1. **Title**: Clinical and Organizational Rotations in Ethics (CORE). The acronym helps to focus on the core significance of the rotations in our degree programs. The clinical component is so interwoven with the organizational component in health care that the rotations focus upon the dynamic relationship between clinical, organizational, and professional ethics. There are four clinical ethics rotations, two junior rotations (HCE646 & HCE647), and two senior rotations (HCE681 & HCE682). The rotations have the HCE7xx number for the Catholic Program. Typically, senior rotations are for doctoral students.

2. **Rationale**. The CORE provides HCE degree students with an experience-based curriculum to learn in a supervised, step-by-step manner the scholarly knowledge and professional skills for providing ethics services in health care. Moreover, the curriculum focuses upon providing ethics leadership to integrate clinical, organizational, and professional ethics across the health care organization.

3. **Step-by-step approach**. Each rotation is designed to build on one another in a practical and supervised manner, each subsequent rotation requiring the previous rotations. Each rotation has distinct learning objectives. Significant time is dedicated to the student’s critical reflection to enhance the enterprise of experiential learning in a meaningful and personal manner. Each rotation seeks to engage the integration of the clinical and organizational components of contemporary health care delivery.

4. **Timespan**. Typically, each rotation extends for 15 weeks over a semester, lasting 150 hours, divided differently among the varying rotations.

5. **Personnel Oversight Structure of CORE**.
   - **Center Director**.
     - All oversight responsibility of the CORE Program.
   - **Faculty Clinical Supervisors** of HCE681 and HCE682.
     - With approval of the Center Director, any HCE Faculty can supervise.
     - The goal is to involve HCE Faculty in the CORE Program.
   - **Faculty Clinical Supervisor at UPMC/Mercy**.
     - Oversight responsibility for HCE646 and HCE647 which typically occur at UPMC/Mercy.
     - The Faculty Clinical Supervisor is the Course Instructor who is responsible and accountable for all aspects of the rotation courses at UPMC/Mercy.
   - **Clinical Fellow**.
     - The Clinical Fellow provides mentoring oversight for the rotations. This mentoring is always accountable to the relevant Faculty Supervisor.
     - To ensure appropriateness and to avoid any potential conflicts, the role of the Clinical Fellow will be assigned by the Faculty Supervisor and approved by the Center Director. The mentoring role will be delineated in writing.
The Clinical Fellow can advise on the student’s progress and comment on the student’s work (such as journals, readings, case reviews, projects) but cannot assign grades or be privy to any confidential information related to the student.

6. **Time Chart.** All rotation students will record their work using a time chart at the beginning of each journal submission.

7. **Rotation Components.** The supervised, experiential approach shares a series of components that are required in different proportions in each rotation.
   A. **Pedagogical Component & Assessment.**
      Each rotation requires a pedagogical component with assigned readings and seminars that will be assessed for learning outcomes. This component establishes the conceptual framework and terminology specific to the rotation’s goals. Typically, the reading component should build on knowledge provided in other HCE course work.

   B. **Rounds, Ethics Services.**
      Each rotation requires extensive mentored experience in Rounds and Service (such as attending Ethics Committee Meetings) reflecting the student’s seniority in the degree program, requiring the professional demeanor and commitment appropriate to the experience.

   C. **Journals, Readings, Meetings/Seminars.**
      Each rotation requires regular student journals, for review and revision if appropriate, ongoing readings (these may overlap with the texts selected in the pedagogical component), and group meetings/seminars. Together, these undertakings foster critical reflection on the various learning opportunities. This critical component enhances the experiential learning of the rotation.
      - **Weekly Journals.** Journals briefly summarize activities as referenced in the weekly time chart and offer critical reflection upon the identified activities, connecting with critical reflection on course readings.
      - **Weekly Readings.** Students are expected to provide a summary of the reading assigned and to integrate critical reflections on readings of the week or prior weeks into their weekly journals.
      - **Monthly UPMC Mercy Meetings.** Typically, for the 646 and 647 rotations, there are monthly meetings at UPMC Mercy and seminars at the Center for Healthcare Ethics.

   D. **Capstone Essay/Project.**
      - The rotation requires a Capstone Essay that provides a critical reflection on the practical experience. This critical component enhances the experiential learning of the rotation.
      - Rotations may require a Project to be integrated with the Capstone Essay. The Project will be assigned by the Faculty Supervisor to reflect the focus of the rotation. The Capstone Essay and the Project together should be a 25 page paper (double-spaced) to be submitted by the end of the rotation. The Project will be assigned after the Pedagogical Component at the beginning of the Rounds & Ethics Service
Component. Students must submit for approval a 1-page proposal for the Project. Examples of Projects include year-end-reviews and ethics bulletins.

E. **Student Assessment & Course Evaluation.**

- Every student is assessed individually by the assigned Faculty and every Course is evaluated by each student at the end of the rotation. Interim reviews may be conducted during the rotation by the Center Director. Any concerns or comments may be voiced at any time during the rotation to either the Faculty Supervisor or the Center Director.

