

The University of Texas MD Anderson Cancer Center Postgraduate Physician Assistant Fellowship Program in Oncology

January 2025

Handbook



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Introduction

The University of Texas MD Anderson Cancer Center is one of the world's leading comprehensive cancer centers and is in the Texas Medical Center, one of the largest business districts in the nation. A state-supported facility, MD Anderson has over 700 patient beds, over 40 operating rooms, and nearly 2,000 faculty. Guided by the mission of excellence in patient care, research, education and prevention, over 2 million patients have received treatment at MD Anderson Cancer Center since 1944.

The Office of Physician Assistant Programs offers other unique opportunities for PA trainees. The postgraduate program spans twelve months and is designed to prepare PAs for a career in adult medical, surgical or radiation oncology. The aim of the Postgraduate PA Fellowship in Oncology is to expand the basic, novice oncology knowledge and skills acquired during PA school training, so the PA fellow will be able to competently provide care in an area of subspecialty clinical oncology practice to the cancer patient

Institution Mission Statement

The mission of The University of Texas MD Anderson Cancer Center is to eliminate cancer in Texas, the nation, and the world through outstanding programs that integrate patient care, research and prevention, and through education for undergraduate and graduate students, trainees, professionals, employees and the public.

Program Mission Statement

The mission of the Postgraduate Physician Assistant Fellowship in Oncology program is to eliminate cancer in Texas, the nation and the world by training the next generation of outstanding physician assistants who will provide comprehensive care to cancer patients as part of effective interprofessional teams and who will be leaders in healthcare delivery, cancer prevention, education, clinical research and quality improvement.

ARC-PA Accreditation Status

The ARC-PA has granted **Accreditation-Clinical Postgraduate Program** status to the **MD Anderson Cancer Center Postgraduate Physician Assistant Fellowship in Oncology Program** sponsored by MD Anderson Cancer Center.

Program Administration

The MD Anderson staff is here to ensure your success throughout the program year. Individuals may be contacted by e-mail, cell phone or may be paged. Please check your e-mails daily for communications from the staff.

Jeffrey Lee, Chief Medical Executive ad interim, Professor, Surgical Oncology

Role: Executive Sponsor, PA Fellowship Pickens Tower, FCT20.5218, Tel: 713-792-7218

Pager: 713-404-3196, E-mail: jelee@mdanderson.org

Cristina Checka, MD, Associate Professor, Breast Surgical Oncology

Role: Medical Director, PA Fellowship

League City Campus, 2280 Gulf Fwy S, League City, TX 77573 Pager: 713-404-4804, E-mail: cmchecka@mdanderson.org

Katie Delucia, MPAS, PA-C, Director, Advanced Practice Providers

Role: Program Director, Physician Assistant Education

Mendelsohn Faculty Center, FC12.2050, Tel: 713-792-3501, Fax: 713-792-2304

Cell: 832-741-7760

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Michelle Castillo, MHA, Operations Manager, Advanced Practice

Role: Operations Manager, Office of PA Programs

Administrative Director, Physician Assistant Education Programs

Mendelsohn Faculty Center, FC12.2052, Tel: 713-792-8021, Fax: 713-792-2304

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E-mail: mecastillo@mdanderson.org

PA Fellowship Steering Committee Members

Cristina Checka, MD, Associate Professor, Breast Surgical Oncology

Role: Medical Director, PA Fellowship

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Ly Dsouza, MS, MPAS, PA-C

Lymphoma/Myeloma Research – Physician Assistant 1515 Holcombe Blvd., Unit 425, Tel: 713-745-8614

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Justin Folloder, MPAS, PA-C

GI Medical Oncology – Physician Assistant Pickens Tower, FCT17.5057, Tel: 713-745-5032

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Leah Theriot, MSPA, PA-C

Radiation Oncology Clinic – Physician Assistant Cyclotron, BB.4944a, Tel: 713-792-5163

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Jill Miller, MS, PA-C

Leukemia – Physician Assistant

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Pager: 713-606-3852, E-mail: jvershel@mdanderson.org

Steven Wei, MS, MPH, PA-C

Surgical Oncology – Supervisor, Advanced Practice Providers

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PA Fellowship Evaluation and Curriculum Committee

Chair: Katie DeLucia, MPAS, PA-C

Office of Physician Assistant Programs –Director

Medical Director: Cristina Checka, MD

Associate Professor, Breast Surgical Oncology

Administrative-Operational Support: Michelle Castillo, MHA

Office of PA Programs – Operations and Administrative Management

Administrative-Operational Support: Christine Larry-Hicks

Office of Physician Assistant Programs – Program Coordinator

Heather Ashford, PA-C

Orthopedic Oncology – Physician Assistant

Michelle Butaud, APRN

Breast Medical Oncology – Advanced Practice Registered Nurse

Justin Folloder, PA-C

GI Medical Oncology – Physician Assistant

Haleigh Mistry, PA-C

Lymphoma/Myeloma – Physician Assistant

Leah Theriot, PA-C

Radiation Oncology – Physician Assistant

Ly Dsouza, PA-C

Lymphoma/Myeloma Research – Physician Assistant

Executive Leadership

Todd Pickard, MMSc, PA-C

Office of Physician Assistant Programs – Executive Director

Cristina Checka, MD, Medical Director

Associate Professor, Breast Surgical Oncology

Jeffrey Lee, MD, Executive Sponsor

Chief Medical Executive, ad interim Professor, Surgical Oncology

Rotation Advisors – see rotation curriculum

Roles and Responsibilities

Katie DeLucia – Director – directs the educational and programmatic components of the PA Fellowship program.

Cristina Checka – Medical Director - supports the program director, provides programmatic and educational guidance for the program and provides strategic support.

Michelle Castillo – Operations Manager – oversees the administrative aspects and manages the programmatic operations components of the PA Fellowship program.

Advisors – Advanced Practice Providers (PAs and APRNs) who develop, organize and lead the clinical rotation experiences for the PA Fellow.

BREAST	
Butaud	Michelle
Perry	Allison
COMMUNITY ONCOLOGY	
Bridges	Christian
Hernandez	Erin

DIAGNOSTIC IMAGING	
Bui	Christopher
GI	Lucation
Folloder	Justin
Mitchell	Jocelyn
Lee	Sarah
GU	Canbia
Higareda Lim	Sophia Zita
GYN	Zita
Rucker	Erika
Unke	Jenna
HEAD & NECK	Jenna
Alpard	Jennifer
Theriot	Leah
Gallagher	Natalie
INFECTIOUS DISEASES	
White	Candice
LEUKEMIA	
Miller	Jill
Laubscher	Christian
LYMPHOMA	
Morrow	Wes
Siddiqui	Asiya
Murphy	Karmila
MELANOMA	
Mehta	Urvi
Carpenter	Rebecca
NEURO	
Mathai	Abey
PALLIATIVE CARE	
Tallie	Kimmie
Bansal	Anjuly
SARCOMA	
Phillips	Paula
STEM CELL TRANSPLANT	
Barnett	Melissa
Chu	Diem
THORACIC	
Myers	Sharon
Anderson	Sarah

<u>Clinical Mentors</u> – provide support and resource assistance to the PA Fellow during their training year.

Research:

Jason Smith, PA-C, Physician Assistant, Sarcoma Medial Oncology Selena Carmona, PA-C, Physician Assistant, Leukemia Courtney Bendig, PA-C, Physician Assistant, GI Medical Oncology

Clinical Teaching:

Elizabeth (Lisa) Sutherland, PA-C, Physician Assistant, GU Radiation Oncology Elsa (Melissa) Arvide, PA-C, Physician Assistant, Surgical Oncology Jenilette Cristo, PA-C, Physician Assistant, Surgical Oncology

Supplemental roles – provide supplemental learning and training:

Ly Dsouza, PA-C, Physician Assistant, Lymphoma/Myeloma Research – Clinical Research **Prachee Singh, PA-C**, Physician Assistant, Lymphoma/Myeloma – Quality and Performance Improvement

Simulation Trainers – coordinate the Simulation Center learning activities:

Heather Ashford, PA-C, Supervisor, MDA – UTMB RCC **Hunter Paddock, PA-C,** Physician Assistant, Plastic Surgery

Organizational Chart

Office of the Chief Medical Executive

Jeffrey Lee, MD Chief Medical Executive, ad interim Professor, Surgical Oncology

Cristina Checka, MD Medical Director, PA Education

Office of Physician Assistant Programs

Todd Pickard, MMSc, PA-C, Executive Director Katie DeLucia, MPAS, PA-C, Director Angie McIntosh, MS, PA-C, Director Michelle Castillo, Operations Manager Christine Larry-Hicks, Program Coordinator

Physician Assistant Fellowship

Narrative Description:

The Postgraduate PA Fellowship in Oncology Program is housed within the Office of PA Programs at MD Anderson.

The PA Fellows report to Katie DeLucia, Director, Advanced Practice

Katie DeLucia reports to the Executive Director of Advanced Practice, Todd Pickard.

Todd Pickard reports directly to Jeffrey Lee, MD, Chief Medical Executive, ad interim.

Dr. Cristina Checka reports to Dr. Lee in her role as Medical Director.

Dr. Cristina Checka and Katie DeLucia have a dyad partnership.

Admissions

Qualifications

- Applicants must be a student or graduate in good standing of an Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA) approved PA program.
- Must hold a baccalaureate degree from an accredited college or university. A master's degree is preferred.
- Must have passed or be eligible to take the National Commission on Certification of Physician Assistants Examination.
- Must obtain a Texas PA license prior to the program start date.

