The University of Texas MD Anderson Cancer Center

Postgraduate Physician Assistant Fellowship Program in Oncology Handbook

March 2023
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Section 1

Introduction

The University of Texas MD Anderson Cancer Center is one of the world’s leading comprehensive cancer centers and is located in the Texas Medical Center, one of the largest business district in the nation. A state-supported facility, MD Anderson has over 680 patient beds, over 40 operating rooms, and more than 2,000 medical and surgical faculty. Guided by the mission of excellence in patient care, research, education and prevention, over 1 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.

Welela Tereffe, MD, Chief Medical Executive, Professor, Radiation Oncology
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PA Fellowship Steering Committee Members

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Chief Medical Executive
Professor, Radiation Oncology
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Pager: 713-606-3710, E-mail: wtereffe@mdanderson.org

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PA Fellowship Evaluation and Curriculum Committee

Chair: Katie DeLucia, MPAS, PA-C
Office of Physician Assistant Programs –Director

Administrative-Operational Support: Michelle Castillo
Office of PA Programs – Operations and Administrative Management

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

Chris Lopez, MBA
Office of Physician Assistant Programs – Program Manager

Haleigh Mistry, PA-C
Lymphoma/Myeloma – Physician Assistant

Leah Theriot, PA-C
Radiation Oncology – Physician Assistant

Reviewed and updated 4.24.23
Ly Dsouza, PA-C
Lymphoma/Myeloma Research – Physician Assistant

Executive Leadership

Todd Pickard, MMSc, PA-C
Office of Physician Assistant Programs – Executive Director

Medical Director – TBA

Welela Tereffe, MD, Medical Director and Executive Sponsor (ad interim)
Chief Medical Executive
Professor, Radiation Oncology

Rotation Advisors – see rotation curriculum

Roles and Responsibilities

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

Michelle Castillo – Operations Manager – oversee the administrative aspects and manage 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.

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**Clinical Mentors** – provide support and resource assistance to the PA Fellow during their training year.

**Abey Mathai, PA-C**, Supervisor, Advanced Practice Providers, Neuro-Oncology
**Jeannette Mares, PA-C**, Manager, Advanced Practice Providers, GI Medical 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 – QI/PI

**Simulation Trainers** – coordinate the Simulation Center learning activities:

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

Reviewed and updated 4.24.23
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 Welela Tereffe, MD, Chief Medical Executive.

The future Medical Director will report directly to Dr. Tereffe and have a dyad partnership with Katie DeLucia.
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 perform motor function 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

Applications are submitted through the DISCOVER online system. Applicants should visit the Postgraduate Physician Assistant Program in Oncology website to find out how to apply using the DISCOVER online system as well as clinical rotations, benefits and expenses and eligibility.

Once online applications are submitted, the following supporting documents must be completed by a set due date. These include:

• Curriculum Vitae
• Statement of Intent
• Unofficial Transcript of Highest Degree (PA School)
• Reference contact information
• Knowledge Assessment

Applicants will be asked to complete an submit the Reference Contact Information form found in their Discover account in a timely manner, as the program will be contacting the individuals provided on the form on their behalf to complete another specific reference form. If employed, one reference must be from a current supervising physician. Students/new graduates must provide at least one reference from their program director or a clinical faculty member. A curriculum vitae should be included with the admissions application.
Interviews

Interviews 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. The day for the formal interview is usually an all-day event. Interview day is at the expense of the applicant. In addition to interviews, 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 received back, 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 (formerly AVA Trainee)

Once an offer has been made, the Research Trainee Programs Office is responsible for providing appointment letters and contacting HR for the appropriate processing.

- The following items are required prior to appointment and are submitted to the Research Trainee Programs Office by the Office of Physician Assistant Programs:
  - Completed application
  - Unofficial PA school transcripts
  - CV
  - Two references (form to be sent to the providers by the Office of PA Programs)
  - Recommendation Form for Appointment (completed by the Office of PA Programs)

- The following items are required prior to appointment and are submitted to the Office of Research Trainee Programs, through Discover, by the candidate:
  - Immunization compliance report
  - Completed and signed background check forms
  - Signed appointment letter

- The following items are required prior to the start date and are submitted to the Office of Research Trainee Programs, through Discover, by the candidate:
  - Proof of NCCPA certification
  - Copy of Texas PA license
  - PA school diploma

