A MODEL OF INTEGRATED STUDENT EDUCATION AND FACULTY PRACTICE

I. Mission Statement:

The model for the integration of Student Education with Faculty Practice within the Institute for Innovation in Health and Human Services (IIHHS) exists to provide educational and training experiences for students, to develop collaborative service opportunities where faculty and students can work together in clinical practice, and to create innovative research programs across the practice areas of the IIHHS at James Madison University.

II. Integration of Student Education and Training with Faculty Practice: The Model

Numerous clinics of distinction exist within the Institute for Innovation in Health and Human Services (IIHHS) for the express purpose of supporting the education goals and objectives of students at James Madison University. These distinctive clinics have been designed to meet a variety of unique needs identified in our community. JMU faculty and students work collaboratively to meet these community needs by providing a variety of clinical services. In this model, students work with faculty mentors where modeling and real-life learning can be experienced throughout various aspects of service delivery. This model seeks to integrate service delivery and practice with education and training across professional disciplines within IIHHS to promote health, well-being, and healing across the life span. This collaborative relationship between student and faculty generates unique and innovative research opportunities. The emphasis on active student learning, faculty practice, and ongoing research are the primary pillars of this integrated model.

A. Student Education and Training:

At the center of this Integrated Model is the education and professional development of the JMU student. Through partnerships with various academic units within the university clear and measurable training objectives are identified and built into the service delivery models of the clinics at the institute. Application of classroom knowledge in a clinical setting promotes critical thinking and provides opportunities to achieve higher-level educational objectives. Across all professional disciplines training objectives related to knowledge, skills, and abilities are relevant for the professional development of students. The service delivery model of the Institute clinics provides realistic opportunities for students to work directly with faculty through a variety of opportunities within clinical practice.

The capacity to work collaboratively with members of other disciplines to promote the common good of our clients is a value that is integrated through all aspects of service delivery and training in the IIHHS. Interprofessional collaboration between faculty and students within and between various disciplines is a distinctive characteristic of clinical training opportunities within the IIHHS.

B. Faculty Practice:

Faculty expertise and experience gained in their roles as educators and practitioners forms the second pillar of an integrated model of education and service delivery. This important distinctive characteristic acknowledges the faculty practitioner as a life-long learner and recognizes the need for continued practice. The continued growth of the faculty practitioner is contingent upon ample
opportunities for practice in a setting where they can keep their skills up-to-date and model the best practices within their discipline. Faculty practice is an important component of the university’s scholarship requirement for tenure and promotion. The opportunity to practice within the University setting allows the faculty practitioner to better enhance learning experiences of students and further integrate theory and practice.

Faculty practice opportunities within the Institute also provide occasions for interprofessional collaboration among faculty from various disciplines. Interprofessional collaboration between faculty members can further enhance clinical goals in the areas of training, service, and research and support the faculty practitioner in their role as a life-long learner. This approach to faculty practice provides a positive model for students while ensuring clinical expertise in service delivery for clients.

C. Research:

The third essential pillar of this model acknowledges the importance of research in clinical practice. As trends in health care require evidence based treatment approaches and outcomes, an integrative model of faculty practice and student training also helps to facilitate the integration of practice and research. A practitioner/scholar approach to clinical work places the practitioner in a position to pose research questions relevant to current best practices in the field. The model of integrated student education and training with faculty practice emphasizes the practitioner/scholar approach to clinical practice and training and provides an example of the practitioner as a life-long learner and researcher. This approach to practice and research recognizes that the practitioner has a responsibility to participate in research to help evaluate program effectiveness and evidence based practice.

III. Training/Practice opportunities within the Institute:

A wide range of training and service delivery options are available through the Institute. Faculty may be involved in clinical practice through numerous clinical activities. These opportunities exist for the purpose of supporting an integrated model of student education and faculty practice.

♦ Case Study and Clinical Formulation – Cases from the faculty/practitioner may be used to demonstrate actual clinical practice to assist in meeting training objectives.
♦ Direct Observation – Students have opportunity to observe live service delivery by faculty member.
♦ Video Observation-Videotapes (with proper client consent) of faculty practitioner or student interactions and interventions may be used for educational purposes.
♦ Observation of particular techniques and procedures (recorded as part of training library developed for the Training clinics)
♦ Student/faculty practice – Students work directly with faculty practitioner in the delivery of services.
♦ Student practice – Students work directly in clinical practice under the direct supervision of faculty member.
♦ Faculty practice – provides various opportunities for the faculty practitioner to provide clinical services to keep skills current and meet licensure requirements. Faculty/practitioner may use a variety of approaches to enhance roles in teaching and training.

