

## GRADUATE MEDICAL EDUCATION TRAINING AGREEMENT

**THIS AGREEMENT** is made and entered into by and between **“PROVIDENCE HEALTH & SERVICES – OREGON**, an Oregon charitable nonprofit corporation doing business as «Hospital», Oregon, hereinafter referred to as **“HOSPITAL”**, and «First\_Name» «Last\_Name» referred to as **“RESIDENT”**.

### RECITALS

Hospital desires to provide clinical and educational opportunities for Resident in accordance with Accreditation Council for Graduate Medical Education (ACGME) Program Requirements and American Board of Medical Specialties Requirements for «Medicine». Resident desires to take advantage of Hospital’s facilities for clinical training in a residency program.

NOW, THEREFORE, Hospital and Resident agrees as follows:

1. **Resident’s Responsibilities.** Appointment is contingent on acceptable health and drug screen, background check and verification of credentials. Resident shall provide documentation of successfully obtaining Doctor of Medicine (M.D.) or Doctor of Osteopathic Medicine (D.O.) degree or equivalent international credentials. Resident shall provide services at Providence facilities in a manner that is consistent with the Providence Health & Services- Oregon Mission and Core Values, Providence St. Joseph’s Health Code of Conduct, and the Roman Catholic moral tradition as articulated in such documents as the Ethical and Religious Directives for Catholic Health Care Services.

While performing or carrying out any aspects of the Residency Program at Hospital, under this Agreement, Resident agrees.

A. To perform the duties of resident physician in a «Medicine» training program in accordance with established educational and clinical practices, policies and procedures in all sites to which Resident is assigned, as outlined in the job description, which is included as Appendix A of this Contract, the Essential Job Functions for Residents, which is included as Appendix B and the training program’s Residency Policy Manual.

B. To follow PSJH system, PH&S Oregon, Hospital, Medical Staff, and PH&S Oregon Graduate Medical Education Committee (GMEC) policies applicable to residents). If Hospital policies are inconsistent with GMEC policies, the GMEC policies shall prevail. Providence will make such policies available to residents in written or digital format and it is the responsibility of the Resident to be aware of policy content.

C. To comply with ACGME duty hours restrictions and program-specific policies concerning duty hours as provided by the program, and to accurately and truthfully document hours on duty.

D. To obtain and keep current a license (training license or unrestricted license) to practice medicine in the State of Oregon. A current license is required to begin and continue in training. Failure to keep a current license may result in a leave of absence, suspension, non-renewal, or dismissal.

E. Employment outside the Residency Training program (moonlighting) may occur in the PGY 2 and PGY 3 years only, must be approved in writing by the Program Director before Resident commits to any moonlighting duties, and must be counted toward the ACGME 80-hour maximum weekly hour limit. Declining performance in the training program in the judgment of the program director may result in curtailment of moonlighting.

F. Responsibilities upon Graduation, Resignation, Termination, Non-Renewal or Dismissal from Training Program. Resident shall be responsible for:

- (a) Returning all Hospital Property such as books, equipment, pagers, tablet, etc.
- (b) Completing all outstanding medical records.
- (c) Settling all remaining professional and financial obligations.

2. **Duration of Appointment:** This agreement shall be for one academic year, beginning «Begin\_Date» and ending «End\_Date» unless terminated sooner pursuant to paragraph 5 below. PGY 1 residents will receive an extended contract that includes orientation to the program. Orientation time does not count toward educational time required to complete the program.

3. **Financial Support for Residents:** Hospital will provide Resident a salary and housing stipend during the term of this agreement. The salary will be \$62,437 annually and the housing stipend shall be \$2,250 annually. Both salary and housing stipend shall be payable in bi-weekly installments. The Hospital will provide Resident with a Wellness stipend of \$500 payable in the first check of the contract

year. All compensation in this paragraph will be subject to withholding for income taxes, Social Security, and other legally required deductions.