Medical Staff and Credentialing Services

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

- 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
  - Memo from Medical Director requesting patient care duties
  - Position Description signed by Medical Director and Program Director
  - PA Core Privileges signed by Medical Director and PA fellow candidate (electronic)
  - Intent to Practice

- The following items should be submitted to the MSCS by the candidate:
  - 3 professional references (form to be provided)
  - 1 Current Competency reference (Program Director or former employer/supervisor)
  - 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

Reviewed and updated 4.24.23
Texas Medical Board

Once the candidate has accepted the offer to enter the program, the process of applying for Texas licensure should begin. There are certain requirements and documentation to be submitted to the Texas Medical Board, along with an application fee, that can be found on their website at: http://www.tmb.state.tx.us/professionals/physicianassist/applicants/pa_eligibility.php.

Candidates should expect that their PA license will be issued no sooner than 60-90 days after all documents have been received by the Texas Board. They will not be able to begin the program until the license has been issued. Temporary licenses can be obtained if the PA license will not be issued before the program start date and this may also take up to 60 days or longer, so candidates must apply early. Applicants must obtain either a temporary or permanent license to begin the credentialing process and maintain regular communication on the status of any licenses 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 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 governed and conducted by MD Anderson’s Employee Health. Health screenings are not conducted by program faculty nor are they privy to employee/trainee health records. Employee Health 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:

A. All Clinical Operations faculty, trainees/students, and other members of MD Anderson’s workforce.

B. Patient Care Facilities workforce members who have patient contact.

C. 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. Refer to Vendor Summary Agreement (Section 6.13).

**Other Immunizations – Outbreak Situations**

In the event of an outbreak with a VPD.

Follow the Outbreak Plan (see Outbreak Plan (MD Anderson Institutional 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:

A. Medical conditions identified as contraindications or precautions by the CDC (see Immunization of Health Care Personnel – Recommendations of the Advisory Committee on Immunization Practices).

B. 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).

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 (see the Exposure Control Plan Policy (MD Anderson Institutional Policy # CLN0428)).

B. 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 (see Varicella and Varicella Zoster Policy (MD Anderson Institutional Policy # CLN0433)).

Policy Compliance

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

A. 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 (opposite the photo) that is provided by Employee Health & Well-being at time of vaccination to indicate policy compliance.

B. Completion of Influenza Vaccine Waiver/Declination Form requesting specified vaccine exemption and compliance with Section 3.3 of this policy.

C. 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.

D. Policy compliance for exempt workforce members is the responsibility of the supervisor or manager of each work area.

Disciplinary Actions Failure to comply with this policy may result in disciplinary action up to and including termination.

Reviewed and updated 4.24.23
PA Fellow Responsibilities

Attendance/Participation

Regular attendance is essential in completing the academic requirements of the program. A professional demeanor and attitude are a very important part 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 to their clinical assignments. Prior to each rotation, the curriculum including the learning objectives, should be reviewed. A reading list is provided for each rotation. Although these readings may be completed during the rotation, preparation prior to the first day of each rotation is expected by the preceptors. Items that will help in preparation for the rotation include reviewing the key points of each major malignancy for the rotation. Self-study, including 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 usually provided via email and will typically include clinical assignments, rotation conferences, institutional conference/lectures and meetings. In addition, rotation advisors may communicate additional details of the schedule or when schedule changes are necessary.

Typically, your weekly schedule will include clinical, didactic and administrative work Monday through Friday. It is the responsibility of the fellows to communicate 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 type 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 or Operations Manager must be contacted by email immediately so that advisors/preceptors can be notified. Additionally, your clinical preceptor and advisor should be contacted by email. The rotation day ends when the team/preceptor dismisses the PA fellow for the day. The instructional faculty, known as the advisors, will schedule clinical assignments to provide a variety of experiences within each rotation and only the advisors will make changes in the schedule. The PA Fellow and rotation advisor can tailor learning experiences based on fellow request or preference. Ultimately, 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.

Reviewed and updated 4.24.23
See Duty Hours policy for additional information regarding limitations to work hours.

Communication

PA fellows will receive an Institutional email address during orientation and will have access to it from their office laptop, institutional computers in clinical work areas, and the 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 24 hours of email receipt.

