


Name of Policy: GME: Continuation of Training in the Event of Disaster or Interruption in Patient Care			
Policy Number:	3364-86-039-00	Revision/reviewed date: 05/20/2024	
Approving Officer:	Dean, College of Medicine and Life Sciences	Original effective date: 11/04/08	
Responsible Agent:	Director, Graduate Medical Education		
Scope:	UT College of Medicine Residents		
	New policy proposal		Minor/technical revision of existing policy
	Major revision of existing policy	X	Reaffirmation of existing policy

Policy

Administrative support will be provided for Graduate Medical Education (GME) programs and residents in the event of a disaster. Disasters or catastrophic events are defined as an event or sequence of events resulting in a significant alteration or disruption of the residency training program. Examples of disasters include: natural disaster, loss of a major participating site’s ability to provide patient care, catastrophic loss of faculty or program leadership, loss of a major participating sites accreditation, or lack of access to providing sufficient patient care experience at any major participating site to support resident competency development.

Purpose

To define the process and procedure for graduate medical education programs in the event of a disaster.

Procedure

In the event of a disaster the following protocol will be utilized:

- the Designated Institutional Official (DIO), or his/her designee, will be the primary contact person with the ACGME
- the DIO, in consultation with the Dean of the College of Medicine, will be the agent responsible for making the determination that a disaster exists.
- the DIO and GME Office, with direction from the Dean of the College of Medicine, will coordinate responses with entities involved, including affected programs, hospitals and other care sites.
- The DIO, Dean of the College of Medicine, and ProMedica Metro leadership are responsible for implementing solutions that will allow the continuation of training for impacted residents.

Immediately following a disaster and up to within 24 hours, the DIO will:

1. Transmit initial communications plan to all affected parties and/or their representatives.

2. The DIO will work with the office of General Counsel, Hospital Administration representatives, and the Medical Staff Office of affected sites to coordinate immediate activities, including patient care issues.
3. Maintain at least daily group communication with program directors/GMEC members.
4. Initially residents are expected to report to their originally assigned hospital/clinic location. In the event the hospital/clinic is affected by the disaster and unable to operate in the usual fashion or if the patient load is skewed by the disaster, some or all of the trainees may need to be reassigned by the DIO after discussion with the Program Director and approval of the DIO with the hospital/site officials. Residents should seek the guidance of their program directors who in turn will work with the DIO to determine immediate resident response to affected clinical sites.
 - a. Trainees are expected to perform as physicians and professionals in the context of the specific disaster, taking into account their level of training, their specialty, and their demonstrated level of competence.
 - b. Trainees should always have appropriate supervision given their level of training and competence.

Within 72 hours, the DIO will:

Call an emergency meeting of the Graduate Medical Education Committee (GMEC) to assess the effect of the situation on residency/fellowship education, including the probable duration of the interruption. If safety concerns prohibit a meeting in a physical location, the GMEC will convene on an emergency basis via phone or internet teleconference.

Within 10 days:

The DIO will contact the Executive Director of the Institutional Review Committee of the ACGME to discuss the impact of the disaster on GME functions. Once the ACGME has obtained sufficient information about the situation from the DIO, the Executive Director of the Institutional Review Committee will provide relevant information to the Executive Directors of the Residency Review Committees (RRCs) involved.

- a. Due dates may be established by the ACGME to submit program reconfiguration requests to the ACGME and to inform each program's trainees of the plan. The DIO, program directors and GMEC will develop any required reconfiguration plans.
- b. Program directors may contact their respective Executive Director of the RRC to discuss specialty specific concerns.
- c. The DIO will notify the Executive Director of the Institutional Review Committee when the disaster has been resolved.

After 10 days:

The DIO, with consultation of affected program directors, will monitor progress of both healthcare delivery and functional status of GME training programs for their educational mission during and following a disaster. They (or their designees) will work with the ACGME to determine the appropriate timing and action of the options for disaster impacted institution and/or programs, including:

- Maintain functionality and integrity of program(s),
 - Temporary resident transfer until program(s) reinstated, or
 - Permanent resident transfer, as necessitated by program or institution closure.
1. If there is a need for residents/fellows to continue their training elsewhere, on a temporary basis, the GME Office will assist programs with arrangements for housing,

salary and other issues involved in a temporary transfer to another program. If a permanent transfer is necessary; the GME Office will work with the accepting institution to arrange the transfer. In the situation of a permanent resident transfer, all Institutional, Common and Specialty/Subspecialty Program Requirements will be met in terms of transfer requirements and provision of documentation.

- a. The DIO or designee will contact the ACGME Executive Directors with requests related to trainee transfers.
2. All arrangements will be coordinated through the GME Office, working with the affected programs. The institution will continue to pay salary and all contracted benefits until other arrangements are in place. Longer term funding (i.e. once decisions to maintain programs, temporarily or permanently transfer residents) will be determined on the basis of the expected operations of the teaching sites, CMS and governmental regulations and the damage to the infrastructure of the finance and hospital operations.
3. The DIO in conjunction with the GMEC will determine the schedule, as needed, for ongoing GMEC meetings that would be in excess of regularly scheduled meetings.

Once the disaster is declared over by the ACGME and DIO:

1. Plans will be made with the participating institutions to which trainees have been transferred for them to resume training under sponsorship at the University of Toledo.
2. Appropriate credit for training will be coordinated with the ACGME and the applicable Residency Review Committees
3. Decisions as to other matters related to the impact of the disaster on training will be made.

<p>Approved by:</p> <p><u>/s/ Shaza Aouthmany, M.D.</u> Chair, Graduate Medical Education Committee</p> <p><u>/s/ Christopher Cooper</u> Dean, College of Medicine & Life Sciences</p> <p>Review/Revision Completed by: <i>Graduate Medical Education Committee</i></p>	<p>Policies Superseded by This Policy:</p> <ul style="list-style-type: none"> • None <p>Initial effective date: 11/04/08</p> <p>Review/Revision Date: 11/04/08, Reviewed 11/02/10, Reviewed 11/06/12, Reviewed 11/04/14, Revised 11/01/16, Reviewed 11/13/18, Revised 08/06/19, Revised 11/5/19, Reviewed 5/2024</p> <p>Next review date: 5/2027</p>
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