

MARSHALL COMMUNITY HEALTH CONSORTIUM RURAL TRAINING TRACK SURGERY RESIDENCY PROGRAM

LETTER OF AGREEMENT FOR THE COOPERATIVE TRAINING OF RESIDENTS FROM MARSHALL COMMUNITY HEALTH CONSORTIUM (MCHC) AND CABELL HUNTINGTON HOSPITAL(CHH) (Participating Site) WHICH IS PART OF THE MOUNTAIN HEALTH NETWORK.

This letter of agreement is an educational and sustainability statement that sets forth important points of agreement between Marshall Community Health Consortium (MCHC) and Cabell Huntington Hospital, its affiliates and preferred provider sites. This statement of educational purpose does not affect current contracts, other Program Letters of Agreements (PLAs) and institutional affiliation agreements between Marshall University School of Medicine and Cabell Huntington Hospital.

This Letter of Agreement is effective from June 1, 2022, and will remain in effect for ten years (10) years, or until updated, changed, or terminated as set forth by either of the parties. All such changes must be communicated with the MUSOM Office of Graduate Medical Education.

1. Persons Responsible for Education and Supervision

At MCHC: Paulette S. Wehner, MD, Vice Dean, GME

At Cabell Huntington Hospital: Semeret Munie, M.D., Site Director MD, and current MCHC and/or Marshall University Joan C. Edwards School of Medicine faculty members:

The above mentioned people are responsible for the education and supervision of the residents while rotating at the Participating Site and may change due to resignation or the addition of new faculty members.

2. Responsibilities

The faculty at the Participating Site must provide appropriate supervision of residents in patient care activities and maintain a learning environment conducive to educating the residents 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 ACGME Residency Program Requirements and are delineated in goals and objectives for each rotation. As program director, Dr. Amiri is ultimately responsible for the content and conduct of the educational activities at all sites, including Cabell Huntington Hospital. The program director, Participating Site Director, the Site

Coordinator, and the faculty are responsible for the day-to-day activities of the residents to ensure that the outlined goals and objectives are met during the course of the educational experiences.

The rural residency resident is required to spend a minimum of one-half (½) of their entire residency training program of 5 years in Logan. Due to the nature of the rural training residency program, rotations may be anywhere from two (2) week blocks – one (1) year in duration. The day-to-day supervision and oversight of resident activities will be determined by the specialty service where they are assigned. The MCHC Program Coordinator will work closely with the Site Coordinator to share responsibility for oversight of some resident activities, including coordination of evaluations, arrangements of conferences, sick leave, annual leave and benefits.

4. Assignments

MCHC will provide to CHH the name of the resident(s) assigned to the site, the service they will be training on and other relevant information. Residents will remain on MCHC's payroll; remain eligible for all resident benefits, including annual leave, sick leave, and health insurance, etc. Resident's will be covered under MCHC'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 MCHC Site Coordinator in conjunction with the Site Coordinator. 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 CHH assignments, residents will be under the general direction of MCHC's Graduate Medical Education Committee and the Surgery Residency Program's Policy and Procedure Manual as well as the policies and procedures

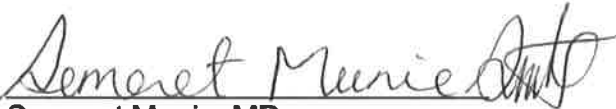
of the Participating Site for patient confidentiality, patient safety, medical records, etc.

7. Program Sustainability

In recognition of the need for rural surgeons, the Marshall Community Health Consortium and its founding members, the Marshall Department of Surgery and Logan Regional Medical Center agree to work together to support the long-term financial sustainability for the new rural surgery residency program beyond the RRPD period of performance. Funding sources must go beyond clinical revenues to financially sustain the program.

8. Authorized Signatures

CABELL HUNTINGTON HOSPITAL/MOUNTAIN HEALTH NETWORK



Semeret Munie, MD
Surgery Site Director

11/10/21

Date

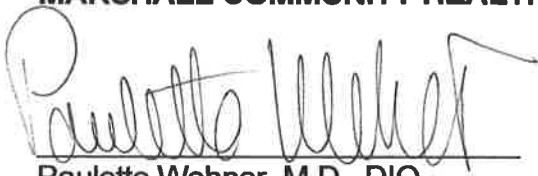


Hoyt Burdick, MD
Chief Medical Officer
Mountain Health Network

11/10/21

Date

MARSHALL COMMUNITY HEALTH CONSORTIUM



Paulette Wehner, M.D., DIO
Vice Dean for GME

11/10/21

Date