An iPhone will be issued, upon director and/or Institutional approval, for institutional email, institutional phone calls 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 not be functioning or be forgotten at home, the PA fellow should notify their current rotation advisors. The PA Fellows should notify program leadership so new equipment can be ordered, if needed. 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 residency or 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 scope of the training program, all residents and fellows must function under the supervision of an MD Anderson attending physician with appropriate clinical privileges. It is expected that a responsible attending physician is present on service and the preferred method of contact for those physicians is known (typically pager or mobile text messaging). Each training program is constructed to encourage and permit residents and fellows to assume increasing levels of responsibility commensurate with their individual progress in experience, skill, knowledge, and judgment. Residents and fellows must not attempt to provide clinical services or do procedures for which they are not trained. Each resident or fellow is responsible for communicating significant patient care issues to the attending physician. Such communication must be documented in the record. Failure to function within graduated levels of responsibility or to communicate significant patient care issues to the responsible attending physician may result in the removal of the resident or fellow from patient care activities. The trainee must demonstrate his or her ability to assume increased responsibility for patient care. This determination is the responsibility of the Program Director with advice from members of the teaching staff. Advancement to higher responsibility will be on the basis of an evaluation of his or her 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.

Reviewed and updated 4.24.23
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 Non-Physician Clinical Education Trainee Manual. A tracking calendar of time off requests for program administration and leadership is housed in the MS Teams PA Fellowship and Orientation Resources hub.

Scheduled time off

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 month prior. 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 in excess of 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.

Scheduled medical leave should be requested as soon as possible.

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

In the event that 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.
Stipend

The PA Fellows are allotted an annual stipend of $93,500. PA Fellows are paid on a monthly basis on the 1st of each month. Direct deposits are issued once a month for a total of twelve checks per year. Payment is inclusive from the first to the last day of the current month. Direct deposits are issued on the first working day of the following month. [For example, if you begin your appointment on April 1st, you would receive your first paycheck on May 1st.]

For questions related to pay, please visit https://mdanderson.org.sharepoint.com/sites/Home/SitePages/Your-Pay.aspx or contact myHR directly. PA Fellows are not eligible to participate in any incentive programs, such as Professional Practice Model for Advanced Practice Providers, Anderson Award, etc. while they are in the trainee role.

Health Insurance

The PA Fellows are afforded Institutional health benefits including health insurance (trainee and their family), dental insurance, vision insurance, disability insurance (long and short-term), life insurance. For more information insurance benefits, please visit https://mdanderson.org.sharepoint.com/sites/Home/SitePages/Insurance-Benefits.aspx or UT Benefits. PA Fellows may access insurance benefits on Day 1.

Liability Insurance

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

FMLA/Extended Absence

PA Fellows are eligible under the Family and Medical Leave Act to have unpaid job protection for certain family and medical leave of absences. PA Fellows may visit https://www.mdanderson.org/about-md-anderson/employee-resources/leave/health-related-leave/fmla.html for more information.

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 https://mdanderson.org.sharepoint.com/sites/Home/SitePages/Taking-Leave.aspx.

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://mdanderson.org.sharepoint.com/sites/Home/SitePages/Retirement.aspx.
Holidays
Institutional holidays (refer to the intranet institutional calendar) are recognized by the Program. PA fellows will not be required to work on any institutionally recognized holiday.

Section 5

Program Content

Orientation
New employees (including PA Fellows) are required to participate in an institutional and program orientation. The program sets aside the two weeks for 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 will be providing prior to each rotation.

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:

Reviewed and updated 4.24.23
* 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 credit by visiting https://mdanderson.cloud-cme.com/default.aspx. A minimum of 1 hour CME per month is required for the PA Continuing Education (PACE) Lecture Series. 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. 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.

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 around 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.

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.

PA Fellows are required to complete the ASCO Advanced Practitioner Certificate Program. This is self-directed and can and should be in coordination with disease site rotations. At the end of the program year, PA Fellows should have successfully completed the online module training and complete the assessment to receive a certificate of completion.

**Quality Improvement / Performance Improvement**

The goal of this aspect of the program is to expose PAs for leadership positions within oncology practice settings to improve 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 provides an introduction to quality improvement and performance improvement. A quarterly interactive lecture series focused on creating a foundation of QI/PI knowledge is coordinated with a senior and experienced PA. Participation 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. The purpose of this aspect of the program is
to prepare PAs to develop the next generation of clinicians caring for cancer patients. Additional information will be provided upon enrollment in the program.

