC\\_AAref\\_Val=https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html](https://www.cdc.gov/vaccines/hcp/imz-schedules/adult-age.html?CDC_AAref_Val=https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html)  
Healthcare Personnel Vaccination Recommendations (based on CDC guidelines): <https://www.immunize.org/wp-content/uploads/catq.d/p2017.pdf>

**Note that photographs of documents (using a camera function) will not be accepted. The document upload must be in a pdf form.**

### **Certifications/Training**

All students will need to provide proof of current Basic Life Support (BLS) through the American Heart Association prior to matriculation in the MPA program. BLS must be maintained and current for the duration of the MPA program. Documentation provided to the program must be submitted in a PDF format. During the didactic year, the student will also complete and upload proof of completed Advanced Cardiac Life Support (ACLS), Occupational Safety and Health Administration (OSHA) training, and Health Insurance Portability & Accountability Act (HIPAA) training.

### **Certification and Licensure**

A PA may not begin working as a Physician Assistant in most states until he/she has successfully passed the Physician Assistant National Certifying Examination (PANCE) **and** has been licensed/registered by the state in which they practice. There may be exceptions for certain state licensures or for federal employment, such as the military and Veterans Administration. Failure to complete all necessary steps may constitute practicing medicine without a medical license. Upon graduation, students are responsible for ensuring they obtain all required and licenses and certifications. West Coast University is not responsible for registration or licensing; the student is solely responsible for all such requirements and verifying proper authorizations to practice medicine have been obtained.

Successful completion requires that the applicant achieve the passing score established by the National Commission on Certification for Physician Assistants (NCCPA) for that examination. The program supports all graduates who have passed the PANCE exam in their application for state licensure, not including payment. It is the student's responsibly to research and understand all state specific licensure requirements, beyond the educational requirements of the MPA program. The MPA program has verified that the state educational requirements have been met in each state identified in the [Professional Licensure disclosures](#).

## **MPA TEXAS PROGRAM TITLES & ROLES**

The **MPA Dean/Program Director** is a PA who holds current or emeritus NCCPA certification status (A2.08) with at least three years of full-time higher education experience (A2.06) employed by the university to lead the WCU MPA Texas Program. The MPA Dean/Program Director oversees all aspects of the program, including providing program leadership through effective program organization, program administration, fiscal management of the program, continuous programmatic review and analysis, communication, and adherence to the Standards and ARC-PA policies (A2.09a-f). The role may also include clinical practice, teaching, service, and engaging in scholarship. The program director is also responsible for developing, reviewing, and revising as necessary the program's mission statement, goals, and competencies; selecting applicants for admission to the MPA program; providing student instruction; evaluating student performance; academic counseling of students; assuring the availability of remedial instruction; designing, implementing, coordinating, and evaluating the curriculum; and evaluating the program (A2.05a-h). The Program Director is also responsible for evaluating, mentoring, and fostering the development of academic and clinical faculty and the program, including supervising the medical director, principal and instructional faculty, and staff in activities that directly relate to the MPA program (A2.10). The Program Director cannot also be the medical director, principal faculty, instructional faculty, or staff (A2.02).

The **MPA Medical Director** is a currently or previously board-certified, licensed osteopathic or allopathic physician (or PA) employed by the WCU MPA Texas Program (A2.11). The Medical Director is an advocate for the MPA program through active participation in the program and support of the development and review of the program curriculum and competencies to meet current practice standards as they relate to the PA role (A2.12). The Medical Director is actively involved in developing and reviewing the program mission statement and program competencies, providing instruction, evaluating student performance, curriculum development and evaluation, program evaluation, and participates in several program committees.

The **MPA Director of Academic Education (DAE)** is an academic administrator and principal faculty member employed by the WCU MPA Program to oversee the program's didactic year including didactic curriculum, which includes didactic year syllabi, content delivery, and assessment of all aspects of the didactic year and summative evaluation. The DAE oversees and coordinates the didactic year curriculum as the **Chair of the Curriculum Committee**, which includes didactic year syllabi, content delivery, sequencing, and assessments. The DAE oversees and creates policies and procedures relevant to the didactic environment.

The **Director of Clinical Education (DCE)** is an academic administrator and principal faculty member employed by the WCU MPA Program to oversee the program's clinical year including clinical curriculum, which includes clinical year syllabi, content delivery, and assessment of all aspects of the supervised clinical practice experiences. The **DCE** is the **Chair of the Clinical Phase Committee** and is responsible for overseeing the recruitment, organization, planning, and evaluation the supervised clinical practice experiences for students as well as communicating with all the clinical sites about matters that relate to clinical education. The DCE oversees and creates policies and procedures relevant to the clinical environment.

The MPA Dean/Program Director and all Principal Faculty participate in developing, reviewing, and revising the program's mission statement; selecting applicants for admission to the MPA program; providing student instruction; evaluating student performance; serving as advisors for students, assuring the availability of remedial instruction; designing, implementing, coordinating, and evaluating the curriculum; and program evaluation (A2.05).

**MPA Principal Faculty** are Physician Assistants and other educators, who provide student learning and are employed, or contracted, to provide greater than 50% of their time facilitating student learning and report to the MPA Dean/Program Director. All have faculty ranks and are intricately involved with student learning and administrative duties. As integral to the education experience in the program, principal faculty will also serve as committee chairs and oversee programmatic administration in areas of subject matter expertise and areas needed for programmatic support. The program faculty are responsible for developing, reviewing, and revising as necessary the program's mission statement, goals, and competencies; selecting applicants for admission to the PA program; providing student instruction; evaluating student performance; academic counseling of students; assuring the availability of remedial instruction; designing, implementing, coordinating, and evaluating the curriculum; and evaluating the program (A2.05a-h).

MPA Faculty Advisors provide support and advice to enrolled MPA students and expectations of the advisory role include but are not limited to:

- Develop an advising relationship to help students feel a sense of connection, support, and guidance to navigate the program.

- Possess a complete understanding of the entire curriculum, program design, University policies and procedures, and University and program handbooks.
- Guide students in developing a program success plan for didactic courses, clinical experiences, research projects, PANCE preparation, and employment readiness.
- Provide guidance and support to students specific to time management.
- Provide referrals, as needed, to university co-curricular support services such as the student advisor.
- Maintains professional integrity, confidentiality, sensitivity, and respect for individual needs and diversity in student advising.
- Documentation/tracking of each student's progress towards degree completion.

## CODE OF CONDUCT

### University Student Conduct Policy

Refer to the WCU Student Handbook for information on the Code of Conduct and the WCU Student [Conduct Policy](#). Additional policies specific to the WCU MPA Program are outlined below.

### Standards of Professional Conduct

University and program policies are included to provide students with broad notice of expected and prohibited conduct; they are not designed to exhaustively define misconduct. All enrolled students are required to review and, when applicable to the PA student, continuously abide by the [Guidelines for Ethical Conduct for the PA Profession](#) in addition to all WCU and program policies.

As health care practitioners, PAs are required to conform to the highest standards of ethical and professional conduct. These include, but are not limited to:

- Respect
- Flexibility
- Academic integrity
- Honesty and trustworthiness
- Accountability
- Cultural competency
- Professional dress (see dress code below)
- Cell phone use is common as more applications are, and become, available to assist with the clinical experience. The use of mobile, or cellular phones, during clinical experiences ought to be used for such purposes and NOT for personal use. NO photographs of patient information, clinics, staff members, and/or patients during clinical rotations are permitted. Violation of patient privacy may result in dismissal from the program.

### Student Responsibilities

In addition to adhering to the standards of professional conduct outlined in the handbook, students are expected to perform the following during their clinical rotations:

- Obtain detailed histories and conduct physical exams, develop a differential diagnosis, formulate an assessment and plan through discussion with the preceptor.
- Conduct oral presentations and document clinical findings in the EMR or via handwritten notes/prescriptions.
- Become proficient in coding (ICD-11 and/or CPT) after patient encounter.
- Perform focused history and physicals as applicable.

- Perform and/or interpret common laboratory results and diagnostic studies.
- Educate and counsel patients across the lifespan regarding disease prevention and disease management.
- Attend clinical rotations as scheduled in addition to grand rounds, lectures, and conferences, if available.
- Demonstrate emotional resilience and stability, adaptability, and flexibility during the clinical year.
- Follow directions from the Clinical Phase Committee as well as clinical site preceptors and staff.

## CAMPUS and CLINICAL SITE INFORMATION

### Identification as a PA Student & Dress Code (A3.04)

The University Dress Code is found in the [WCU Student Handbook](#). The professional dress code for MPA students in the didactic and clinical year follow the University's dress code with the following additions:

- Students must be clearly identified as PA Students in the clinical setting to be clearly distinguished from physicians, medical students, and other health profession students and practitioners (A3.04).
- The name badge **must** be clearly written to identify the student as a PA Student.
- Additional identification will also be present on the student's short white lab coat, to be worn during all assigned clinical rotation activities unless otherwise directed by the clinical preceptor. Students should wear their WCU Student ID badge, and if needed, the clinical site issued badge for each rotation.
- Students **must always** introduce themselves to patients, patient family members, and clinical site staff by stating their full name and position title—"Physician Assistant Student."

### On-campus and Didactic Year Attire

- Students are expected to maintain a neat, clean appearance during class time, as they will in their future roles and positions.
- All students are required to adhere to business casual dress standards, such as wearing button up shirts, slacks, khakis, professional blouses, knee-length skirts or knee-length dresses while on campus unless otherwise specified by the MPA program. Students are otherwise permitted to wear scrubs for lab days.
- In addition, particular courses may require specific attire (e.g., shorts and tee-shirts) to facilitate patient interactions—for example, in OSCEs or other simulated patient encounters. In these cases, students will be required to follow the designated dress code as instructed by course director(s).
- Accommodations can be requested by students with specific medical conditions or religious beliefs that require special clothing. Contact your campus Student Affairs office for more information.
- PA students are expected to adhere to the same ethical and professional standards required of certified PAs. The professional conduct of PA students is evaluated on an ongoing basis throughout the program. Students not meeting standards of dress and appearance may be denied access to patients during their clinical experiences, which will jeopardize the completion of the Supervised-Clinical Practice Experiences (SCPE). Violations of dress code policies may result in exclusion of participation in certain programmatic activities and/or the disciplinary process outlined in the WCU [Student Handbook](#), section Conduct and Discipline.

### Clinical Year Attire

- Business attire is appropriate for clinical rotations and callback days. Business attire includes button-up shirts (with or without a tie), slacks, khakis, professional blouse, knee-length skirts, or knee-length dresses, unless otherwise directed by the preceptor. Scrubs may be worn on rotation only if the preceptor deems it appropriate.
- During callback weeks, business attire is required unless otherwise specified by the program.
- Accommodations can be requested by students with specific medical conditions or religious beliefs that require special clothing. Contact your campus Student Affairs office for more information.
- The clinical dress may be altered by a clinical department, attending preceptor, or health professions setting as deemed appropriate.
- Clothing should be clean, pressed, and in good condition.
- All students are required to wear their clean short, white lab coats with WCU patch and a nametag clearly stating “Physician Assistant student” status and must be always visible. There may be some rotations where white coats are prohibited, but a nametag stating the student’s status must always be visible.
- Thin strap or racer back tank tops must be covered with a sweater or jacket. Low cut or strapless tops or dresses are not permitted. Cleavage should not be visible.
- Jeans and flip-flops are not permitted. Closed-toe shoes are required in the clinical setting.
- Head coverings: Hats, caps, and other head coverings are not permitted except for medical or religious purposes.
- Piercings are permitted in ears only (no gauges), and no more than two studs may be worn in each ear. Nose, tongue, chin, lip, and eyebrow piercings are not permitted in clinical settings.
- All jewelry should be removed in surgical, pediatric, and psychiatric settings.
- Visible body tattoos (including feet and ankles) should be appropriately covered while on clinical rotations or representing the university at events.
- Excessive jewelry, perfume, cologne, or make-up should be avoided.
- Smoking or vaping fragrances can cause irritation to patients and are not permitted during the clinical experiences.
- Students should have good daily hygiene that includes clean teeth, hair, clothes, and body.
- Long or artificial or brightly colored fingernails are not appropriate in the care of patients.
- Hair longer than the shoulders must be pulled back. Hats may not be worn on clinical rotation.
- Neatly trimmed facial hair is acceptable unless otherwise noted by clinical site.
- Professional/conservative hair colors only.
- No chewing gum during patient encounters.

If preceptors observe any concerns about a student’s professionalism, they will be encouraged to contact the Clinical Phase Committee or the Director of Clinical Education immediately. WCU reserves the right to dismiss any students who do not reflect WCU’s ethical and professional standards. Such situations will be referred to the Progress and Promotion Committee and as needed, the University Conduct Committee for adjudication.

# MPA TEXAS PROGRAM SPECIFIC POLICIES AND PROCEDURES

## Student Services and Resources

Refer to the [WCU Student Handbook](#) for information on services, including disability services. Additional details on Disability Services can be found [here](#).

## Program Director, Medical Director, and PA Principal Faculty as Student Health Care Providers Policy (A3.06)

Any individual who is in any capacity as program director, medical director or principal faculty (including adjunct, instructional faculty, preceptors, guest lecturers, or otherwise on paid or unpaid status) must not act as healthcare providers for the program students except emergency situations. Students are to be directed to their primary care provider, emergency department, or other health care provider.

## Policy for Student Employment while Enrolled in the Program (A3.14i)

Enrollment in the program is a full-time commitment, and employment during PA school is not recommended. If a student chooses to be employed while enrolled in the program, academic attendance, performance, and participation standards will not be altered in any way to accommodate employment. Students should be aware that the program may require evening or weekend classes, clinical experiences, and related activities.

## Students as Administrative Staff, Clinical Staff, or Instructional Faculty during Didactic and Clinical Experiences (A3.02, A3.03a-b)

Students are neither required nor permitted to work for the program. However, students may serve as tutors, teaching assistants, or graduate assistants in paid or unpaid roles (A3.02).

PA students will not substitute for, or function as, didactic or clinical instructional faculty (i.e., may not teach a class session in lieu of a faculty member), regardless of prior knowledge, education, or experience. This does not preclude PA students from acting as peer tutors, providing information or expertise during a class session (A3.03a).

PA students will not substitute for or function as clinical or administrative staff in the didactic or clinical curriculum (A3.03b). Students will not provide administrative staff work at the program nor provide clinical staff work while on supervised clinical practice experiences (SCPEs). Functioning as staff while on SCPEs may include consistently performing tasks not required of a PA student, such as filling in for or acting in the role of a clerk, nurse, or medical assistant (e.g., answering phones, filing paperwork).

## Students Providing or Soliciting Clinical Sites and/or Preceptors (A3.08)

MPA students are not required to provide or solicit clinical sites or preceptors. The WCU MPA Program will coordinate all clinical sites and preceptors for program required rotations. Coordinating clinical practice experiences involves identifying, contacting, and evaluating sites and preceptors for suitability as a required or elective rotation experience. Students may propose suggestions to the Clinical Phase Committee by emailing the **Student Clinical Site Request** form to [WCURCH-MPAprogram@westcoastuniversity.edu](mailto:WCURCH-MPAprogram@westcoastuniversity.edu) for specific sites and preceptors but are not required to do so. Students' suggested sites and preceptors may be reviewed, evaluated, and approved for educational suitability by the program. Requests are intended to support programmatic clinical capacity and educational quality and are not guarantees of placement.

All **Student Clinical Site Request** forms must be **submitted at least six (6) months in advance** of the anticipated rotation start date and must include full disclosure of any prior personal, professional, or employment relationship between the student and the proposed site or preceptor. Late or incomplete requests will not be reviewed.

Submission of a site or preceptor request does not guarantee approval or placement. All clinical placements are contingent upon the establishment of a fully executed affiliation agreement between the University and the clinical site, as well as successful completion of the program's site and preceptor vetting process. A preceptor's willingness to precept a specific student does not obligate the program to place that student at the site.

To ensure sustainability and equity in clinical education, the program will not establish affiliation agreements for one-time or single-student placements. **Clinical sites and preceptors must be willing to accept a minimum of three (3) MPA students within a twelve-month period, as determined by program needs, to be considered for affiliation.**

The program retains sole discretion over clinical site approval, preceptor assignment, student placement, and rotation scheduling. Even when a site and preceptor are approved, students may be assigned to alternative placements to meet curricular, accreditation, or operational requirements.

Failure to disclose prior relationships, attempts to independently arrange clinical placements, or misrepresentation of site availability may result in denial of the request, reassignment of the rotation, or additional disciplinary action as outlined in this handbook.

### **Student Services Addressing Personal Issues Impacting Program Progress (A3.07)**

Students may experience personal problems that can adversely affect personal fulfillment and their education. To assist PA students who may need extra support, WCU offers a free, confidential Student Assistance Program (SAP) to students. SAP services are provided by Aetna, a private, national consulting and service firm that specializes in student assistance consultations. Additional information for timely access is provided in the WCU [Student Handbook](#) under Counseling Services.

### **Mistreatment and Grievances (A1.02g and A3.14g)** **Mistreatment of a Student (A1.02g)**

The MPA program expects teachers and students to demonstrate respect and professionalism when interacting with one another. It is expected that all interactions will be free of abuse, humiliation or harassment of any kind and demonstrate the highest standards of ethical conduct in all settings.