Technical Standards

PA fellows must be able to visualize patients as part of a physical examination. They should be able to speak, hear and write clearly enough to perform essential functions as a physician assistant. They must be able to perform motor functions that allow for examination of patients and performance of surgical and medical procedures. They must be able to use a telephone and computer keyboard.

Application Process

Applicants should visit the <u>Postgraduate Physician Assistant Program in Oncology</u> website and review the 'How to Apply' section. Applicants should review the curriculum, clinical rotations, benefits, expenses, eligibility, and how to <u>apply</u> via the program website. Applications are submitted through an online Qualtrics survey system.

As part of the online application, the following supporting documents must be submitted and completed by a set due date. These include:

- Curriculum Vitae
- Statement of Intent
- Unofficial Transcript of Highest Degree (PA School)
- Knowledge Assessment
- Reference Contact Information
 - O Applicants will be asked to provide (2) letters of recommendation. One reference will assess the applicant's clinical acumen. The second reference will assess the applicant's didactic capacity. If employed, one reference must be from a current supervising physician. New graduates must provide at least one reference from their program director or a clinical faculty member. Additionally, references will be asked to submit a reference form. Applicants will submit the letters and completed form via the Qualtrics application link promptly.

Interviews

Interview are held on a selected day. Applicants must attend interviews onsite or virtually to be considered for the program. Rare exceptions require steering committee approval. Interview day is at the expense of the applicant. In addition to interiews, the day will provide an opportunity to learn more about the program, meet program staff and instructional faculty.

Selection Process

Typically within 2 weeks of the interview date, selection is complete and program acceptance or denial letters are emailed. Once acceptance letters are completed and received, the Research Trainee Programs Office is notified to prepare an institutional acceptance letter. Official start dates are determined based on a mutually agreed upon date, considering graduation, NCCPA board exam and estimated time for issuance of state licensure. The typical program year extends from early April to late March.

Advanced Placement

Advanced placement for previous experience or education is not available.

Educational Appointment

Research Trainee Programs

Once an offer has been accepted by the PA fellow, the Research Trainee Programs (RTP) Office at MD Anderson is responsible for providing the appointment letter and contacting HR for the appropriate processing.

The Office of Physician Assistant Programs will notify the PA fellow when a profile has been created in New Innovations (NI), the online portal housing required documents. The PA fellow will upload the following documents into the NI portal to successfully complete the RTP onboarding requirements & process.

- The PA fellow will follow the steps accordingly and provide the following documents/information. The list is dynamic and may not be exhaustive. The PA Office team will provide updates accordingly.
 - Completed Application Form
 - 3 Letters of Recommendation on official letterhead
 - Certificate of Completion from a US Program
 - Curriculum Vitae (CV)
 - Diploma of Highest Degree Relative to Position Applied (PA School Degree)
 - Professional State License
 - Official Transcript of Highest Degree (PA School Transcript)
 - English Proficiency Certification, if applicable
 - Immunization Compliance Report
 - Recommendation for Appointment
 - Appointment Letter Submitted by Applicant
 - Government Issued ID
 - Check-In Document
 - Social Security Card
 - Selective Service Form
- The PA Fellowship team will create individualized MS Teams folders to house internal program documents. The PA fellow will be provided a link to their personal folder to upload the items below:
 - Texas State PA License
 - American Heart Association ACLS/BLS certificate
 - o Brief Personal Bio (no more than 300 words), including:
 - o PA School Name and Graduation Date,
 - o Professional or Research work performed prior to PA school,
 - o Motivation for choosing the specialty area of oncology,
 - o Interest in choosing postgraduate training,
 - o Highlights during your training,
 - o Clinical oncology interests and passion areas,
 - o Personal hobbies/interests outside of fellowship, and
 - o If comfortable, your hometown/background.
 - o Professional Photo (jpeg). Notify @Castillo, Michelle E when uploaded.
 - PA Fellow Preference Form

Medical Staff and Credentialing Services

The Medical Staff and Credentialing Services (MSCS) verifies all credentialing and privileging information for all staff.

The PA Fellowship team will notify MSCS via email of incoming members of the fellowship cohort. MSCS will email the PA fellow a link to MD Anderson's online credentialing/privileging portal. The PA fellow should complete the online applicationa within 7-business days. Upon receipt of completed application, MSCS will conduct primary source verification. including but not limited to verification of education, work history for prior 5 years, references, hospital privileges and malpractice claims history. Once the credentialing verification process is complete, the credential files are reviewed and recommended for approval the appropriate institutional committees. The PA fellow and Program Director will receive email communication from indicating award of clinical privileges at MD Anderson.

- The following items are required to be submitted to the MSCS by the Office of PA Programs to initiate the credentialing process:
 - Copy of Offer Letter
- The following items should be submitted via the online credentialing/privileging MSCS portal by the **candidate**:
 - 3 professional references (form to be provided)
 - 1 Current Competency reference (PA Program Director, or if practicing, a recent supervising physician/medical director)
 - Completed Texas Standardized Credentialing Application
 - Copy of current PA Texas License
 - Copy of out of state license (if any)
 - Copy of NCCPA Certificate
 - Current American Heart Association approved CPR, BLS or ACLS certification
 - Completed and signed request for privileges (electronic)

Texas Medical Board

Once the candidate has accepted the offer to enter the program, the process of applying for Texas PA state licensure should begin. There are certain requirements and documentation to be submitted to the Texas PA Board (TPAB), along with an application fee, that can be found on their website at: https://www.tmb.state.tx.us/page/licensing-physician-assistants.

Candidates should expect that their Texas PA license will be issued no sooner than 60-90 days after all documents have been received by the TPAB. The PA fellow cannot begin the program until the license is issued. If the permanent PA license will not be issued by the appointment start date, a temporary PA license should be obtained. This temporary license may also take up to 60 days or longer.

To complete the credentialing process, PA fellows must obtain a temporary or permanent license. The PA fellow must maintain regular communication on any license status delays with

the Office of Physician Assistant Programs. The cost to obtain licensure can be significant. These costs are at the fellow's personal expense and cannot be reimbursed. For questions related to specific costs, please contact the Texas Medical Board.

All applicants are required to pass the Texas Physician Assistant Jurisprudence Examination (JP). The JP exam is administered by Pearson VUE at locations throughout the United States. You may schedule your exam once you have filed an application for licensure (forms and fees) and have received a scheduling permit from the board staff. Physicians, Physician Assistants, and several other types of licensure applicants are required to submit their fingerprints for state and national criminal history background checks. Fingerprinting services are provided through IdentoGo by IDEMIA at the trainee's personal expense.

PA Fellow Relocation Expense

The cost to relocate from out of state can be significant. These costs are at the fellow's personal expense and cannot be reimbursed.

PA Fellow Health and Screening

In accordance with MD Anderson's institutional policy CLN1141 entitled "Vaccine Preventable Diseases (VPD) Policy for Faculty, Trainees/Students, and Other Members of MD Anderson's Workforce", the institution requires PA fellows to receive vaccines for the Vaccine Preventable Diseases (VPD) as specified by MD Anderson. The "Immunization of Health Care Personnel – Recommendations of the Advisory Committee on Immunization Practices" includes a complete list of the VPD recommended by the US Department of Health & Human Services and the CDC. Health screening and immunizations are confidentially governed and conducted by MD Anderson's Employee Health and Well-Being (EHWB). Health screenings are not conducted by program faculty nor are program faculty privy to employee/trainee health records. EHWB at MD Anderson maintains compliance in accordance with HIPAA standards and regulations for its employees and trainees.

Required Vaccinations

MD Anderson offers immunizations for Vaccine Preventable Diseases (VPD) free of charge to employees based on their assigned work duties and risk of occupational exposure to VPD. This process is governed by institutional policy CLN1141.

Risk Assessment for VPD: Following review of VPD health care associated infections, exposures, and the rate of VPD among faculty, trainees/students, and other members of MD Anderson's workforce over the past five (5) years, annual Influenza vaccination and varicella vaccination or demonstrated immunity to varicella have been identified as required vaccines based on level of risk.

Influenza vaccine and varicella vaccine or immunity is required for:

- All Clinical Operations faculty, trainees/students, and other members of MD Anderson's workforce.
- Patient Care Facilities workforce members who have patient contact.
- Contract employees providing direct patient care must provide proof of immunization to influenza and proof of immunization to varicella or immunity to varicella to their contract agency prior to active duty at MD Anderson.

Other Immunizations – Outbreak Situations in the event of an outbreak with a VPD:

- Follow the Outbreak Response Policy (ADM0183).
- Develop a plan to minimize the risk of transmission to staff and patients.
- Identify faculty, trainees/students, and other members of MD Anderson's workforce at risk for exposure to outbreak of VPD.
- When applicable, vaccinate faculty, trainees/students, and other members of MD Anderson's workforce at risk.

Exemptions by Faculty, Trainees/Students, and Other Members of MD Anderson's Workforce Faculty, trainees/students, and other members of MD Anderson's workforce may request an exemption from the vaccination requirements based on the following:

- Medical conditions identified as contraindications or precautions by the CDC (see Immunization of Health Care Personnel – Recommendations of the Advisory Committee on Immunization Practices).
- Reasons of conscience, including a religious belief.
- All faculty, trainees/students, and other members of MD Anderson's workforce requesting an exemption from the influenza and/or varicella vaccination are required to complete a waiver/declination form for each specific vaccination (see Influenza Vaccine Waiver/Declination Form [Instructions]).