**Clinical Teaching Mentors:** provide support and resource assistance to the PA Fellow during their preceptor role.

**Lisa Sutherland, PA-C,** Physician Assistant, Surgical Oncology – Vascular Access Clinic  
**Melissa Arvide, PA-C,** Physician Assistant, Surgical Oncology – Inpatient Hepatobiliary Surgery
Section 6

Abstract/Manuscript Guidelines

Each PA fellow will be required to 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 that are of both 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 and their research mentor. PA Fellows are encouraged to submit their manuscript or abstract for publication or presentation. Time for review and revisions should be allowed prior to the end of the program year as the manuscript or abstract may be submitted to an appropriate journal or conference before the end of the program year. A certificate of program completion from the program cannot be issued until the manuscript has been accepted by the 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 in order to receive a certificate of completion for the program.
Presentation Guidelines

During the course of 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 Continuation 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 is available as needed as long as 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 had been met. The evaluations will be completed online.

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

Self-evaluation
At the beginning of the 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 a summative evaluation. Performance evaluations are shared with the PA Fellow during triannual and final evaluation meeting with the associate 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 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.
**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 success.

The final evaluation and copy of the required manuscript or abstract must be provided to the Research Trainee Programs office before a certificate of completion will be 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**

PA fellow must provide evaluation of key aspects of the program including clinical rotation, clinical educators/preceptors, program faculty and staff, and didactic lectures. The purpose of this evaluation is to support ongoing program improvement. Given the small size of the program, anonymity cannot be maintained. Comments should be provided in constructive and professional ways that foster such improvement.

Although the following schedule for conducting this evaluation will be used, any problems that occur during the program year, the program director should be contacted immediately to assist in resolving. Additional feedback may be requested periodically. All evaluations will be completed online/electronically.

**Rotation and Advisor Evaluations**

Prior to the end of each rotation, a rotation evaluation from will be made available online for the PA Fellow to complete. This will also encompass an evaluation of the rotation advisors regarding the rotation effectiveness.

**Didactic Lecture Activities/Events**

Didactic lecture series/conference will be evaluated yearly. Evaluation will be provided for PACE, Core Curriculum, Oncology Forum, the ASCO courses, Board Review course 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**

Beginning for the 2023 cohort, the program’s orientation process will be assessed.

**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 prior to the training year’s completion.

Reviewed and updated 4.24.23
Graduate Survey
After completion of the program a graduate survey will be sent by email. Graduate survey data will be conducted for a total of three years post-graduation. The evaluation will be sent to the PA fellow graduate and their supervisor/employer.

Section 9

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:

- **ASCO Education Courses (ASCO-SEP)**
  - These courses cover basic concepts in clinical oncology including all major malignancies, treatment modalities and related topics.
  - All lectures are online as podcasts/recorded lectures and can be accessed and viewed at any time but are required to be completed in conjunction with the related rotation.

- **PACE Lectures**
  - This lecture series is specifically intended for PAs at MD Anderson. Topics include oncologic, supportive care and general medicine.
  - Lectures 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 held on Tuesdays from 1:00-2:30pm
  - Attendance is expected.

- **Hematology and Oncology Board Review Course**
  - Annual review conference.
  - Usually held during the last week of September or October; typically via Zoom.
  - PA fellows will attend when the course is available during their program year. (For those beginning the program just prior to the conference, they will not attend that year. The conference syllabus may be obtained.)
  - Fellows are expected to attend the course in its entirety.

Reviewed and updated 4.24.23
RECOMMENDED

- Institutional Grand Rounds
  - The primary purpose of Institutional Grand Rounds is to present the faculty and trainees a survey of the ongoing research activity within the institution. This serves two major educational objectives. The first is to assure that faculty and trainees are up to date in their knowledge of the latest progress and advances in diagnosis, treatment and prevention. The second is to make the faculty aware of all the current research in the institution and to facilitate interaction and collaboration between the varied highly specialized disciplines within the institution.