4. **Conditions for Reappointment and Promotion:** Hospital will provide residents with conditions for reappointment. This generally includes satisfactory performance in ACGME milestones, appropriate progress in meeting specialty board requirements, satisfactory performance on clinical rotations, and a final global assessment of satisfactory performance as determined by the program's clinical competency committee and program director at the current PGY level. The Resident must also demonstrate the potential to perform at the next PGY level or as a program graduate, as appropriate. In addition to meeting promotional criteria as described in Appendix D, residents must achieve a passing score on USMLE II or COMLEX II to advance to the PGY 2 year. Residents must have a scheduled a date to take USMLE III or COMLEX III by the mid-point of the PGY-2 year and must pass the exam to advance to the PGY-3 year.

5. **Grievance and Due Process**

(a) Grievances: The Hospital delegates to the Sponsoring Institution's GMEC the construct and oversight of a grievance policy. Residents are entitled to address grievances related to the clinical learning environment, compliance with ACGME accreditation requirements, sexual misconduct, harassment, and unprofessional conduct of others through the prevailing GMEC Grievance Policy or through PSJH system processes, as appropriate. Providence will make such policies available to residents in written or digital format.

(b) Due Process: The Hospital delegates to the Sponsoring Institution's GMEC the construct and oversight of a due process policy. Residents are entitled to due process under the prevailing GMEC Due Process Policy relating to the following actions: probation, suspension, non-renewal of contract, non-promotion or termination/dismissal for academic performance reasons as determined by the Program Director. Providence will make such policies available to residents in written or digital format.

6. **Termination/Dismissal without Due Process:** Hospital may, in its discretion, terminate this Agreement immediately and without applying the GMEC Due Process Policy which governs termination actions relating to academic performance, upon the occurrence of any of the following events.

(a) Resident fails to immediately notify Providence of the initiation, occurrence, or existence of certain events, defined as:

(1) Any malpractice claims, or lawsuits filed against Physician.

(2) Suspension, revocation, termination, restriction, or expiration of Physician's federal DEA number or license to practice medicine in the state of Oregon

(3) The initiation of a disciplinary proceeding or inquiry before the Oregon Medical Board or a similar body.

(4) Any investigation, sanction, or similar action by a peer review organization.

(5) Any auditor's or similar proceeding by any federal, state, or local agency dealing with payment for medical services or any commercial or government payor.

(6) Any criminal investigation, including but not limited to any arrest, criminal charge, or indictment of Physician.

(7) Any adverse action with respect to, or impairment of, the Physician which may negatively affect the status of Physician's license, permits, or privileges; or

(b) Resident has engaged in personal conduct of such a serious nature that his or her continued practice on behalf of Hospital is unacceptable to Hospital provided that personal conduct expressly protected by applicable employment law will not provide a basis for such termination. This conduct includes, but is not limited to sexual or other harassment, discrimination, or other conduct harmful to the workplace environment.

(c) Resident is charged with either (1) any offense punishable as a felony, or (2) any offense punishable as a gross misdemeanor that also tends to injure the reputation of Providence as reasonably determined by Providence in its sole discretion.

(d) Resident is unable to perform the essential functions of his or her job as reasonably determined by Providence, Physician does not qualify for leave under Providence benefit policies, and Providence is unable to provide reasonable accommodations if required by state or federal law.

(e) Resident is abusing or misusing drugs (either illegal drugs or prescription drugs in a manner other than as prescribed) or is impaired by drugs or intoxicants in the workplace.

(f) Failure of compliance with a fitness for duty exam.

(g) Providence Oregon requires compliance with federal and state COVID-19 vaccination requirements or submission and approval of a medical or religious exemption. Currently, full vaccination is achieved two weeks after the second dose of Pfizer or Moderna vaccines, or two weeks after the single-dose Johnson & Johnson vaccine. Unvaccinated prospective and contracted residents and fellows must provide proof acceptable to Providence of a medical exemption or religious exemption on forms approved and published by the Oregon Health Authority. If a request for exemption is denied, or if incomplete information is provided, prospective residents and fellows will not be granted a contract and an existing resident or fellow's contract will be administratively terminated based on their ineligibility to practice in a healthcare facility in Oregon.