Procedure for Exempt Faculty, Trainees/Students, and Other Members of MD Anderson's Workforce: A faculty member, trainee/student, or other member of MD Anderson's workforce who is exempt from the required vaccines must comply with the following procedures to protect patients from exposure to disease:

- Influenza: Wear surgical mask when within six (6) feet of a patient when engaged in patient care or having contact with patients as part of their assigned duties during the duration of the identified Respiratory Virus Season. Follow Standard Precautions, as required of all faculty, trainees/students, and other members of MD Anderson's workforce. Refer to the Exposure Control Plan Policy, CLN0428.
- Varicella: Exposure to varicella in nonimmune individuals may require the faculty member, trainee/student, or other member of MD Anderson's workforce to be furloughed following exposure to chicken pox or disseminated varicella zoster. If the exposure is thought to be significant, the faculty member, trainee/student, or other member of MD Anderson's workforce should be reassigned to duties which do not involve patient contact, to areas of low risk, or be placed on leave from the tenth (10th) day after the first exposure through the twenty-first (21st) day after the last exposure or until antibody testing indicates immunity. Refer to Varicella and Varicella Zoster Policy, CLN0433.

Policy Compliance

Policy compliance by faculty, trainees/students, and other members of MD Anderson's workforce consists of one of the following:

- Receipt of required vaccines or demonstration of immunity to varicella. Faculty, trainees/students, and other members of MD Anderson's workforce receiving an influenza vaccination should wear a flu vaccination sticker in the upper right corner of their ID Badge that is provided by Employee Health & Well-being at time of vaccination to indicate policy compliance.
- Completion of Influenza Vaccine Waiver/Declination Form requesting specified vaccine exemption and compliance.
- Employee Health & Well-being will provide up-to-date information for all covered faculty, trainees/students, and other members of MD Anderson's workforce with respect to status of annual influenza vaccination and varicella vaccination or immunity.
- Policy compliance for exempt workforce members is the responsibility of the supervisor or manager of each work area.

Corrective Actions

• Failure to comply with this policy may result in corrective action up to and including termination.

PA Fellow Responsibilities

Attendance/Participation

Regular attendance is essential in completing the program's academic requirements. A professional demeanor and attitude are particularly important parts of the fellow's total learning experience. PA fellows will be expected to actively participate in direct patient care activities at MD Anderson during their rotation experiences.

Fellows should come prepared for their clinical assignments. Prior to each rotation, the curriculum, including the learning objectives and outcomes, should be reviewed. A reading list is provided for each rotation. Although these readings may be completed during the rotation, the advisors and preceptors expect preparation before the first day of each rotation. Items that will help prepare for the rotation include reviewing the key points of each major malignancy. Self-study, self-directed reading, preparing journal club and professional presentations, and manuscript preparation, is expected to be completed after scheduled clinical assignments.

The PA fellow should come to the rotation dressed in appropriate professional attire. MD Anderson surgical scrubs are to be worn in the OR.

Daily Schedule

The rotation schedule is typically provided via email and should include clinical assignments, rotation conferences, institutional conferences/lectures, and meetings. In addition, rotation advisors may communicate additional details of the schedule throughout the rotation or when schedule changes are necessary.

Typically, the weekly schedule will include clinical, didactic, and administrative work Monday through Friday. The fellows are responsible for communicating time off with the rotation advisors. Academic time and administrative time will also be provided to PA fellows on Tuesday afternoons. This time is intended for scheduled meetings with educators or the program director and similar types of activities to avoid conflicting with clinical responsibilities.

Mondays through Fridays, fellows are expected to arrive by 8:00 AM unless otherwise scheduled. Any delays that are anticipated should be approved in advance. For any unexpected delays or absences, the Program Director and Operations Manager must be contacted by email immediately. Additionally, the PA fellow must also contact their clinical preceptor and advisor via email. The rotation day ends when the clinical team/preceptor dismisses the PA fellow for the day. The instructional faculty, known as the rotation advisors, will provide various experiences within the rotation schedule to meet learning objectives and outcomes. Only the advisors will make changes to the schedule. The PA Fellow and rotation advisor can tailor learning experiences based on fellow request or preference. Changes need to align with rotation curriculum and its syllabus. If there is a problem with an assignment, the advisor should be

notified for clarification or re-assignment. If the advisors are not available, the Program Director or Operations Manager should be contacted.

See Clinical and Education Work Hours policy for additional information regarding limitations on work hours.

Communication

PA fellows will receive an institutional email address during orientation. They will have access to an institutional laptop, institutional desktop computers in clinical work areas, and an assigned institutional iPhone. MD Anderson relies heavily on email communication as a prompt means of communication. The PA Fellow is expected to check email regularly and routinely during the day. Timely response is expected within one business day of email receipt.

An iPhone will be issued, upon director and/or institutional approval, for institutional email, institutional phone calls, pages and text messages. All clinical trainees, staff and faculty are required to carry their institutional iPhones during work hours, unless on approved leave. Should the device malfunction or be forgotten at home, the PA fellow should notify their current rotation advisors. If needed, the PA Fellows should notify program leadership so new equipment can be ordered. As soon as it has been issued, the PA fellow can use their mobile and pager number for work related communication.

Professionalism

The trainee agrees to perform to the best of his or her ability the customary duties and services as assigned by the fellowship Program Director, to abide by the Rules and Regulations of the Board of Regents of The University of Texas System, the Rules and Regulations of MD Anderson as specified in the Institutional Policies, the hospitals to which assigned, and to meet those conditions outlined in this manual.

Supervision

Within the training program's scope, all PA fellows have a relationship established with Dr. Cristina Checka, Medical Director, via the TMB portal, which includes supervision and delegation for prescribing and ordering. During rotation experiences at MD Anderson attending physicians and advanced practice providers with appropriate clinical departmental privileges will be present. A responsible attending physician should be present on service, and the preferred contact method for those physicians is known (typically pager or mobile text messaging found via the institutional directory). The training program is constructed to encourage and permit PA fellows to assume increasing levels of responsibility commensurate with their individual progress in experience, skill, knowledge, and judgment throughout the training year. PA Fellows may not provide clinical services or perform procedures for which they are not trained. A PA fellow must be supervised when performing any invasive procedure. Each fellow is responsible for communicating significant patient care issues to the attending physician and their APP preceptor/advisor. Such communication must be documented in the record, and as indicated, include a safety report submission. Failure to function within graduated levels of responsibility

or to communicate significant safety concerns or patient care events to the responsible attending physician and APP preceptor/advisor may result in the removal of the fellow from patient care activities. The trainee must demonstrate his or her ability to assume increased responsibility for patient care. This decision is the responsibility of the Program Director with advice from members of the instructional faculty and the Medical Director. Advancement to higher responsibility will be based on an evaluation of trainee readiness for advancement.

PA fellows will be supervised during clinical experiences by experienced licensed healthcare professions. The PA fellowship aligns its PA fellow supervision practices with MD Anderson's 'Resident and Fellow Supervision in Patient Care Delivery' policy (CLN0620). It provides best practice process and recommendation.

Expenses

PA fellows may incur professional costs and expenses during the program year, including books, professional organization membership fees, conference registration, etc. It is estimated that these expenses be no more than \$1,000.

Benefits

Time Off

Requests for all leave should be made online through Kronos. Typically, educational vacation is coded as "VAC" in the time off request online form and "SCK" for educational sick time. An email notification will alert the PA fellow that the leave request has been approved. Additional information regarding academic policies for vacation and sick leave may be found in the Clinical Health Education Programs Trainee Manual. The 'Leave Policy for Trainees' (ACA0097) and 'Time Off and Leave Policy' (ADM0302) establish processes and provide guidance to trainees on time off and other leave policies and procedures at MD Anderson.

Scheduled time off

Full time educational trainees receive 160 hours of educational vacation time, 100 hours of educational sick time, and 16 hours of wellness leave annually. Vacation time will be approved at the discrepancy of the Program Director with consideration of the clinical rotation schedule. It is recommended that vacation time be requested at least two months prior to the date requested. The earlier the time is requested, the more likely it will be approved. Fellows should monitor the balance of their time off. Fellows will be given three (3) working days or 24 hours of extramural time that will not be deducted from their vacation time. This time can be spent traveling to job interviews. Any time over these three days will be deducted from their unused vacation time. Additionally, fellows are given one week of academic time. Fellows must remain in Houston during this week and work in the office or at home during this time. The administrative week should be dedicated to the completion of expected program project work, such as manuscript completion, presentation completion, etc.

Scheduled medical leave should be requested as soon as possible. To address gaps in attendance related to medical leave, elective rotation weeks will be used to meet and fulfill the core program rotation requirements.

Training and conference leave is available upon approval from the Program Director. This type of leave is coded differently on the time off request form and does not deduct from the educational vacation or educational sick time leave balances. Disaster Leave is also available in the event of a natural disaster.

Unscheduled absences or tardiness

If the PA fellow is ill or otherwise tardy or not able to report for an assigned shift, the *Program Director and Operations Manager should be contacted prior to the assigned arrival time* by email. Fellows should also contact their clinical preceptors and advisors.