- Division of Cancer Medicine Grand Rounds
  - The mission of the Division of Cancer Medicine is to eliminate cancer and allied diseases through integrated programs in patient care, research, education, and prevention. The Division of Cancer Medicine is striving to make progress to realize this mission, as the division builds strong partnerships with the other MD Anderson divisions as well as with other cancer centers nationally and internationally to develop more effective therapies that are targeted to each patient’s unique disease profile.

  - [https://mdandersonorg.sharepoint.com/sites/Home/SitePages/Events.aspx](https://mdandersonorg.sharepoint.com/sites/Home/SitePages/Events.aspx) (internal Institutional calendar website)

- Division of Surgery Grand Rounds
  - The mission of the Division of Surgery is to promote excellence in patient care, surgical safety, advanced surgical techniques, multidisciplinary research and educational programs.
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.

- **Procedure Encounters**
  - All procedures should be logged. The level of participation and supervising preceptor noted for procedures.

- **Patient Encounters**
  - Patient visits (inpatient and outpatient) will be logged under the “Continuity Clinic” section for all rotations.
    - The purpose of the visit should be used to determine the diagnosis(es) to be logged.
    - The PA fellow should be providing an assessment and plan for each logged diagnosis.
      - 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 the diagnosis of colon cancer as well as the patient’s pain, both conditions should be logged.
      - Additional encounter logs are required for each diagnosis.
    - Only diagnoses on the target list are required to be logged.
Program Policies

Please refer to the Clinical Education Non-Physician 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 who is actively experiencing job problems but who does not appear to be impaired may be referred to the EAP by management. This is a formal management referral and is not mandatory. See the Employee Assistance Program Policy (MD Anderson Institutional 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 (1) is dangerous to those around them, (2) is making threats to harm himself/herself or others, or (3) is otherwise medically or psychiatrically unstable; and/or

  - 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 make arrangements for a meeting with the EAP during business hours.
• Outside of business hours, page the EAP counselor on call for assistance at 713-404-3092.

• EAP Actions

• The EAP:
  o 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.
  o 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 The employee:
  o 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.
  o May be required to continue with medical care, drug and alcohol monitoring, and EAP follow-up for a designated period after returning to work.

Conflict Resolution Policy for MD Anderson Trainees (ACA0078)

• Informal Conflict Resolution Procedure
  o A Trainee must first informally present the complaint to the PD/M for discussion, consideration, and resolution within five (5) working days from the date of the action that is the subject of the complaint. If the PD/M is the subject of the complaint, the Trainee may bring the complaint to the Executive Director in an effort to resolve it informally.
  o In the event that the Trainee’s presentation of the issue is not resolved in Section 1.1 within five (5) working days, the Trainee or PD/M may continue the informal conflict resolution process by utilizing MD Anderson’s Ombuds Office. (Refer to the Ombuds Office Policy (UTMDACC Institutional Policy # ADM1039).)

Reviewed and updated 4.24.23
The MD Anderson Ombuds Office will be utilized as the designated neutral or impartial third-party that will assist the Trainee and other individuals involved in the conflict in resolving the issue.

If the conflict is not resolved after utilizing the Ombuds Office, the Trainee may file a Formal Grievance. The informal conflict resolution procedure must be used and completed before a Formal Grievance may be filed.

- Formal Grievance Procedure

  - Formal Grievances must be submitted in writing, signed, and dated, to the Associate Vice President of Academic and VISA Administration (AVP, AVA) or Vice President of Medical Education (VPME), as appropriate, with a copy to the Respondent, within five (5) working days from the date the informal procedure is completed.

  - The statement 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 all informal attempts at resolution.
    - Any other information that the Grievant believes to be relevant.
    - A statement of the outcome or remedy the Grievant desires.

  - Any documentation in the Grievant’s possession that is relevant to the grievance should be attached to the grievance statement.

  - The Respondent has five (5) working days to submit a response in writing to the AVP, AVA/VPME with a copy to the Grievant.

  - The AVP, AVA/VPME will forward all submitted information to the Department Chair, Division Head, or Chief Academic Officer, Science, as appropriate, for review and determination. A written decision will be sent to the Grievant and Respondent within then (10) working days from receipt of the appeal information. A copy will also be sent to the AVP, AVA/VPME.