7. **Professional Liability Insurance:** Hospital will provide Residents with professional liability insurance while acting within the scope of their residency employment. Coverage is provided under the Providence Health & Services-Oregon self-insurance trust. Coverage provided by the trust will not be less than \$3,000,000 each event, \$5,000,000 in aggregate. Only those clinical experiences considered as part of the training program will be covered for professional liability. This coverage applies for the duration of training and provides legal defense and protection against awards from claims reported or filed after the completion of graduate medical education. This coverage is consistent with the institution's coverage for other employed medical/professional practitioners. A summary of coverage is provided as Appendix E.

8. **Health Insurance Benefits for Residents and Eligible Dependents:** Hospital will provide Resident access to health insurance benefits for the Resident and their eligible dependents beginning the first day of employment.

9. **Disability Insurance for Residents:** Hospital will provide short- and long-term disability insurance to residents beginning the first day of employment.

10. **Vacation and Leaves of Absence for Residents:** Hospital will provide leave for residents compliant with applicable state and federal laws as follows:

1) **Vacation Leave and Sick Leave-** Hospital will Provide Resident with 25 days (200 hours) of Monday–Friday of Provider Time Away (PTA) over the duration of this contract. The PTA bank includes 20 days of time away from training for vacation and 5 days of sick time. The Program Director will manage how vacation time is scheduled and will publish appropriate policies and procedures on requesting vacation at the program level. Two consecutive weekend days may be taken for each 5-day block of Monday-Friday vacation time which the program will not schedule the Resident contingency call or weekend call duties. The weekend days will not result in a charge to the PTA bank. PTA will be loaded each year on July 1. Residents may roll over 40 hours (5 Monday-Friday days) from the prior contract year into the new year. Any unused PTA will not be paid out upon graduation, termination, non-renewal, non-promotion, or other actions that end employment with Providence.

2) **Benefits Associated with a New Child**

a) **Short Term Disability Leave** – The birth parent may take 6 weeks of short-term disability benefits at 100% pay postpartum after a one-week waiting period during which provider time a way may be used. Additional disability benefits may be available based on the medical situation. For example, 8 weeks of short-term disability benefits are typically authorized for birth by Caesarian section.

b) **Parental Leave** - Birth parent or non-birth parents may take parental leave, also known as baby-bonding leave, up to 6 weeks at 100% of pay for either parent. After birth parents take the short-term disability benefit, they are then eligible for the additional parental/baby bonding leave.

3) **Additional Paid Family Leave** (One-time only)– FMLA eligible residents will have 6 weeks of paid leave to care for a family member allowing up to 3 occurrences of a minimum of one week.

4) **Special Circumstance Paid Time Away (One-time only)** – in the circumstance that a Resident exhausts their entire provider time away bank due to disability leave, parental leave, or family leave, an additional 40 hours will be loaded into their provider time away bank when the Resident returns to work to allow additional paid vacation between the time of return and the end of the academic year.

5) **Coordination with Oregon Paid Leave Benefit** – If a resident is eligible for and receives Oregon Paid Leave Benefits, Providence Oregon will coordinate with and supplement such Paid Leave Benefits to ensure that the resident receives 100% Short Term Disability Leave, Parental Leave, and/or Additional Paid Family Leave as described in the paragraphs above. Beginning September 3, 2023, residents working for Providence Oregon are required to apply for Oregon Paid Leave Benefits when requesting Short Term Disability Leave, Parental Leave and/or Additional Paid Family Leave.

11. **Timely Notice of Effect of Leave(s) of Absence on Program Completion:** The Hospital will provide timely notice of the effects of requested leave (s) and absences listed above on the ability of residents to satisfy requirements for program completion. Training may be extended to make up for absences based on the policies of accreditation bodies such as the ACGME or board eligibility/certification policies of the American Board of Medical Specialties (ABMS) and their subordinate specialty boards such as the American Board of Internal Medicine and American Board of Family Medicine. These organizations establish the maximum number of days that can be potentially missed without extending training. If a program's clinical competency committee and program director feel that a learner's academic progress requires additional training, the program director has the option of extending training to make up for the time missed regardless of the ABMS or ACGME requirements. Additionally, if the program director can extend training even if the ACGME or the ABMS board would allow the deficit of training to be forgiven, and the resident is performing well in their training program, based on service needs of the program.