Mistreatment is defined to arise when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process. If an MPA Texas student believes they have been mistreated, they have the right to file a grievance using the University's grievance procedure (A3.14g). If a student believes a University official, faculty member, administrator or student has acted improperly or inconsistently with WCU policies and/or procedures, the student may also file a grievance (see policy outlined below).

In addition to the mistreatment prohibited above, the University also has policies in place regarding specific types of behavior that are prohibited (see the [WCU Student Handbook](#)

section on Prohibited Behavior). These include, but are not limited to, general [non-discrimination](#), the [Title IX policy](#), [code of conduct](#), and the student/employee fraternization policy (see the [WCU Student Handbook](#) section on Student/Employee Fraternization). Some of these policies provide specific procedures to resolve the applicable grievance or complaint. If a student submits a grievance for mistreatment, the grievance may be referred for review under one or more other applicable policies at the University.

### **Complaint/Grievances Procedure (A3.14g)**

The details of procedure to file a grievance, and the Student Grievance Form, are published in the [WCU catalog](#).

### **Academic Advisement**

With a rigorous and academically challenging program, it is important that students have a MPA faculty member they can meet with regularly to receive mentorship and seek advice. For this reason, each student will be assigned a faculty advisor whom they will meet with at least once in each trimester to review academic progress, professionalism, and any issues that may have come up during the term. The encounter is documented and placed in the student's file.

Aiding in and monitoring the development of professionalism is an important component of PA education. Student professionalism is evaluated and monitored by both faculty and the student through the utilization of a Professionalism Evaluation. These questionnaires are reviewed and discussed during advisor/advisee meetings.

In Trimesters 2-6 students must bring to their advisor-advisee meeting a completed **Performance Optimization Plan and Leadership Form**, which are available on Canvas. It is expected that students will be able to appropriately self-assess their abilities and that the forms will have been completed in a thoughtful manner. Students who arrive at the meeting unprepared could be asked to reschedule and it may be noted in their academic file. **Grade Tracking Forms** will be reviewed at advising meetings up to the extent that grades have been finalized, ensuring students are making satisfactory academic progress and continuing to meet programmatic requirements for progression.

Students are encouraged to meet with their advisor more frequently if they feel they are experiencing academic or personal difficulties. It is desirable to identify problems at an early stage and bring these to the attention of the faculty advisor so that remedies can be developed and implemented. Students experiencing academic and/or other personal difficulties have access to Student Services, which includes tutoring and counseling. Students experiencing personal and/or academic difficulties will be referred to Student Services by their advisor and/or Course Directors.

## **COMMUNICATION POLICIES**

### **Communication with the MPA Program and WCU**

The student will be assigned a WCU email address upon enrollment in the MPA program. This is the only email address that will be replied to by WCU personnel. Forwarding your WCU email to another email account is not permitted. These accounts can lack the security, capability, and sometimes sufficient space necessary for downloading important attachments. Further, you are prohibited from sharing your WCU email or other login credentials with anyone else. This will help ensure your identity and security when communicating with WCU.

The following is additional information for email communication:

- Students are expected to check their WCU email accounts at least once daily Sunday through Friday.
- Students are expected to respond to program emails within 24 hours or the first business day following a holiday.
- Email responses and forwarded emails should include the original message when appropriate.
- When checking email, it is expected that students will read the whole message (e.g., on a device with a small screen, scroll down to view messages in their entirety).
- Students must download email attachments rather than view them in 'preview' mode to ensure receipt and visualization of the entire document.
- Email messages and responses should be saved to a file (if necessary) for reference.
- It is **required** to use a professional signature line in student email correspondence, including full name, class, and phone number.

Joe Smith, PA-S1  
 West Coast University – Texas MPA Program  
 Class of 202x  
 Phone: xxx-xxx-xxxx

The student is responsible for maintaining access to their WCU email account throughout the program. If the policies regarding email communication are not followed, disciplinary or professionalism-related actions may be taken at the discretion of the faculty and staff. The specific nature of these actions will depend on the severity and frequency of the violation, and may include warnings, probation, or other appropriate measures.

## Professionalism in Communication

All correspondence between students and WCU personnel, whether it be written or verbal, must follow the professionalism standards of the MPA program. Additionally, emails received by WCU personnel that do not meet the professionalism standards of the MPA program will be sent back to the student with an appropriate follow up message providing the student with an opportunity to revise the email.

## CLASSROOM POLICIES

### Recording of Lectures

The recording of academic activities, including lectures, laboratory or examination demonstrations, review sessions, and similar events, is permitted solely at the discretion of the Course Director(s) and lecturer, unless such recording is required as a WCU-approved accommodation. In all other circumstances, prior approval must be obtained from the Course Director. Approval for recording is a privilege granted on a voluntary basis and may be withdrawn at any time at the Course Director's discretion. Recording of an instructor (visually or auditorily) without their explicit consent is unethical and is forbidden.

### Electronic Devices

Smartphones, tablets, and laptops are increasingly common in medical education and clinical settings as more applications are, and become, available to assist in learning. These devices may be used in the classroom and/or clinical experiences at the discretion of the Course Director and/or preceptor. However, the use of these and other electronic equipment in a manner not consistent with classroom/clinical activities often creates unacceptable disruptions. Under no circumstances may photographs, text messages, audio recordings, or other media recordings of patient information, clinical sites, clinical staff, visitors, patients, patient families,

etc., be created, stored, or shared. Doing so represents a clear HIPAA violation, is in violation of program policies, and could result in formal disciplinary action up to and including dismissal from the University.

Instructors will notify students if electronic equipment is required for an in-class activity. The following activities are considered disruptions:

- Texting/Messaging
- Cell phone ringing
- Surfing the internet
- Checking or writing emails
- Playing games
- Checking or posting to social media sites
- Working on outside assignments

Distractions related to electronics in class are considered a professionalism issue and will be addressed individually by the Course Director(s). Students may use electronic devices during class breaks, between classes and/or during any other non-instructional time. Professionalism issues will be monitored across all courses.

## PROFESSIONAL BEHAVIOR POLICIES

### MPA Student Professionalism Policy

Evaluation of professionalism is a fundamental expectation and is assessed across all programmatic activities in the MPA Texas program, including virtual meetings. This evaluation encompasses, but is not limited to, classroom instruction, clinical experiences, simulation exercises, and interactions with classmates, faculty, staff, University officials, and clinical staff and preceptors.

Professionalism is specifically discussed during advising sessions. In addition, certain courses formally include professionalism as a component of the final course grade.

Upholding high standards of professionalism is essential for success in the MPA Texas program and is critical to the student's future as a healthcare provider. Ongoing concerns or repeated violations of professionalism standards may lead to the progressive measures described below, or further disciplinary action.

If any program personnel reports a student for a violation of the program's Professionalism policies, the following progressive measures will be taken:

1. **First violation:** Verbal warning with email follow-up from the course director or faculty advisor.
2. **Second violation:** Written warning and a meeting with the student's faculty advisor.
3. **Third violation:** Referral and meeting with the Progress and Promotion Committee. This may be documented in the student's academic file as an incident of unprofessional behavior and may impact the student's overall professionalism evaluation, including, but not limited to, placement on professionalism probation.
4. **Fourth violation:** Referral and meeting with the MPA Dean/Program Director, which may include referral to the WCU Conduct Committee and placement on professionalism probation. This will be documented in the student's academic file as an incident of unprofessional behavior and will impact the student's overall professionalism evaluation, potentially resulting in dismissal from the University.

In addition to the progressive professionalism violation sequence outlined above, individual courses or supervised clinical practice experiences may include professionalism as a graded component. At any stage of a professionalism violation, point deductions or grading consequences may be applied in accordance with the applicable course syllabus, professionalism rubric, or assessment criteria. Such academic consequences are separate from, and may occur concurrently with, program-level professionalism review and disciplinary processes.

In the event of egregious professional concerns or violations, or a repeated violation, as determined in the sole discretion of the MPA Dean or Program Director, the progressive measures above may be overridden and the student may be referred directly to the WCU Conduct Committee.

### Professionalism Probation Policy

The MPA program holds students to high standards of professional conduct consistent with expectations of the physician assistant profession. Professional behavior is a core competency required for progression, clinical participation, and graduation from the program. Accordingly, the program maintains a formal process for addressing professionalism concerns that is separate from academic performance.

Professionalism probation is a non-academic status assigned to a student who demonstrates significant, recurrent, or unresolved lapses in professional behavior that fall below MPA program, university, or clinical site expectations but do not necessarily warrant immediate dismissal. Professionalism probation may be imposed independently of, or concurrently with, academic probation.

Behaviors that may result in professionalism probation include, but are not limited to, repeated unapproved absences or tardiness; failure to meet program or clinical responsibilities; inappropriate, disrespectful, or unprofessional communication; failure to follow program, university, or clinical site policies; dishonesty or lack of accountability; unprofessional conduct in any classroom or clinical settings; any violation of the university code of conduct; or failure to remediate previously identified professionalism concerns.

A student placed on professionalism probation will receive written notification outlining the specific behaviors of concern, the duration of probation, and the expectations required for remediation. The student will be required to complete a **Professionalism Improvement Plan**, which may include reflective writing, professionalism-focused remediation activities, meetings with program leadership or faculty, enhanced monitoring, or other corrective measures deemed appropriate by the program.

While on professionalism probation, a student may be subject to restrictions, including but not limited to limitations on participation in program-sponsored activities, ineligibility for leadership or representative roles, ineligibility for awards or honors, and additional program oversight during clinical or didactic activities. The program may also delay clinical placement, modify clinical assignments, or require additional professionalism evaluations during the clinical year.

Professionalism probation is imposed for a defined period and is reviewed by the program's Progress and Promotion Committee or equivalent body at the conclusion of the probationary term. Outcomes of this review may include removal from professionalism probation upon demonstration of sustained improvement, extension of professionalism probation if progress is incomplete, or escalation of action if concerns persist.

Failure to demonstrate sustained and meaningful improvement in professional behavior may result in additional remediation, continued probation, removal from clinical activities, or dismissal from the MPA Program and University. Dismissal from the University may occur for professionalism concerns alone, regardless of academic standing.

The MPA Program reserves the right to take immediate action, including suspension or dismissal, when professionalism violations pose a risk to patient safety, the learning environment, or the integrity of the profession.

### **Communication Regarding Course Material**

If the information presented in class or other required resources conflicts with information provided by a different yet reputable medical source, the student may choose to email the Course Director(s) for clarification. In this email, the student must provide the following information which will assist the Course Director(s) in providing a timely response.

- General question stated briefly
- Information from class, including source
- Information from outside of class, including source and page number or link
- Specific details outlining the conflict

### **Academic Humility**

Academic humility is an important trait for both healthcare professionals and MPA students. Academic humility requires students to possess self-awareness, an understanding of their limits, and a willingness to say “I don’t know” when appropriate. It also requires an understanding that each of us is continuously learning and must do so to become excellent practitioners, that a positive and supportive learning environment is key to success, and that education is a team effort made up of students and professors alike.

### **Unauthorized Clinical Activities and External Representation**

While enrolled in the WCU MPA Texas Program, students are not permitted to participate in clinical activities outside of those that are authorized, arranged, and supervised by the program. This includes, but is not limited to, clinical observations, shadowing experiences, volunteer activities, or any other patient-care–related experiences. Students may not represent themselves as a West Coast University student, an MPA Texas Program student, or a PA student in any clinical, observational, volunteer, or professional capacity unless the activity has been explicitly approved by the program.

In addition, students are prohibited from serving as brand ambassadors, influencers, representatives, or affiliates for healthcare-related companies while enrolled in the program when such roles imply clinical involvement, patient interaction, or professional representation. This includes partnerships with apparel, medical device, pharmaceutical, or healthcare service companies.

Participation in unauthorized clinical activities or external professional representation while enrolled constitutes a violation of program policy and may result in disciplinary action, up to and including dismissal from the MPA Texas Program and the University.

### **Social Media Policy**

Students in the WCU MPA Texas Program are expected to maintain professional standards of conduct in all forms of online and electronic communication. Social media includes, but is not limited to, blogs, personal websites, messaging applications, and platforms such as Facebook,

Instagram, X (Twitter), YouTube, Reddit, and similar sites. These expectations apply whether students are posting original content or commenting on content created by others.

Students are prohibited from dispensing medical advice, clinical opinions, or referrals through social media. In addition, students should refrain from posting content or personal opinions that could reasonably be perceived as unprofessional or disrespectful toward the University, the program, faculty, classmates, clinical sites, preceptors, staff, or patients.

Students may not initiate or accept social media connections (“friending,” following, or direct messaging) with patients, patient family members, preceptors, or other clinical site staff while enrolled in the program. Connections on social media with University faculty or staff also may not occur until the student has fully completed the PA program, an exception is made for professional networking through career-focused platforms (e.g., LinkedIn) .

Students may not use West Coast University’s name, logos, or branding in personal social media usernames, handles, or URLs. If a student chooses to identify their affiliation with WCU or the MPA Program, it must be clear that **all posted content reflects the student’s personal views and not those of the University or the program**, and such content must align with professional conduct standards.

Violations of this policy may result in referral to the University Conduct Committee and disciplinary action, up to and including dismissal from the program and University, consistent with University and program policies. Students are responsible for reviewing and complying with the University Social Media Policy as published in the WCU [Student Handbook](#).

## EXAMINATION POLICIES

### Examination Protocol

The following are the procedures regarding the administration of an examination. These are based on the PANCE protocols so that students may become accustomed to the PANCE format during PA school. Both the student and proctor are responsible for adhering to the examination protocol. Exams may be given outside of the regularly scheduled class time. Check the official schedule for dates and times.

Although paper exams and scantrons may be used on occasion, the majority of exams will be given using a computer-based program. Students will use their own laptop computers to download and take exams.

Students are responsible for learning the required material for the course covering the learning objectives prior to exams, regardless of whether lecturers cover all content or not. Exam questions may be from the text, lecture handouts, or supplemental resources provided. All questions will be based on both the general course learning outcomes and specific instructional objectives. In some courses, a topic list may be provided.

It is recommended that the student hold themselves and their colleagues to the highest standards during examinations. Academic dishonesty will be addressed in accordance with the WCU [Student Handbook](#) Code of Conduct (pg.10).

## On Campus Examinations Policy

1. Students are required to be present for all scheduled examinations, must arrive on time for the examination, and must bring a working and fully charged laptop computer and power cord.
2. Exam Download
  - a. Students will be notified when the exam is available for download.
  - b. Exams must be downloaded at least 30 minutes prior to the exam start time. Students are not given additional exam time if they are unprepared or face technology issues that should have been addressed in advance. Paper exams are not provided absent documented extenuating circumstances or unless and accommodation has been granted in advance.
  - c. If the student must take a paper exam:
    1. The student must meet with the Course Director and/or their faculty advisor to discuss the reason.
    2. If this becomes a repeated concern, the student may not be able to take the exam and may receive a zero (0) and be referred to the Progress and Promotion Committee.
  - d. For technical difficulties, call 1-866-429-8889 or email [support@examsoft.com](mailto:support@examsoft.com)
3. If there is a computer problem prior to the start of the exam, it is the student's responsibility to address that issue before coming to the exam, including getting a working personal replacement electronic device.
4. Upon entry into the examination site, the student must place all belongings (e.g., books, notes, study aids, smart watches, earbuds, hats, or any other electronic devices other than a laptop and mouse used for the exam, coats, and personal possessions) at a site away from the seat.
5. Cellular phones are not allowed at a student's seat and must be turned off before being stowed. If a student is found to have an electronic device other than a laptop (e.g., cell phone or smartwatch) on them during an exam, the student may be referred to the Progress and Promotions Committee or Student Services for disciplinary action. Academic dishonesty will be dealt with according to the WCU [Student Handbook](#) Code of Conduct (pg.10).
6. The MPA Program reserves the right to assign seating during examinations.
7. If students plan to use earplugs, the squishy, foam-like, compressible type must be used.
8. No talking is allowed once an examination starts.
9. Food and drinks, including water, are not allowed during exams and must be stowed with other belongings. An exception may be made at the discretion of the Course Director in extreme circumstances or if there are previously approved accommodations. This request must be made before the exam day.
10. Before a student can leave the testing area, the proctor will verify that the student's answer file has been successfully uploaded (i.e., "green screen" visible).
11. Examination dress code: Please refer to WCU [Student Handbook](#) regarding Exam Dress Code (pg. 29).
12. Cheating: Please see the Academic Honor Code (pg. 13) in the WCU [Student Handbook](#).

## Late Entry to Examination Policy

A student who arrives late to an examination will not be given additional time to complete the exam. Any student arriving late will have their exam time monitored separately by the proctor (and will equal the total exam time minus the number of minutes late). This new amount of time

will supersede the original time within ExamSoft. If a student arrives >15 minutes late from the exam start time, it will be at the discretion of the Course Director(s) or designated proctor to determine if the student will be permitted to take the exam at that time or whether the exam will be rescheduled for that student. If the exam is rescheduled, the exam will review the same subject material covered by the original examination; however, the exam may be presented in a different format than the original examination. Furthermore, any student arriving after other students have completed the exam and left the testing area will not be allowed to start the examination.