***Additionally, once any time off requests are approved. It is the responsibility of the fellow to send an Outlook invite to the Program Director, Operations Manager and Program Coordinator to notify them of their upcoming absence. ***

Stipend

The PA Fellows are allotted an annual stipend of \$105,000. PA Fellows are paid monthly. Monthly direct deposits are issued totaling twelve payments per year. Direct deposits are issued on the first working day of the following month. Payment is inclusive from the first to the last day of the current month. For example, if the program appointment commences on April 1st, the first paycheck is received on May 1st.

For questions related to pay, please visit

https://mdandersonorg.sharepoint.com/sites/Home/SitePages/Your-Pay.aspx or contact myHR directly. As trainees, PA Fellows are not eligible to participate in any classified staff incentive programs, such as Professional Practice Model for Advanced Practice Providers, Anderson Award, etc.

Health Insurance

PA Fellows are eligible for institutional health benefits including health insurance (trainees and their family), dental insurance, vision insurance, disability insurance (long and short-term), life insurance. For more information on insurance benefits, please visit https://mdandersonorg.sharepoint.com/sites/Home/SitePages/Insurance-Benefits.aspx or <a href="https://mdandersonorg.sharepoint.com/sites/Home/Site

Liability Insurance

PA Fellows are provided with indemnity coverage for medical malpractice and liability through the UT system.

FMLA/Extended Absence

PA Fellows are not eligible for Family Medical Leave (FML) Act leave, which provides unpaid, job protection for certain family and medical leave of absences. The institutional FML policy applies only to benefits eligible trainees, who must have worked for MD Anderson (or another State of Texas agency or institution) for at least twelve months and 1,250 hours of prior service. FML provides eligible trainees with up to 12 workweeks (480 hours) leave of absence during any 12-month period. PA Fellows may visit <u>Trainee Leave</u> for more information.

Parental Leave is available to all regular full-time and part-time (benefits eligible) trainees, with less than 12 months of state service or who have worked fewer than 1,250 hours in a 12-month period immediately preceding the birth or adoption of a child or placement of a foster child. Parental leave allows for up to 12 workweeks (480 hours for full-time employees; prorated for part-time employees). PA fellows are eligible for Parental Leave.

The PA Fellows also have access to reduced paid leave and are eligible to receive 50% salary continuance benefit. For a full list of time away benefits available to PA Fellows, please visit Trainee Leave.

Retirement

PA Fellows participate in the UT Teacher Retirement System (TRS). This is a defined benefit retirement plan where all eligible employees of the University of Texas system are automatically enrolled in TRS on the first day of their employment. For more details, please visit https://www.utsystem.edu/offices/employee-benefits/ut-retirement-program/teacher-retirement-system. The retirement page at MD Anderson includes information on mandatory and voluntary retirement plans https://mdandersonorg.sharepoint.com/sites/Home/SitePages/Retirement.aspx.

Holidays

Institutional holidays (https://www.mdanderson.org/about-md-anderson/employee-resources/leave/institutional-holidays.html) are recognized by the Program. PA fellows will not be required to work on any institutionally recognized holiday.

Program Content

Orientation

New employees (including PA Fellows) are required to participate in an institutional and program orientation. The program commences with two weeks of program orientation. These weeks provide an opportunity for the fellow to obtain computer access, passwords, billing information, office information, and participate in introductory instruction which will include Zoom and in-person presentations, e-learning assignments, and simulation training.

Program Objectives/Curriculum

The program's core curriculum will be provided during orientation. Curricula for specific clinical rotations and other program experiences will also be provided during orientation provided in a program orientation binder.

Clinical Rotations

Core Disease Site Clinical Rotations: 34 weeks total

- * Breast 3 weeks
- * Gastrointestinal 5 weeks
- * Gynecology 2 weeks
- * Head and Neck oncology 3 weeks
- * Thoracic oncology 3 weeks
- * Leukemia 3 weeks
- * Lymphoma 3 weeks
- * Stem Cell Transplantation 2 weeks
- * Melanoma 2 weeks
- * Sarcoma 1 week
- * Neuro-oncology 3 weeks
- * Genitourinary 3 weeks
- * Community Oncology 2 weeks

Supportive Care: 4 weeks total

- * Infectious Disease 2 weeks
- * Palliative Care 2 weeks

Misc.

* Diagnostic Imaging - 1 week

Electives: Variable

Elective time may be available at the end of the program year. To participate in elective rotations, PA Fellows must have met core rotation competencies and required patient encounters.

Elective rotation examples include:

- * Psychiatry
- * Investigational Therapeutics

- * Interventional Radiology
- * Pulmonary Medicine
- * Cardiology

Didactic

PA fellows will attend a variety of institutional conferences. PA Fellows log their attendance through the Professional Education Portal (PEP) system at MD Anderson. PA Fellows must create an account, text attendance, and complete presentation evaluations to receive CME (Continuing Medical Education) credit by visiting https://mdanderson.cloud-cme.com/default.aspx.

PA fellows must attend at least (1) PA Continuing Education (PACE) Lecture Series per month. An additional hour of CME per month is required by attending any other institutional lecture series where CME is offered, such as Grand Rounds, Ethics Seminar, SPACE, departmental case conferences, etc. <u>In summary, a minimum of 2 CME hours is required for PA Fellows per month. One of those hours per month must include PACE lecture series attendance. To receive credit, PA Fellows must log their attendance through PEP.</u>

For each rotation, the PA fellow is provided a reading list. In addition, patient care conferences and disease specific lectures will be arranged during clinical rotations. Core clinical readings will focus on established evidence-based guidelines as identified in the rotation curricula. In addition, original research articles are identified for each rotation to provide the PA fellow an opportunity to learn about various types of clinical research applicable to the field of oncology. Fellows are expected to read all assigned articles. Opportunities for discussion of specific articles may be scheduled with rotation advisors, preceptors or the Program Director. The PA fellows are encouraged to review and align the self-guided didactic APPOS Oncology 101 and 102 modules with their clinical rotation schedule.

PA Fellows are required to attend the weekly Oncology Forum sponsored by the Division of Pharmacy. This recurring meeting is scheduled from 12:30 PM - 2:00 PM every Tuesday afternoon during administrative time.

Quality Improvement / Performance Improvement

The goal of this aspect of the program is to expose PA fellows to the foundational pearls of practice-based learning and improvement focusing on continuous patient care improvement, self-evaluation, and life-long learning. PA fellows are expected to develop skills and habits contributing to patient care through quality improvement and performance improvement initiatives. PA Fellows are required to complete the Quality College modules in the Education Center at MD Anderson. This introduces quality and performance improvement. Additionally, an interactive lecture series focused on creating a foundation of QI/PI knowledge is coordinated with a senior and experienced PA during quarter 1 – quarter 2 of the program year. Meeting participation (in person and/or via Zoom) is expected.

Clinical Teaching

PA fellows will be instructed on methods of clinical teaching and participate in clinical teaching of PA students under the direction of a PA mentor. This aspect of the program prepares PAs to develop the next generation of clinicians, who may be caring for cancer patients. Additional information will be provided upon enrollment in the program.

<u>Clinical Teaching Mentors</u>: provide support and resource assistance to the PA Fellow during their preceptor role.

Elizabeth (Lisa) Sutherland, PA-C, Physician Assistant, GU Radiation Oncology Dept Elsa (Melissa) Arvide, PA-C, Physician Assistant, Surgical Oncology Jenilette Cristo, PA-C, Physician Assistant, Surgical Oncology

Journal Club:

The goal of this aspect of the program is to develop PA fellows to become competent in clinical oncology medical literature review and practically apply medical literature outcomes to oncology practice. An interactive lecture series and focused journal club is coordinated with a senior and experienced research PA during the program year. Meeting participation (in person and/or via Zoom) is expected.

Abstract/Manuscript Guidelines

Each PA fellow must write a professional abstract or manuscript that could be submitted to a professional conference or peer-reviewed journal, respectively. Topics may include quality improvement projects, performance improvement projects, clinical teaching, or an oncology clinical topic. The Program Director must approve the topic by the second quarter of the program. Consideration should be given to topics of interest to the PA fellow and could result in a published manuscript or oral or poster presentation.

The manuscript will be reviewed by the Program Director, Clinical Research Advisor, and their research mentor. PA Fellows are encouraged to submit their manuscript or abstract for publication or presentation. PA fellows should allot time for review and revisions before the program year ends. PA fellows will present their research/manuscript topic during the final month of their training year during the PACE lecture series.

A certificate of program completion from the program cannot be issued until the manuscript/poster has been accepted by program reviewers. During the last month of the program year, the PA fellow will also give a lecture based on their project. Fellows have three (3) months after the program end date to complete their abstract or manuscript to receive a certificate of completion.

Presentation Guidelines

During the year, the PA fellow will be required to give four professional lectures. Presentations will typically be given to the MD Anderson PA staff and PA students as part of the PA Continuing Education (PACE) lecture series. Other professional presentation opportunities on a state or national stage, through professional development organizations such as TAPA and AAPA, may be available depending on schedules and readiness.

The purpose of these presentations is to provide the PA fellow with opportunities to enhance their expertise in any of the following topic areas including oncology, QI/PI and clinical teaching. In addition, these assignments will require the PA to become proficient with power point presentations and improve oral communication skills.

The presentation topics typically include the following:

- 1. Case Presentation- An interesting case of a patient selected by the PA fellow
- 2. Randomized clinical trial
- 3. Clinical teaching
- 4. Topic selected for abstract or manuscript

See Instructions for Presentation for additional information and tips and these presentations. One-on-one help/guidance is available as needed if sufficient time is allowed for scheduling an appointment. For branded slide decks in order to adhere to MD Anderson's branding standards, visit Brand Central.