## 12. **Other Resident Benefits**

1) Wellness Half-Days – Hospital will provide the Resident with three sessions of scheduled half-day time away from training for personal wellness appointments for preventive health care. Wellness days must be requested in advance and approved by the Program Director or their surrogate. A wellness half day does not require the use of PTA.

2) Interviews for Fellowship and Employment – Hospital may allow up to 5 days away total for post-residency employment and fellowship interviews that is subject to program director approval. An interview absence does not require the use of PTA.

3) Scholarly activity – Residents are granted up to 5 days per academic year as part of their training program to present scholarly activity at local, regional, and national conferences subject to program director approval. This is not considered a vacation or a leave of absence.

13. **Information Related to Eligibility for Specialty Board Examinations:** Hospital will provide timely notice of the effects of requested leave (s) and extensions of training on the ability of residents/fellows related to eligibility for specialty board examinations

14. **Institutional Policies and Procedures on Educational Work Hours and Moonlighting:** The Hospital is committed to following the duty hour limits published in the most recent ACGME program requirements. The Hospital has delegated oversight of monitoring and correcting any duty hour violations to the Sponsoring Institution's GMEC and training programs in accordance with the GMEC Duty Hours and Fatigue Policy. The Hospital has delegated oversight of Resident moonlighting to the Sponsoring Institution's GMEC and training programs in accordance with the GMEC Policy on Resident Moonlighting.

15. **Parking** - Hospital will provide free parking at the primary training site for the Resident

16. **Behavioral Health Services** - Hospital will provide residents with access to confidential counseling and behavioral health services.

17. **Accommodations for Disabilities** - Hospital will provide reasonable accommodation for employees for disabilities that would allow the Resident to perform the essential functions and duties of his/her job as described in Appendix B in accordance with HR policy.

18. **Food** - Hospital will provide access to appropriate food services when on duty. Residents are provided with a non-taxable food benefit of \$2,409 each academic year.

19. **Call Rooms** - Hospital will provide call rooms that are safe, quiet, and private for Residents when performing overnight call.
20. **Life Insurance** - Hospital will provide Resident with a life insurance policy in accordance with current HR guidance.
21. **Retirement** - Hospital will allow the Resident to participate in the current system 401(k) and 457 (b) retirement plan in effect at the time of hiring, as outlined in the Program Information section of the website located at <https://workplaceservices.fidelity.com/mybenefits/navstation/navigation>
22. **Resignation by Resident.** Resident may terminate this Agreement at any time with or without cause and without penalty or premium, by giving 90 days written notice to the Hospital. The Hospital may elect to allow the resident to terminate their employment contract prior to 90 days if approved by the Training Program Director.
23. **Federally Funded Health Care Programs.** Resident hereby represents and warrants that no event has occurred to cause present debarment, suspended, proposed for debarment, declared ineligible, or excluded from participation in any federally funded health care program, including Medicare and Medicaid. Resident hereby agrees to immediately notify Hospital of any threatened, proposed, or actual debarment, suspension, or exclusion from any federally funded health care program, including Medicare and Medicaid. If Resident is debarred, suspended, proposed for debarment, declared ineligible, or excluded from participation in any federally funded health care program during the term of this Agreement, or any time after the effective date of this Agreement it is determined that Resident is in breach of this Section, this Agreement shall, as the effective date of such action or breach, automatically terminate. Resident further understands that Hospital periodically checks contracted individuals and entities against the Office of Inspector General (OIG) and General Service Administration (GSA) databases of Excluded Individuals and Entities and will notify Resident if it discovers a match. Hospital will take reasonable measures to verify that the match is the same individual or entity before taking any action to terminate any underlying agreement(s).
24. **Access to Records.** During the term of this Agreement and for a period of four years after the Agreement's termination, Resident shall grant access to the following documents to the Secretary of US Department of Health and Human Services ("Secretary"), the US Comptroller General, and their authorized representatives, this Agreement, and all books, documents, and records necessary to verify the nature and cost of services.

