GME Administrative Support Disaster Response Policy

Purpose:
To establish a policy that addresses administrative support for Graduate Medical Education programs and residents in the event of a disaster or disruption in patient care. This will include minimizing the impact of such a situation on the educational experience of the residents, protecting the well-being and safety of the residents, and assisting with provisions for continuation of the educational experience and resident assignments.

Definitions:
Extreme emergent situation: a local event, such as a hospital-declared disaster for an epidemic, limited to one sponsoring institution, participating institution of clinical setting that affects resident education or the work environment but does not rise to the level of an ACGME-declared disaster as defined in the ACGME Policies and Procedures.

Disaster: An extraordinary event or set of events which may be determined by Federal, State and/or local governments and as are defined by the ACGME cause significant alteration to the residency experience at one of more residency programs and institutions and impact an entire community or region for an extended period of time.

Policy:
I. In the event of an extreme emergent situation or a disaster, programs directors (PD) must consult and coordinate with the Designated Institutional Official (DIO) as the first point of contact concerning the impact of the situation on resident education and work environment and in accordance with institutional disaster policies.

II. In the event of a disaster, the Department leadership and PD in collaboration with the DIO and GME Office will make reasonable efforts to ascertain the whereabouts of program residents/fellows and endeavor to ensure their safety.

III. ACGME Institutional, Common and specialty-specific Program Requirements continue to apply in emergent situations for clinical assignments within a training program and institution.

IV. Residents are physicians and are expected to perform according to society’s expectations of physicians as professionals and leaders in health care delivery.

V. Residents should not be first-line responders without appropriate supervision given the clinical situation at hand and their level of training and competence. Resident performance should not exceed expectations for their scope of competence as judged by program directors and supervisors or by the limits of self-confidence in their own abilities.
VI. The Graduate Medical Education Committee (GMEC) working with the DIO, the GME Office and other sponsoring institution and affected participating institution leadership will work with individual sponsored programs and strive to restructure, reconfigure or reconstitute the educational experience as quickly as reasonably possible following the disaster or interruption in patient care.

VII. If an extreme emergent situation causes serious, extended disruption to resident assignments, educational infrastructure, or clinical operations which affect the sponsoring institution’s or program’s ability to conduct resident education in substantial compliance with ACGME standards, the DIO will report these events to the Executive Director (ED) for the Institutional Review Committee (IRC). The DIO will call or email the ED-IRC with information and/or requests for information.

VIII. Program directors will not directly contact their respective Executive Director of Residency Review Committee until the DIO has received confirmation of communication from the ED-IRC. Thereafter, PDs will call or email the appropriate ED-RRC with information and/or requests for information.

IX. Program directors must update the DIO regarding all conversations with the EDs-RRCs regarding any specialty-specific issues and should copy the DIO on all communications.

X. The DIO will notify the ED-IRC when an institutional extreme emergent situation has resolved.

XI. If as the result of a disaster situation a program or the institution cannot provide at least an adequate educational experience for each of its residents/fellows, so that disruption of an individual resident’s ability to complete required training in a specialty within the expected timeframe is minimized, the institution through the DIO and GME Office in cooperation with the PD will:
   a. Make best effort to arrange appropriate temporary transfers to other programs/institutions until such time as the program can resume the training experience and provide adequate educational experience, as determined by the GMEC and DIO in collaboration with the PD or
   b. Assist residents in permanent transfers to other programs/institutions to the extent possible in an expeditious manner so that they can continue their education if a disaster prevents the institution from re-establishing an adequate educational experience as determined by the DIO and GMEC in collaboration with the PD.
   c. Coordinate with hospital finance any issues related to resident relocation and reassignment of CMS funding for residents affected by the disaster. During periods of time that residents spend in temporary transfer to another institution, SUNY Downstate or the appropriate affiliate paysource for the resident will continue to provide salary and benefits, consistent with applicable laws and regulations.
XII. Within 10 days after the declaration of a disaster, the DIO will contact the ACGME to discuss due dates established by the ACGME for:
   a. Programs to submit program reconfigurations to the ACGME
   b. Informing each program’s residents of resident transfer decisions
   c. Any next steps needed.

XIII. SUNY Downstate programs offering to accept temporary or permanent transfers from other institutions affected by an extreme emergent situation of a disaster must receive approval from the DIO. Thereafter, a request for complement increase, if needed, must be submitted by the PD to the appropriate RRC via WebADS. Transfers over the complement can not be accepted without prior approval. The DIO, GMEC and GME Office will assist programs in coordinating acceptance and appointment of transfers.

XIV. At the outset of a temporary resident/fellow transfer, a program will inform each transferred resident of the minimum duration and the estimated actual duration of his/her temporary transfer, and continue to keep each resident informed of such durations if there is a need to extend such. Communication will be made using written or electronic means.

XV. In the event of a disaster, academic, personnel and training records will be protected and maintained as per State University of New York Records Retention Policy.

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