F. **Grade Assignment.**

- **Course Instructor:** The Course Instructor assigns grades to students based on a matrix and timetable specific to each rotation. Grades for each component in the rotation are assigned at the end of every component so that the student can track grade progress. The Course Grade is submitted at the end of each academic semester. Grade challenges should be submitted first to the Faculty Supervisor who assigns the grade and thereafter to the Center Director.

- **Percentage of Grade for Rotation Components.** The grade percentages emphasize critical reflection and learning.

- **Senior and Junior Rotations.** Each rotation develops its own percentage distribution of the grade.

- **Grade Assessment.** Grades adopt the College Policy, as follows.
  - **Grades and Quality Point System of The McAnulty Graduate School:**
    - http://www.liberalarts.duq.edu/gradmanual/academic.html
    - A (4.0) Distinguished scholarly work
    - A- (3.7)
    - B+ (3.3)
    - B (3.0) Normal progress toward degree
    - B- (2.7)
    - C+ (2.3)
    - C (2.0) Warning. Student subject to departmental action
    - F (0.0) Failure. Course must be repeated.
      - Student subject to departmental action

    **Note:** The HCE Policy is that students with a C+ grade or lower in a CORE course may be required to repeat the course.

8. **Schedule Layout.** The rotation syllabus should present a weekly layout that assigns the rotation components to specific timelines. If a specific student requires extended timelines, such as for Rounds, the arrangement as agreed by the Faculty Supervisor should be recorded in writing.

9. **Learning Objectives of Each Rotation.** These Learning Objectives are connected with the *Alignment of the ASBH HCE-C Program with HCE’s Clinical Ethics Rotations* (June 2020) – referred to as the *Alignment Document.*
• **HCE646.**
  Focus: Introduction to the Clinical Environment and Ethics Committees.
  Level of Supervision: Close Supervision.
  
  o **Understanding.** Learn clinical vocabulary and concepts.
    - Learn secular vocabulary and concepts to engage the clinical environment.
    - Learn the Catholic approach in the *Ethical and Religious Directives*.
    - See, the *Alignment Document* (above).
  o **Experience.** Observation.
    - Observe the clinical environment and related organizational, clinical, and professional issues that typically are addressed by ethics committees.
  o **Reflection.** The Clinical Environment and Ethics Committees.
    - Critical reflection on the clinical environment and its related ethical issues as typically addressed by ethics committees.
    - Critical reflection on the professional etiquette and ethos evidenced in the clinical environment.
    - Critical reflection via journals, readings, seminars, and a capstone essay.

• **HCE647.**
  Focus: Ethics Committees: consultation, education, policy.
  Level of Supervision: Some independence to interact with health professionals.
  
  o **Understanding.** Learn ASBH *Core Competencies*.
    - Nature and Goals of ethics consultation.
    - Core competencies for ethics consultation: rationale, knowledge, process, character. See, *Core Competencies*.
    - See, the *Alignment Document* (above).
  o **Experience.** Participation in Case Consultations, Professional Education, Policy Review & Development.
    - Participate in prospective and retrospective Case Consultations.
    - Engage the integration of clinical, organizational, and professional issues that ethics committees encounter.
  o **Reflection.** Consultations, Education, Policy.
    - Critical reflection on Consultations, Education, Policy opportunities.
    - Critical reflection via journals, readings, seminars, and a capstone essay/project.

• **HCE681.**
  Focus: Provide Traditional Ethics Services (consultation, education, policy) in a facility.
  Level of Supervision: Function independently under general supervision.
  
  o **Understanding.** Refine Ethics Consultation Competencies.
    - Deeper understanding of Knowledge, Process Skills, and Responsibilities.
    - See, the *Alignment Document* (above).
  o **Experience.**
- Function as Ethics Expert in health care facility.
- Engage typical ethics services: Case Consultation, Professional Education, Policy Review & Development.
  - **Reflection.**
    - Critical reflection on the Ethics Services provided.
    - Critical reflection via journals, readings, seminars, and a capstone essay/project.

HCE682.
**Focus:** Understand Integrated Ethics Services in a facility focusing on this approach.
**Level of Supervision:** Function independently under general supervision.

- **Understanding.** Learn Integrated Ethics Competencies.
  - Learn *Integrated Ethics* approach of the Veterans Health Administration.
  - See, the *Alignment Document* (above).
- **Experience.**
  - Function as Ethics Expert in health care facility.
  - Provide traditional ethics services: Case Consultation, Professional Education, Policy Review & Development.
  - Develop ethics services via measurable outcomes & quality improvement to integrate ethics services across the organization.
- **Reflection.**
  - Critical reflection on the Ethics Services provided.
  - Critical reflection via journals, readings, seminars, and a capstone essay/project.