**IN WITNESS WHEREOF**, Providence Health & Services – Oregon has caused this Agreement to be executed by «Hospital» and Resident has signed this Agreement, as of the date first hereinabove written.

I acknowledge that I am participating in an academic training program and that the evaluations of my work and progress in my training area are an integral part of the training program. I agree that information resulting from such evaluations may be furnished by my residency training program to organizations to which I may apply for training, employment, or privileges.

«Hospital»

Resident

\_\_\_\_\_  
 «Program\_Director»  
 Program Director  
 «Program\_Name»

\_\_\_\_\_  
 «First\_Name» «Last\_Name»  
 Resident

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Date

## Appendix A

### Job Description

<b>Process Level(s):</b>	522, 530	<b>Dept Number(s):</b>	82400, 82401
<b>Job Code:</b>	22015	<b>Dept Name:</b>	DEPARTMENT OF MEDICINE
<b>Position Title:</b>	Resident Physician	<b>Position Number:</b>	multiple
<b>Position Type:</b>	Staff	<b>FLSA:</b>	Exempt
<b>Date Developed:</b>	09/18	<b>Reports To:</b>	Program Director

### MISSION, CORE VALUES AND VISION:

#### **Mission:**

As people of Providence, we reveal God's love for all, especially the poor and vulnerable, through our compassionate service.

#### **Core Values:**

As a member of the Providence team, you will work in a mission-driven environment that encourages diversity and personal growth and fosters our core values of Respect, Compassion, Justice, Excellence, and Stewardship.

#### **Vision:**

As people of Providence, we will provide a *connected experience of care* built on a foundation of clinical excellence.

#### **General Summary:**

Acquires, through didactic instruction and supervised clinical experiences, the knowledge, and skills necessary to provide professional care with increasing responsibility to patients in the designated training program. Performs all duties in a manner which promotes teamwork and reflects the Sisters of Providence mission and philosophy.

#### **Key Relationships:**

Reports to the Program Director.  
No subordinate positions

### QUALIFICATIONS:

**The qualifications for the position are the minimum requirements needed to be successful in the position. The level of experience and expertise for the job is determined by the current amount of expertise in the unit/department. If training or experience is not required but would be desirable, it is listed as preferred however, persons without preferred background will be considered in the hiring process.**

#### **Education, Training & Experience (includes licenses or certifications):**

The Resident physician meets the qualifications for resident eligibility as outlined in the Graduate Medical Education Committee Policy on Eligibility and Selection.

Resident must be eligible for a training license to practice medicine by the Oregon Board of Medical Examiners.

#### **Knowledge, Skills & Abilities:**

Thorough working knowledge of the basic principles of practicing medicine.

#### **Special Equipment Utilized:**

Equipment commonly found in standard Hospital patient care nursing units and Providence Medical Group ambulatory clinics.

## STANDARDS OF PERFORMANCE:

Each of these are considered an essential function:

1. **Mission & Values:**  
Actively supports and incorporates the mission and core values into daily activities. Treats all others with respect and demonstrates excellence, justice and compassion in daily work and relationships with others.
2. **Service Commitment:**  
Demonstrates competency by placing a high priority on service to everyone encountered. Consistently shows the characteristic of service excellence.
3. **Team Member:**  
Demonstrates competency by maintaining positive, constructive interpersonal relationships, and by understanding and practicing the principles of effective teamwork.
4. **Confidentiality/Privacy:**  
Protects confidential/private information related to patients, members, employees, and others.
5. **Environment of Care/Infection Control/Safety:**  
Consistently demonstrates and incorporates principles of safety and infection control into daily activities as outlined in Environment of Care, Infection Control, and Exposure Control manuals and department safety policies/procedures. Consistently uses personal protective equipment as required and takes appropriate precautions whenever there is potential for contact with blood, body fluids, chemicals and/or other hazardous materials. Maintains knowledge of work-appropriate aspects of environment of care programs, complies with policies and reports unsafe conditions. Successfully completes Environment of Care Healthstream modules in the required timeframes and participates in fire drills and emergency exercises. May label, transport and store hazardous waste as described in annual training.
6. **Attendance and Punctuality:**  
Demonstrates performance by adhering to established policies and procedure and exhibiting the defined characteristics associated with attendance and punctuality.
7. **Respect for Diversity:**  
Demonstrates competency by knowing and applying the principles of an inclusive work environment.

