



**PROGRAM LETTER OF AGREEMENT PARTICIPATING SITES
(ACGME COMMON PROGRAM REQUIREMENTS 1.B.2)**

This letter will serve as a Program Letter of Agreement (PLA) between the sponsoring institution, **Charleston Area Medical Center ("CAMC")** and **Joan C. Edwards School of Medicine at Marshall University ("Participating Site")** for the training of residents/fellows in the Pediatric Residency program. This program is accredited by the Accreditation Council for Graduate Medical Education (ACGME) (and/or American Osteopathic Association (AOA)) and requires a participating site agreement which ensures the following provisions:

All residents/fellows in the Pediatric Residency program shall be assigned to the participating site for a period of one training month ("The Rotation"). This rotation is four weeks in duration with the exception of clinics, conferences, or vacation; exact schedules will be individualized with each resident.

During the rotation or training assignment at the Participating Site, the resident will report to and be supervised by **Patricia Kelly, MD** as the primary responsible faculty member as identified by the Program Director of the sponsoring institution. Other faculty appointed by the Program Director who may be involved have been designated below:

N/A

The general content of the educational experience includes: The resident will gain appreciation of logistical and medical issues in caring for the adolescent population. The assignment will include a one-month clinical rotation that includes patient care at outpatient and/or school-based clinics. The specific goals and objectives of the rotation are attached to this agreement.

Patricia Kelly, MD agrees to coordinate teaching and supervision of the residents during "The Rotation" with other participating faculty as listed above. Patricia Kelly, MD will be required to complete formal evaluations as may be required by the program. Such evaluation shall correspond to the achievement of the six core competencies or other requirements according to accreditation or program requirements.

Residents/Fellows shall be expected to evaluate the educational experience and supervising faculty as assigned to the Participating Site.

Residents/Fellows shall follow rules of governance and GME regulations of the sponsoring institution (CAMC) while at the participating site. The Program Director retains ultimate authority in the educational assignment of residents/fellows. Resident/fellow shall follow rules of governance and patient care policies and procedures while performing patient care services at participating site. Participating site shall have authority to limit or restrict patient care activities for assigned residents/fellows. Participating site shall have authority to prohibit or remove resident/fellow from assignment upon written notification to the Program Director. Ultimate responsibility for meeting educational requirements remains with the Program Director.

Participating Site shall ensure the following:

6. Each resident/fellow is engaged in provision of patient care services under the supervision of a physician duly licensed to practice in the State of West Virginia;
7. Guidelines established by the accreditation requirements shall be followed as applicable to "The Rotation" assignment as may be defined by the program director or the program requirements;
8. Compliance with applicable regulatory and legal requirements;
9. Appropriate levels of professional liability insurance are maintained;
10. Assignment of this Agreement or any duties of this Agreement are not assigned without consent of Charleston Area Medical Center, Inc. Such a request and other correspondence related to this agreement shall be directed to: Sharon A. Hall, 3200 MacCorkle Ave. S.E., Charleston, West Virginia 25304.

CAMC shall ensure the following:

3. CAMC shall incur the cost of salary, fringe benefits and applicable travel/lodging expenses for residents/fellows assigned to participating site;
4. Maintain professional liability insurance or self-insurance for each resident/fellow in connection with his/her program requirements, including participation in "The Rotation." Such professional liability insurance or self-insurance will not extend to activities performed by resident/fellow outside the scope of the assignment at the participating site.

Both parties agree and acknowledge that CAMC is incurring all or significantly all of the costs of the resident assignment at Participating Site.

This letter of agreement will be effective as of **September 1, 2022** and will continue in effect until terminated by either party upon thirty (30) days of advanced written notice to the other. This letter of agreement will be automatically terminated in the event either party is sanctioned by Medicare, Medicaid or any other governmental payer (including exclusion, suspension, debarment or other limitation).

We appreciate the graduate medical education opportunity you are providing to our residents. If you have any questions at any time, please do not hesitate to contact the Office of Graduate Medical Education at 304-388-9948.

For Charleston Area Medical Center:

For Joan C. Edwards School of Medicine at
Marshall University:

Sharon A. Hall 9/27/22
Sharon A. Hall Date
Its Agent

Patricia J. Kelly 9/7/2022
Patricia Kelly, MD Date
Program Site Director

John G. Frohna 9-2-22
John G. Frohna, MD, MPH Date
Pediatric Residency Program Director

P. Wehner 9/13/22
Paulette Wehner, MD Date
Administrative Authority

ADOLESCENT MEDICINE ROTATION

DEPARTMENT OF PEDIATRICS
CHARLESTON AREA MEDICAL CENTER - WVU-Charleston Division

DUTIES, GOALS AND OBJECTIVES

DESCRIPTION:

This is a one month required rotation of residency. There are no night calls or weekend duties specific to this rotation. Residents, however, should expect to have a few float calls on general pediatrics inpatient service.

DUTIES:

1. Residents will work with Dr. Luzier at the Eating Disorder Clinic at CAMC Memorial on Monday Afternoons. Clinic meeting starts at 12pm. Residents will also work with Dr. Luzier on the other available opportunities presented that deal with adolescents.
2. Residents will work with Dr. Talley and observe the Psychotherapy groups for adolescents as well as the other available opportunities presented that deal with adolescents.
3. Residents will work with Cabin Creek Health System to rotate through various school based clinics (ex. Herbert Hoover or Riverside School Systems).
4. Complete reading assignments as posted on the Resident Wikispaces website.

