



Sam Houston State University

MEMBER THE TEXAS STATE UNIVERSITY SYSTEM

College of Osteopathic Medicine

Graduate Medical Education

Sam Houston Regional Education Consortium (SHREC)

SUPERVISION POLICY

Origination date: July 31, 2022	Policy owner: Graduate Medical Education Administration
Effective date: July 1, 2025	Policy contact: Director of Graduate Medical Education
Last review date: May 21, 2025	ACGME Institutional Requirement #: IV.J., IV.J.1., IV.J.2. ACGME Common Program Requirement #: VI.A.2.b), VI.A.2.b).(1) – IB.A 2.b).(3)

SCOPE:

This policy applies to all SHREC Accreditation Council of Graduate Medical Education (ACGME)-accredited Programs at Sam Houston State University College of Osteopathic Medicine (SHSU-COM).

PURPOSE:

To ensure that the SHREC Graduate Medical Education (GME) Programs provide appropriate supervision for all Residents/Fellows that is consistent with proper and safe patient care, the educational needs of Residents/Fellows, and the applicable ACGME Review Committee (RC) and Common Program Requirements.

To ensure sufficient institutional and/or Programmatic oversight to assure that Residents/Fellows are appropriately supervised, meaning that a Resident/Fellow is supervised by the teaching Faculty in such a way that the Residents/Fellows assume progressively increasing responsibility according to their level of education, knowledge, skills, experience, and judgment.

To ensure that on-call schedules for teaching faculty are structured so that supervision is readily available to Residents/Fellows on duty.

To ensure that the level of responsibility accorded to each Resident/Fellow is determined by the Program Director and the teaching faculty.



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POLICY:

SHREC RESPONSIBILITY

It is the responsibility SHREC to ensure that each of its ACGME-accredited programs establishes a written program-specific supervision policy consistent with institutional policy and respective ACGME requirements to establish detailed written policies describing Resident/Fellow supervision at each level for their respective Programs. The policies must be maintained in the Program Manual.

PROGRAM RESPONSIBILITY

It is the responsibility of individual Program Directors to establish detailed written policies describing Resident/Fellow supervision at each level for their respective Programs. The policies must be maintained in the Program Manual.

The requirements for on-site supervision will be established by the Program Director for each Program in accordance with ACGME guidelines and should be monitored through periodic Program reviews, with institutional oversight through the GMEC internal review process. Supervision may be:

Direct Supervision. The supervising physician is physically present with the resident during the key portions of the patient interaction, or the supervising physician and/or patient is not physically present with the resident and the supervising is currently monitoring the patient care through appropriate telecommunication technology. Note: when a resident requiring direct supervision provides remote care, the supervising physician must be physically present with the resident.

Indirect Supervision. The supervising physician is not providing physical or concurrent visual or audio supervision but is immediately available to the resident for guidance and is available to provide appropriate direct supervision.

Oversight. The supervising physician is available to provide review of the procedures/encounters with feedback provided after care is delivered.

Residents/Fellows may request the physical presence of an attending at any time and are never to be refused. Residents/Fellows are expected to

- Know and follow their Program's policies for when they must always contact their supervisor, including when they are uncertain or if a patient has a change in status
- Present data to their supervisor accurately, and to let their supervisor know if they omitted part of the exam
- Provide feedback to their supervisor regarding what was helpful



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Programs should establish policies that support effective supervisor behaviors such as:

- Set clear expectations of:
 - When to call
 - Situations in which Residents/Fellows should always call
 - How to call - provide accurate pager/phone numbers
 - Residents/Fellows' roles in the care of the patient
- Create a safe learning environment
 - Reassure the Resident/Fellow that it is always appropriate to call if uncertain
 - Recognize and address uncertainty in the Resident/Fellow
- Be readily available
 - Answer pages and phone calls promptly
 - Planned communication (schedule times for calls)
- Balance supervision with Resident/Fellow autonomy
 - Provide input but do not take over the case
- Be respectful
 - Be patient with the Resident/Fellow regardless of time of day
 - Do not yell at or belittle a Resident/Fellow

REPORTING INSUFFICIENT OR INAPPROPRIATE SUPERVISION

Residents concerned about insufficient or inappropriate supervision should discuss the situation with their Program Director. Residents concerned about continuous insufficient or inappropriate supervision should contact the DIO.

LINKED/RELATED POLICIES: N/A

REFERENCES/AUTHORITIES:

- Institutional Requirements, Accreditation Council for Graduate Medical Education, 2022 [ACGME Common Program Requirements](#)

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