Evaluations

Evaluation of PA fellows

Objective evaluation methods as outlined below will be used to monitor progress through the program and to ensure that educational objectives have been met. The evaluations will be completed online.

The training program is constructed to encourage and permit PA fellows to assume increasing levels of responsibility commensurate with their individual progress in experience, skill, knowledge, and judgment throughout the training year. Increasing responsibility for PA fellows is determined through a structured and collaborative approach that integrates self-assessment, direct observation during rotations, and rotation performance evaluations. PA fellows regularly reflect on their own progress, identifying strengths and areas for growth, which they discuss during quarterly evaluations sessions with the Program Director. Rotation advisors complement this self-assessment by evaluating fellows' performance through direct observation in clinical settings, focusing on key competencies such as medical knowledge, clinical decision-making, communication, professionalism, etc.

Quarterly evaluations provide a formalized opportunity to review progress and discuss readiness for expanded responsibilities. These evaluations are guided by milestones outlined in the fellowship program competency document and are supported by constructive feedback from mentors and rotation advisors. Regular discussions with the program director ensure alignment between fellows' perceived readiness and the objective assessments from rotation advisors. These discussions also allow for tailored guidance, ensuring fellows are equipped with the skills and confidence needed to excel as they take on more complex responsibilities.

All evaluation material will be on file electronically and may be reviewed by the PA fellows, if requested.

Self-evaluation

At the beginning of the program year and quarterly, the PA fellows will evaluate themselves on their strength/weaknesses and progress.

Performance Evaluations

Advisor evaluation of clinical skills, knowledge, and attitudes will consist of one evaluation obtained for each rotation. This will be completed by the advisor(s) for the rotation. The advisors will obtain feedback from participating preceptors and provide the program with a summative evaluation. Advisors are encouraged to verbally discuss areas of clinical performance strength and opportunity to enforce what to continue doing and what to stop/start doing. Performance evaluations are shared with the PA Fellow during triannual and final evaluation meeting with the Program Director.

Knowledge assessment

Written or oral exams (exit interviews) will be completed for each required rotation. Advisors can choose to provide the exams at the start or end of the rotation. Advisors are encouraged to review the assessment results with the PA Fellow to enforce knowledge and offer feedback.

Presentations

The presentation will be evaluated qualitatively to include presentation skills, both verbal and visual organization, appropriate discussion of the manuscript, personal conclusions, and facilitation of the discussion. Verbal feedback will be given by the Program Director.

Abstract/Manuscript

Comments will be provided to the PA fellow upon final Program Director review of the manuscript. If changes are needed before the work can be accepted, the fellow must complete these and submit for final review before the program certificate may be issued.

Triannual Evaluation

Tri-annually, the PA fellows will be evaluated by the Program Director for their overall success in the program. This will include reviewing the individual evaluations (preceptors, presentations, self-assessment, etc.). Prior to the meeting, the PA will complete a self-assessment online. Overall progress in the program including advisor evaluations, knowledge assessments and presentation evaluations will be discussed. This will also serve as an opportunity to obtain feedback from the PA fellows regarding the program. PA fellows are expected to have evaluation scores of 'meeting expectation' as they move through the training year to ensure success.

Final Evaluation/Program Completion

The Program Director conducts a final comprehensive PA fellow performance evaluation. This includes a review of the past year's evaluations from faculty, preceptors and the Program Director's direct interactions and observations during the training year. PA fellows are expected to have evaluation scores of 'meeting expectation' throughout the training year to ensure successful program completion.

The final evaluation must be provided to the Research Trainee Programs office before a certificate of completion is awarded. Fellows will have up to three months after the last day in the program to complete the required manuscript for a certificate of completion. If the manuscript is not completed by three months after program completion, a letter of participation in the program will be provided.

Program Evaluation by PA Fellow

The PA fellow must provide evaluation of key aspects of the program including clinical rotation, rotation advisors/adjunct advisors and trainers, program faculty and staff, and didactic lectures. This evaluation supports ongoing program improvement and self-assessment. Given the small size of the program, maintaining anonymity cannot be assured. Comments should be provided in constructive and professional ways that foster such improvement.

A schedule for conducting evaluation will be used during the program year. The program director should be contacted immediately for any significant or egregious concerns or problems that occur during the program year to address and facilitate resolution. Additional feedback may be requested periodically. All evaluations will be completed online/electronically.

Rotation and Advisor Evaluations

At the end of each rotation experience, the PA fellow will evaluate the rotation advisor(s) and the rotation experience. The online assessment will be made available for the PA Fellow to complete. This will include evaluation of the effectiveness of the rotation and its advisors.

Didactic Lecture Activities/Events

Didactic lecture series/conference will be evaluated yearly. Evaluation will be provided for PACE, Core Curriculum, Oncology Forum and the APPOS courses within the Final Program Evaluation.

Adjunct Advisors, Program Administration, and Administrative Support Biannually, the adjunct advisors, simulation trainers, program leaders, and administrative support staff will be evaluated (Quarter 2 & Quarter 4).

Orientation Process

The program's orientation process will be assessed via an online review. Typically, the assessment is sent to the PA fellows for completion approximately 1-month after program orientation has been completed.

Final Program Annual Evaluation

The program evaluation will be completed annually by the PA fellow. The final program evaluation is comprehensive and will be completed in late March just before the training year's completion.

Graduate & Employer Evaluation Surveys

One year after program completion, a graduate and employer survey will be sent by email. Graduate and Employer survey data will be collected for three years following fellowship completion. The evaluation will be sent to the PA fellow graduate and their direct supervisor/manager.

Conferences

PA fellows are required to routinely attend the following lectures. Attendance is recorded in the Professional Education Portal (PEP) system at MD Anderson. The PA fellow should text their attendance in accordance with the PEP process to confirm attendance.

Required:

APPOS Oncology 101 and 102

- These courses cover basic concepts in clinical oncology including all major malignancies, treatment modalities and related topics.
- This is a self-guided, self-paced didactic curriculum accessed through a dedicated landing page for the program. All modules are recorded lectures online and can be accessed and viewed at any time.
- Disease-specific modules should be completed within the related clinical rotation.
- There are additional modules that must be completed during the orientation period. These are listed in the Orientation Schedule.
- To receive a certificate of completion for each course, all modules and pre and posttests must be completed. A passing post-test score of 70% for Oncology 101 and 75% for Oncology 102 is required. There is a maximum of 2 attempts for each post-test.

PACE Lectures

- This lecture series is specifically intended for PAs at MD Anderson. Topics include oncology, supportive care and general medicine.
- Lectures are held from 12pm 1pm. Meetings are typically held on the 2nd Monday and the 4th Thursday or 4th Friday of every month. Date, location, and topic information is provided by e-mail.

• Oncology Forum

- The objective of the oncology forum is to provide the oncology pharmacy residents and other residents and students an opportunity to enhance their knowledge base regarding oncology related issues through informal group discussions with the pharmacy clinical section. Other healthcare professionals also attend and participate in these discussions (i.e., staff pharmacists, nurses, physician assistants, pharmacy students, etc.)
- Lectures are held on Tuesdays from 1:00-2:30pm.
- Attendance is expected.

RECOMMENDED

• Institutional Grand Rounds

- This bimonthly interprofessional lecture series is designed to meet the needs of physicians, nurses, advanced practice providers, pharmacists and other health care professionals and trainees. The lectures provide updates from MD Anderson leaders

and external experts on clinical and translational research, evidence-based practices, quality improvement initiatives and more.

• Division of Cancer Medicine Grand Rounds

- The Division of Cancer Medicine Grand Rounds seminar series is held twice monthly on Tuesdays via Zoom. Topics presented are of interest to clinical, laboratory and translational researchers, fellows, patient care providers, residents and staff. Presentations run for 45 minutes beginning at 8 a.m., followed by a 15-minute Q&A session. Registration is required to attend the live webinar. Contact DoCM to be added to the distribution list before each presentation.

New Innovations Fellowship Management Site

Work Hours

PA fellows are required to log into New Innovations each day and indicate office time, clinic time, OR time, and/or conferences attended, etc. Hours/time will be logged into the duty hours section of New Innovations. Procedures and patient logs will also be captured in this software, as well.

Clinical Encounters

Patient visits and procedures should be logged daily. This log will serve as a reference regarding progress during the year and may be used as reference for hospital credentialing committees for future employment. This data is also used for program evaluation and to assess a PA fellow's progress for increasing clinical responsibilities.

o **Procedure Encounters**

- All procedures on the target list and any additional procedures will be logged under the "Procedures" section, including the date the procedure was performed.
- A selection should be made for each procedure from the "Procedure" drop-down list (the "Group All Procedures" drop-down list can be used to filter procedures based on the target list for each rotation). The level of participation is recommended to be noted for procedures in the "Comments" section.

o Patient Encounters

- Patient visits (inpatient and outpatient) will be logged under the "Procedures" section for all rotations. Only diagnoses on the target list are required to be logged. However, it is recommended PA Fellows log all patients for future employment and hospital credentialing.
- A selection should be made for each patient visit from the "Diagnosis" drop-down list (the "Group All Diagnoses" drop-down list can be used to filter diagnoses based on the target list for each rotation).
 - The visit's purpose should be to determine the diagnosis(es) to be logged. For example, if a patient is seen with colon cancer but is only assessed and treated for pain, then "pain" is the diagnosis to be logged. Alternatively, if an assessment and plan is made for diagnosing colon cancer and the patient's pain, both conditions should be logged.
 - To log an additional diagnosis, select "+Add Procedure" then select the additional diagnosis.
- It is recommended the PA Fellow provide an assessment and plan for each logged diagnosis under the "Comments" section.