OVERALL OBJECTIVE:

The overall objective of this one month required rotation is to promote residents' experience in managing common adolescent problems with emphasis on adolescent growth and development, nutrition, reproductive health, gender identity, and behavioral problems.

GOALS AND OBJECTIVES:

A. Medical Knowledge

Goal 1

Residents are expected to demonstrate knowledge of established and evolving biomedical, clinical and social sciences, and the application of their knowledge to patient care. Residents will apply an open-minded, analytical approach to acquiring new knowledge, access and critically evaluate current medical information and scientific evidence and apply this knowledge to clinical problem-solving, clinical decision-making, and critical thinking.

Goal 2

Learn to recognize normal and abnormal growth and development in adolescent patients.

Goal 3

Learn to differentiate normal and abnormal pubertal growth and development and the accompanying physiologic and psychological changes.

Goal 4

Understand common adolescent health problems including chronic illnesses, sports-related issues and the effects of environmental violence.

Objectives:

The resident should be prepared to discuss the following topics in the adolescent patient:

- | | | |
|----------------------------------|--------------------|--------------------------|
| a. Abdominal pain | b. Acne | c. Contraceptive methods |
| d. Eating disorders and obesity | e. Headaches | f. Menstrual disorder |
| g. Sexually transmitted diseases | h. Sports injuries | i. Substance abuse |
| j. Violence/bullying | | |

B. Patient Care

Goal 1

Residents are expected to provide patient care that is compassionate, appropriate and effective of the promotion of health, prevention of illness, and the treatment of disease in the adolescent population.

Objectives

- a. Gather accurate, essential information from all sources, including medical interviews, physical examinations, medical records and diagnostic/therapeutic procedures. Learn how to conduct a confidential adolescent interview.
- b. Make informed recommendations about preventive, diagnostic and therapeutic options and interventions that are based on clinical judgment, scientific evidence, and patient preference.
- c. Develop, negotiate and implement effective patient management plans and integration of adolescent care.

C. Practice-Based Learning and Improvement

Goal 1

Use scientific evidence and methods to investigate, evaluate and improve patient care practices.

Objectives

- a. Identify areas for improvement and implement strategies to enhance knowledge, skills, attitudes and processes of care
- b. Analyze and evaluate practice experiences and implement strategies to continually improve the quality of patient practice
- c. Develop and maintain and willingness to learn from errors and use errors to improve the system or processes of care
- d. Use information technology or other available methodologies to access and manage information, support patient care decisions and enhance both patient and physician education.

D. Interpersonal and Communication Skills

Goal 1

Demonstrate interpersonal and communication skills that enable the resident to establish and maintain professional relationships with patients, families, and other members of the health care teams.

Objectives

- a. Learn to provide effective and professional consultation to other physicians and health care professionals and sustain therapeutic and ethically sound professional relationships with patients, their families and colleagues.
- b. Use active listening, nonverbal communication, effective questioning, and narrative skills to communicate with patients and families.
- c. Maintain comprehensive, timely, and legible medical records.
- d. Complete evaluations of the attending staff and rotation in a timely manner.
- e. Learn to give age-appropriate anticipatory guidance including discussions of health promotion and disease prevention.
- f. Develop an effective approach to help adolescents discuss issues relating to male and female reproductive health including sexuality, pregnancy, contraception and sexually-transmitted diseases.

E. Professionalism

Goal 1

Demonstrate behaviors that reflect a commitment to continuous professional development, ethical practice, an understanding and sensitivity to diversity and a responsible attitude towards their patients, their profession and society.

Objectives

- a. Demonstrate respect, compassion, integrity, and altruism in relationships with patients, families, and colleagues.
- b. Demonstrate sensitivity and responsiveness to the gender, age, culture, religion, sexual preference, socioeconomic status, beliefs, behavioral and disabilities of patients and professional colleagues.
- c. Adhere to principles of confidentiality, scientific/academic integrity, and informed consent.
- d. Enhance skills at interviewing adolescents with attention to confidentiality, consent and cultural background.

F. Systems-Based Practice

Goal 1

Demonstrate both an understanding of the contexts and systems in which health care is provided, and the ability to apply this knowledge to improve and optimize health care.

Objectives

- a. Understand, access and utilize the resources, providers and systems necessary to provide optimal care.
- b. Understand the limitations and opportunities inherent in various practice types and delivery systems, and develop strategies to optimize care for the individual patient.
- c. Apply evidence-based, cost-conscious strategies to prevention, diagnosis and disease management.
- d. Collaborate with other members of the health care team to assist patients in dealing effectively with complex systems and to improve systematic processes of care.
- e. Learn to recognize the signs and symptoms that lead to the early identification of risky behaviors and to gain familiarity with the appropriate interventions, including family and community resources.
- f. Understand access to and use of appropriate referral sources for psychosocial issues such as peer and family relations, depression, eating disorders, substance abuse, suicidal ideation and school performance for adolescent patients.