- Appeal Process

  - If the Grievant is not satisfied with the decision issued in Section 2.4, a written appeal may be submitted to the Chief Academic Officer, with a copy to the AVP, AVA/VPME, within five (5) working days of the date of the appealed decision.

  - An appeal must be submitted in writing, signed, and dated, and include:
- A statement requesting appeal including why the Trainee feels the appealed decision is incorrect.
- A brief description of all attempts at resolution, to date.
- Any further information that the Grievant believes to be relevant.
- A statement of outcome or remedy the Grievant desires.

- The Chief Academic Officer or designee will conduct a review of all the prior steps in the conflict resolution procedure, including all cumulative documents. The Chief Academic Officer will provide a written decision within ten (10) working days of the date of the appeal.
- The Senior Vice President’s decision is final.

**Remediation Policy**

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 for their trainee to learn effectively and practice competently. A primary responsibility of our PA fellows is to meet the training program requirements, and to maintain a satisfactory professional, academic and clinical performance within the program. 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. A primary responsibility of our PA fellows is to meet the program expectations of the PA Postgraduate Fellowship in Oncology, and to maintain a satisfactory professional, academic and clinical performance within the program. 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 performance does not meet expectations or progress as hoped.

In such cases, it is the responsibility of the rotation advisor to notify 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 fellows’ 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 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 in which improvement in certain 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 fellows’ orientation binder.

**Education & Training Disciplinary Actions and Appeals Policy (ACA0068)**

1.1 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 Cancer Center 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.

1.2 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 discipline whether the conduct takes place on or off campus. A Trainee is also subject to discipline 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.

1.3 Conduct that is prohibited and that may constitute grounds for disciplinary action may include, but is not limited to:

   A. Academic dishonesty or research dishonesty, including cheating, plagiarism, unauthorized collusion, the submission for credit of any work or materials that are attributable in whole or in part to another person, taking an examination for another person, or any act designed to give unfair advantage to a Trainee or the attempt to commit such act;

   B. Altering or falsification of any official document or record, including patient records, or the submission of false information or omission of requested information that is required or related to an application for admission, the award of a degree, or any official record; MD Anderson Institutional Policy # ACA0068 Page 3 of 8 Published Date: 6/15/2018 Version #: 42.0

   C. Unprofessional physical behavior including assault, acts or threats of violence, or any behavior that violates the Violence Prevention Policy (UTMDACC Institutional Policy # ADM0257);

   D. Harassment of any person;

   E. Inappropriate conduct of a sexual nature, including engaging in sexual harassment, sexual abuse, sexual violence, crimes of domestic violence, dating violence, sexual assault, and

Reviewed and updated 4.24.23
stalking, or other behavior in violation of the Sexual Misconduct Prevention Policy (UTMDACC Institutional Policy # ADM0285);

F. Illegal use, possession and/or sale of a drug or narcotic;

G. 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;

H. Engaging in hazing, either singly or in concert with others, or failing to report hazing (Hazing at State educational institutions is prohibited by State law. TEXAS EDUCATION CODE, Sections 51.936 and 37.151-157);

I. Obstructing, disrupting, or interfering with, either singly or in concert with others, any authorized teaching, educational, research, administrative, disciplinary, public service, or other activity or public performance; J. Engaging in conduct that endangers the health or safety of any person;

K. Unauthorized use or possession of firearms or other weapons, explosives, or hazardous chemicals; and

L. Unauthorized distribution of copyrighted materials, including peer-to-peer file sharing.

1.4 A Trainee who receives a period of suspension as a disciplinary sanction is subject to further Disciplinary Action for any prohibited conduct that takes place during the period of suspension.

1.5 A Trainee who has been suspended or expelled for disciplinary reasons is prohibited from being on the property of MD Anderson during the period of such suspension or expulsion without prior written approval of the OGME or ORTP.

2.0 Sanctions

2.1 Potential sanctions for prohibited behaviors that may be assessed include, but are not limited to: disciplinary probation; withholding or withdrawal of credit or certificate; bar against re-admission; restitution or reimbursement for damage to or misappropriation of institutional or MD Anderson property; suspension of rights and privileges, including participation in MD Anderson employment or extracurricular activities; expulsion/dismissal from training program (with termination of related employment); and/or other sanction as deemed appropriate under the circumstances.