Program Policies

Please refer to the Clinical Health Education Programs Policy and Procedure Manual for information regarding additional policies for clinical trainees by contacting CHEP@mdanderson.org.

Fitness for Duty (ADM0274)

• General Information

 An employee experiencing job problems but not impaired may be referred to EAP (Employee Assistance Program) for management. This is a formal management referral and is not mandatory. See the 'Employee Assistance Program Policy' ADM0275.

• The Supervisor Investigates, Observes, and Documents

 Any employee or trainee who observes another coworker appearing to be impaired should immediately notify a supervisor on duty.

• The direct supervisor or supervisor on duty:

- Investigates and, when possible, personally observes and interviews the employee. If the direct supervisor is not available to directly observe and interview the affected employee, another manager or supervisor will perform this observation and interview.
- Documents all observations, including how the employee responds when interviewed. The Employee Fitness for Duty Supervisor Initial Observation Report should be used to document these observations.

• Calls the University of Texas Police at Houston (UTP-H) if:

- The employee is behaving in a way that is dangerous to those around them, is making threats to harm himself/herself or others, or is otherwise medically or psychiatrically unstable; and/or
- o There is evidence that a crime may have been committed.
- Calls the EAP for guidance and provides the completed Employee Fitness for Duty Supervisor Initial Observation Report.
- The supervisor will escort the affected employee to EAP offices or arrange a meeting with EAP during business hours.
- Outside of business hours, page the EAP counselor on call for assistance at 832-325-3409.

EAP Actions

In consultation with the supervisor and with Human Resources (when available)
determines if the employee should be taken off the job and removed from job
responsibilities, or if another course of action may be indicated.

- O Provides guidance on how to safely escort the employee for an immediate assessment, for urgent treatment, or for transportation home. Note: If transportation home is recommended, the supervisor makes the arrangements after consulting with the EAP. The affected employee is not allowed to drive themselves home.
- Assesses or arranges for a medical evaluation to determine if fit for duty, facilitates access to treatment, and coordinates a return-to-work process and follow-up care, as needed.

• Return to Duty:

- o The employee:
 - Will not return to work until all aspects of the fitness for duty evaluation are completed and approval to return to work is granted by the EAP.
 - May be required to continue with medical care, drug and alcohol monitoring, and EAP follow-up for a designated period after returning to work.

Practitioner Health and Impairment (CLN0619)

• General Information

- The purpose of this policy is to educate practitioners and their coworkers about stress, mental illness, and other conditions that can cause distress and impaired performance; address prevention of physical, psychiatric, and emotional illness that may impact a licensed independent practitioner's ability to safely and effectively perform the essential functions of his/her position; describe the resources available to all practitioners to help maintain their own health and/or refer themselves or a colleague for assistance; and provide a mechanism, separate from disciplinary action, which facilitates rehabilitation of impaired licensed independent practitioners, or practitioners who have an obvious decline in work performance which has the potential to impact patient safety.
- The goal of this process is to provide guidance for identifying impairment and supporting rehabilitation to licensed independent practitioners to aid in retaining or regaining optimal professional functioning.

• General Process & Procedure:

- Reporting Acute Signs and Symptoms of Impairment: An individual who
 observes a Practitioner whose behavior represents an immediate threat to patient
 safety follows the Fitness for Duty Policy (UTMDACC Institutional Policy #
 ADM0274).
- Observation or Voluntary Disclosure of Impairment: An individual can disclose concerns about Impairment in a licensed practitioner to the Practitioner Peer Assistance Committee (PPAC). The report must be factual and include a description of the incident(s) that led to the suspicion of impairment. A confidential meeting by the PPAC occurs between the reporter and the named practitioner. If the Impairment represents a threat to patient safety, the Committee

- follows the Fitness for Duty Policy (UTMDACC Institutional Policy # ADM0274).
- Managing the Practitioner After a Committee Determination of Possible Impairment: If after reviewing the results of the assessment, the Committee deems an outside evaluation should be conducted, the Chair/designee makes a recommendation to the Practitioner that they undergo an outside evaluation. Committee members will follow up with Practitioner after the evaluation and recommend EAP referral for continuing help. If the Practitioner refuses outside evaluation, committee follow up, or EAP referral, the Committee will make a brief report to the Practitioner's department chair or supervisor. All medical documentation pertaining to the PPAC's activities including the identity of concerned persons, specific Practitioners and interviews are confidential.

• General Resources:

- o Programs available for all MD Anderson employees:
 - Employee Assistance Program (EAP): A confidential assessment and referral program for all employees, Faculty, educational appointees, immediate family members and retirees to resolve problems that affect their personal lives and performance on the job. All self-referrals to the EAP are confidential, except as limited by law, ethical obligation, or when patient safety is threatened. Refer to the Employee Assistance Program Site
 - Employee Health & Well-being: The MD Anderson department responsible for the occupational health of employees. Its two sections are: Occupational Health and the Employee Assistance Program.
 - The Wellness and Work Life Program: Provides programs on stress, physical activity, and health promotions. The Wellness coaches also offer one-on-one wellness advice. Refer to Human Resources Site, under Employee Health Worklife & Wellness.
 - Training for Practitioner Supervisors on Recognizing Signs of Impairment and Appropriate Actions: Provided by Employee Health & Well-Being, the EAP, and the Faculty Health Committee.
 - Other Educational Development Programs: Refer to the Human Resources in Site for other programs, management training, and conflict resolution.

Education & Training Conflict Management (ACA0078)

• General Information:

O It is the policy of MD Anderson to encourage fair, efficient, and equitable solutions for resolving conflicts that may arise during a Trainee's appointment. This conflict management policy provides methods for Trainees to seek prompt resolution, and no Trainee will be disciplined, penalized, or prejudiced for utilizing this policy in good faith. This policy applies to all Trainees appointed through Education & Training. Issues that may lead to conflict and may be grieved under this policy include but are not limited to authorship, benefits,

salary, responsibilities, work hours, work-related interpersonal conflicts, academic and corrective actions (other than termination); and other matters for which a hearing has not been granted under another institutional policy.

• General Process & Procedure: Informal Stage of Conflict Management

- A Trainee must present the complaint to the Program Director (PD) for discussion, consideration, and resolution within five working days from the date of the action that is the complaint's subject. If the PD is the subject of the complaint, the Trainee may bring it to the Executive Director of Advanced Practice in the Office of PA Programs to resolve it informally.
- o The Ombuds Office can also be a part of the informal conflict management process providing informal, unbiased, and confidential conflict resolution.
- If the conflict is not resolved after utilizing informal mechanisms mentioned above, the Trainee may file a Formal Grievance. The informal conflict resolution procedure must be used and completed before a Trainee files a Formal Grievance.

• General Process & Procedure: Formal Grievance

- A Formal Grievance, in the form of a signed PDF, must be submitted to the CETO with a copy to the Respondent, within five working days from the date the informal procedure is completed. The Formal Grievance must include the following: A factual description of the complaint or dispute resulting in the grievance; The name of the person(s) against whom the grievance is initiated; A brief description of informal attempts at resolution; Any other information that the Grievant believes to be relevant; A statement of the outcome or remedy the Grievant desires; and any other documentation that the Grievant believes to be relevant to the Formal Grievance should be attached to the statement.
- The Chief Education and Training Officer (CETO) will forward all submitted information to the applicable Department Chair and/or Division Head for review and determination. A written decision will be sent to the Grievant and Respondent within ten working days from receipt of the Formal Grievance.

• General Process & Procedure: Appeals Process

- o If the Grievant is not satisfied with the decision, a written appeal may be submitted to the Chief Academic Officer (CAO), with a copy to the CETO, within five working days of the date of the decision.
- O An appeal, in the form of a signed PDF, must be submitted, and include: a statement requesting an appeal, including why the Trainee feels the decision is unsatisfactory; a brief description of all attempts at a resolution to date; any further information that the Grievant believes to be relevant; and a statement of outcome or remedy the Grievant desires.
- The CAO, Chief Scientific Officer (CSO), or their designee will conduct a review of all the previous steps in the conflict resolution and Formal Grievance procedures, including all cumulative documents. The CAO, CSO, or their designee will provide a written decision to the Grievant and Respondent within ten days of the appeal date. The rendered decision is final.

Remediation Policy

General Process & Procedure:

The PA postgraduate fellow population is diverse and has variability in trainee exposure to clinical experiences. This can present unique challenges for trainees who may not be traditionally equipped for oncology practice and for preceptors and rotation advisors who desire a trainee to learn effectively and practice competently. The PA fellow's primary responsibility is to meet the training program requirements and maintain satisfactory professional, academic, and clinical performance during the program year. While it is hoped that all PA fellows who train within our program will be able to progress satisfactorily through the program, there may be instances when a PA fellow's training does not progress as hoped.

Underperformance can prevent or delay progress through training programs, graduation, or jeopardize future clinical practice work opportunities. In such cases, the rotation advisor is responsible for notifying program leadership. In partnership with the rotation advisor, program faculty and leadership will support the underperforming trainee utilizing clear documentation and direction. Success in the PA Postgraduate Fellowship in Oncology is contingent upon favorable trainee performance during rotations and maintenance of professional demeanor and behavior. This process is supported by the 'Supporting the Underperforming Learner: Physician Assistant Education' document and outlines its procedure. This document should be reviewed thoroughly by the PA fellow. It is located in the PA fellow's orientation binder.

