LEHIGH VALLEY HEALTH NETWORK GRADUATE MEDICAL EDUCATION

GME Policy - Institutional Agreements

| I. SCOPE: | |
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| Lehigh Valley Health Network (LVHN) adopts this p | olicy for the following selected |
| licensed entities: | □ Labiah Vallavillaaniaa |
| ☐ Lehigh Valley Hospital | ☐ Lehigh Valley Hospice |
| ☐ Lehigh Valley Hospital — Pagenta | ☐ Pocono VNA / Hospice |
| □ Lehigh Valley Hospital – Pocono□ Lehigh Valley Hospital – Schuylkill | ☐ Lehigh Valley Home Care – Schuylkil☐ Lehigh Valley Home Care – Hazleton |
| ☐ Transitional Skilled Unit | □ LVHN Children's Surgery Center |
| ☐ Lehigh Valley Home Care | □ LVHN Surgery Center – Tilghman |
| ☐ Lehigh Valley Hospital – Coordinated Health Alle | 3 , |
| ☐ Lehigh Valley Hospital — Coordinated Health Bet | |
| □ LVHN East Stroudsburg Ambulatory Surgery Cel | |
| □ LVHN Ambulatory Surgery Center of Lopatcong | |
| | • / |
| Medical and Dental Resident and Fellow Phy | ysicians |
| All ACGME and CODA approved postgraduate Health Network (LVHN). | training programs at Lehigh Valley |
| II. POLICY | |
| It is an ACGME Institutional Requirement that t develop and implement a formal written policy | |
| III. DEFINITIONS | |
| ACGME – Accreditation Council for Graduate Medical Education | |
| CODA – Council on Dental Accreditation | |
| GMEC – Graduate Medical Education Committee | ee |
| Sponsoring Institution – The institution that ass program of GME | umes the ultimate responsibility for a |

Participating Institution – The institution that provides some part of the resident's

IV. PROCEDURE

training outside of LVH.

- A. LVHN retains responsibility for the quality of GME even when resident or fellow education occurs in other institutions.
- B. Current institutional agreements (i.e., master affiliation agreements and/or program letters of agreement) must exist between the sponsoring institution and all of its major and participating institutions, in accordance with ACGME and CODA requirements.
- C. LVHN must assure that each of its ACGME- or CODA accredited programs has established agreement (or memoranda of understanding) with its participating institutions in compliance with the specialty's program requirements. A copy of agreements covering recurrent rotations must be filed in the Department of Education's Graduate Medical Education office, in the Department of Finance, and as appropriate be uploaded to the respective accrediting body's information system.

The letter of agreement should:

- 1. Identify the faculty who will assume both educational and supervisory responsibilities for residents;
- 2. Specify their responsibilities for teaching, supervision, and formal evaluation of residents;
- 3. Specify the duration and content of the educational experiences; and
- 4. State the policies and procedures that will govern resident education during the assignment.

V. REFERENCES: N/A

VI. ATTACHMENTS / FORMS: N/A

VII. DISCLAIMER:

This policy and the implementing procedures are intended to provide a description of recommended courses of action to comply with statutory or regulatory requirements and/or operational standards. It is recognized that there may be specific circumstances, not contemplated by laws or regulatory requirements that make compliance inappropriate. For advice in these circumstances, consult with the Departments of Risk Management and/or Legal Services, as appropriate.

VIII. REVIEW:

Origination: mm / yyyy

Review / Revision: mm / yyyy, mm / yyyy

Approved by the Graduate Medical Education Committee

| Approved by: Margaret Hadinger (Dir Grad Med Educ / Dio) | Approval Date: 12/15/2021 |
|--|------------------------------|
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