**Age Related:** Yes

Consequently, the employee must be competent in the interpretation of a patient's self-report or behavior, and this information must be interpreted with an understanding of the cognitive, physical, emotional/psychosocial, and chronological maturation process. The treatment of patients should be individualized and should reflect an understanding of the developmental needs and range of treatment needs for each patient.

Neonate     Pediatric     Adolescent     Adult     Geriatric

### **Principal Duties and Functions (\* indicates essential functions):**

- \*1. Is aware of and complies with the goals and objectives of each educational experience of the residency program.
- \*2. Adheres to Department policies, procedures, schedules, and assignments as directed by the Program Director and designated program leadership.
- \*3. Adheres to system policies of the Providence St. Joseph Health, regional policies of Providence Health & Services Oregon, polices of the Medical Staff, and polices of the Graduate Medical Education Committee (GMEC)

- \*4. Complies with Accreditation Council for Graduate Medical Education regulatory guidance, including duty hours, and accurately and truthfully document duty hours and any areas of accreditation concern in accordance with program and GMEC policies.
- \*5. Provides medical care to patients at a level of autonomy and supervision that meets department expectations, ACGME requirements, and Institutional expectations. This includes but is not limited to the following:
  - a. Participating in safe, effective, compassionate, and high value patient care.
  - b. Developing an understanding of ethical and socioeconomic challenges of patient populations being served
  - c. Communicating with interdisciplinary care teams and patients to ensure patient centered care and optimal quality and safety.
  - d. Participating in program, regional, and system initiatives regarding patient safety, quality improvement and improved communications.
  - e. Participating in educational activities of the training program as designated by the Program Director or other program leadership.
  - f. Assuming responsibility for teaching and supervision of other residents and medical students, as appropriate to the level of training, designated by the Program Director and other program leadership.
- \*6. Participates in orientation and other required administrative training.
- \*7. Participates in Institutional committees and councils to which the Resident physician is appointed or invited.
- \*8. Participates in all Department education programs and activities as required by the Program Director or other program leadership.
- \*9. In addition to meeting program criteria for promotion, Resident must achieve a passing score on USMLE II or COMLEX II during the PGY-1 training year to advance to the PGY 2 training year. Resident must also schedule a date to take the USMLE III or COMLEX III exam by mid-year of the PGY 2 training year and must pass the exam to advance to the PGY 3 training year.
- \*10. Performs other duties as may be requested by the Program Director or other Program leadership.

**Major Challenges:**

1. Provide efficient, high quality patient care in both inpatient and outpatient settings.
2. Work well with all types of health care professionals
3. Empower patients to participate in their own care.
4. Assume increasing levels of competency and autonomy as measured by the specialty specific ACGME milestones and the opinion of the program director and Clinical Competency committee.



## Appendix B

### Essential Job Functions for Residents

The following list includes tasks that are representative of those required of a resident of «Medicine» at «Hospital». This list is not meant to be all inclusive nor does it constitute all job duties, academic performance measures, or graduation standards. Residents may request accommodations for short- or long-term disabilities in the workplace through human resources channels in accordance with federal and state law.

A resident, without the use of an intermediary, must be able to:

- Take a history and perform a physical examination
- Use sterile technique and universal precautions
- Perform cardiopulmonary resuscitation
- Move throughout the clinical site and hospitals to address routine and emergent patient care needs
- Communicate effectively with patients and staff in the English language, verbally and in writing, in a manner that exhibits good professional judgment and good listening skills and is appropriate for the professional setting
- Demonstrate timely, consistent, and reliable follow-up on patient care issues, such as laboratory results, patient phone calls, or other requests
- Input and retrieve computer data through a keyboard and read a computer screen
- Read charts and monitors
- Perform documentation procedures, such as chart note completion and other paperwork, in a timely fashion
- Manage multiple patient care duties at the same time
- Make judgments and decisions regarding complicated, undifferentiated disease presentations in a timely fashion in emergency, ambulatory, wards, ICU, and other hospital settings
- Demonstrate organizational skills required to eventually care for 8 or more outpatient cases per half day
- Take call for the practice or service, which requires inpatient admissions and work stretches of up to 24 hours.
- Present well-organized case presentations to other physicians or supervisors
- Participate in and satisfactorily complete all required rotations in the curriculum