When supportive interventions for the underperforming PA fellow and strategic learning support fail, an escalation strategy or remediation plan may be considered. In such cases, it is the responsibility of the Program Director (PD) and the Medical Director (MD), working with the program's rotation advisors, to remediate the fellow. Continuation in the PA Fellowship Program on unrestricted status is contingent upon favorable performance based on rotation performance evaluations, end of rotation oral/written examinations, quarterly milestone evaluations, and self-evaluations. For PA Fellows where improvement in certain competency areas is deemed necessary by the PA fellowship rotation advisors and/or program faculty (PD or MD), formal remediation through corrective action using an Expectations Memo will be initiated. If the PA fellow does not improve as defined in the Expectations Memo, they will be dismissed from the program. This process is supported by the 'Remediation Plan – Postgraduate PA Fellowship in Oncology' document and outlines its procedure. This document should be reviewed thoroughly by the PA fellow. It is located in the PA fellow's orientation binder.

Education & Training Corrective Actions and Appeals Policy (ACA0068)

• General Information

This policy provides a consistent and equitable means to address the unsatisfactory conduct of a Trainee. It is the policy of MD Anderson to address unacceptable behavior of a Trainee fairly and efficiently. This policy applies to all Trainees appointed by the Division of Education and Training. Depending on circumstances, Trainees who are compensated by MD Anderson may alternatively be subject to MD Anderson workforce member Corrective Action policies and procedures in consultation with MD Anderson's Division of Human Resources.

• Conduct Standards

- All Trainees are expected and required to obey federal, state, and local laws; to comply with The University of Texas System Board of Regents Rules and Regulations (Regents' Rules and Regulations); the rules and regulations of MD Anderson and The University of Texas System (UT System), and directives issued by administrative officials of MD Anderson or UT System in the course of their authorized duties; and standards of conduct appropriate for an academic institution.
 - Any Trainee who engages in conduct that violates Regents' Rules and Regulations, MD Anderson or UT System rules, or federal, state, or local laws, is subject to Corrective Action whether the conduct takes place on or off Campus.
 - A Trainee is also subject to Corrective Action for prohibited conduct that occurs while participating in off-Campus activities sponsored by MD Anderson or UT System, including but not limited to rotations, clinical assignments, or field trips.
- Prohibited conduct that may constitute grounds for Corrective Action includes but is not limited to: academic or research dishonesty; Alteration or falsification of any official document or record, including patient records; submission of false information or omission of requested information that is required for or related to an application for admission, the award of a degree, or as a part of any official record; Unprofessional physical behavior, including assault, acts or threats of violence: Harassment of any person; inappropriate conduct of a sexual nature, including sexual harassment, sexual abuse, sexual violence, crimes of domestic violence, dating violence, sexual assault, stalking; unauthorized possession or use of property, equipment, supplies, buildings, or facilities owned or controlled by the UT System or MD Anderson, or the defacing, mutilation, or destruction of such property; hazing, either singly or in concert with others, or failing to report hazing; obstructing, disrupting, or interfering with, either singly or in concert with others, any authorized teaching, educational, research, administrative, Corrective Action, public service, or other activity or public performance; conduct that endangers the health or safety of any person; unauthorized use or possession of firearms or other weapons, explosives, or hazardous chemicals; and unauthorized distribution of copyrighted materials, including peer-to-peer file sharing.

• General Process & Procedure: Corrective Action

- Any Trainee who receives a period of suspension as a Corrective Action is subject to further Corrective Action for any prohibited conduct that takes place during the period of suspension.
- Any Trainee who has been suspended or expelled as a Corrective Action is prohibited from being on Campus during the period of such suspension or expulsion without the prior written approval of the Graduate Medical Education or Research Trainee Programs.
- Potential Corrective Actions for prohibited behaviors may include, but are not limited to:
 - Probation;
 - Withholding or withdrawal of credit or a certificate;
 - Prohibition from Campus/denial of re-admission;

- Restitution or reimbursement for damage to, or misappropriation of, institutional/MD Anderson property;
- Suspension of rights and privileges, including participation in MD Anderson employment or extracurricular activities;
- Expulsion/dismissal from training program (with the termination of related employment); and/or
- Other Corrective Actions as deemed appropriate under the circumstances.
- o If a Trainee is found responsible for the illegal use, possession, and/or sale of a drug or narcotic on Campus, the minimum Corrective Action assessed shall be suspension from the Campus and/or suspension of rights and privileges for a specified period.
- o Imposition of Corrective Actions may result in withdrawal of visa sponsorship.
- Review sections 3.0 9.0 of policy ACA0068 outline the following processes and detailed procedures:
 - Corrective Action Procedures
 - Immediate Interim Action
 - Uncontested Corrective Action
 - Contested Corrective Action and Sanctions

• General Process & Procedure: Hearings and Appeals

- Hearing Process
 - The Trainee must submit a written request for a hearing stating the specific reasons for the appeal to the CETO. The request must be received in the Research Trainee Programs (RTP) no later than five business days after the appealing party has been notified of the Corrective Action assessed by the CETO. The date the notice of the charges and Corrective Action is sent initiates the five-day deadline. When an interim Corrective Action has been taken, the Trainee will be given the opportunity to have a hearing of the charges within 10 business days after the interim Corrective Action was taken; however, at the discretion of the CETO, the 10-day period may be extended for a period not to exceed an additional 10 business days.
 - The CETO will appoint a hearing panel, consisting of three members. The party may challenge the impartiality of any hearing panel member. The challenge must be in writing, state the reasons for the challenge, and be submitted to the hearing panel member being challenged and the CETO at least five days prior to the hearing. The hearing panel member will be the sole judge of whether they can serve with fairness and objectivity. Except in those cases where immediate interim Corrective Action has been taken, the Trainee shall be given at least 10 business days written notice of the date, time, and place of the hearing and the names of the hearing panel members.
 - Each party shall provide the other party with a list of witnesses, a summary of the testimony to be given by each, and a copy of any documents to be introduced at the hearing at least five business days prior to the hearing. Each party shall have the right to appear, present testimony of witnesses and documentary evidence, interview and cross-examine witnesses. A Trainee may be assisted by an advisor of choice, including an attorney.

Appeals Process

- The appeal process will be used when a Trainee appeals the Corrective Action of academic sanctions, suspension, or dismissal from their program; when a Trainee appeals the charge in cases that do not include academic sanctions, suspension, or dismissal from their program; or when RTP or the Trainee appeals the decision of the hearing panel.
- The appealing party must submit a written appeal to the appeal official stating the specific reasons for the appeal and any argument to the appeal official with a copy to the other party. The appeal must be received no later than 10 business days after the appealing party has been notified of the Corrective Action(s) assessed by the Chief Academic Officer (CAO) or the decision of the hearing panel. The date the notice of the Corrective Action(s) or decision is sent initiates the 10-business day deadline. The non-appealing party may also submit a response to the appeal, which must be received no later than five business days after receipt of the appeal, with a copy to the other party. The action of the appeal official shall be communicated in writing to the Trainee and CETO within 30 calendar days after the appeal and related documents have been received. The decision of the appeal official is final.

Corrective Action Record

A permanent written record of Corrective Action will be maintained for every Trainee that has been assessed a suspension, expulsion, or denial, revocation, or withdrawal of credit or a certificate. A record of scholastic dishonesty shall be maintained for at least five years unless the record is permanent in conjunction with the above stated conditions.

PA Supervision in Patient Care Delivery Procedure and Process

Education of PA fellows is the primary purpose of the MD Anderson Postgraduate Physician Assistant Program in Oncology. PA fellows work under the direction, supervision, and responsibility of a physician in accordance with policies established by the Medical Staff and consistent with applicable Texas statutes and the Rules and Regulations of the Texas Physician Assistant Board (TPAB). PA fellows exercise judgment within their areas of competence and participate directly in the medical care of patients under the supervision and direction of a member of the Medical Staff.

It is the policy of MD Anderson to train PA fellows to the fullest extent possible, consistent with applicable statutes, regulations and sound medical care. Individual departments, providers, and supervising physicians may restrict or limit the range of medical care provided by PA fellows under their supervision.

PA fellows will receive privileges to provide Core PA privileges including performing histories and physical examinations, ordering diagnostic procedures, formulating a diagnosis and developing a treatment plan and assisting at surgery. Consistent with institutional policies for advanced practice providers, department-specific privileges and department-specific specialty procedures may be performed by PA fellows with direct proctoring and supervision by individuals that are privileged by the Credentialing Committee of the Medical Staff to perform these clinical and surgical procedures. PA fellows may only perform department-specific specialty procedures with direct supervision.

When a PA fellow is involved in a patient's care, the advisor, preceptor or MD Anderson attending physician must continue to maintain personal involvement in the care of that patient.

Clinical and Education Work Hours Policy for GME and CHEP Trainees (ACA0086)

It is the policy of MD Anderson to ensure that trainee work hours promote an environment that provides high-quality education and safe and effective patient care while promoting the well-being of clinical trainees. Each program must have written policies and procedures consistent with institutional requirements for trainee work hours and the working environment. Program Directors are responsible for establishing and distributing work schedules. The PA fellowship aligns with ACGME maximum clinical and education work hours and limits it to no more than 80 hours per week. PA fellows do not participate in a call schedule. Compliance with these Clinical Experience and Education standards is a responsibility shared by the PA Fellowship Program Director, the institution, and PA trainees.