2.2 If a Trainee is found responsible for the illegal use, possession, and/or sale of a drug or narcotic on campus, the minimum sanction assessed shall be suspension from the campus and/or suspension of rights and privileges for a specified period of time.

2.3 Imposition of disciplinary sanctions may result in withdrawal of visa sponsorship.

3.0 Disciplinary Action Procedures

3.1 Once an allegation has been made that a Trainee engaged in prohibited conduct, the complaining party and/or the Trainee’s PD/M, as appropriate, shall report the allegations to the Department Chair and Education & Training. The VP will appoint an Investigator from OGME,
ORTP, or the Division of MD Anderson Institutional Policy # ACA0068 Page 4 of 8 Published Date: 6/15/2018 Version #: 42.0 Human Resources to conduct an investigation into the allegations of misconduct. The Trainee will be given an opportunity to respond to the allegations. An official from OGME or ORTP may participate in the investigation. Upon completion of the investigation, the Investigator will issue findings of facts to the VP.

3.2 The VP will review the findings and evidence, determine whether to proceed with charges, and, if so, determine the sanction appropriate to the charges. Before proceeding with Disciplinary Action, the VP will offer the Trainee the opportunity to meet, to provide a response to the charges and, upon request, to review the available evidence supporting the charges.

**PA Supervision in Patient Care Delivery Procedure and Process**

Education of PA fellows is the primary purpose of the MD Anderson Physician Assistant Oncology Post-Graduate Program. 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 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 independently if they have been privileged to do so.

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 Experience and Education (formerly Duty Hours)

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 that are consistent with the ACGME Institutional and Program Requirements of the specialties and subspecialties. Compliance with the ACGME’s Clinical Experience and Education standards is a responsibility shared by the 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 (RES#3535). Trainees who may create intellectual property must comply with the Intellectual Property Policy (ADM#0345) contained in Series 90000 of the Regents’ Rules and Regulations. The Intellectual Property Policy for MD Anderson Cancer Center is a means of recouping certain expenses incurred by the institution that are necessary for securing intellectual property rights that are developed by the institution and its employees. 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 privileging 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 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.

Other related Institutional policies:

- Education & Training Disciplinary Actions and Appeals Policy (ACA0068)
- Academic Actions and Appeals in Training Programs Policy (ACA1194)

Refer to the Research Trainee intranet site regarding institutional educational trainee policies. This can be found online at:

https://mdanderson.org/sharepoint/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 in a timely manner, meaningful, authenticated, and legible. 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 he or she is 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 Acceptable Use Agreement and User Acknowledgment Form, 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 #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.

Reviewed and updated 4.24.23
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.

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 duration of the trainee’s appointment. Upon terminating from the Institution the health information is scanned and maintained in Employee Health for 30 years.

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 the 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 termination or withdrawal from a program is governed by section 3.0 of MD

Reviewed and updated 4.24.23
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 his/her notification of termination unless otherwise authorized by the assigned program director and approved by Research Trainee Programs.

**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.
Additional Resources

Research Trainee Programs (RTP):
Contact Kameshia Hunt, Academic Coordinator, at 713-563-9531

Medical Staff Office:
Contacts:
Sandra Tillman, Supervisor, at 713-794-5537
Danyelle Cormier, Credentialing Coordinator, at 713-792-7135
Anishia Williams, Credentialing Coordinator, at 713-794-1011

4-INFO
Dial 713-794-4636 for technical issues with computer or printer problems

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

OneConnect (aka EPIC, the EMR) & Patient Billing
Contact Lisa Romero at lrromero@mdanderson.org for OneConnect concerns or
ISTraining@mdanderson.org for help with usernames and passwords

Ethics Office
713-792-8775

Office of PA Programs
713-794-5002

OneConnect Help Desk
4-INFO

Scientific Publications
713-792-3305

myHR
5-MyHR

Paging Services
4-INFO

Graduate Medical Education – Email: ogme@mdanderson.org

Research Trainee Programs – Email: RTP-EAS@mdanderson.org

Microsoft Teams – PA Fellowship Orientation and Resources

Reviewed and updated 4.24.23
PA Fellow Attestation

I. ____________________________, have read, understood and agree to the policy outlined in the Postgraduate Physician Assistant in Oncology Fellowship Program Handbook.

________________________________
Print Name

________________________________
Signature

________________________________
Date