## Examination Integrity

Please see the Academic Honor Code in the WCU [Student Handbook](#). The Program also follows the [NCCPA PANCE Exam Policy](#) (pg. 2):

“The content of the [exam], and each of its items, is proprietary and strictly confidential, and the unauthorized retention, possession, copying, distribution, disclosure, discussion, or receipt of any examination question, in whole or in part, by written, electronic, oral or other form of communication, including but not limited to e-mailing, copying or printing of electronic files, and reconstruction through memorization and/or dictation, before, during, or after an examination, is strictly prohibited. In addition to constituting irregular behavior subject to disciplinary action such as revocation of certification, revocation of eligibility for future certification, and disciplinary fines, such activities violate [WCU MPA Texas Program’s] proprietary rights, including copyrights, and may subject violators to legal action resulting in monetary damages.”

## Examination Performance Review Process & Procedure

Students may be able to review their exam performance after completion of an exam by all students. Exam performance review includes only missed content and/or task categories, as applicable. Exam performance reviews are only mandatory for students who score less than 76% on an exam. Students who score less than 76% on the exam are expected to email the appropriate course director(s) to schedule their exam performance review. This request must come within seven (7) days of the exam grade being posted. Exam performance reviews may be conducted with either the course director(s) or instructional faculty for the course in which the exam failure took place. Professional behavior during an exam performance review is expected. Conduct deemed unprofessional may result in a formal evaluation of the student’s professionalism (please see MPA Student Professionalism Policy). Exam material reviews (i.e. student review of exam questions/answer choices or OSCE content) may not be permitted to protect exam integrity, if the course director(s) determine it is not appropriate. An overall program review of commonly missed content for exams is up to the discretion of the course director(s) and/or instructional faculty member(s).

Exam performance reviews are provided at the discretion of the faculty and are intended solely to support student learning and self-reflection. Faculty are not obligated to disclose, release, or provide copies of completed grading rubrics, scoring keys, examiner notes, item-level data, or other internal assessment materials. Access to such materials may be limited or denied to protect exam integrity, ensure fairness across cohorts, and preserve the validity of program assessments. Students are provided rubrics, where appropriate, to prepare for examinations as listed in individual course syllabi.

The purpose of the exam performance review is not to allow a student to challenge the exam questions, content, or answer choices. It is to allow a student to:

1. Review where they might have had a misunderstanding of the medical content or task category.

2. Analyze strengths and weaknesses as a test-taker.

Course directors or instructional faculty will conduct individual exam performance review with the student and must be proctored. Students are not permitted to have any writing or recording devices, paper, books, cell phones, etc., during the exam performance review. Any material passed out during this review must be returned at the end and nothing can be recorded or duplicated/copied. It is mandatory that during the exam performance review, students leave all personal material, including all smart devices, phones, and backpacks in a safe storage area outside the student's possession. If exam materials are taken out of the designated review area, the student involved may receive a failing grade for the examination.

Students will not be allowed to review any exams again prior to cumulative and/or remediation exams. Cumulative exams and Clinical Year End of Rotation Exams (EORs) may not be reviewed at any time.

### Examination Review Integrity

Examination Integrity policies also apply to exam reviews; Please see the Academic Honor Code in the WCU Student Handbook. The Program also follows the NCCPA PANCE Exam Policy: *"The unauthorized retention, possession, copying, distribution, disclosure, discussion, or receipt of any examination question, in whole or in part, by written, electronic, oral, or other form of communication, including but not limited to emailing, copying, or printing of electronic files and reconstruction through memorization and/or dictation, before, during, or after an examination, is strictly prohibited."*

## VIRTUAL ETIQUETTE POLICY

The Zoom meeting room platform will be used to conduct all "virtual" sessions, unless otherwise determined by the MPA program. Virtual sessions include classes and other meetings that may be scheduled virtually. The WCU MPA Program has adopted the following virtual etiquette and behavior expectations as the minimum requirements for students during any virtual sessions.

Students must:

1. Display professionalism at all times, including being prepared to engage in scholarly discussions.
2. Sharing Zoom/classroom information, links, or passwords to anyone outside of their cohort or MPA Program is strictly prohibited.
3. Have a computer with video and audio capabilities and know how to operate the features on their device before class begins.
4. Upon entering the Zoom/online classroom, mute their microphones (if not already muted by the Host). In addition, students should rename their display name as "First Name" "Last Name." This will assist us in maintaining the safety and security of our Zoom/online sessions.
5. When possible, use a headphone device when engaged in the virtual session in order to reduce ambient noise and distractions.
6. Enter the Zoom/online classroom with their videos on (faces displayed).
  - a. Icons or pictures replacing the live Zoom video are only acceptable when taking short breaks during the virtual class setting (limited to no more than five minutes and preferably taken during the regularly scheduled breaks as given by the Host).
7. Choose an appropriate physical environment prior to entering the Zoom/online classroom and avoid those that are distracting to other participants. Virtual backgrounds may be allowed at the discretion of the Host.

8. As much as possible, attempt to have “stable” access to the Internet at all times to reduce learning interruptions and unfortunate disconnections during the class session.
9. Use the chat box to communicate to the class when appropriate or when taking a short break from the class discussion. While private chat communication is enabled for most Zoom/online classes, it is expected that students will use this feature in a professional manner.
10. Use appropriate language and “Emoticons” during class engagement so as not to offend other members of their learning community. Students are encouraged to use the “raise hand” feature in the Participants tab in order to ask questions of the group or Host.
11. Any violation of this Virtual Etiquette Policy may result in the student receiving a professionalism warning/infraction as outlined in the MPA Student Professionalism Policy.

## **ACADEMIC STANDARDS, PERFORMANCE, AND PROGRESSION**

### **MPA Texas Program Academic Standards to Maintain Enrollment and Progress (A3.14a)**

#### **Good Standing Policy**

For more information, please visit the [WCU catalog](#).

#### **Academic Standards, Performance, and Progression**

A grade point average (GPA) of 3.0 or above, trimester and cumulative, is required of all MPA students.

Additionally, in readiness for clinical experiences:

Complete all didactic year courses in good academic standing (course grades of  $\geq 76\%$ ; successfully complete any remediation or academic action plans) and good professional standing (successfully complete any professionalism improvement plans).

#### **Satisfactory Academic Progress (SAP) Progress and Promotion (P&P) Committee**

Satisfactory academic progress (SAP) must be evident and continually demonstrated by students in the MPA program in order to progress in the program. Any failure to progress academically up to and including the failure of a course may be cause for referral to the MPA Progress and Promotion (P&P) Committee. The P&P committee will review the student’s academic and professional record and recommend a plan, which may include an Academic Action Plan (AAP). The P&P Committee is charged with monitoring all MPA students both academically and professionally and ensuring academic progress throughout the entire program.

#### **Enrollment and Progression in the Program (A3.14a)**

Students are required to complete the MPA program curriculum in the sequence specified in the University Catalog. Each trimester’s coursework is to be considered a pre-requisite to the next trimester. As such,

- Students may not enter the program with advanced placement (A3.12c).
- Students are required to complete, in sequence, all didactic coursework.
- There is no opportunity to change the order of didactic coursework.
- Clinical coursework will be full-time in the sequence designated by the Clinical Phase Committee.

- Clinical experiences are assigned by the Clinical Phase Committee and all rotations must be completed as assigned.

## **Year 1 Examination (Y1E; also called End of Year (EOY) exam) – Entry into Clinical Experiences**

This written exam is comprised of information learned throughout the first year. Detailed information will be provided to students within 1 month of the examination. A student who earns less than a score of **76%** on the Y1E must remediate and demonstrate competency in area(s) of deficiency. The student will have until the start of Term 4 to complete remediation and to score above 76% on reassessment. If the student is unable to achieve the 76% on reassessment, they may be subject to academic dismissal.

## **PROGRAM COMPLETION REQUIREMENTS**

### **Requirements and Deadlines for Completion of the Program (A3.14b)**

Graduation from the MPA Texas program is predicated on student fulfillment of satisfactory grade point average, professional conduct, and completion of Supervised Clinical Practice Experiences.

### **Graduation Requirements**

- Achieve a grade of 76% or better for all courses in the program.
- Achieve a minimum cumulative GPA (cGPA) of 3.0
- Successfully pass all components of the program's Summative Evaluation
- Be recommended for graduation by the Program Director.
- Complete the Application for Graduation Form.

### **Maximum Program Completion Timeframe for Graduate Students**

For more information, please visit the WCU [catalog](#).

## **MPA TEXAS PROGRAM SUMMATIVE EVALUATION**

The program conducts and documents a Summative Evaluation of all MPA students within the final four months of the program (B4.03). This evaluation incorporates multiple assessment instruments to measure student learning in both the didactic and clinical components of the program. The purpose of the Summative Evaluation is to measure student progress in meeting the program's core competencies and ensure students possess the medical knowledge, clinical reasoning and problem-solving abilities, clinical and technical skills, interpersonal skills, and professional behaviors needed for entry into clinical practice (B4.03).

### **Medical Knowledge**

Medical knowledge are evaluated through two approaches: Firstly, a cumulative examination, the Physician Assistant Education Association (PAEA) End of Curriculum (EOC)\* Exam, is administered during the final trimester of the clinical year as part of the Summative Evaluation. Secondly, medical knowledge is assessed during the Summative Objective Structured Clinical Examination (OSCE). Students demonstrate their understanding of core medical knowledge and their ability to provide patient-centered care for patients across the lifespan.

### **Clinical Reasoning and Problem-Solving Abilities**

The clinical reasoning and problem-solving competencies are assessed in the Summative OSCE. This assessment evaluates students' ability to effectively evaluate a patient during a medical encounter by selecting and interpreting laboratory and diagnostic studies accurately.

Students are expected to formulate a differential diagnosis based on historical information, physical examination, and laboratory and diagnostic study findings. Students design patient-centered management plans, considering factors such as efficacy, possible adverse reactions, contraindications, monitoring, and referrals. Meeting the program's core competencies in clinical reasoning and problem-solving abilities is assessed objectively during the Summative OSCE. Principal and instructional faculty and standardized patient observers evaluate proficiency based on a competency-based rubric. Additionally, students access a point of care resource to integrate evidence from a scientific study to make an evidenced-based and culturally sensitive clinical judgment.

### **Clinical and Technical Skills**

Clinical skills are objectively assessed during the Summative OSCE, and technical skills are evaluated in a separate Clinical Procedure Station of the Summative Evaluation to ensure student competency. Proficiency in eliciting an accurate and pertinent medical history from patients, performing a comprehensive or problem-focused physical examination adapted to the patients age and care needs, and executing core clinical (examination) skills required in primary care are evaluated and scored with a rubric. Students are assessed on their ability to perform technical skills (procedures) at a Clinical Procedure Station.

### **Interpersonal Skills**

Interpersonal skills are objectively assessed during the Summative OSCE. Students are evaluated by faculty and the standardized patients based on their ability to demonstrate effective interpersonal skills in communicating with patients, family members, and members of the health care team. Also, students will compile a Subjective, Objective, Assessment, and Plan (SOAP) note detailing their findings and care plan, which will be scored using a rubric. Students will be assessed on their written and oral communication skills in conveying the findings of a clinical encounter appropriately and effectively. Lastly, the Summative Evaluation will include a patient scenario station in which students must demonstrate their ability to provide appropriate patient education and interventions, including effective communication with the health care team.

### **Professional Behaviors**

The Summative Evaluation of professionalism will be assessed during the Summative OSCE. Faculty observers, standardized patients, and student self-evaluations will all be scored using competency-based rubrics. An additional professionalism scenario assessment of the summative OSCE will evaluate student competency in demonstrating professionalism and ethical behaviors, such as compassion, respect, integrity, sensitivity, and responsiveness to patients. Student reflections will also be assessed to evaluate their ability to engage in continuous self-assessment and implement improvement plans that include self-reflection, self-care, and a commitment to lifelong learning.

Station 1: Medical Patient Encounter (Medical Knowledge, Clinical Skills, Interpersonal Skills, Professional Behaviors)

Station 2: Oral Case Presentation and SOAP note (Clinical Reasoning and Problem-Solving Abilities, Interpersonal Skills)

Station 3: Clinical Procedure Station (Technical Skills)

Station 4: Application of Evidence Based Medicine (Clinical Reasoning and Problem-Solving Abilities)

Station 5: Professionalism and Ethics Patient Dilemma (Professional Behaviors)

Station 6: Team Based Care Patient Scenario (Interpersonal Skills, Clinical Reasoning and Problem-Solving Abilities)

## Station 7: Comprehensive Written Exam (Medical Knowledge)

To pass the summative exam, each student must receive > 76% on the examination. A student who does not meet the benchmark for the PAEA EOC Exam evaluation will be required to meet with the Progress and Promotion Committee. If a student is unable to demonstrate competency in accordance with the remediation process, the student may be subject to academic dismissal from the program and University.

\*Please note that only one remediation/retake of the PAEA EOC exam is allowed.

### **Deceleration (A3.14d)**

Deceleration is defined by the accreditor, ARC-PA, as “the loss of a student from the entering cohort, who remains matriculated in the PA program.”

The WCU MPA Texas program does not offer deceleration. Students are expected to progress through the curriculum on a full-time basis and graduate with their originally admitted cohort. Students that are dismissed or withdraw from the program may be eligible to reapply to the program. The program must be completed on a full-time basis.

Students who apply for and are granted an institutional Leave of Absence (LOA) must still withdraw from the University and are not able to resume the program until the next set of required courses is offered and space is available.

The following circumstances do not constitute programmatic deceleration:

- Approved institutional Leave of Absence (LOA) granted consistent with University policy.
- Withdrawal from the University while in good standing.

Students granted an institutional LOA are considered withdrawn from the University for administrative and financial aid purposes and are therefore not continuously matriculated during the period of leave. As a result, separation from the entering cohort following an approved LOA is not considered deceleration under ARC-PA definitions. An approved institutional Leave of Absence does not guarantee placement into a future cohort and may result in additional delayed program completion based on curricular sequencing and seat availability.

Reentry following an LOA or withdrawal is contingent upon:

- Completion of required institutional and program reentry processes;
- Availability of space in the appropriate cohort;
- Completion of any required remediation, programmatic competency reassessment, and repetition of coursework, as determined by the program.

Students who are dismissed or who withdraw from the program for academic reasons must reapply through the standard admissions process if seeking readmission.

For more information on please visit the WCU [Leave of Absence Policy](#), WCU [Reentry Policy](#), and the WCU [Reentry Following Withdrawal Policy](#).

# MPA TEXAS PROGRAM ACADEMIC POLICIES

## Remediation (A3.14c)

Student progress is monitored and documented in a manner that promptly identifies deficiencies in knowledge or skills and establishes means for remediation. Remediation is the opportunity to correct a gap in knowledge and to address progress and/or professional conduct in the program.

Early identification of student deficiencies on an exam or test is monitored by the Course Director(s) and a student is notified with a Letter of Concern (LOC) to initiate a meeting and plan for support in knowledge gaps. If a course grade in progress at Week 5 and/or Week 10 is less than a 76%, students are notified with a LOC and the Progress and Promotion (P&P) Committee meets to identify additional areas of need and a formal Academic Action Plan (AAP) is created. Recommendations regarding remediation will be made by the P&P Committee on an individual basis after considering all pertinent circumstances in each case.

Any student placed on an AAP or Progress Plan for academic or professional reasons and offered remediation must fulfill all the terms of the remediation contract within the designated time frame or face actions including, but not limited to, dismissal from the program and University.

The offer of remediation is not automatic or guaranteed. **Remediation is to be regarded as a privilege that must be earned by a student** through demonstrated dedication to learning and active participation in the educational program to include, but not limited to, overall academic/clinical performance, regular attendance, individual initiative, and utilization of resources available to them.

Remediation, in the form of a formalized AAP or Progress Plan may be required for:

- An in-progress course grade that falls below 76%.
- A “Below Expectation” rating on a Professionalism Evaluation or professional concern brought to the P&P Committee by a Course Director or faculty advisor.
- Any identified deficits or concerns in the student’s performance by a preceptor or program personnel, including professionalism, or if the student’s preceptor evaluation grade is less than 76% during the clinical year regardless of the student’s calculated grade for a particular rotation.

The P&P Committee may recommend a remediation plan that includes, but is not limited to the following:

1. Development of an AAP that outlines and defines a remediation plan, the successful remediation criteria, timeline to complete the plan, and the responsibilities of the student.
2. A remediation exam of failed subject material as constructed by the Course Director(s).
  - a. The student must score at least 76% on the remediation of a Summative, End of Curriculum, Year One Exam, and module exams.
  - b. The highest grade submitted for a successfully remediated exam is 76%.
3. Additional supervised clinical practice experience including repeating partial or entire rotation(s) or completing additional clinical assignments to ensure the student has met course learning outcomes, which may delay graduation and incur additional costs by the student.
4. Reading and assignments with follow-up discussion, oral assessment, or written examination.
5. Case-based learning exercises focused on areas of deficiencies.
6. Written self-reflection exercises.
7. Written response to selected exam items with reference citations.

8. Individual skills training or faculty-led tutoring.
9. Requiring corrective action for unprofessional behavior and/or misconduct. This may include but is not limited to direct apologies, letters of apology, professionalism assignments, additional clinical rotation(s), ongoing monitoring, and reports of professional behavior corrections by faculty, preceptors, etc.