Research and Intellectual Property

Trainees who engage in scientific research at MD Anderson are responsible for maintaining the integrity of all research projects and must keep permanent, auditable records of all experimental protocols, data, and findings, which is governed by 'Principles for Scientific Research Policy' (RES3535). Trainees who may create intellectual property must comply with the 'Intellectual Property Policy' (ADM0345) contained in Series 90000 of the Regents' Rules and Regulations. This governs the ownership, development, and commercialization of the Intellectual Property of MD Anderson, the negotiation of equity in conjunction with an Intellectual Property licensing transaction, and the handling and disposition of equity received by MD Anderson as part of an Intellectual Property licensing transaction. The policy applies to all types of intellectual property, including, but not limited to, any invention, discovery, creation, know-how, trade secret, technology, scientific or technological development, research data, works of authorship, and computer software regardless of whether subject to protection under patent, trademark, copyright, or other laws.

Moonlighting Policy

PA fellows are discouraged from moonlighting, either within MD Anderson Cancer Center or outside the institution. Under certain circumstances moonlighting may be authorized. Prior to beginning any moonlighting employment, PA fellows must submit to the Program Director a written request outlining the nature of the employment, proposed work hours and duration of moonlighting employment. PA fellows must receive credentialing and privileges through the Credentialing Committee of the Medical Staff if they seek employment in another department within MD Anderson Cancer Center. If any PA fellow is authorized to moonlight within MD Anderson Cancer Center, these hours must also be recorded in the New Innovations program, with verification through the institutional time clock system, to ensure compliance with work hour policies.

PA Fellow Medical Care Policy

If the PA fellow became seriously ill during work hours, they may be assessed in the Acute Cancer Care Center by a clinician who does not serve as program faculty or their preceptor. If emergency care is needed, aid will be rendered in line with code blue and emergency services MD Anderson's policies. PA Fellows have access to Employee Health and Well-Being and its services at MD Anderson as they deem appropriate. The health records of PA Fellows are maintained confidentially and can be only be released with the written permission of the PA Fellow.

Should the PA fellow wish to receive cancer care at MD Anderson Cancer Center, they may do so but these services may not be provided by the program faculty or their preceptors/advisors.

Refer to the Research Trainee intranet site, which provides a comprehensive list of all related institutional educational trainee policies. This can be found online at:

https://mdandersonorg.sharepoint.com/sites/research-trainee-programs/SitePages/Policies.aspx

Medical Records

PA trainees may be responsible for direct patient care or ancillary services provided to the patient. The medical record documentation associated with patient care should be completed promptly, accurately, verifiably, and legibly. Failure to complete medical records promptly and accurately indicates failure to deliver adequate care to patients, is an issue of professionalism, and may be considered grounds for academic corrective action, including, but not limited to revocation of dictation privileges, suspension with or without pay, probation, and/or dismissal. Medical records are the property of the respective hospital/clinic and are not to be removed unless properly authorized. PA trainees are not "custodians" of medical records and may not produce records in response to requests for or legal processes (including subpoenas) purporting to require such production. All requests for and/or legal processes requiring production of medical records must be referred to the Office of Legal Services immediately upon receipt. The process initiates and maintain an accurate, timely, and meaningful electronic record of clinical care provided to MD Anderson patients, in accordance with the federal regulatory agencies (CMS), federal and state law and MD Anderson Medical Staff Bylaws is governed by the 'Medical Documentation' policy (CLN0555). This policy complements the 'Medical Records' policy by providing detailed standards for clinical documentation that is part of the Patient's Medical Record (CLN0554).

Quality Assurance

Trainees will be informed of the various hospitals' organizations for and methods of providing quality assurance. Trainees should participate in the quality assurance activities of the clinical services to which they are assigned.

Access to MD Anderson Network and E-mail

Upon meeting all requirements, completing all paperwork relevant to their appointment and signing the Information Resources and Data User Rights and Responsibilities Acknowledgment Form (Information-Resources-Rights-Acknowledgement.pdf), PA trainees will receive a MD Anderson e-mail address and network access for use during the duration of their appointment. PA trainees are subject to and shall abide by the terms of MD Anderson Institutional Policy 'Use of Information Technology Policy' ADM0263. All use of the MD Anderson network, including internet access, is a privilege that must not be abused. Any prohibited or inappropriate use of the network and the e-mail system may result in termination of such privilege and may be grounds for other adverse action.

E-mail Communication

E-Mail is the predominant means of communication between the PA Trainees, PA Office, and the Fellowship Program. Communications may include information regarding stipends and benefits, important announcements from affiliated hospitals, notification of house staff meetings, etc. Trainees must routinely check email and periodically clear unnecessary messages from the email inbox. Trainees have no expectation of privacy in any communication through the MD Anderson Network, including e-mails. Trainees are encouraged to limit the use of MD Anderson resources for personal emails and are accountable for the information in their MD Anderson mailboxes.

Credentials on ID Badges

It is the policy of MD Anderson to ensure that identification badges are correct and consistent in acknowledging the credentials of all trainees. In addition, ID badges must be worn in a highly visible manner while on property owned or under the control of the institution. ID Badges may not be traded, loaned, or shared. The ID Badge is worn only by the person to whom it was issued. PA fellows must maintain compliance with the 'Identification (ID) Badge Policy' (ADM0282).

Retention of Health Information

All Trainee Health Information Records are forwarded to Employee Health for maintenance. Employee Health maintains the originals of all trainee health information for the trainee's appointment. Upon terminating from the Institution, the health information is scanned and maintained in Employee Health for 30 years. The PA Fellowship program faculty and administrators do not have access to PA fellow confidential health records.

Release of Trainee/Verification Information

It is the policy of MD Anderson to ensure the lawful and consistent release of trainee information for purposes of responding to requests for information and to ensure the integrity and confidentiality of trainee information to the extent allowed by law.

Reduction in Size or Closure of Program Policy

If the Institution decides to either reduce the size of or close the program, or certain parts of the program, the PA Fellows will be notified as soon as possible. Every reasonable effort will be made either to allow the PA Fellows time to complete their education or assist the PA Fellows in identifying other employment opportunities that align with their training interests. This is aligned with MD Anderson's Graduate Medical Education process for program closure or reduction.

Voluntary Termination (Resignation)

The decision to withdrawal from the PA fellowship requires serious consideration and should be made only following extensive consultation with counseling supports available to PA fellows. A PA fellow may choose to withdraw from the program for several reasons including the following, ongoing issues with academic underperformance, career choice, personal reasons, extended leave of absence making circumstances around return difficult. The process for voluntary resignation or withdrawal from a program is governed by section 3.0 of MD Anderson's 'Non-Renewal and Termination of Appointment Policy for Trainees' policy (ACA0062). A PA fellow must provide written notification to OPAP and the program director regarding the voluntary termination of appointment. A minimum of thirty (30) days' notice is expected. PA fellows are required to report to work until the last working day specified in their notification of termination unless otherwise authorized by the assigned program director and approved by the CETO.

Sexual Misconduct Under Title IX: Reporting, Process, and Resources Policy (ADM3384)

This policy informs all workforce that The University of Texas MD Anderson Cancer Center (MD Anderson) will not tolerate Sexual Misconduct in the workplace and learning environments. It also identifies resources available to those subjected to Sexual Misconduct and outlines options for addressing concerns about Sexual Misconduct. Note: Sexual Harassment is a form of Sexual Misconduct.

PA fellows should review all mentioned programs and institutional policies and procedures independently and thoroughly.

PA Fellows may seek, find, and search the Institutional Policies SharePoint site via the following link: Find an Institutional Policy.

Additional Resources

Research Trainee Programs (RTP):

Contact Kameshia Hunt, Sr. Academic Coordinator, at 713-563-9531

Medical Staff & Credentialing Services:

Contacts:

Sandra Tillman, Supervisor, at 713-794-5537 Danyelle Cormier, Credentialing Coordinator, at 713-792-7135 Anishia Williams, Credentialing Coordinator, at 713-794-1595

4-INFO

Dial 713-794-4636 for technical issues with computer or printer problems One Access for help with usernames and passwords

Documentation Compliance

Contact Anita Holloway, Sr. Compliance Analyst, at 713-792-2417.

OneConnect (aka EPIC, the EMR)

https://mdandersonorg.sharepoint.com/teams/OneConnect ISTraining@mdanderson.org

Patient Billing

Contact Sharon Olvera at (713) 563-3523 stolvera@mdanderson.org

Ethics Office

713-792-8775

UM-Ethics@MDAnderson.org

Office of PA Programs

713-794-5002

OneConnect Help Desk

4-INFO

Research Medical Library

713-792-2282

RML-Help@MDAnderson.org

myHR

5-MyHR

Paging Services

4-INFO

<u>Microsoft Teams – PA Fellowship Orientation and Resources</u>

Clinical Health Education Programs SharePoint – <u>Trainee Information</u>

Health & Well Being SharePoint - Feel Well

MD Anderson Branded Templates: <u>Brand Central</u>.

Graduate Medical Education – Email: ogme@mdanderson.org.

Research Trainee Programs – Email: <u>RTP-EAS@mdanderson.org</u>

PA Fellow Attestation

I,	, have read, understood and agree to the policy outlined in
the Postgraduate Physician A	ssistant in Oncology Fellowship Program Handbook.
Print Name	
Signature	
Signature	
Data	
Date	