

MARSHALL UNIVERSITY SCHOOL OF MEDICINE

MARSHALL FAMILY MEDICINE RESIDENCY PROGRAM

LETTER OF AGREEMENT FOR THE COOPERATIVE TRAINING OF RESIDENTS/FELLOWS FROM MARSHALL UNIVERSITY JOAN C. EDWARDS SCHOOL OF MEDICINE (MUSOM) AND LINCOLN PRIMARY CARE CENTER (LPCC).

This letter of agreement is an educational statement that sets forth important points of agreement between Marshall University School of Medicine (MUSOM) and Lincoln Primary Care Center. This statement of educational purpose does not affect current contracts and institutional affiliation agreements between the two institutions.

This Letter of Agreement is effective from July 1, 2018, and will remain in effect for five (5) years, or until updated, changed, or terminated by MARSHALL FAMILY MEDICINE RESIDENCY and/or LINCOLN PRIMARY CARE CENTER. Such changes must be communicated with the MUSOM Office of Graduate Medical Education.

1. Persons Responsible for Education and Supervision

At MUSOM: Tammy Bannister, MD, Program Director
Marshall Family Medicine Residency

At LPCC: Greg Elkins, MD
Medical Director

The above mentioned people are responsible for the education and supervision of the residents/fellows while rotating at the Participating Site.

2. Responsibilities

The faculty at the Participating Site must provide appropriate supervision of residents/fellows in patient care activities and maintain a learning environment conducive to educating the residents/fellows in the ACGME competency areas. The faculty must evaluate resident performance in a timely manner during each rotation or similar educational assignment and document this evaluation at completion of the assignment.

3. Content and Duration of the Educational Experiences

The content of the educational experiences has been developed according to the ACGME Residency/Fellowship Program Requirements and are delineated in the attached goals and objectives for each rotation.

As program director, Dr. Bannister is ultimately responsible for the content and conduct of the educational activities at all sites, including Lincoln Primary Care Center. The program director, Participating Site director and the faculty are responsible for the day-to-day activities of the

residents/fellows to ensure that the outlined goals and objectives are met during the course of the educational experiences.

Rotations may be in two week blocks but generally are a month in duration.

Marshall Family Medicine Residency offers a Rural Track for selected residents as a mechanism for achieving an ultimate goal of the program, to train and retrain highly qualified family physicians in rural areas of the state of West Virginia. This training includes: maintain a continuity practice inclusive of obstetrics, home visit, and attain required and elective educational rotations in a rural setting.

Required Family Medicine Center Continuity Practice including continuity OB experience and continuity home visit patients. This experience must be two years including the PGY-2 and PGY-3 years and may be 2.5 years if a PGY-1 is accepted for the Rural Track. Required Pediatric Outpatient Rotation – one month duration. Required Adolescent Medicine Rotation – ½ month duration. Elective experiences as arranged with individual residents - each rotation one month duration.

The day-to-day supervision and oversight of resident/fellow activities will be determined by the specialty service where they are assigned. Vicky Blackshire, Residency Coordinator, is responsible for oversight of some residents/fellow activities, including coordination of evaluations, arrangement of conferences, sick leave, annual leave and benefits.

To maintain continuity, residents are required to attend clinic duties while on outside rotations. Residents are also required to attend mandatory lectures and events. Notifications are sent to outside rotations prior to the start of the rotation outlining these required responsibilities.

4. Assignments

MUSOM will provide Lincoln Primary Care Center the name of the resident/fellow assigned to the site, the service they will be training on and other relevant information. Residents/fellows will remain on MUSOM's payroll; remain eligible for all resident benefits, including annual leave, sick leave, and health insurance, etc. Residents will be covered under MUSOM's malpractice policy in the amount of one million dollars per occurrence. The policy also provides tail coverage and legal defense.

5. Responsibility for Supervision and Evaluation of Residents

Residents will be expected to behave as peers to the faculty, but be supervised in all their activities commensurate with the complexity of care being given and the resident's own abilities and level of training. Such activities include, but are not limited to the following:

- Patient care in clinics, inpatient wards and emergencies
- Conferences and lectures
- Interactions with administrative staff and nursing personnel
- Diagnostic and therapeutic procedures
- Intensive Care unit or Ward patient care

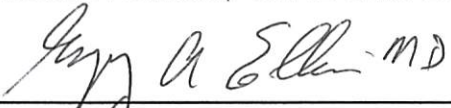
The evaluation form will be developed and administered by the Marshall Family Medicine Residency Program. Residents will be given the opportunity to evaluate the teaching faculty, clinical rotation and Participating Site at the conclusion of the assignment.

6. Policies and Procedures for Education

During assignments to Lincoln Primary Care Center, residents/fellows will be under the general direction of MUSOM's Graduate Medical Education Committee's and Marshall Family Medicine Residency Program's Policy and Procedure Manual as well as the policies and procedures of the Participating Site for patient confidentiality, patient safety, medical records, etc.

7. Authorized Signatures

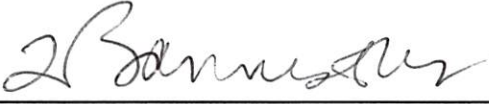
LINCOLN PRIMARY CARE CENTER



Greg Elkins, MD
Medical Director

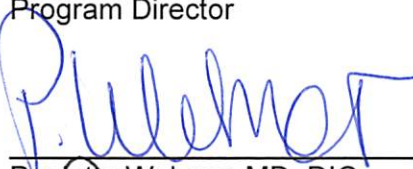
5/18/18
Date

MUSOM



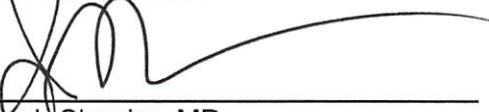
Tammy Bannister, MD
Program Director

5/3/18
Date



Paulette Wehner, MD, DIO
Vice Dean for GME

5/4/18
Date



Joseph Shapiro, MD
Dean

5/4/18
Date

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8/1/12

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