Failure to meet the requirements of an Academic Action Plan may result in any of the following:

- Referral to the Progress & Promotion Committee
- Referral to the MPA Dean/Program Director
- Referral to the Conduct Committee
- Referral to WCU Student Affairs
- Academic Dismissal

The list of sanctions above is not exhaustive, and the sanctions are not progressive or presented in sequential order.

### **Benchmark Competencies for the MPA Texas Program**

The MPA Texas Program is committed to student success and defines **76%** as the minimum passing grade for courses throughout the program. This represents the minimum benchmark for successful course completion. As students progress through the program, they are required to maintain a grade point average (GPA) of 3.0 or higher, both trimester and cumulative, on a 4.0 scale in order to remain in good academic standing and to progress in the program. Consistent with the MPA Program's commitment to academic excellence, a minimum cumulative GPA (cGPA) of 3.0 is also required for graduation.

### **Students Academically At-Risk**

The Student Affairs department at each campus works with the MPA program leaders and faculty to intentionally identify students that may be academically at-risk ("At-Risk"). Even though the MPA program will continually monitor and support all students, the Student Affairs Department will also intentionally focus and support our academically at-risk students.

### **Definition of Academically At-Risk**

A student is considered At-Risk if they meet any of the following criteria:

- Any individual score below 76% on exams at any point in a course,
- A course grade of under 76% during grades-in-progress checkpoint, or
- A final course grade between 76% and 79%.

At-Risk status is identified by the Course Director(s) and/or the DAE or DCE and is referred to the P&P Committee for review. The student's faculty advisor is notified and participates in developing a plan to support the student's academic success.

### **Academic Support**

Academic support consists of several resources which include, but is not limited to:

1. Course Directors: Each course has at least one Course Director who oversees in-class instruction and outside of class tutoring (content review) and metacognition (learning how to learn).
2. Faculty Advisors: Each student is provided a MPA faculty advisor. Faculty advisors:
  - Provide support and guidance to navigate the program.

- Provide advice in developing a program success plan for didactic courses, supervised clinical practice experiences, PANCE preparation, and employment readiness.
  - Provide direction specific to time management.
  - Provide referrals to the co-curricular support services.
3. Co-curricular Support Services: Student support services, such as working with the Student Advisor, complement the MPA program's academic support process and are an extension of the learning experiences.

## Academic Support Documentation

Academic Support Documentation is provided when a student meets the At-Risk criteria. There are two types of documentation used by the MPA program

1. **Letter of Concern (LOC):** A program-generated letter that formally notifies a student of academic performance below the program's academic standard (i.e., 76%). A Letter of Concern is issued when a student is At-Risk:
  - A student scores below 76% on exams or during grades-in-progress checkpoint, or
  - A student earns a final course grade between 76% and 79%.

Letters of Concern become part of the student's official record and serve as formal notification of concerns related to academic progress.

2. **Academic Action Plan (AAP):** An Academic Action Plan is a written document provided to At-Risk students that outlines areas in need of improvement, identifies any relevant academic support needs, and specifies the recommended and required academic strategies. The AAP is developed collaboratively by the student and the Course Director(s) and is intended to support the student's learning and successful completion of the respective course.

## Academic Support During the Didactic Year

### In-Course

The WCU MPA Texas Program proactively monitors student academic performance throughout each trimester to allow the program to identify and address any student deficiencies within a timely manner (B4.01b).

Course Directors submit grades at Week 5 and Week 10 of each didactic trimester, consistent with University expectations and program-specific monitoring practices. At each grades-in-progress checkpoint, a student's current course grade is reviewed to determine whether they are At-Risk.

### End-of-Course

Students in the WCU MPA Program are required to maintain a minimum GPA of 3.0 on a 4.0 scale, both trimester and cumulative, to remain in good academic standing and to progress in the program.

Although a final course grade of 76% (C+), or 2.3 on a 4.0 scale, meets the minimum threshold for passing an individual course, performance at this level may place a student at risk of not meeting the program's required trimester and/or cumulative GPA (cGPA) standards.

End-of-course academic support and reassessment are intended to support student learning, address identified knowledge gaps, and promote academic success. This process is designed to assist students who may be at risk of falling below the required trimester or cumulative GPA and to support their continued progression in the program.

### **Academic Support During the Clinical Year**

The clinical year is organized into trimesters, each consisting of three 5-week clinical rotations (courses) or supervised clinical practice experiences (SCPE) in addition to trimester-specific didactic courses. The same academic support documents, GPA/cGPA, grade requirements, and At-Risk definitions are used for the clinical year.

Each SCPE course includes:

- a review of the student's mid-rotation self-evaluation,
- a final grade evaluation at the conclusion of Week 5.

This structured monitoring process allows the program to identify and address any student deficiencies within a timely manner (B4.01b) for students who are at risk and to initiate timely academic support in collaboration with the Director of Clinical Education, program faculty, the P&P Committee, and the Clinical Phase Committee, as appropriate.

All didactic courses in the clinical year (e.g., Art of Care I-III, Masters Project I-II, Capstone Masters Project, Advanced Topics) are monitored using the same process as didactic courses in the didactic year (e.g., checkpoints at Week 5 and Week 10).

Clinical assessment and academic support differ from the didactic year in the following ways:

- Final clinical course grades are submitted at the conclusion of each 5-week rotation.
- Preceptors evaluate students at the end of each rotation based on the student's ability to meet course learning outcomes for the supervised clinical practice experience.
- Course Directors are responsible for submitting final grades and coordinating academic support and reassessment processes, with input from the P&P Committee, when indicated.
- The clinical team reviews student exposures in SCPEs at the end of each trimester to ensure students are making progress toward achieving required exposures (e.g., settings and populations) prior to program completion and informing the Clinical Phase Committee if changes to the clinical placement schedule might be necessary.

Academic support and reassessment during the clinical year may occur through one or more of the following mechanisms:

- During the current or subsequent clinical rotation and/or through distance education activities
- During scheduled on-campus time during callback days

### **Clinical Year Exams/Quizzes**

PAEA-developed End-of-Rotation (EOR) examinations are administered at the conclusion of all required core Supervised Clinical Practice Experiences (SCPEs), including Family Medicine, Internal Medicine, Emergency Medicine, Women's Health, Pediatric Medicine, Behavioral Medicine, and Surgery. In addition, discipline-specific quizzes are required at the conclusion of all elective SCPEs. The PANCE Prep Assessment (PPA) is also administered during the clinical year as part of programmatic assessment.

All clinical-year examinations and quizzes must be completed on campus when the student is assigned to a rotation located within 250 miles of the WCU Texas campus. Students assigned to out-of-town rotations located more than 250 miles from campus may be permitted to complete examinations or quizzes remotely.

Students eligible for remote testing due to out-of-town rotations (>250 miles) must communicate with the DCE regarding examination or quiz logistics no later than one (1) week prior to the designated testing date. It may be possible for students rotating at sites in California to take their examinations at the WCU CGS (LA) or Ontario campuses, provided space and staffing are available.

In extremely limited and exceptional circumstances, the DCE, in collaboration with the MPA Dean/Program Director, may approve remote testing for students assigned to rotations within 250 miles of the WCU Texas campus. Such approval is discretionary and not guaranteed.

The program reserves the right, at any time and for any reason, to require examinations or quizzes to be administered via a remote proctoring platform or at an alternate proctored testing location. Any costs associated with remote proctoring or off-site testing are the responsibility of the student.

### **Incomplete Grades**

The program permits the assignment of an Incomplete (“I”) grade under limited extenuating circumstances, as outlined in the [WCU Catalog](#). Students should refer to the University Catalog for the full Incomplete Grade policy and procedures.

Within the MPA Texas Program, students are required to:

- complete the curriculum in a full-time, lockstep sequence in which each trimester serves as a prerequisite to the next,
- successfully complete all didactic and clinical coursework prior to progression,
- maintain a minimum GPA of 3.0 on a 4.0 scale, both trimester and cumulative, and
- meet all graduation and summative evaluation requirements.

Because an Incomplete grade indicates that a course has not been completed, receipt of an Incomplete grade may prevent a student from:

- meeting prerequisite requirements for subsequent coursework or clinical rotations,
- maintaining required trimester and/or cumulative GPA standards,
- demonstrating satisfactory academic progress (SAP), or
- completing the program within the required curricular sequence and maximum program completion timeframe.

For these reasons, an Incomplete grade in any MPA course may result in referral to the Progress and Promotion Committee and may lead to program and University dismissal, depending on the timing of the Incomplete, the student’s academic standing, and the student’s ability to meet program progression and graduation requirements within the allowable University timeframe.

Dismissal is not automatic and is determined on a case-by-case basis through the Progress and Promotion Committee process, consistent with University and program policies.

## **Late Assignment Submissions**

Timely submission of all course assignments is essential in PA education. Assignment due dates are posted in Canvas and/or in the Course Syllabus, and students are expected to submit all assignments by the stated deadlines.

Assignments submitted up to 24 hours after the due date will incur a 20% penalty. Assignments submitted more than 24 hours late will receive no credit, unless prior approval has been granted by faculty at least 24 hours before the assignment due date. All assignments must be completed and submitted regardless of grade eligibility. Failure to submit required assignments may result in course failure.

## **ATTENDANCE POLICIES**

### **Attendance & Punctuality**

WCU MPA Program is designed to provide the medical and professional education required to be a competent PA. Because attendance and punctuality are expectations of professionals in the workplace, they are also a requirement of this program. Attending class and arriving on time contributes to demonstrating respect for instructors and peers. It is the student's responsibility and an expectation of professional behavior that the student will be present and ready to learn when instruction is scheduled to begin.

During the first year of the program, the program is taught in a mostly face-to-face format during the first didactic courses, which means students are required to be present in-person for instruction. In some cases, courses are offered in a blended format, providing for some online instruction. During the second year of the program, when clinical instruction occurs, students are required to attend on-site clinical instruction at an assigned clinical partner site. During the clinical instruction year there are also didactic asynchronous courses in which attendance is monitored by submission of weekly assignments in the program's learning management system.

During the entire program, the student is required to be prepared at the start of instruction, including but not limited to, completing the following activities prior to the start of class/instruction - arrival to the classroom or clinical site, stowing of any gear, and completion of any other activities (restroom, coffee, etc.). In addition to being present and ready to learn when instruction is scheduled to begin, the students are required to remain in attendance for the entire scheduled period of instruction.

The PA program is academically rigorous and builds upon previous instruction. Because important information is presented during instruction, and class discussions and other interactions are essential to the educational development of the PA role, the program requires students to attend all scheduled periods of instruction, as well as other scheduled educational functions that may be required, regardless of whether or not the scheduled function triggers attendance. This includes arriving on time and remaining present and engaged until the class, lab, clinic or other function has ended.

The program requires all students to be available for instructional activities from 8 AM – 8 PM Monday through Thursday and 8 AM – 5 PM on Friday, regardless of the standard schedule. In the event of a holiday, unforeseen circumstances or unique opportunities, instructional time may be rescheduled to a different day of the week during the timeframes described above. If no other viable choice is available to make up instructional time, rescheduling may be required on weekends. Due to the accelerated and rigorous nature of the Program, instructional times may need to be moved with very short notice in the event make up time is needed. Clinical site

assignments and scheduling are addressed separately based on the needs and availability of the clinical site.

If a student is unable to attend class or programmatic activities for any reason, the student must notify the appropriate person, as provided in this handbook. Failure to alert the appropriate person at WCU of an absence may result in consequences, as outlined in this handbook.

### Minimum Attendance Requirements

Class attendance, preparation, and participation are integral to a student's academic success. Active attendance is determined by a student's continued participation and attendance in registered courses. As a result, the following attendance-related policies apply to all students attending West Coast University.

### University Attendance

The university deems any student that has not attended for more than 14 calendar days, including holidays, breaks, and weekends, to have withdrawn from the institution. This determination will be made no later than 14 days after the student's last date of attendance as determined by attendance records in the student information system. Students that are withdrawn for non-attendance will receive a WF (Withdrawal-Fail) or WNP (Withdrawal No-Pass) grade for all in progress courses at the time of the withdrawal.

### Course Attendance

The university also maintains standards regarding attendance for all courses attended. Students will be withdrawn from scheduled course(s) if the following standards are not met:

(1) Students must have recorded attendance in scheduled courses by the end of the add/drop period at the start of each trimester or they will be unregistered from the course(s).

(2) Students must not exceed fourteen (14) consecutive calendar days of non-attendance in online asynchronous course(s), including holidays, or they will be withdrawn from the course with a failing grade of WF (Withdrawal-Fail) and/or WNP (Withdrawal No-Pass) in their course(s). **Per MPA Texas programmatic requirements, this also applies to all face-to-face and online synchronous courses and may trigger withdrawal from the course(s) and program dismissal.**

(3) Students must not exceed the percentage threshold outlined below or they will be withdrawn from the course with a failing grade of WF (Withdrawal-Fail) and/or WNP (Withdrawal No-Pass) in their course(s). **Per MPA Texas programmatic requirements, students will also be withdrawn from any co-requisite courses if they are withdrawn from any course with a failing grade of WF and/or WNP, which may result in program dismissal.**

- Didactic/Lab - 10% (MPA Texas programmatic requirement). This does not override the 14-day rule.
- Clinical Experience – 0%\*

\*There is no advance provision for missing clinical hours. In the event of exceptional circumstances documented by the student and approved by the MPA program as described in the Clinical Year Absence Policy, students are required to make-up any missed clinical hours by the end of the clinical rotation (i.e., PA 600, PA 603, PA 606, PA 615, PA 618, PA 621, PA 630, PA 633). Please see the program's Clinical Year Absence Policy for additional details. If making up clinical hours by the end of the rotation is not logistically possible due to unforeseen circumstances, the student must work with the Clinical Phase Committee and the Director of Clinical Education to develop a plan to make up the hours prior to program completion, which

may include delaying the student's program completion date and increase the cost of attendance.

(4) Withdrawal from a required program course may result in withdrawal from the program by the end of the term or interruption in progression, consistent with University policy and program sequencing. A student who has been withdrawn from a course will not be permitted to progress in the curriculum until the course is offered again, typically with the next cohort.

A student who is advised by a faculty advisor, the Director of Academic Education, the University Registrar, or the Student Affairs Department (MPA Student Advisor) that there is an attendance issue is **required** to make an appointment to meet with the DAE, the DCE, the MPA Student Advisor, and/or faculty advisor, and may have the individual reason for the absence further reviewed by the P&P Committee. Please see the [WCU Catalog](#) for more information.

## Absences

Due to the rigor of the PA program, missing any course instruction, activities, assignments, or exams can be very detrimental to your ability to be successful in the program. Attendance is mandatory for all scheduled periods of instruction for the entirety of the scheduled instruction time. Students are also required to attend meetings and programmatic activities that do not trigger attendance, unless otherwise specified.

In the event a student is absent from a didactic class, even if they have not met or exceeded the allowed percentage threshold in the didactic year, they must document the reason for any absence in writing to the course director for didactic classes. Please refer to the specific requirements outlined in the Didactic Year Absence Policy or Clinical Year Absence Policy, respectively. Absences include arriving late to (tardiness), or early departure from, any class or clinical assignment. If a student is absent from any clinical rotation, they must follow the Clinical Year Absence Policy outlined in this handbook. The program will track student tardiness and early departures throughout the entire program.

## Clocking Attendance

Students are required to clock in and out in the time management system at their actual time of arrival and departure. In addition, students must notify the course director in writing by submitting the Attendance Correction Form within 24 hours of any missed or incorrectly entered time. Failure to accurately record time or to provide timely written notification may be referred to the P&P Committee for professionalism review. Inaccurate or falsified time reporting may constitute a violation of the University Code of Conduct and may result in disciplinary action up to and including dismissal. Please see the WCU [Student Handbook](#) section on Code of Conduct.

## Missed Work During Absences

Students are responsible for all coursework material, labs, and examinations missed during their time away from class or clinical assignment, regardless of whether credit is awarded or not. When possible, the student must pre-arrange to take examinations, participate in labs, or other course activities with the course director(s) approval. Taking examinations early is a privilege and is not guaranteed.

For **approved** absences, missed assignments, quizzes, exams, and activities are made up in coordination with the course director(s) and in alignment with course syllabi. If permitted to

make up a missed assignment, quiz, exam, or activity, students may receive a reduced percentage point score, up to 20% reduced.

In the case of **unapproved** absences, missed assignments, quizzes, exams, and/or activities are still required to be completed. However, no grade may be assigned. Eligibility for a partial grade is at the discretion of the MPA Dean/Program Director.

A student who misses more than one assessment in a course, regardless of reason, will be referred to the Progress and Promotion (P&P) Committee for review. The P&P Committee will consider:

- the circumstances surrounding the missed assessments,
- the student's academic performance,
- professionalism history, and
- compliance with attendance and absence policies.

In the case of multiple missed assessments in a single course, outcomes the P&P Committee may consider include, but are not limited to:

- assignment of a zero for any or all missed assessments,
- required academic support,
- professionalism action,
- course failure, or
- program dismissal.