IV. Administrative Structure and Operational Guidelines:

The three primary pillars of the Integrated Model for Student Education and Faculty Practice are designed to support the overall mission of James Madison University. Therefore, individual academic departments and programs work closely with the IIHHS Clinics to identify practice opportunities for faculty that clearly support training goals and objectives relevant to each academic department or program. Under the general guidelines established and monitored by the IIHHS, each academic department or program will be responsible for negotiating all aspects related to faculty participation in clinical practice and responsibilities of their teaching/service requirements.
A. Ethics and ethical oversight

Each individual clinician shall practice within the ethical boundaries of their individual discipline as determined by professional organizations, state licensure regulations, and James Madison University. Each participating clinician shall express their intent to practice within these ethical guidelines and sign an agreement with the IIHHS. The IIHHS and James Madison University reserves the right to terminate an agreement between the IIHHS and an individual clinician if it is determined that a serious ethical violation (as determined by the Practice Ethics Panel) has occurred. It is recognized that some administrative oversight will be needed to ensure compliance around practice issues. Therefore the IIHHS will work with individual faculty members and academic departments to ensure compliance around issues of liability and risk management and ethics.

B. Liability Issues:

**Liability and Risk Management:** All faculty/practitioners engaging in clinical practice through IIHHS that are clearly linked to student education (see Teaching/Practice Opportunities) will be covered under the university liability plan. In addition to the university policy faculty practitioners are encouraged to secure their own individual professional liability insurance in accord with the limits set forth by the State Board of Health Professions and licensing governing bodies. Each faculty practitioner may discuss the need for additional liability insurance with their department head as relevant to their duties and parameters of their individual discipline.

**Licensure status:** All clinicians of the Institute will be required to maintain an active license with the State Board of Health Professions. A copy of each individual license will be kept on file at the Institute. Additionally, a current copy of each clinician’s license will be posted at the in the Institute offices where it can be viewed by the clients of the Institute.

**Records:** Each Institute clinician will be required to maintain necessary records in accord with licensure regulations and ethical guidelines set forth in HIPPA. The Institute will provide secure file storage for all clinicians. Additionally, individual clinicians will be provided access to a secure electronic file storage protected by individual passwords. Information necessary to conduct billing related practices shall be kept in a secure area to be accessed only by individuals involved in billing practices. Individual clinicians will NOT have access to the records of other clinicians and all regulations relevant under HIPPA shall be strictly enforced. The Ethics Panel will review all questions regarding use of patient information.

**HIPPA:** Each clinician in the Institute shall be responsible to practice within the guidelines as set forth by HIPPA. Additionally, the Institute Clinical Services Committee will determine policy common to all practice areas and develop general guidelines to be employed in compliance with HIPPA. This policy will be put in written format and available for distribution to all clients of the Institute. The Ethics panel will review violations of HIPPA compliance and appropriate recommendations shall be communicated to individual clinicians. The Institute will identify and train a Security Officer to oversee all issues related to HIPPA.

C. Revenue and Costs:

**Costs:** A portion of monies generated through the practice for each individual faculty member will be paid to the Institute Clinics and James Madison University to cover the costs associated with the faculty practice. This amount will be negotiated between the individual faculty member, their relevant academic unit or program, and the Institute clinics. The monies paid to the institute and the University will cover items related to infrastructure, billing, supplies, clerical support, etc. Individual costs of practice may vary according to use of clinic supplies and services used by individual faculty clinicians. All other monies generated through the faculty practice will be paid directly to individual departments to be distributed according to individual agreements negotiated between each faculty member and the academic unit or program.
Costs related to infrastructure, billing and clerical support: The following is a listing of potential infrastructure and clerical and billing support that can be provided by the Institute Clinics.

- Office space (desk, computer, telephone)
- Clinic rooms
- Telephone
- Client waiting areas
- Stationary, envelopes, and postage
- Advertising (included in Institute advertising)
- Mail Box
- Access to secure computer
- DVD Recording capabilities
- Access to locked and secure file storage
- Clinical supplies (medical equipment, therapy supplies, etc)
- Access to copy and fax machines
- Limited clerical support
- Billing support (preauthorization’s, billing, follow-up, aging accounts etc)
- Reception greeting and management of client flow (including evening hour support)
- Telephone messaging
- Basic office supplies (copy paper, pens, note pads, printer supplies, file folders etc)
- Testing Kits, protocols, computer administered and scored tests will be negotiated separately based on projected usage.
- Forms common to all clinics (parking letters, maps, application forms, etc)

Revenue: Monies remaining after IIHHS costs that are generated through faculty practice will be paid directly to individual departments to be disbursed in accord with the agreement negotiated between the individual faculty member and the department. The Institute clinics will make payments to individual academic departments as stipulated in agreements arranged between the IIHHS clinics and each academic department or program.

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