Extreme Emergent Situation and Disaster policy (IR I.V.M.)

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Purpose:

To define responsibilities during emergencies including “disasters” which impact an entire community or region for an extended period of time and “extreme emergent situations” localized to one institution, a participating institution or a clinical setting.

Policy:

In the event of a disaster impacting the graduate medical education programs sponsored by WSU, the GMEC has established this policy to protect the well-being, safety, and educational experience of residents/fellows enrolled in our training programs.

Definitions

Extreme emergent situation is defined as a local event (such as a hospital-declared disaster for an epidemic) that impairs the ability of WSU to support resident education or the work environment but does not rise to the level of an ACGME-declared disaster as defined by ACGME Policies and Procedures.

Disaster is defined as an event or set of events causing significant alteration to the ability of WSU to support many residency programs as defined by the ACGME policies and procedures (e.g. Hurricane Katrina).

Declaration of Extreme Emergent Situation

A declaration of an extreme emergent situation may be initiated by the DIO in collaboration with the hospital chief executive officer, chief operating officer, chief medical officer, affected program directors and department chairs. The first point of contact for answers to questions regarding a local emergent situation shall be the GMEC/DIO. When possible, an emergency GMEC meeting will be convened to assess the situation.

Declaration of a Disaster

When warranted, the ACGME chief executive officer, with consultation of the ACGME Executive Committee and the chair of the Institutional Review Committee, will make a declaration of a disaster. A notice will be posted on the ACGME website with all information relating to ACGME’s response to the disaster.

Procedure for Extreme Emergent situation
Once a declaration of an extreme emergent situation is declared:

- Administrative support for all GME programs and residents, as well as assistance for continuation of resident assignments, will be provided to all programs.
- Program directors of each program will meet with the DIO and other university/hospital officials to determine the clinical duties, schedules and alternate coverage arrangements for each residency program.
- The DIO and university/hospital administration will keep in mind that all ACGME institutional, common and specialty-specific program requirements continue to apply in an emergent situation with regard to clinical assignments within a training program.
- Program directors will remain in contact with the DIO regarding plans to address the situation and additional resources as needed. ACGME guidelines for development of those plans will be implemented.
- Residents are, first and foremost, physicians, whether they are acting under normal circumstances or in an extreme emergent situation. Residents are expected to perform according to their degree of competence, level of training, scope of license and context of the specific situation.
- Residents will not be first-line responders without consideration of the need for appropriate supervision based on the clinical situation and their level of training and competence. Residents at an advanced level of training who are fully licensed in the state of Michigan may provide patient care independent of supervision based on the rules and policies of the institution.
- The following will be taken into consideration regarding a resident’s involvement in an extreme emergent situation:
  - The nature of the health care and clinical work that a resident will be expected to deliver
  - The resident’s level of post-graduate education, specifically regarding specialty preparedness
  - Resident safety, consideration of their level of training, associated professional judgment and the nature of the situation
  - Board certification eligibility during or after a prolonged extreme emergent situation
  - Reasonable expectations for duration of engagement in the situation
  - Self-limitations according to the resident’s maturity to act under significant stress or duress for an extended period of time.
- The DIO will contact the ACGME IRC executive director if (and only if) the situation causes serious, extended disruption that might impair the ability of WSU to support the institution/program ability to remain in compliance with ACGME requirements. The ACGME IRC or DIO will alert the respective Residency Review Committee.
- If the situation is complex, the DIO may need to submit in writing a description of the situation to the ACGME executive director.
- The DIO will receive electronic confirmation of the extreme emergent situation from the ACGME Emergency Disaster-IRC, which will include copies to all Emergency Disasters of Residency Review Committees.
Upon receipt of this confirmation by the DIO, program directors may contact the executive directors of their respective RRCs if necessary to discuss any specialty specific concerns regarding interruptions to resident education or the effect on the educational environment. Program directors are expected to follow their institutional disaster policies regarding communication processes to update the DIO of any specialty specific issues. The DIO will have an active role in any emergent situation, ensuring the safety of patients and residents through the duration of the situation.

If notice is provided to the ACGME, the DIO will notify the ACGME IRC executive director when the extreme emergent situation has been resolved.

**Procedure for When a Disaster is declared**

- Administrative support for all GME programs and residents, as well as assistance for continuation of resident assignments, will be provided to all programs.
- To maximize the likelihood that residents will be able to complete program requirements within the standard time required for certification in that specialty, the DIO will meet with each program director and appropriate university or hospital officials to determine whether transfer to another program is necessary to provide adequate educational experiences to residents and fellows.
- Once the decision is made that the sponsoring institution can no longer provide an adequate educational experience for residents, the sponsoring institution will, to the best of its ability, arrange for the temporary/permanent transfer of residents to programs at other sponsoring institutions until such time as the participating institution is able to resume providing the experience. (Notification of placement will be communicated to residents no less than 10 days after the declaration of the disaster.). Residents who transfer to other programs as a result of a disaster will be provided by their program directors an estimated period necessary for relocation within another program.
- Should that initial time estimate need to be extended, the resident will be notified by his/her program director via written or electronic communication identifying the estimated period of the extension.
- It will be the intent of WSU to provide the appropriate administrative support, to the extent possible, to re-establish a permanent educational experience that meets the standards of the ACGME as quickly as possible. If this cannot be achieved within a reasonable amount of time following the disaster, WSU will take appropriate steps to arrange permanent transfers of residents to other accredited programs.
- If more than one program/institution is available for temporary or permanent transfer of a particular resident, the preferences of each resident must be considered.
- The program director and DIO are jointly responsible for maintaining ongoing communication with the GMEC throughout the placement process.
- The DIO will provide initial and ongoing communication to hospital officials and all affected program directors.
• Program directors and the DIO will determine/confirm the location of all residents, determine the means for ongoing communication and notify emergency contacts of any resident who is injured or cannot be located.

• The DIO will contact the ACGME Institutional Review Committee executive director within 10 days after the declaration of the disaster to discuss the due date for submission of plans for program reconfigurations and resident transfers.

• The ACGME website will provide phone numbers and email addresses for emergency and other communication with the ACGME from disaster-affected institutions and programs. The DIO will ensure that each program director and resident is provided with information annually about this emergency communication availability.

• The DIO will access information on the ACGME website to provide program directors and residents with assistance in communicating and documenting resident transfers, program reconfigurations and changing participating sites.

• The DIO and program director will call or email the IRC executive director with information and or requests for information. Residents will call or email the IRC executive director with information and/or requests for information if they are unable to reach their program director or DIO.

• In the event of a disaster affecting other sponsoring institutions of graduate medical education programs, the program leadership at Wayne State University will work collaboratively with the DIO, who will coordinate on behalf of the school of medicine the ability to accept transfer residents from other institutions. This will include the process to request complement increases with the ACGME that may be required to accept additional residents for training. Programs under a proposed or actual adverse accreditation decision by the ACGME will not be eligible to accept transfer residents.

All program directors and residents must be familiar with this policy and communication plan. This policy is included in the GME Trainee Manual and Benefits Guide and available on New Innovations: https://www.new-innov.com/Login/-Login.aspx?Hospital=WSU.