### **Unplanned Absences in Extenuating Circumstances**

In the event a student is absent from class, including in excess of the program-defined percentage threshold, due to extenuating circumstances beyond their control, students are required to send a written request to the Director of Academic or Clinical Education (as appropriate for their current year of instruction) and provide documentation that specifically substantiates the reason for the emergency. An unplanned absence is an emergency event that was not foreseen, and may include, but is not limited to, a serious medical event or death in the family. The requests must be submitted in advance of an absence occurring, but in no case later than 24 hours after the absence occurs. Requests for unplanned absences will undergo programmatic review and approval by the MPA Dean/Program Director, in their sole discretion. A request made to approve an unplanned absence may not be approved, or approved in full, and result in an unapproved absence. Determinations are not subject to appeal.

The program does not designate absences as “approved” or “unapproved” for attendance accounting purposes. Absences are designated as approved or unapproved solely to determine eligibility for make-up work, grades and professionalism review; approved absences do not negate recorded absences or reset attendance thresholds.

### **Tardiness**

Given the collaborative nature of the program, tardiness to activities, particularly when occurring on multiple occasions, is considered unprofessional and may adversely affect course grades and progression in the program. Unless previously approved by the course director(s), tardiness of more than 15 minutes to any class activity or clinical assignment may be counted as an unapproved absence at the discretion of the course director(s) or clinical preceptor. Repetitive tardiness will be considered unprofessional and subject to all applicable program policies and consequences, including but not limited to a letter of concern or referral to the P&P Committee, potential course failure, and potential dismissal from the program.

## Didactic Year Absence Policy

Didactic-year PA students are expected to uphold the highest standards of professionalism during Trimesters 1-3. The didactic year operates under only very limited, pre-approved exceptions as outlined below in accordance with WCU [Catalog](#)'s attendance policy for MPA-Texas students and additional programmatic requirements. Full participation in instructional time is considered an essential component of PA competence and patient care. Absences, whether planned or unplanned, will only be considered under the most exceptional circumstances and are strictly limited.

Any absence during the didactic year is subject to the strict **MPA Texas program-defined limit of 10% missed attendance** of face-to-face, blended, and online synchronous courses and is defined as time missed in live instruction per course. In online asynchronous courses, attendance also includes completion of required online activities (such as modules, quizzes, discussion posts) by the stated deadlines. Failure to complete these required activities by the stated deadline will be recorded as absences.

Participation in program-approved professional development activities, including attendance at professional conferences, may be considered a planned absence when such activities are directly related to the student's academic or professional development. Requests for conference attendance must follow the program's Professional Development Leave policy and require advance approval. Approved professional development leave does not exempt students from the program's attendance thresholds unless explicitly approved in writing and does not relieve students of responsibility for completing all missed coursework, assessments, or instructional activities.

### 1.1 Planned Absence During the Didactic Year

A planned absence is an absence that:

- Receives review and approval from the Course Director(s) and Director of Academic Education (or designee) and is reviewed/filed by the program once approved.
- Requires submission of a **Didactic Time Off Request Form** to the appropriate personnel prior to the absence **at least one month in advance**.
- A planned absence request may not be approved or approved in full. If a request to approve a planned absence is not approved, this may result in an unapproved absence if the student does not attend any scheduled didactic activity.
- Requests related to professional conferences or similar leadership activities are reviewed under the program's Professional Development Leave policy and may require additional documentation and approvals.
- Determinations are not subject to appeal.

### 1.2 Unplanned Absence During the Didactic Year

- An unplanned absence is an emergency event that was not foreseen, and may include, but is not limited to, a serious medical event or death in the family.
- Must be requested in writing with supporting documentation submitted to the DAE (or designee). The student must provide documentation that specifically substantiates the reason for the emergency that caused the unplanned absence.
- The requests should be submitted in advance of an absence occurring, but in no case later than 24 hours after the absence occurs.

- In the event of tardiness or early departure from a didactic course, which are counted as absences, students must clock the change on mobile attendance and notify the Course Director within 24 hours via e-mail with a **Missed Class Form**.
- **Missed Class Forms** that are not completed and sent within 24 hours after the absence occurs will require a meeting with P&P and/or may result in professionalism points lost, at the discretion of the Course Director. Students are advised that unplanned absences during the didactic year are particularly hard to allow for, in part due to limitations of scheduling make up hours prior to the end of the term.
- Requests for unplanned absences will undergo programmatic review and approval by the MPA Dean/Program Director, in their sole discretion. A request made to approve an unplanned absence may not be approved or approved in full and may result in an unapproved absence.
- Determinations are not subject to appeal.

### 1.3 Unapproved Absence During the Didactic Year

Any of the following are considered unapproved absences:

- Failure to appear for any scheduled didactic course activity, for any amount of time, without both the course director's and the DAE's (or designee's) prior approval. The exception here is in the event of an unplanned absence for which the event prevented the student from giving prior notice.
- Absence not supported by a documented, program-approved plan for making up missed time, assignments, and/or assessments.
- Any misrepresentation or inaccurate reporting of attendance by the student. Please refer to the [WCU Student Handbook](#) section on Code of Conduct.
- Unapproved absences are professionalism violations and will trigger immediate, progressive disciplinary intervention as outlined below.
- Part-time jobs, extracurricular activities, vacations, or lack of childcare are **not** acceptable excuses for absences.
- All unapproved absences must be documented using the **Missed Class Form**, regardless of whether verbal notification was provided. Verbal notification alone does not constitute formal approval or documentation of an absence.

## 2. Allowable Absences During the Didactic Year

- Didactic-year students are expected to attend all scheduled class activities, unless prior approval is granted and provided the student has not exceeded the MPA Texas program-defined percentage of absences (10%). Students are required to make up missed assignments, activities, or assessments in coordination with the course director(s). Incomplete assignments, activities, or assessments may result in the student's inability to complete course requirements and progress in the program.
- Limited exception for planned absences, as described above. Program-approved professional development activities are subject to separate review under the Professional Development Leave policy. No allowance for unapproved absences or additional planned absences, regardless of personal circumstances.
- Unplanned absences due to unforeseen and documentable emergencies may be approved as described above.
- The MPA Dean/Program Director may make exceptions to this policy only in connection with required programmatic activities and when such exceptions are necessary to meet curricular, accreditation, or institutional requirements. All exceptions will be documented in writing, including the rationale for the exception.

### **3. Progressive Intervention for Unapproved Absences During the Didactic Year**

#### **First Unapproved Absence**

- The student meets with their Faculty Advisor to review the incident.
- Professionalism expectations are reinforced.

#### **Second Unapproved Absence**

- The student meets jointly with their Faculty Advisor and the P&P Committee.
- The P&P Committee may implement formal remediation or impose additional monitoring and requirements.
- A written summary is permanently added to the student's record, which may be included with the application submitted for each graduate applying for licensure as a PA. Please see [Form L](#) from the Texas Medical Board.

#### **Third Unapproved Absence**

- Student is referred to the University Conduct Committee. A referral to the Conduct Committee does not require, but may include, a concurrent referral to the P&P Committee.
- Outcomes may include disciplinary action, up to and including program dismissal.

Note: Students who fail to meet these strict standards risk immediate academic and disciplinary action, including the possibility of dismissal from the MPA Texas Program.

### **Clinical Year Absence Policy**

Clinical-year PA students are expected to uphold the highest standards of professionalism, including perfect attendance at all supervised clinical practice experiences (SCPEs) during Trimesters 4–6. The clinical year operates under a zero-tolerance attendance expectation, with only very limited, pre-approved exceptions as outlined below in accordance with WCU [Catalog](#)'s attendance policy for MPA-Texas students. Full participation in SCPEs is considered an essential component of PA competence and patient care. Absences, whether planned or unplanned, will only be considered under the most exceptional circumstances and are strictly limited.

Participation in program-approved professional development activities, including professional conferences, is considered an exceptional circumstance during the clinical year and requires advance approval in accordance with the Professional Development Leave policy. Approval is contingent upon clinical site concurrence, completion of required make-up clinical hours, and determination that the activity does not compromise achievement of supervised clinical practice requirements and course learning outcomes.

#### **1.1 Planned Absence During the Clinical Year**

A planned absence is an absence that:

- Receives review and approval from the Clinical Preceptor, SCPE Course Director, Director of Clinical Education, and is reviewed/filed by the Clinical Phase Committee once approved.
- Is subject to the strict limit of two (2) single occasions (each equivalent to one clinical day) for the entire clinical year; the days may be used consecutively. Half or partial days count as a single occasion.
- Includes a preceptor-approved make-up plan to ensure all clinical hours and required SCPE experiences are completed and on track.

- Requires submission of a **Clinical Time Off Request Form** to the appropriate personnel prior to the absence as detailed above. The form can be found in Exxat and should be emailed to [WCURCH-MPAprogram@westcoastuniversity.edu](mailto:WCURCH-MPAprogram@westcoastuniversity.edu) as outlined in the form.
- A planned absence request may not be approved or approved in full. If a request to approve a planned absence is not approved, this may result in an unapproved absence if the student does not attend any scheduled clinical activity.
- Students who are selected or invited to present at a professional conference, or plan to attend to represent the MPA program in challenge bowl, may request approval for professional development leave that exceeds the standard two-day planned absence limit. Such requests require documentation of acceptance or invitation, a preceptor-approved make-up plan, and approval from the Director of Clinical Education. Requests that may significantly affect clinical hour completion or program progression will be referred to the Progress and Promotion Committee for final determination.
- Determinations are not subject to appeal.
- Approval of an absence does not guarantee the availability of make-up clinical experiences or successful completion of required clinical hours.
- The limited allowance for planned absences is intended to accommodate foreseeable, discretionary time away from clinical duties and is distinct from unplanned, illness-related, or emergency absences and does not include absences related to acute illness, injury, or other unforeseen medical conditions.

## 1.2 Unplanned Absence During the Clinical Year

- An unplanned absence is an unforeseen and unavoidable event, including acute illness, injury, or significant personal emergency, that prevents a student from safely participating in clinical duties. Students are not expected to attend clinical activities while acutely ill.
- Must be requested in writing with supporting documentation e-mailed to the Clinical Phase Committee at [WCURCH-MPAprogram@westcoastuniversity.edu](mailto:WCURCH-MPAprogram@westcoastuniversity.edu). The student must provide documentation that specifically substantiates the reason for the emergency that caused the unplanned absence as detailed in the **Clinical Time Off Request Form**.
- The requests should be submitted in advance of an absence occurring, but in no case later than 24 hours after the absence occurs.
- Requests for unplanned absences will undergo programmatic review and approval by the MPA Dean/Program Director, in their sole discretion. A request made to approve an unplanned absence may not be approved, or approved in full, and may result in an unapproved absence.
- Approved unplanned absences related to documented acute illness or medical emergency do not count toward the two (2) single-occasion planned absence limit. Other unplanned absences may be reviewed on a case-by-case basis to determine whether they count toward the planned absence allowance. Students are expected to promptly notify their preceptor and the program of illness-related absences and must not report to clinical sites when doing so would pose a risk to patient safety, staff, or themselves.
- Students must maintain ongoing communication with both the clinical preceptor and the program regarding their clinical status, including notification of the anticipated date of return to clinical activities. Prior to resuming clinical duties, the student must discuss and confirm a plan with the clinical preceptor and the program to address any missed time. Make-up requirements may include additional clinical hours, Aquifer cases, targeted assignments, or other program-approved activities as determined by the Director of Clinical Education and/or MPA Dean/Program Director.

- Determinations are not subject to appeal.

### **1.3 Unapproved Absence During the Clinical Year**

Any of the following are considered unapproved absences:

- Failure to appear for any scheduled clinical activity, for any amount of time, without both prior program and preceptor approval. The exception here is in the event of an unplanned absence for which the emergency prevented the student from giving prior notice.
- Absence not supported by a documented, program-approved plan for making up missed time.
- Any misrepresentation or inaccurate reporting of attendance by the student. Please refer to the [WCU Student Handbook](#) section on Code of Conduct.
- Unapproved absences are professionalism violations and will trigger immediate, progressive disciplinary intervention as outlined below.
- In the clinical year, unapproved absences may also result in a 0% professionalism grade for the rotation where the absence occurred.

## **2. Absences Subject to Approval During the Clinical Year**

- Clinical-year students are expected to attend all scheduled SCPE days without exception, consistent with the WCU [Catalog](#)'s attendance policy for MPA-Texas students. Students are required to make up missed clinical hours in coordination with the SCPE preceptor. Incomplete clinical hours may result in the student's inability to complete course requirements and progress in the program.
- Limited exceptions are made to approve planned absences, as described above. No allowance for unapproved absences or additional planned absences, regardless of personal circumstances.
- Unplanned absences due to unforeseen and documentable emergencies may be approved as described above.
- The MPA Dean/Program Director may make exceptions to this policy for acute illness, emergencies, commencement, or other programmatic activities, if applicable. Additionally, if there are circumstances outside of the program and student's control that may delay the start of a SCPE, the MPA Dean/Program Director may make exceptions to approve the missed clinical experiences with coordination from the Director of Clinical Education on makeup experiences or assigned work. Logging hours for completing any assigned work will serve as attendance.
- Approval of an absence does not guarantee the availability of make-up clinical experiences or successful completion of required clinical hours and may delay program completion.

## **3. Progressive Intervention for Unapproved Absences During the Clinical Year**

### **First Unapproved Absence**

- The MPA clinical year team notifies the faculty advisor of the absence and may facilitate the student meeting with their Faculty Advisor to review the incident.
- Professionalism expectations are reinforced.

### **Second Unapproved Absence**

- The MPA clinical year team notifies the program of the absence, and the student meets jointly with their Faculty Advisor and the P&P Committee.
- The P&P Committee may implement formal remediation or impose additional monitoring and requirements.

- A written summary is permanently added to the student's record, which may be included with the application submitted for each graduate applying for licensure as a PA. Please see [Form L](#) from the Texas Medical Board.

### **Third Unapproved Absence**

- Student is referred to the University Conduct Committee by the clinical year team after the program is notified of the student's absence. A referral to the Conduct Committee does not require, but may include, a concurrent referral to the P&P Committee.
- Outcomes may include disciplinary action, up to and including program dismissal.

Note: Students who fail to meet these strict standards risk immediate academic and disciplinary action, including the possibility of dismissal from the MPA Texas Program.

## **WITHDRAWAL, DISMISSAL, APPEAL, AND REENTRY (A3.14e, A3.14f, A3.14h)**

The MPA program follows the University's guidelines for dismissal, appeal, and reentry. Information and guidance regarding this section is found in the [WCU catalog](#).

### **Withdrawal from a Program (A3.14e)**

For more information, please visit the [WCU catalog](#).

### **Dismissal from the Program – Policy and Procedures (A3.14f)**

- Any violation of policy, particularly where dismissal is identified as a consequence, may result in dismissal from the program.
- Otherwise, a student will be dismissed from the program if:
  - A grade of "C" or lower is received in any course.
  - The minimum cumulative GPA of 3.0 for each trimester is not met.
  - An incomplete grade is unresolved or results in a grade of "C" or lower.
  - Withdraws from one or more classes.
  - The maximum number of semester/trimester credit units to complete the program is exceeded.

### **Graduate University Dismissal Appeal Policy (A3.14h)**

For more information, please visit the [WCU catalog](#)

### **Reentry**

#### **Physician Assistant Program following Dismissal**

For more information, please visit the [WCU catalog](#).

#### **Reentry Following Withdrawal**

For more information, please visit the [WCU catalog](#).

### **Exception to Academic Policy**

For more information, please visit the [WCU catalog](#).

To submit a petition for an exception to policy, obtain the form from the Student Affairs Office in Texas ([WCUDALStudentAffairsGeneral@westcoastuniversity.edu](mailto:WCUDALStudentAffairsGeneral@westcoastuniversity.edu)) and include documentation

to support the request. A list of all other relevant forms can be found on the [West Coast University Forms](#) page.

## **LEAVE OF ABSENCE POLICY**

### **Medical Leave of Absence**

Students who require a medical leave of absence must request a meeting with the MPA Dean/Program Director and the Director of Academic Education and/or Director of Clinical Education, depending on the timing of the proposed leave. The circumstances of the leave will be reviewed with the Progress and Promotion Committee. Each case will be considered on an individual basis. Students must submit the WCU Leave of Absence Request Form. No other leaves of absence are permitted.

A plan for reentry, remediation, or dismissal will be developed in discussion with the MPA Dean/Program Director. Student dismissal will follow the “Dismissal” protocol in the WCU Student Handbook. Students returning after a medical leave of absence must obtain a medical clearance letter prior to returning to the program.

Given the limited availability of re-entry points and the sequential nature of the curriculum, opportunities for returning to the program after a medical leave of absence are limited and may require waiting an extended period until the next required courses to progress in the program is offered again.

As a condition of re-entry, students may be required to successfully complete a comprehensive re-entry assessment, which may include both a written examination and a practical/skills-based examination, to demonstrate readiness to resume the curriculum. Students would be scheduled to take the re-entry assessments in the trimester prior to the trimester they are scheduled to return from LOA and resume the program.

Students are only given one opportunity to successfully pass the re-entry assessments. Failure to successfully complete the required re-entry assessment(s) may result in the student being required to reapply to restart the program from the beginning. In accordance with program and university policies.