## Appendix C

### Educational and Professional Funds

The Department of Medical Education provides each preliminary resident with an educational fund allowance of \$500/year and each family medicine resident and each categorical internal medicine resident \$3,500 for the duration of their training period for use toward approved educational and professional, resources and activities.

#### Approved educational and professional expenses

- Professional medical society membership dues, journal subscriptions, medical books, and board certification and licensure preparation material in written or digital format directly related to the resident training program
- Reimbursement for course registration and travel expenses booked through Providence Travel to/from medical conferences directly related to the training program for learning or for research presentations. To be eligible for reimbursement, a conference must be recognized as a legitimate medical education activity, generally recognized as providing AMA Category I CME credit.
- Courses on Executive skills courses/coaching, such as time management skills and organization skills and learning optimization coaching to improve time management and organizational skill. This must not be used to accommodate for a disability or to reimburse medical treatment.

#### Unapproved educational and professional expenses

- Computers, tablet computers, cellular telephones, data plans, and medical equipment such as, but not limited to, stethoscopes, otoscopes, ophthalmoscopes, blood pressure cuffs, and ultrasound probes that the resident retains as their personal property may not be purchased with this allowance.

#### Reimbursement guidelines

- When requesting reimbursement, submit proof of payment within 60 days. During the last 60 days of training, receipts for all purchased services and items must be submitted and approved for reimbursement before the last day of residency employment to avoid reimbursement denial.
- Residents cannot be reimbursed for conferences, examinations, and other educational events that will occur after they leave residency employment.

## Appendix D

### Promotion Criteria

The development of competency is an ongoing process in the growth of a physician. These promotion criteria are the minimal expectations for each resident to achieve for a given year of training in order to successfully progress through the program.

Each resident will meet twice yearly (December and June) with program leadership to review their progress in the 6 ACGME Competencies (Patient Care, Medical Knowledge, Practice Based Learning, Systems Based Practice, Professionalism and Interpersonal Skills and Communication) and in the 22 Milestones. This progress will have been assessed by the Clinical Competency Committee, and there are different expectations of proficiency at different points in training.

In general, by the end of the academic year PGY1's is expected to have a score of at least 2.5 on most Milestones, PGY2's is expected to have a score of 3 on most Milestones, and PGY3's is expected to have a score of 4 on most Milestones. Any critical deficiencies or progress that is significantly lower than expected will require an improvement plan, articulated in discussion with the Program Director or Associate Program Director. Please familiarize yourself with the Milestones.

It should be noted that we value professionalism highly. Unprofessional behavior (for example: disrespectful treatment of staff, colleagues, patients, and their families, sloppy or delayed completion of work, inattention to pages, not taking ownership of one's own education) will not be tolerated.

In addition to making successful progress toward the Competencies and Milestones, each resident is expected to:

1. Complete outpatient clinic notes within 24 hours
2. Respond to outpatient lab/imaging and patient calls within 48 hours. If unable, ask for help.
3. Keep outpatient problem list and medication list up to date
4. Complete admission notes the same day
5. Complete discharge summaries within 24 hours of discharge
6. Use consistent and agreed upon tools to transition patient care
7. Read your evaluations in New Innovations to assist in your continuous personal improvement
8. Be ACLS certified
9. Have a minimum attendance of 70% at educational conferences (except on days off and during specific rotations when attendance is exempt)
10. Take the ITE exam yearly (except with exemption from Program Director), and meet with the Associate Program Director to design a study plan for any score below the 40th percentile
11. Pass the USMLE III/Complex Level 3 exam prior to advancement to PGY3
12. Be current on all scholarly project responsibilities within the prescribed timelines including:
  - a. Quality Improvement Project (see QI Curriculum on Sharepoint for year specific expectations and timeline)
  - b. One abstract with poster submission to a regional or national conference or an abstract submission to a peer reviewed journal completed no later than March 1st of PGY3 year.
13. Be current on all professional responsibilities including but not limited to:
  - a. Clinical Documentation
  - b. Clinic Electronic Desktop
  - c. Health Streams Modules
  - d. ACGME and Residency Surveys
  - e. Required evaluations (peer, attending, medical student, etc.)
  - f. Duty Hours Documentation Log
  - g. Procedure Log (see Policy on Procedural Competence for details)
14. Make satisfactory progress in remediation of any deficiencies identified within the specified timeline

Failure to meet requirements by the defined deadlines will result in the following:

1. Verbal counseling by the program director or an associate program director
2. Reassignment to non-clinical administrative duties when tasks are over 14 days delinquent until necessary promotional and professional criteria are completed
  - Failure to complete the tasks may be included, at the discretion of the Clinical Competency Committee, in the resident's final ABIM evaluation as a professional deficiency.
  - Any prolonged assignment to non-clinical administrative duties to make up delinquent tasks may result in an extension of training if required ACGME, ABIM, or program clinical rotations are missed
3. Repeat violations or failure to remediate the original deficiency may result in a Clinical Competency Committee recommendation for a formal academic improvement plan and/or disciplinary action in accordance with the regional GMEC due process policy.



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/25/2021
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THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Willis (Bermuda) Ltd. Wellesley House, 2nd Floor 90 Pitts Bay Road Pembroke, HM08 BMU	<b>CONTACT NAME:</b> Willis Towers Watson Certificate Center <b>PHONE (A/C No. Ext):</b> 1-877-945-7378 <b>FAX (A/C No.):</b> 1-888-467-2378 <b>E-MAIL ADDRESS:</b> certificates@willis.com														
<b>INSURED</b> Providence St. Vincent Medical Center 2121 Santa Monica Blvd. Santa Monica, CA 90404-2091	<table border="1" style="width: 100%;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A: American Unity Group Limited</td> <td>C0929</td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: American Unity Group Limited	C0929	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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INSURER B:															
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

**COVERAGES**

CERTIFICATE NUMBER: W21032200

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			1-14601-00-21	06/01/2021	06/01/2022	EACH OCCURRENCE \$ 3,000,000			
	<input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$			
	GENL AGGREGATE LIMIT APPLIES PER:									PERSONAL & ADV INJURY \$
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJ.JECT <input type="checkbox"/> LOC									GENERAL AGGREGATE \$ 5,000,000
	OTHER:						PRODUCTS - COM/PO/AGG \$			
	<b>AUTOMOBILE LIABILITY</b>						COMBINED SINGLE LIMIT (Ea accident) \$			
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$			
	<input type="checkbox"/> OWNED AUTOS ONLY		<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident) \$			
	<input type="checkbox"/> HIRED AUTOS ONLY		<input type="checkbox"/> NON-OWNED AUTOS ONLY				PROPERTY DAMAGE (Per accident) \$			
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR						EACH OCCURRENCE \$			
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$			
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						\$			
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>						PER STATUTE    OTH-ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A				E.L. EACH ACCIDENT \$			
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$			
							E.L. DISEASE - POLICY LIMIT \$			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

If this Certificate of Insurance is for Professional and / or General Liability insurance this provides evidence of coverage for 1) employees while acting within the scope and during the course of their employment with Providence St. Joseph Health and /or 2) contracted parties for their acts, errors or omissions in rendering or failing to render Medical Services outlined by such contract with a Providence St. Joseph Health entity including the Insured identified on this certificate.

**CERTIFICATE HOLDER****CANCELLATION**

All Residents Attn: Kelley McCarty 9205 SW Barnes Rd. Ste 20 Beaverton, OR 97005	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p>
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ACORD 25 (2016/03)

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SR ID: 21135503

BATCH: 2106691