

21.6 Appendix F — Distributive Model: Off-site Inspection Guide

OFF-SITE CLINICAL FACILITIES

Site: _____

Third year site Fourth year site Third AND Fourth year site

Names of clinical personnel:

_____ Position: _____
 _____ Position: _____
 _____ Position: _____

Relationship of practicum rotation coordinator and site (practice or facility)?

Standard 3

21.3.3a Adequacy of Safety Measures:

Posted protocols/warning signs:

- 1) isolation facilities YES _____ NO _____ NA _____
- 2) radiology/radioactivity YES _____ NO _____ NA _____
- 3) first aid/evacuation/other emergencies YES _____ NO _____ NA _____
- 4) hydraulic chutes YES _____ NO _____ NA _____

Describe safety measures at this facility. Who is responsible for safety inspections?

Any unsafe conditions? Note specific area and deficiency:

Safety of facilities for housing animals (fencing, corrals, caging, runs, etc.)?

Safety equipment is in place for radiographic procedures? NA

- 1) Lead barriers YES NO NA
- 2) Aprons YES NO NA
- 3) Gloves YES NO NA
- 4) Eyewear YES NO NA
- 5) Dosimetry Badges YES NO NA

21.3.3b – h: Adequacy of instructional environment and equipment

Waiting rooms/client areas	NA	OK	Concerns
Examination rooms	NA	OK	Concerns

Treatment areas	NA	OK	Concerns
Laboratory – clinical pathology/diagnostics	NA	OK	Concerns
Kennels/Animal Housing	NA	OK	Concerns
Surgery and anesthesia	NA	OK	Concerns
Gas cylinders secured	NA	OK	Concerns
Intensive/critical care	NA	OK	Concerns
Necropsy	NA	OK	Concerns
Pharmacy	NA	OK	Concerns

Controlled substances:
Access? In clinic and ambulatory?

Records?

Expired/out-dated drugs?
Comment:

Safety of chemo drugs? Hood?, personal safety gear?, waste?

Offices/Student break area	NA	OK	Concerns
Computers and internet access		OK	Concerns
Overall building infrastructure		OK	Concerns
Other		OK	Concerns
Isolation	NA	OK	Concerns

21.3.4 Students instructed in use of facility? (orientation)
How?

When?

By whom?

Standards 4, 6, 9 and 11

21.4.4 Monitoring and supervision

Third year sites and fourth year sites – questions for preceptors

How were you trained/ oriented to the responsibilities of being a distant veterinary teaching facility coordinator, and by whom? Discuss your responsibilities for student evaluations.

With whom do you communicate in regard to students and goals and expectations for students rotating through your clinic/ facility? How often?

Discuss your responsibilities regarding clinical competencies of students. How are these used to improve student learning at your facility?

How often, during a rotation, does someone from the school/college come to visit your clinic?

Who usually makes these visits?

What do they do while they're here, i.e., nature of the visit?

follow-up?

do you keep record of these visits and/or correspondences?

Who is responsible for day-to-day supervision and monitoring of students in your practice?

Who is responsible for completing the on-line evaluations of students in your practice? (21.6.4)

Does this person also discuss this evaluation or otherwise give feedback to the students?

Please describe nature and frequency of evaluation and feedback.

Do you use the feedback forms /internet programs that are available from the school/ college?

Do you feel that the assessment system provided allows you to assess the students in an adequate manner?

YES

NO

Fourth year sites – additional questions for preceptors

How often does someone from the school/college inspect or examine your practice/ facilities and update information related to their criterion and requirements for your participation as a CORE fourth year site?

Describe the types of rounds you have with the students? How often do these occur?

21.4.5: Student involvement and responsibilities

When students are rotating through this practice/site, how are they involved in healthcare management?

Do they:

meet with clients?	YES	NO	NA
discuss costs/ billing with clients?	YES	NO	NA
admit patients?	YES	NO	NA
discharge patients?	YES	NO	NA
take medical history?	YES	NO	NA
examine patients?	YES	NO	NA
make entries in medical records?	YES	NO	NA
participate in diagnoses?	YES	NO	NA
take cytology sample?	YES	NO	NA
treat patients?	YES	NO	NA
participate in surgeries? if yes, describe nature of participation	YES	NO	NA
administer and/or monitor anesthesia?	YES	NO	NA
participate in emergency treatments?	YES	NO	NA
participate in critical care?	YES	NO	NA
participate in imaging	YES	NO	NA
radiography?	YES	NO	NA
positioning/ taking radiographs?	YES	NO	NA

interpretation?	YES	NO	NA
ultrasound?	YES	NO	NA
imaging process?	YES	NO	NA
interpretation?	YES	NO	NA
other?	YES	NO	NA
conduct necropsy examinations?	YES	NO	NA
other?	YES	NO	NA

How did the students learn about the facility? Describe how arrangement for transportation and housing were made at the DVTH?

How do the students evaluate the site and their experiences there?

How are students instructed in bio-safety at the sites?

If possible verify these with students on site. If not then do so during student interview session including their thoughts regarding pros and cons of site.

21.4.7: Medical records

What type of medical records do you maintain?	electronic	paper	both
Do students have access to the records?	YES	NO	NA
Are records “readily retrievable?”	YES	NO	NA

(Team should, if possible, examine a few representative records to validate what has been stated)

Other comments regarding records?

Standard 5

21.5.1, 21.5.3

To what type of learning and information resources do students have access at your practice?

Textbooks	YES	NO
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