## **POLICIES AND PROCEDURES FOR REFUNDS OF TUITION AND FEES (A1.02h)**

### **Withdrawal and Refund Policies**

For more information, please visit the WCU Catalog at:

<https://wcucurrent.catalog.prod.coursedog.com/financial-policies-and-information/withdrawal-and-refund-policies>

### **Tuition Refund Policy**

For more information, please visit the WCU Catalog at:

<https://wcucurrent.catalog.prod.coursedog.com/financial-policies-and-information/withdrawal-and-refund-policies#tuition-refund-policy1>

### **Return of Federal Title IV Financial Aid**

For more information, please visit the WCU Catalog at:

<https://wcucurrent.catalog.prod.coursedog.com/financial-policies-and-information/withdrawal-and-refund-policies#return-of-federal-title-iv-financial-aid>

## Return of Military Educational Benefits

For more information, please visit the WCU Catalog at:

[https://wcucurrent.catalog.prod.coursedog.com/financial-policies-and-information/withdrawal-and-refund-policies#return-of-military-education-benefits\\_1](https://wcucurrent.catalog.prod.coursedog.com/financial-policies-and-information/withdrawal-and-refund-policies#return-of-military-education-benefits_1)

## Federal Refund Requirements and State Refund Requirements

For more information, please visit the WCU Catalog at:

<https://wcucurrent.catalog.prod.coursedog.com/financial-policies-and-information/withdrawal-and-refund-policies#federal-refund-requirements-vs-state-refund-requirements>

## MPA Website – Tuition & Fees

For more information, please visit the MPA Texas website at:

<https://westcoastuniversity.edu/programs/master-physician-assistant/dallas#tab-9>

## PROFESSIONAL DEVELOPMENT LEAVE POLICY

The MPA Texas Program recognizes leadership development and professional engagement as important components of PA education. Students may request approval to participate in professional conferences or off-campus academic activities that occur during scheduled instructional or clinical time when such activities are directly related to the student's professional development.

Professional Development Leave (PDL) is not guaranteed and must be approved in advance. Students must obtain program approval prior to registering for, committing to, or incurring expenses related to any conference or professional activity. Approval to attend is contingent upon the student being in good academic and professional standing and in compliance with all program attendance, progression, and professionalism policies.

Requests for conference attendance are submitted using the existing program **Time Off Request Form** process applicable to the student's current phase of the curriculum (didactic or clinical) **at least one month in advance**. Students must include supporting documentation, such as conference details and dates. Students requesting leave to attend a conference at which they have been selected or invited to present (e.g., podium presentation, poster presentation, invited speaker) must also submit documentation of acceptance or invitation, along with a written plan describing how missed coursework, assessments, laboratories, or clinical hours will be completed.

During the didactic year, conference attendance requests are reviewed by the Course Director(s) and the Director of Academic Education (DAE) or designee. Approved conference attendance during the didactic year is subject to University and program attendance limits. Students remain responsible for all missed instructional content, assignments, and assessments, and all course policies—including grading penalties—apply unless otherwise specified in writing.

During the clinical year, conference attendance requests require approval from the clinical preceptor, the SCPE Course Director, and the Director of Clinical Education (DCE). Because attendance at supervised clinical practice experiences is essential to meeting program and University requirements, any clinical time missed must be made up in coordination with the clinical site and program. Approval does not guarantee the availability of make-up clinical experiences.

Students who are presenting at a professional conference may request approval for conference attendance that exceeds standard attendance limits. Such requests are reviewed on an individual basis and require confirmation of acceptance or invitation, an approved make-up plan, and concurrence from all required academic and clinical stakeholders. Requests that may significantly impact attendance thresholds, clinical hour requirements, or program progression are referred to the Progress and Promotion Committee (P&P) for final determination. Approval may include conditions and may affect the student's progression timeline or program completion date.

All costs associated with conference attendance, including registration, travel, lodging, and related expenses, are the responsibility of the student unless otherwise specified in writing by the University or program.

## **CLINICAL YEAR POLICIES**

### **Clinical Year Eligibility & Readiness Requirements**

Transitioning into clinical rotations represents a significant milestone in the MPA Texas Program, as students apply foundational didactic knowledge within supervised clinical practice experiences across multiple areas of medicine. Prior to entry into the clinical year, all MPA Texas students must meet the following requirements.

- Students must maintain current and approved status of all required background checks, drug screening, immunizations, vaccinations, and tuberculosis (TB) clearance in accordance with University, program, and clinical site requirements. Students must also provide proof of personal health insurance coverage and malpractice insurance, as required by the program.
- Students must successfully complete all didactic coursework in good academic standing, including earning course grades of 76% or higher, completing any required remediation plans, and maintaining a minimum cumulative GPA of 3.0 on a 4.0 scale.
- Students must also be in good academic and professional standing, with no unresolved professionalism concerns, disciplinary actions, or Progress and Promotion Committee requirements that would preclude progression, based on University and additional superseding MPA program requirements.
- Students must be in compliance with all didactic year attendance requirements.
- Students must have successfully completed required certifications and trainings, including Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS), HIPAA training, and OSHA/Bloodborne Pathogen training.
- Students must successfully pass the Year 1 Examination (Y1E) prior to entering the clinical phase of the program.

Failure to meet any of the above requirements may delay or prevent progression into the clinical year, which may result in withdrawal or dismissal from the program and University.

### **Hospital Credentialing**

Most hospital credentialing requirements are completed in the months preceding the start of the clinical year. However, students may be required to complete additional credentialing documentation during the clinical year if clinical assignments change or if hospital systems update their requirements.

Students are responsible for completing all credentialing materials accurately and by the specified deadlines. Failure to comply with hospital credentialing requirements may result in

delayed rotation start dates, interruption of clinical training, and/or delayed graduation, consistent with program and University policies.

## Clinical Site Polices

### Clinical Site Travel Expectations and Student Responsibilities (A3.14j)

Students may be required to travel within Texas, including outside of the DFW metroplex, or outside of the State of Texas for any given clinical rotation. Students may either be assigned to or request a clinical site outside of the DFW Metroplex or Texas. Many factors play a role in site selection and assignment, including, but not limited to, availability of sites and preceptors. The majority (approximately 60%) of our clinical rotation sites are within a 75-mile radius of the WCU Texas campus and the vast majority (approximately 80%) of clinical rotation sites are located within Texas. **MPA students are advised that travel for clinical placement is an inherent and required component of the MPA Texas Program during the clinical year.**

While it is our goal to place students at as many rotation sites that are in close proximity to the WCU Texas campus as possible, students are advised to expect to travel to at least one (1) rotation site farther than 75 miles from the WCU MPA Texas campus. Students are responsible for the cost of travel, housing, and any other extraordinary costs associated with clinical site placement and attendance. In the event placement is outside of the immediate area, the student may request a meeting with the financial aid department to make an adjustment to their cost of attendance to address these additional costs.

All clinical rotation site placements determined by the Clinical Phase Committee are final and not subject to appeal. All students will be required to attest to this policy and other clinical phase policies throughout the duration of the program. Program policies are subject to change.

**Students are responsible for arranging and financing their own travel and housing** related to assigned rotation sites. This includes all transportation expenses to and from rotation sites, as well as all costs associated with housing and living arrangements.

### Clinical Site Parking Information

Some sites, especially larger teaching hospitals, have limited parking available for students. Students should inquire with their preceptor on parking availability and policies. Keep in mind some sites may require that students pay for parking. Transportation costs, including parking, are the student's responsibility. Students should comply with all parking rules at their assigned rotation sites.

### Clinical Site Approval and Safety (A1.02e)

All clinical sites are vetted and approved by WCU to ensure compliance with ARC-PA accreditation standards and institutional safety requirements. The safety of students is a priority, and students are expected to promptly report any concerns related to their clinical environment.

If a student feels unsafe at a clinical site, the student must notify the program as soon as possible. This includes contacting the Director of Clinical Education (or designee) or a member of the Clinical Phase Committee by phone or email, as appropriate to the situation. Students are encouraged to report concerns in good faith and will not be penalized for doing so.

In circumstances involving an immediate or urgent safety concern, students should contact 911 first and then notify the program as soon as it is safe to do so.

Upon notification of a safety concern, the program will review the situation and may take appropriate action, which may include temporary removal of the student from the clinical site while the matter is assessed. Such action will be taken to protect student safety and will not, in itself, result in academic or professional penalty. Further determinations regarding continuation, reassignment, or remediation will be made in accordance with program and University policies.

### **Clinical Site Accommodation Requests**

The MPA Program recognizes that participation in clinical education may present hardship or accessibility considerations for some students, including those related to medical conditions, disabilities, or sincerely held religious beliefs. While travel and variable scheduling are inherent components of clinical education and program completion, the program will make reasonable, good-faith efforts to consider documented hardship or accessibility needs when feasible.

Students seeking accommodation are directed to contact the Student Affairs department (Student Advisor) as early as possible to discuss their circumstances and to provide documentation as requested. Requests will be reviewed in accordance with WCU accommodation policies for campus-based requests and will be coordinated with the clinical site when clinical site participation is impacted by the request.

The program does not guarantee that requested accommodations will be granted or implemented as requested.

## **CLINICAL YEAR PROFESSIONAL BEHAVIOR AND CONDUCT**

### **MPA Student Clinical Year Expectations**

In addition to complying with all professional conduct standards outlined in this handbook, PA students are expected to actively participate in patient care during clinical rotations under appropriate supervision. This includes:

- Obtaining patient histories, performing physical examinations, developing differential diagnoses, and formulating assessments and management plans in collaboration with the supervising preceptor.
- Demonstrating proficiency in oral case presentations and clinical documentation, including accurate and timely entries in the EMR and, when applicable, handwritten notes.
- Demonstrating working knowledge of clinical coding practices appropriate to their level of training.
- Selecting and interpreting laboratory tests and diagnostic studies.
- Providing patient education and counseling across the lifespan related to health promotion and disease management.
- Attending all scheduled clinical rotations and associated educational activities
- Demonstrating professionalism, adaptability, and emotional resilience throughout the clinical year.
- Following the direction of the Director of Clinical Education, the Clinical Phase Committee, and assigned preceptors and clinical site staff.

### **Conflicts of Interest Policy in Clinical Placements**

To preserve professional boundaries and ensure objective clinical education, students may not be supervised by, evaluated by, or placed in a reporting relationship with an **individual** with whom they have a prior or existing personal, familial, social, religious, or professional relationship.

A student may be permitted to complete a clinical rotation at the same clinical site or practice where such an **individual** is employed provided that the **individual** is not the assigned preceptor, does not participate in the student's supervision or evaluation, and does not otherwise influence the student's clinical assessment or learning experience. The intent of this requirement is to ensure that each clinical rotation provides a new, objective, and unbiased educational experience.

All actual or potential conflicts of interest must be fully disclosed by the student and/or preceptor and receive prior approval from program administration before scheduling. Approval is not guaranteed and is determined based on the ability to maintain appropriate supervision, professional boundaries, and educational integrity.

Rotations with a current personal health care provider are prohibited. If a student is scheduled to rotate with a former health care provider, at least one year must have elapsed since the provider-patient relationship ended. During the rotation, the student may not seek medical advice or care from the preceptor or other providers at the site. It is highly discouraged for students to initiate a provider-patient relationship with any previous preceptor prior to graduation.

If a student personally knows a patient, the student must immediately excuse themselves from the encounter and notify the supervising preceptor. The student must not participate in the patient's care or access the patient's medical record. The program must be informed, and appropriate reassignment will be determined by the preceptor. Failure to disclose or comply constitutes a professionalism violation.

Failure to disclose a known relationship with an assigned preceptor to the Clinical Team or failure to comply with this policy may result in reassignment, removal from the rotation and/or requirement to repeat the rotation, and additional programmatic or disciplinary action, consistent with University and program policies.

### **Preceptor-Student Professional Boundaries & Non-fraternization Policy**

In addition to the University's Student/Employee Fraternalization Policy (pg. 30, [WCU Student Handbook](#)), students in the MPA Program are required to maintain strict professional boundaries in all clinical settings. These expectations apply to interactions with preceptors, clinical site staff, patients, and any individuals involved in the student's supervised clinical education, collectively referred to as Clinical Contacts.

While enrolled and participating in clinical rotations, students are prohibited from engaging in personal, social, romantic, or otherwise non-professional relationships with Clinical Contacts. Social activities, personal favors, or interactions outside of the professional learning environment are not permitted.

Communication with Clinical Contacts must remain professional and related solely to clinical education and patient care. Contact through personal or social media platforms is not permitted while the student is enrolled in the program. Professional networking through career-focused platforms (e.g., LinkedIn) as permitted by program policy.

Any pre-existing personal or professional relationship between a student and a preceptor or other clinical site staff member must be disclosed to the Clinical Team prior to the start of the

rotation. The program reserves the right to modify or reassign clinical placements to maintain appropriate professional boundaries.

Failure to adhere to this policy may result in removal from the clinical rotation and additional programmatic or disciplinary action, consistent with University and program policies.

### Supervision of the PA Student in Clinical Rotations

During each clinical rotation, the assigned preceptor of record (“primary preceptor”) must be available for supervision, consultation, and teaching, or must designate an appropriate alternate preceptor when unavailable. While the primary preceptor may not be physically present for every clinical encounter or shift, students must be clearly assigned to a supervising clinician at all times. The use of more than one preceptor may temporarily affect continuity but can also enhance learning by exposing students to different practice styles and clinical approaches.

If direct supervision is temporarily unavailable, students may be assigned educational activities or may observe and participate with ancillary staff (e.g., radiology, laboratory services, physical therapy) when appropriate and relevant to learning objectives. Preceptors should be aware of and approve all activities assigned to students. PA students are not employees of the clinical site and must function exclusively under preceptor supervision. **Students may not substitute for paid clinicians, clerical staff, or other site personnel** (A3.03b).

Throughout each rotation, it is the student’s responsibility to ensure that the supervising preceptor reviews all patients evaluated by the student. Preceptors may provide graduated autonomy for technical skills and patient care activities based on the student’s demonstrated competence; however, **every patient must be evaluated by the preceptor, and all procedures must be reviewed by the preceptor prior to patient discharge**. PA students may not independently diagnose, treat, or discharge patients without preceptor evaluation and approval.

Students completing rotations at sites that may later become places of employment must maintain a clear student role and may not assume the responsibilities of an employee prior to graduation. All clinical activities must remain within the scope of the approved educational experience and under the supervision of the designated preceptor of record. This distinction is essential to maintain the validity of University-provided professional liability coverage and to protect both the student and preceptor.

Any opportunity or request for a PA student to participate in patient care activities outside of an assigned clinical rotation prior to graduation is prohibited and constitutes a violation of program policy. Additionally, students who are employed in a separate healthcare-related role during PA education may not function in a PA student role while working as a paid employee. Professional liability insurance does not extend to clinical activities performed outside of assigned rotations or outside the student role, and such activities are not permitted.

### Informed Patient Consent for PA Student Involvement in Patient Care

Patients are essential partners in clinical education and must be treated with respect for privacy, dignity, and autonomy in accordance with HIPAA and site policies. Patients must be informed in advance that a Physician Assistant (PA) student will participate in their care, and explicit consent must be obtained. Consent may be obtained through standardized admission processes or on an encounter-by-encounter basis, consistent with clinical site procedures.

MPA students must be clearly identified as a student at all times, including wearing required name badges and verbally introducing themselves as PA students (A3.04). Patients must be informed that they will also be seen by their regular provider or supervising clinician and must be given a clear opportunity to decline or withdraw consent for student involvement at any time, without impact on the quality or availability of their care. If a patient requests to be seen only by a supervising clinician or declines PA student participation, the request must be honored.

When appropriate, consent should be obtained from a legally authorized representative (e.g., parent or guardian), and interpreter services should be used when needed to ensure informed decision-making.

If during a clinical rotation a patient identifies themselves as a West Coast University faculty or staff member, the student should offer to excuse themselves from the encounter and allow the preceptor to assume care, if the patient wishes.

**Any violation of patient confidentiality or HIPAA requirements is considered a serious breach of professional conduct and may result in immediate disciplinary action, up to and including dismissal from the MPA Program and University, consistent with University and program policies.**

### Medical Care and Medication Samples

While enrolled in the MPA Program, students may not seek or receive medical care from a clinical preceptor, clinical site staff, or colleagues. The sole exception is in the event of an emergency, when the assigned preceptor or other nearby licensed healthcare workers may be the only qualified personnel reasonably available to render immediate care.

Students are prohibited from removing, using, or accepting medication samples, supplies, or medical materials from any clinical rotation site for personal use. This includes prescription medications, over-the-counter medications, and clinical supplies.

Violation of this policy constitutes a serious professionalism breach. Students found to be in violation may receive a failing grade for the rotation and will be referred to the Progress and Promotion Committee for review. Outcomes may include disciplinary action up to and including dismissal from the MPA Program and University, consistent with University and program policies.

### Clinical Experience Etiquette

- Regular and punctual SCPE attendance is expected and is one component used to determine readiness for entry into clinical practice.
- Attendance of all scheduled shifts is mandatory. Students are expected to attend in their entirety all special and regularly scheduled clinical assignments.
- Students are expected to arrive at least 15 minutes early to each of their scheduled shifts.
- Unauthorized tardiness, early departures, or absences in clinical rotations will result in the disciplinary process outlined in the Student Handbook, section Student Conduct and Disciplinary Statement. Please see the Clinical Year Absence Policy for details.
- Asking another student to notify the preceptor is not acceptable. Notification of the preceptor does not excuse absence or tardiness. Please review the Clinical Year Absence Policy.

