

Marshall University Joan C. Edwards School of Medicine
Statement of Institutional Commitment
To Graduate Medical Education

The Marshall University Joan C. Edwards School of Medicine (MUSOM) and the Marshall Health Board of Directors (dba University Physicians and Surgeons) are both fully committed to providing a scholarly environment that is dedicated to excellence in education, medical care and research. They further ensure graduate medical education (GME) that facilitates Resident/Fellows' professional, ethical and personal development. ***The School of Medicine specifically commits to provide GME with the necessary financial support for administrative, educational, and clinical resources, including human resources (personnel).***

Seen from the perspective of the School's state-mandated mission to focus on primary care and rural health, residency training at MUSOM is a logical and key component of an educational continuum. As a state-supported school, Marshall must be flexible and adaptable to the health care needs of West Virginians while maintaining its standing as a national leader in primary care and rural health. Its post-graduate training programs are thus consistent with this mission. The School of Medicine and the Marshall Health Board of Directors will provide appropriate clinical venues for Resident/Fellow education through agreements with approved patient care facilities to deliver effective educational experiences that lead to measurable achievement of educational outcomes. Through curricula, evaluation and supervision, the School and the Marshall Health Board will support safe and appropriate patient care.

An organized administrative system, led by the Designated Institutional Official (DIO) and in collaboration with the Graduate Medical Education Committee (GMEC), will have the authority and responsibility for the 1) Oversight and administration of all the Accreditation Council for Graduate Medical Education (ACGME) accredited programs, 2) Assurance of compliance with ACGME Common Specialty/subspecialty-specific Program, and Institutional Requirements, 3) Establishment and implementation of procedures to ensure that the DIO or authorized designee if DIO is absent, will review and cosign all program information forms and any documents or correspondence submitted to the ACGME by Program Directors, and, 4) Preparation and presentation of an Annual Report to the School of Medicine and Marshall Health Board of Directors and major participating sites to review the activities of the GMEC during the past year. The School also commits to providing the DIO with financial support, protected time, sufficient salary and personnel support and resources (e.g., time, space, technology, supplies) to allow for effective administration of the GME Office and all of its programs. The Senior Institutional Executive (SIE) will have the authority to approve and provide resources to support the GME Office and the Residency/Fellowship programs.

The School of Medicine will ensure sufficient institutional resources be provided for the effective implementation of its programs in compliance with the Institutional, Common, and specialty/subspecialty specific Program Requirements. The School and the Programs will ensure that Program Directors have sufficient financial support and protected time to effectively carry out educational and administrative responsibilities.

The Marshall University Joan C. Edwards School of Medicine will exercise its authority in fulfilling the responsibilities outlined in the ACGME institutional requirements to establish and implement policies and procedures regarding the quality of education and the work environment for the residencies in all program. These policies and procedures will include:

1. **Stipends and position allocation:** Annually review and make recommendations on Resident/Fellow stipends and benefits.

2. **Communication with Program Directors:** Provide oversight of, and liaison with, Program Directors; and ensure Program Directors maintain effective communication mechanisms with site directors at each participating site for their respective programs.
3. **Resident/Fellow Duty Hours:** Regularly monitor duty hours to ensure compliance with the institutional, common, and specialty/subspecialty specific program requirements; and consider for approval request from Program Directors prior to RRC for exceptions in the weekly limit of duty hours.
4. **Resident/Fellow Supervision:** Monitor programs' supervision of Residents/Fellows and ensure that supervision is consistent with provision of safe and effective patient care; education and needs of Residents/Fellows; progressive responsibility appropriate to Residents'/Fellows' level of education, competence and experience; and other applicable common and specialty/subspecialty program requirements.
5. **Communication with Medical Staff:** Maintain communication between leadership of the medical staff regarding the safety and quality of patient care.
6. **Curriculum and evaluation:** Assurance that each program provides a curriculum and an evaluation system that enables Resident/Fellows to demonstrate achievement of the six general competencies.
7. **Resident/Fellow Status:** Selection, evaluation, promotion, transfer, discipline, and/or dismissal of Residents/Fellows in compliance with the institutional and common program requirements.
8. **Oversight of program accreditation:** Review accreditation letters and monitoring action plans for correction of citations and areas of noncompliance.
9. **Management of institutional accreditation:** Review the institution's Letter of Report from the Institutional Review Committee of ACGME including the development and monitoring of action plans.
10. **Oversight of program changes:** Maintain oversight of program changes with approval prior to submission to the ACGME by Program Directors.
11. **Experimentation and innovation:** Provide oversight of all phases of educational experiments and innovations that may deviate from institutional, common, and specialty/subspecialty-specific program requirements.
12. **Oversight of reductions and closures:** Provide oversight of all processes related to reductions/ and or closures of individual programs, major participating sites, and the sponsoring institution.
13. **Vendor interactions:** Ensure appropriate interactions between vendor representatives/ corporations and Residents/Fellows/GME programs.
14. **Internal reviews:** Conduct internal reviews in accordance with the standards set forth by the institutional standards set forth by the institutional common, specialty and subspecialty program requirements.
15. **Fatigue and impairment:** Provide education on Resident/Fellow fatigue and impairment.

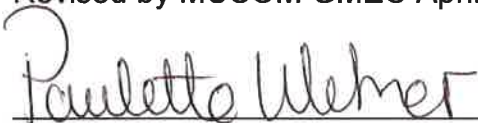
16. Resident/Fellows as educators: Provide development of Resident/Fellow physician teaching skills through institutional curriculums.

The School of Medicine and the Marshall Health Board hereby commit ourselves to offer graduate medical education programs in which physicians in learning develop personal, clinical and professional competence under the guidance and supervision of the faculty and staff outstanding in their respective fields and who are committed to teaching. The programs ensure safe, appropriate and humane care of patients and the progression of Resident/Fellow physician responsibilities consistent with each learner's demonstrated clinical experience, knowledge and skill. As part of a comprehensive university we engage in scholarly activity including research and will make available to Resident/Fellow opportunities to participate in the scholarship of our medical community.

The Institution and its leadership are committed to provide the necessary educational, financial and human resources to support and maintain excellence in graduate medical education. We will make available to our Residents/Fellows ready access to communication resources and technological support as well as access to specialty/subspecialty-specific and other appropriate reference material in print or electronic format and electronic medical literature search capacity databases.

Effective July 1, 2013

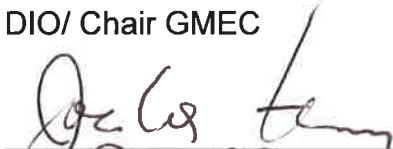
Adopted by MUSOM- November 2, 1999
Revised March 2005- Revised March 2011
Revised by MUSOM GMEC April 16, 2013



Paulette S. Wehner, MD
Sr. Associate Dean for GME
DIO/ Chair GMEC

6/19/13

DATE



Reviewed, Adopted by Marshall Health Board of Directors

7/17/13

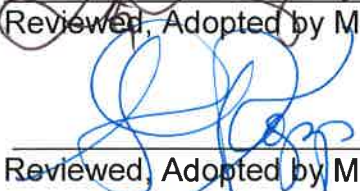
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Reviewed, Adopted by MUSOM Dean/SIE

7-17-13

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Reviewed, Adopted by MU Board of Governors

9/13/13

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