## Cell Phones, Text Messaging, Electronic Device Use

During clinical rotations, use of cell phones, tablets, or other electronic devices for non-educational purposes (including texting, email, or social media) is considered unprofessional and is not permitted. Students are expected to remain engaged in patient care and clinical learning activities at all times.

With preceptor approval, electronic devices with internet capability may be used solely as clinical resources (e.g., medical reference applications) to support patient care and learning. Personal use of electronic devices during clinical time is not allowed.

Students who use electronic devices for non-educational purposes during clinical rotations may be subject to professionalism-related consequences, including loss of professionalism points for the rotation and/or additional disciplinary action, consistent with program policies.

If communication with the clinical team is necessary during clinical hours (e.g., on the day of a scheduled site visit), students must first obtain preceptor permission before using a phone to communicate with faculty or staff.

## Drugs & Alcohol Policy

Student safety, patient safety, and professional conduct are paramount during clinical rotations. Any student who appears impaired or under the influence of drugs or alcohol, or whose behavior poses a risk to patient safety, will be immediately removed from the clinical site. The preceptor is expected to notify the MPA clinical team as soon as possible.

Impairment related to the use, possession, or influence of illicit substances or alcohol constitutes an egregious professionalism violation and may result in a failing grade for the rotation, referral to the P&P Committee, referral to the Conduct Committee, and additional disciplinary action up to and including dismissal from the program and University, consistent with University and program policies.

If impairment is suspected to be related to a prescribed or authorized medication, the student must promptly disclose this to the program. In such cases, the Clinical Phase Committee and MPA Dean/Program Director will review the situation and may adjust or reschedule clinical responsibilities as appropriate to ensure safety and compliance with program requirements. Approval of any modification is not guaranteed.

All students are expected to comply with the University's Drug and Alcohol Abuse Policy (pg. 54, WCU [Student Handbook](#)), as well as applicable federal, state, and clinical site policies.

## Dismissal from Rotation Site

In the event a student is asked to leave a rotation and/or clinical site by the preceptor or clinical site staff, the student must **immediately** notify a member of the Clinical Phase Committee in-person or by phone. Subsequent proceedings will be determined after the Clinical Phase Committee has discussed the reasoning with the student, clinical preceptor, clinical site, the DCE, and MPA Dean/Program Director.

## Clinical Year Communication Policies

### Clinical Year Email Policy

Email is the official method of communication between the MPA Program and students during the clinical year. Students are required to monitor their WCU email account daily, including

weekends and holidays, and to respond to program or clinical team emails within 24 hours or by the next business day following a holiday, unless specified in the email.

Students must acknowledge emails from the clinical team with a brief reply to confirm receipt. If a student is assigned to a clinical site with limited or no internet access, the student must notify the clinical team in advance so alternative contact methods can be arranged.

Failure to comply with clinical year communication expectations may result in professionalism-related consequences, including deductions to professionalism grades or referral to the P&P Committee for further review, consistent with program policies.

### **Pre-Rotation Site Communication Requirements**

Students are required to initiate contact with their assigned clinical site **at least one (1) week prior** to the start of each rotation. This outreach must include the designated site contact and assigned preceptor (if an email address is available), and, when applicable, the hospital system contact for credentialing or access requirements.

If a student does not receive a response from the site by Wednesday prior to the start of the rotation, the student is expected to follow up by telephone with the site contact listed. If the student is unable to establish contact with the site by Thursday prior to the rotation start date, the student must notify the clinical team using the program-designated communication method ([WCURCH-MPAprogram@westcoastuniversity.edu](mailto:WCURCH-MPAprogram@westcoastuniversity.edu)).

Students should not delay reporting communication difficulties or independently alter rotation arrangements. Failure to complete required pre-rotation communication in a timely manner may result in delayed rotation start, reassignment, or professionalism review by the P&P committee, consistent with program policies.

### **Clinical Rotation Orientation and Communicating Student Expectations**

Prior to the start of each clinical rotation, students must complete all required onboarding activities in EXXAT and any additional site-specific requirements. This may include, but is not limited to, obtaining identification badges, computer or electronic medical record (EMR) access, completing required paperwork, participating in EMR training, and completing any mandatory site-specific or institutional training. Failure to complete required onboarding activities may delay or prevent the start of the rotation.

During the first week of each rotation, the student and preceptor are expected to establish mutual goals for the clinical experience. At that time, the preceptor should clearly communicate expectations related to the student's role, responsibilities, and performance standards. The preceptor should also review site-specific policies, including security procedures, personal safety expectations, and emergency protocols (A1.02e).

Clear communication of expectations at the start of the rotation is essential to student success and professional development.

Expectations may include, but are not limited to, the following:

- Scheduled work hours, including start and end times
- Attendance requirements and procedures for reporting absences or tardiness
- Call responsibilities, including overnight or weekend schedules, if applicable
- Professional interactions with patients, preceptors, and clinical staff

- Expectations for participation during rounds, conferences, and clinical discussions
- Scope of student involvement in clinical care and patient encounters, consistent with program and site policies
- Oral presentations, case discussions, and clinical reasoning expectations
- Written documentation, including EMR and handwritten notes, as permitted by the site
- Required assignments, write-ups, or learning activities
- Methods and timing of feedback and evaluation
- Any additional duties or learning activities deemed appropriate by the preceptor to support educational objectives

Students are expected to adhere to all program and site policies, including professionalism standards, confidentiality and HIPAA requirements, and patient safety expectations. Failure to meet preceptor or site expectations may result in remediation, modification of the clinical experience, or referral to the appropriate program committee, consistent with University and program policies.

## **CLINICAL YEAR ASSIGNMENTS**

### **Clinical Rotation Schedules**

Students are required to upload their clinical work schedule to the Art of Care course in Canvas by Wednesday at 11:59 PM CST of the first week of each rotation to allow for planning of faculty and staff site visits. If a complete rotation schedule is not available by this deadline, the student must notify the DCE and the Clinical Phase Committee prior to the deadline.

Submitted schedules must include the following information:

- Student name and cell phone number
- Rotation number
- Clinical site name and address(es)
- Site contact person and email
- Primary preceptor name and email
- For each shift: scheduled hours (specific to time zone), location, and supervising clinician
- Total hours scheduled for the rotation

Schedules submitted with incomplete or inaccurate information (excluding a pending schedule that has been communicated in advance) will be returned for correction, and professionalism points may be deducted.

If for any reason the student is unable to obtain their full clinical work schedule for the 5-week rotation by the assigned deadline, the student must be in communication with the DCE and the Clinical Phase Committee with a plan for how they will obtain their schedule from the preceptor or clinical site.

### **Logging Patient Hours in Exxat**

Students are required to log all clinical hours in Exxat on a weekly basis, preferably within 24 hours of the shift end time. Hours must be entered after the clinical shift has ended and may not be logged in advance. Students must log the hours for their last clinical shift within 24 hours of the last day of the rotation. After this time students are no longer permitted to access the Exxat system for that rotation.

Students who are not delayed and who do not have approved absences are expected to follow the schedule assigned by their clinical preceptor and to log all hours worked accordingly. Deviations from the assigned schedule without approval is considered unprofessional behavior. After the clinical rotation ends, if a student failed to log or needs to correct logged hours, requests for updates must be made within two (2) calendar days from the last date of the clinical rotation experience. At that time, any changes to logged hours may only be entered by program personnel. Requests must be made in writing and submitted via email to [WCURCH-MPAprogram@westcoastuniversity.edu](mailto:WCURCH-MPAprogram@westcoastuniversity.edu) with supporting documentation for the request.

Failure to comply with schedule submission or clinical hour logging requirements by the end of the rotation may result in referral to the P&P Committee for professionalism review and may negatively impact the student's ability to successfully complete clinical requirements consistent with program policies.

### Logging Patients in Exxat

PA students are required to document patient encounters in Exxat for each clinical rotation. A minimum of **50 patient encounters per rotation** must be logged. Entries do not need to be highly detailed; however, they must include sufficient clinical information to accurately reflect the encounter and demonstrate meaningful participation in patient care.

Patient logs are used to verify that students are meeting required SCPE learning outcomes, including exposure to:

- Acute, chronic, and preventive patient encounters, and emergent care
- Patients across the lifespan (infants, children, adolescents, adults, and older adults), and
- a variety of clinical settings, including outpatient, inpatient, emergency department, and operating room environments.

In addition, students must log encounters that include mental and behavioral healthcare, women's health (prenatal and gynecologic care), and conditions requiring surgical management, including pre-operative, intra-operative, and post-operative experiences, as applicable to the rotation.

Failure to complete required patient logs by the end of a rotation may negatively impact the student's final SCPE grade. Incomplete, inaccurate, or insufficient logs will be reviewed by the Director of Clinical Education and the Clinical Phase Committee and may result in professionalism review (see the MPA Professionalism Policy), referral to the P&P Committee, and/or additional programmatic action. Outcomes may include repeating the rotation or completion of additional clinical experiences, as determined by the P&P Committee. Students should note that repeating or extending clinical rotations may delay program completion, and any additional costs incurred are the responsibility of the student.

## CLINICAL YEAR DOCUMENTATION POLICIES

### Charting and Documentation

PA students may enter information into the medical record only when permitted by the clinical site and supervising preceptor and in accordance with site policies. Students must clearly identify all documentation as "student" entries and include their signature with the designation "PA-S." Students are reminded that the medical record is a legal document, and all entries must be accurate, professional, and complete.

Preceptors are responsible for reviewing, editing, and approving all student documentation and must independently document the services they personally provide. Preceptors may not bill for services performed solely by a student. The preceptor must also document the PA student's involvement in the patient encounter and attest that the student was appropriately supervised for the entirety of the visit.

Students' documentation is a contributory part of the medical record, and developing clear, concise, and effective clinical notes is a critical professional skill.

When students do not have access to an EMR or have not yet completed required EMR training, students are encouraged to handwrite clinical notes for educational purposes. These notes should be reviewed by the preceptor whenever possible to provide feedback and support skill development.

### **CMS Documentation Policy**

Effective January 1, 2020, the Centers for Medicare & Medicaid Services (CMS) implemented updated regulations regarding the use of PA student documentation in the medical record for billing purposes.

Under these regulations, supervising clinicians are not required to re-document information entered by PA students. Instead, physicians, PAs, and advanced practice registered nurses (APRNs) may review, verify, sign, and date student documentation, provided they meet all applicable supervision and billing requirements.

Preceptors remain responsible for documenting the services they personally perform and for ensuring that student documentation accurately reflects the care provided. There are no CMS restrictions based on preceptor profession; supervising clinicians are not required to be PAs in order to verify PA student documentation. All documentation and billing practices must comply with CMS requirements, payer policies, and clinical site procedures.

### **Prescription Writing**

PA students may prepare handwritten or electronic prescription information for educational purposes only; however, all prescriptions must be reviewed, signed, and transmitted by the supervising preceptor. A student's name must not appear on any prescription.

At clinical sites utilizing electronic prescribing systems, the preceptor must personally access the system using their own credentials and sign and send all electronic prescriptions. Students are not permitted to use a preceptor's login credentials or independently transmit prescriptions.

When electronic prescribing is not available, students are encouraged to practice handwritten prescriptions under preceptor supervision as part of their clinical education.

Students must immediately notify the MPA clinical team if they are asked by a preceptor or clinical staff member to independently write, sign, transmit, or distribute medications without appropriate supervision. Such requests are not permitted under program policy.

## **CLINICAL YEAR SCHEDULE POLICIES**

Expect the clinical year trimester schedule to be final and non-negotiable. If a student refuses a clinical assignment, the student will be dismissed from the program and University.

## Clinical Rotation Hours Policy

The goal of clinical rotations is to simulate real-world clinical practice while ensuring student safety, well-being, and achievement of program learning outcomes. Students are expected to complete a combination of clinical learning experiences and assigned educational activities as outlined by the program for each SCPE.

### Hours Requirements

For a standard five (5) week rotation, MPA Texas students typically complete **between 100-160 total clinical hours**, depending on clinical environment and site scheduling. A maximum of 80 hours per week is permitted to support student wellness and learning.

If a student is scheduled for fewer than 32 clinical hours per week, they may request additional shifts when feasible; however, this is site-dependent and not guaranteed. Variability in weekly or total hours between individual rotations is expected and acceptable, provided that overall program requirements and rotation-specific learning outcomes are met.

Students whose total logged hours fall below 90 for a five (5) week rotation will have their schedule reviewed and may be assigned supplemental clinical activities or assignments to ensure adequate clinical exposure and experience. Students are discouraged from prioritizing hour accumulation over meaningful clinical engagement and learning.

### Missed Clinical Time

Students who begin a clinical rotation late or who miss scheduled clinical days for any reason (including approved illness, emergency, or program-approved absence) may not meet the expected weekly distribution of hours (i.e., 32 hours per week). In these cases, the program will evaluate completion of the total required hours for the five (5) week SCPE rotation and may assign additional clinical or educational activities as needed. Logged hours are used to document clinical participation and ensure compliance with program requirements; they are not intended to standardize clinical schedules across sites.

If a student is unable to obtain projected hours for each SCPE due to site scheduling constraints, the MPA program may require the student to supplement the learning experience through a project assigned by the SCPE preceptor, assignments given by the Course Director(s) during the SCPE, or assigned additional clinical assignment(s) to ensure the student meets expected course learning outcomes.

### Clinical Schedule Flexibility

Clinical schedules vary by specialty and site, and may include day, evening, night, weekend, and holiday shifts. Shifts may be eight, ten, or twelve hours, with at least eight hours off between shifts. Shift-based rotations (e.g., Emergency Medicine, surgery) may have fewer but longer shifts and lower total hours compared to clinic-based rotations. Preceptors may ask students to rotate shift timeframes to gain the most clinical experience during peak patient flow. These schedules are considered acceptable when they allow for the achievement of educational objectives and program requirements. Educational objectives include exposure to appropriate patient volume, accreditation-related exposures to acuities, settings, and populations, and achievement of rotation-specific learning outcomes.

### Prohibited Practices

Students may not work additional hours during the first part of the rotation to complete their rotation early. Students may not alter their rotation site, start or stop date, or scheduled hours

without prior approval from the DCE (or designee). **Students may not request or decline assigned work hours or schedules outside of program-approved processes. Scheduling is at the discretion of the SCPE preceptor and the site, with the approval of the DCE.**

### **School Closures and Clinical Site Schedules**

While assigned to clinical rotations, students are required to work the shifts assigned based on the clinical site's schedule. WCU holidays or other school closures do not supersede clinic schedules for clinical year students. If a student is assigned to work on a weekend or holiday, the student must work the assigned shift.

The clinical year schedule is highly variable and changes may be made to accommodate preceptor and clinical site availability to ensure students have experiences and encounters that prepare them for clinical practice.

### **Inclement Weather Policy**

In the event of inclement weather, students should follow the Inclement Weather policy of the clinical site at which they are assigned. Campus closings due to inclement weather do not automatically excuse the student from reporting to a clinical site. In the event of inclement (non-emergency) weather conditions, students are expected to make their best effort to report to their scheduled shift on time. Students are expected to demonstrate good judgment about their abilities to travel safely in inclement weather and student safety is always the priority. If a student feels that it is not safe for them to travel to or from their clinical site, they should notify a member of the Clinical Phase Committee and the preceptor immediately. If inclement weather occurs when a student is to report to a clinical site and the site is closed, the student is excused from clinical activities for that day only. Open and timely communication between the student, preceptor, and the clinical team is required to ensure safety and accountability for all students.

### **Disaster Policy**

Should a student's clinical site or student housing administration close or evacuate a student due to a disaster, the student should notify the DCE and the Clinical Phase Committee and leave the premises immediately. Likewise, if the PA Program notifies a student to evacuate an area, the student must notify the preceptor and leave the area immediately. If a student feels that it is not safe for them to travel to or from their clinical site due to a disaster, they should notify the DCE, the Clinical Phase Committee, and the preceptor immediately. Open and timely communication between the student, preceptor, and the clinical team is required to ensure safety and accountability for all students.

Note: In the event of a disaster, students may need to be temporarily or permanently relocated for their rotation(s). Any costs that may be incurred due to relocation under these circumstances are the responsibility of the student.

## **CLINICAL YEAR CALLBACK DAYS AND SITE VISITS**

### **Clinical Year Callback Days**

Full attendance and participation in the entire return-to-campus ("callback") days at the WCU Texas campus is mandatory. These sessions may run from 7 am to 8 pm Central Time Monday through Friday. Therefore, students should not make any travel plans prior to 8 pm Central Time on the Friday of each callback week, to ensure full participation in all required activities. The only exceptions that may be made are for students representing the MPA program in a WCU-sponsored or program-approved event. Personal emergencies will be evaluated on a case-by-

case basis. Failure to abide by this policy may result in failure of the Art of Care Course and lead to subsequent dismissal from the program and University due to course failure.

Please review the specific SCPE syllabi and all clinical year didactic course syllabi for all evaluation components specific to each course.

### **Clinical Site Visits**

A faculty or staff member from the WCU MPA Program will conduct site visits during clinical rotations to support student learning and ensure appropriate clinical supervision. Site visits may include observation of patient interactions, review of clinical reasoning, discussion of cases, and brief feedback from preceptors and clinical site staff. Medical documentation may also be reviewed, as appropriate.

At least one (1) site visit will occur during the clinical phase of the program for each student; additional visits may be conducted at the request of the student, preceptor, or program faculty. Site visits may be announced or unannounced.

For announced visits, students will be notified by program personnel at least 1 week in advance and are responsible for notifying the preceptor. Upon arrival, the student should introduce the visiting faculty or staff member to the preceptor and relevant site personnel. Students should be prepared to verbally present a patient case and discuss clinical reasoning, evidence-based decision-making, referrals, patient education, and follow-up planning. Unannounced visits may occur when program personnel are evaluating a clinical site for ongoing compliance with accreditation standards and have already been in communication with the clinical site's contact or site preceptor.

Clinical site visits are intended as a formative educational experience and serve as an additional data point in evaluating student progression in clinical skills and meeting course and program learning outcomes. Student concerns identified during a site visit may be addressed at the time of the visit or referred to the P&P or Clinical Phase Committee for further review, consistent with program policies.

## **STUDENT SAFETY POLICIES AND PROCEDURES**

### **Legal Concerns**

If a student believes that a patient encounter or clinical situation may have legal implications, the student must notify the Director of Clinical Education as soon as possible and copy the MPA Dean/Program Director. The clinical team will review the matter and, when appropriate, consult with the Medical Director, Campus Executive Director, and/or legal counsel.

If a student is arrested or charged with a criminal offense at any point during the program, the student must notify the DCE and MPA Dean/Program Director (or designee) within 24 hours by both email and phone.

### **Clinical Concerns/Problems**

The MPA Program strives to ensure that clinical rotations provide safe and supportive learning environments. If concerns or problems arise during the clinical year, students should promptly notify the DCE by email and copy the MPA Dean/Program Director for guidance and support.

## Student Physical and Mental Health Safety

If the MPA program has a reasonable concern that a student may be unable to safely participate in patient care, the student may be temporarily withheld from clinical activities pending further discussion and review. The student will be required to meet with MPA program leadership and/or the P&P Committee to determine appropriate next steps, consistent with University and program policies. These actions are taken to ensure patient safety and student well-being and do not constitute a diagnosis or a requirement for treatment.

Students who have concerns about their own well-being, or the well-being of a classmate, are encouraged to notify a Course Director, Faculty Advisor, or MPA program leadership as soon as possible. Free and confidential student counseling services are available through Aetna. See the [WCU Student Handbook](#) under Counseling Resources for more information.

## Off-Campus Learning and Clinical Experience Safety Policy (A1.02e)

Student safety in off-campus learning environments and clinical settings is a program priority. Clinical sites are reviewed for safety and security by program personnel as part of the initial and ongoing evaluation of clinical sites. At the start of each rotation, preceptors are responsible for orienting students to site-specific safety, security, hazard exposure, and emergency response procedures, which may include:

- Security measures on and off (to and from) the clinical site.
- Safety procedures and policies for students entering and exiting the practice to their vehicles.
- Facility security protocols.
- Locations of emergency exits, places of safety, and escape routes.
- Fire safety and location of fire extinguishers.

If a student encounters a situation that threatens personal safety, the student should remove themselves from the situation immediately, contact 911 or on-site security as appropriate, and notify the MPA Program as soon as it is safe to do so. The program will review the situation and determine appropriate next steps.

## NON-DISCRIMINATION POLICIES

### WCU Statement of Non-discrimination (A1.02g)

To ensure equality of opportunity for all members of our community, West Coast University is committed to establishing an environment that is intellectually and physically safe. The University demonstrates its dedication to non-discrimination by promoting academic inquiry, mutually respectful interactions, and diversity of thought, through a dynamic community. The University strives to reflect this commitment by ensuring equal access and promoting opportunities for ALL individuals regardless of race, color, religion, national or ethnic origin, sex, marital, parental, familial, veteran, or military service status, political affiliation, age, or differing mental or physical ability. Please see the University [non-discrimination statement](#).

West Coast University does not discriminate on the basis of race, color, religion, national or ethnic origin, sex, sexual orientation, gender identity or status, marital, parental, familial, veteran, or military service status, political affiliation, age, or disability. The University complies with all local, state, and federal laws barring discrimination. Accordingly, equal opportunity for admission shall be extended to all persons. All inquiries or complaints regarding these laws and regulations should be directed to the University Director of Student Affairs who will provide

students with procedures to resolve complaints relating to alleged unlawful discriminatory actions. Please see the University's [general statement of non-discrimination](#).

Sexual misconduct is a form of sexual harassment, which is a form of discrimination and is prohibited by Title IX of the Education Amendments of 1972. Sexual assault, domestic violence, dating violence and stalking also are prohibited conduct under Title IX, and are additionally defined by the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, as amended by the Violence Against Women Reauthorization Act of 2013. These acts, as defined by law are expressly prohibited at WCU.

## **WCU Title IX Nondiscrimination Policy and Notice of Nondiscrimination (A1.02g)**

West Coast University (WCU) does not discriminate on the basis of sex and prohibits sex discrimination in any education program or activity that it operates, as required by Title IX and its regulations, including in admission and employment.

WCU's Title IX nondiscrimination statement is provided: on the website under <https://westcoastuniversity.edu/legal/title-ix>; in the catalog, in the student handbook, and in the employee handbook. The Title IX policy and grievance procedures are provided on the website under: <https://westcoastuniversity.edu/legal/title-ix>.

Inquiries about Title IX may be referred to the WCU Title IX Coordinator, Chief Deputy Title IX Coordinator or Deputy Coordinators, the U.S. Department of Education's Office for Civil Rights, or both. Contact information for OCR is available here: <https://ocrcas.ed.gov/contact-ocr>.

To report information about conduct that may constitute sex discrimination or make a complaint of sex discrimination under Title IX, please refer to the Title IX Coordinator, the Chief Deputy Title IX Coordinator or the Deputy Coordinators.

Please refer to the following [Title IX and Safety & Security](#) page for more information.

## **Standard Precautions, Exposure and Incident Reporting, and Financial Responsibility**

### **Standard Precautions**

During clinical education, students may be exposed to bloodborne pathogens and other infectious agents, including but not limited to hepatitis B (HBV), hepatitis C (HCV), tuberculosis, herpes viruses, and HIV. Students are required to apply standard precautions to all patient encounters and to treat all blood and bodily fluids as potentially infectious. WCU is committed to protecting the rights and confidentiality of individuals with known or suspected infectious diseases.

### **Handwashing**

Hand hygiene is required:

- Before and after all patient contact and between patients, whether or not gloves are worn
- Immediately after removal of gloves
- Before handling invasive devices
- After contact with blood, body fluids, secretions, excretions, non-intact skin, or contaminated items

- When moving from a contaminated to a clean body site on the same patient
- After contact with objects in the patient's immediate environment

Hand washing (40–60 seconds) and alcohol-based hand rubbing (20–30 seconds) should be performed in accordance with clinical site policy.

### **Personal Protection Equipment (PPE)**

Students must use appropriate personal protective equipment (PPE)—including gloves, masks, eye protection, or face shields—whenever exposure to blood, body fluids, secretions, or splashes is anticipated. PPE use must comply with clinical site policies and procedures.

### **Sharps Handling**

Sharps include needles, scalpels, lancets, broken glass, and other sharp instruments. Students must:

- Handle all sharps with extreme care
- Never recap, bend, or remove needles
- Never pass sharps hand-to-hand
- Never carry exposed sharps or leave them unattended
- Dispose of sharps immediately in approved sharps containers at the point of use
- Dispose of needles and syringes as a single unit
- Never overfill sharps containers

### **Exposure and Incident Reporting (A3.05a-c)**

Any needle stick injury, sharps injury, splash, or other exposure to blood or bodily fluids must be reported immediately to the supervising preceptor and the clinical site, in accordance with site policy. The student must also notify the Clinical Team as soon as possible and complete a Student Incident Report Form within 24 hours and submit it to [WCURCH-MPAprogram@westcoastuniversity.edu](mailto:WCURCH-MPAprogram@westcoastuniversity.edu). This form can be found in Exxat under Resources. Students are expected to follow all required post-exposure evaluation and reporting procedures established by the clinical site.

Any needle stick injury, sharps injury, splash, or other exposure to blood or bodily fluids must be reported immediately to the supervising preceptor and the clinical site, in accordance with site-specific policies and procedures. The student must also notify the MPA Clinical Team as soon as possible.

The student is required to complete the revised Student Incident Report Form within 24 hours of the exposure. Only the current, revised version of the Student Incident Report Form will be accepted. Completed forms must be submitted electronically to [studentincidentreport@westcoastuniversity.edu](mailto:studentincidentreport@westcoastuniversity.edu) and [sKoshi@westcoastuniversity.edu](mailto:sKoshi@westcoastuniversity.edu), with [CRodriguez@westcoastuniversity.edu](mailto:CRodriguez@westcoastuniversity.edu) and the MPA Texas Dean/Program Director copied on the correspondence. The revised forms are available in Exxat under Resources.

Students are expected to comply with all required post-exposure evaluation, testing, treatment, and reporting procedures established by the clinical site, including site-directed occupational health or emergency department protocols. When clinically appropriate and consistent with site guidance, follow-up care may occur with the student's primary care provider. In the event a student does not have established care with a primary care provider, the student may seek evaluation and treatment through urgent care or emergency services. Students must not delay or decline required post-exposure evaluation.

Students must utilize their personal health insurance for immediate medical evaluation and treatment related to the exposure. Any charges not covered by the student's insurance may be submitted for institutional review. WCU will review any uncovered charges and may assume financial responsibility at its discretion following internal review. Submission of documentation or insurance claims does not guarantee reimbursement or payment of uncovered expenses.

Completion of insurance claim forms and submission of billing documentation does not replace required academic or program reporting obligations. Students are responsible for ensuring all reporting requirements are met in a timely manner.

Failure to promptly report an exposure, to follow clinical site post-exposure procedures, to submit required documentation, or to comply with reporting timelines may be considered a professionalism violation and addressed in accordance with program policies and the WCU Student Handbook.

### **Exposure to Infectious and Environmental Hazards**

An exposure incident is defined as a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials. The bodily fluids considered potentially infectious for blood borne pathogen exposures include blood, semen, saliva, cerebrospinal fluid, amniotic fluid, vaginal secretions, pleural fluid, peritoneal fluid, pericardial fluid, and synovial fluid.

### **Methods of Prevention (A3.05a)**

It is the policy of WCU MPA Program to ensure the safety of clinical students from unnecessary exposure to blood or other bodily fluids/communicable diseases through education on universal precautions and immunization and to implement procedures when accidental exposure occurs in order to minimize the risk of contracting a disease.

### **Financial Responsibility**

Students are financially responsible for any medical evaluation, treatment, testing, or follow-up care related to exposure incidents, unless otherwise covered by personal health insurance. Students are expected to maintain adequate health insurance coverage while enrolled in the MPA program.

Students are responsible for utilizing their personal health insurance for medical evaluation, treatment, testing, and follow-up care related to exposure incidents. Students are expected to maintain adequate health insurance coverage while enrolled in the MPA program.

Charges not covered by the student's health insurance may be submitted for institutional review. West Coast University will review uncovered expenses and may, at its discretion, assume financial responsibility for eligible charges following internal review. Submission of documentation or insurance claims does not guarantee payment or reimbursement.

### **Procedures for Care and Treatment After Exposure (A3.05b)**

If a student sustains a needle stick or is exposed to infectious materials they should:

- Immediately wash exposure site thoroughly with soap and water (or water only for mucous membranes)
- Wash needle stick and cuts with soap and water
- Flush the nose, mouth, or skin with water

- Irrigate eyes with clean water, saline, or sterile irritants
- Notify the instructor or clinical preceptor immediately and follow protocol established by the site where the incident occurred.
- Within the same day, the student must report the incident to the Clinical Phase Committee and complete the **WCU Student Incident Report Form** and email it to [WCURCH-MPAprogram@westcoastuniversity.edu](mailto:WCURCH-MPAprogram@westcoastuniversity.edu).
- The incident report, **WCU Student Incident Report Form** shall contain:
  - The date and time of exposure
  - Clinical site, location, and unit information
  - Details of the exposure occurred
  - Details of the type and severity of the exposure
  - Details about the source patient (i.e., post-exposure management, previous vaccinations, current HIV, HBV, HCV status)
- If an incident report was filed at the rotation site, a copy of this must be sent to the WCU MPA Texas Program at [WCURCH-MPAprogram@westcoastuniversity.edu](mailto:WCURCH-MPAprogram@westcoastuniversity.edu) to be maintained in the student's file.
- Seek immediate care for necessary lab work and post-exposure prophylaxis if indicated.
- The student should seek immediate evaluation and treatment in accordance with appropriate medical standards of the clinic or institution where the exposure took place (in some cases this may be at the clinical site's ER, occupational health, or human resources).
- If the clinical site is not able to assist the student, the students should contact the Clinical Phase Committee, their Primary Care Provider, and seek care as directed or at the nearest available facility to provide appropriate care (i.e., initial lab work for HIV, HBV, HCV and risk assessment) to determine the need for chemoprophylaxis.
- The preceptor or appropriate institutional representatives should obtain consent from the source patient for appropriate laboratory testing (i.e., HIV, HBV, and HCV status), if possible.
- Students should receive post exposure prophylaxis within hours of the exposure rather than days, per CDC recommendations, if the status of the source is deemed high risk or if there is uncertainty of the source patient's status.
- Some clinical sites will provide post exposure care to students at no charge. When this is not the case, students should file their personal health insurance. The student's health insurance will be responsible for all costs associated with initial and follow-up treatment. Any costs not covered by the student's health insurance may be submitted for WCU review in accordance with established policy and procedures as outlined in the Student Incident Report Form.
- The student must also contact their primary care provide to schedule post-exposure follow-up. If the student does not have an established primary care provider, it is the student's responsibility to establish care for appropriate follow-up visits.
- In the event of an exposure, The National Clinician's Post Exposure Prophylaxis Hotline is available by phone, 888-448-4911, 24 hours a day, 7 days per week, to provide guidance in managing exposures.
- Free and confidential student counseling services are available through Aetna. See the [WCU Student Handbook](#) under Counseling Resources for more information.

## Health and Malpractice Insurance & Medical Care During the Program (A3.05c)

WCU MPA students are required to maintain continuous health insurance coverage throughout the entirety of the program and must be able to provide documentation of coverage upon request. Students will be required to present their medical insurance information if medical treatment is needed.

Students are responsible for routine personal healthcare costs incurred while enrolled in the MPA Texas program. These may include, but are not limited to, immunizations, tuberculosis screenings, laboratory testing, diagnostic studies, and medical care for personal illness or injury.

Medical evaluation, treatment, testing, and follow-up care related to exposure incidents occurring during program-approved supervised clinical practice experiences must first be billed to the student's personal health insurance. Charges not covered by insurance may be submitted for institutional review. WCU will review uncovered expenses and may, at its discretion, assume financial responsibility for eligible charges following internal review. Submission of documentation does not guarantee payment or reimbursement.

In the event of a malpractice claim resulting from a student's clinical activities performed as part of the approved educational program, the clinical site will be covered under the University's professional liability insurance. Certificates of insurance are provided as part of the affiliation agreement process for each clinical site.

The statement in the **WCU Student Incident Report Form**, "*Students covered under a medical plan must seek treatment from their primary care provider,*" applies to routine personal illness or injury and does not apply to occupational health exposures, clinical site-directed post-exposure care, malpractice coverage, or professional liability matters.

# POLICIES AND PROCEDURES STUDENT ACKNOWLEDGEMENT FORM

In addition to the University policies, students are expected to read and comply with all MPA Texas program policies. Because many of these policies are student-centric, students are required to read and review the entire MPA Texas Student Handbook for understanding.

ARC-PA Standard, 6th Edition	MPA Texas Program Policy	Policy Location MPA Student Handbook Page Number(s)
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.	18
A3.02	The program publishes, makes readily available, and consistently applies a policy that PA students are not required to work for the program.	18, 54
A3.03a	The program publishes, makes readily available, and consistently applies a policy that PA students do not substitute for or function as: a) instructional faculty	
A3.03b	The program publishes, makes readily available, and consistently applies a policy that PA students do not substitute for or function as: b) clinical or administrative staff	
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.	16, 55
A3.05a-c	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	65-69
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.	18
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.	19
A3.12e	The program publishes, consistently applies, and makes readily available to enrolled and prospective students any	7

	admission and enrollment practices that address: e) required technical standards for enrollment.	
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By signing below, I acknowledge that I have received information regarding WCU and MPA program policies and applicable ARC-PA 6<sup>th</sup> Edition Standards.

I understand that I am required to read the MPA Student Handbook and other policies that may be furnished to me from time to time during my enrollment in the program. I understand that I may request a written copy of each manual or policy from the MPA Texas Dean/Program Director.

As a student I am responsible for referring to this handbook for specific policies and procedures governing my status as a student to include program requirements, goals and objectives, satisfactory academic and professional progress, and graduation requirements. I understand that this handbook is a supplement to the information provided in the WCU Catalog and University Student Handbook.

My signature further reflects my commitment to continuously comply with all policies and procedures of WCU.

Print Name \_\_\_\_\_ WCU Student ID # \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Original: Student's education record  
Copy: Student