

GRADUATE MEDICAL EDUCATION POLICIES

Substantial Disruptions In Patient Care/Education

ACGME Policies

IV.N. Substantial Disruptions in Patient Care or Education: The Sponsoring Institution must maintain a policy consistent with ACGME Policies and Procedures that addresses support for each of its ACGME-accredited programs and residents/fellows in the event of a disaster or other substantial disruption in patient care or education.

IV.N.1. This policy must include information about assistance for continuation of salary, benefits, professional liability coverage, and resident/fellow assignments.

Background

The Tilman J. Fertitta Family College of Medicine (COM) is committed to the residents/fellows participating in its ACGME-accredited training programs, as well as the delivery of safe, high quality, high value patient care. Even so, disruptions to these activities can and do occur as the result of weather emergencies or other events which may result in an interruption or change of training.

Procedure

Each ACGME-accredited program sponsored by the COM shall have its own disaster plan, which shall be approved by the GMEC and kept on file with the DIO. This plan shall be reviewed annually by the GMEC and will be distributed in writing and discussed with all residents/fellows in all programs at the start of each academic year. These plans should include, but are not limited to; designated response teams of appropriate faculty, staff and residents/fellows; pursuant to departmental, COM, and affiliated hospital policies.

The goal of these policies, and that of the Sponsoring Institution, is to continue patient care delivery and GME training activities as close to standard protocols as possible during, and immediately following a disaster or other disruptive event.

Residents/fellows, as with all other employees of the COM, are expected to provide and maintain current contact information with the Institution, their programs, and affiliated hospital and clinical partners. Trainees should utilize direct deposit to avoid any disruptions in pay. Residents/fellows will continue to receive their stipends during and immediately following a disaster event and recovery period, and/or accumulate those funds until such time as the UH is able to resume payments.



In the event of an anticipated disaster (i.e. hurricane, ice storm), the DIO, with the approval of the GMEC shall issue ***GME Emergency Alert***. Residents/fellows should follow the directions of their Program and Site Directors. Those trainees not considered essential personnel should gather their belongings and evacuate the premises. Residents/fellows not considered essential personnel should not remain on campus, and not bring property or families there to evacuate. They should not return until alerted by their Program or Site Director.

Residents who are considered essential personnel should be relieved of duty to return home to secure their property and families and return to their assigned training site with appropriate supplies for personal needs (i.e. change of clothes, food, cell phone).

Program Directors shall provide the DIO a sit rep am/pm. That information will be forwarded to the GMEC and all appropriate COM and affiliated hospital/clinical partners. The DIO shall alert the ACGME and all relevant RRCs of the situation, and provide daily updates, if necessary.

All COM ACGME-accredited programs are responsible for maintaining original and redundant files on their training programs and residents by proper utilization of the residency management software. Data which cannot be maintained in this manner shall be kept on UH servers. The COM maintains employment files through original and redundant systems via TALEO.

The COM GME Office will continue to provide administrative support to all ACGME-accredited programs, and residents/fellows from a safe and secured location in order to ensure access to needed resources. Communication with central agencies, such as the Texas Medical Board and the ACGME, will occur through the COM Office of GME.

While residents/fellows are physicians, they may only perform duties based upon their degree of competence, their specialty training and the context of the specific situation. In the event of a disaster, residents/fellows must **not** be expected to perform beyond the limits of their competence, as judged by their Program Director, or outside the scope of their individual licensure. While acting within their COM function, residents/fellows will maintain both their personal immunity to civil actions under the Texas Tort and Claim Act, their worker's compensation coverage, and their coverage for medical liability under their COM policy.

If temporarily off official COM duties, residents/fellows should **not** volunteer at community events without receiving direct, written permission from their Program Director, who should confer with the DIO and UH General Counsel. To do so may place the resident/fellow at personal risk of liability.

As stated, the COM DIO, or his/her designee, will be responsible for all communication between the COM and ACGME during a disaster situation and subsequent recover phase. In the event of a long-term disruption to educational activities, the DIO will contact the ACGME Institutional Review Committee (IRC) within ten (10.0) days after the declaration of said disaster, to discuss particular concerns and possible leaves of absence or return to work dates for all affected



programs should there need to be a) program reconfigurations to the ACGME and/or b) resident/fellow transfer decisions. The due dates of such plans shall be no later than 30 days post disaster, unless other due dates are approved by the ACGME.

If within ten (10.0) days following a disaster, the ACGME has not received communication from the DIO, the ACGME will initiate communication to determine the severity of the disaster, its impact on resident/fellow training, and plans for continuation of educational activities.

The DIO, in conjunction with program directors, will monitor the progress of patient care activities returning to normal status and the functional status of all GME programs for their educational mission both during a disaster and the recovery phase. These individuals will work with the ACGME and the respective Residency Review Committees (RRCs) to determine if the impacted Sponsoring Institution and/or its programs: 1) are able to maintain functionality and integrity; 2) require a temporary transfer of residents to alternate training sites until the home program is reinstated; or 3) require a permanent transfer of residents/fellows. If more than one location is available for the temporary or permanent transfer of a particular physician, the preferences of the resident must be taken into consideration by the home sponsoring institution. Program Directors must make the decision to keep or transfer in a timely manner so that all affected residents/fellows maximize the likelihood of completing their training as projected.

Upon declaration of a disaster by the ACGME Chief Executive Officer, the ACGME will provide information on its website, and periodically update information relating to the event, including phone numbers and email addresses for emergency and other communication with the ACGME from disaster-affected institutions and residency/fellowship programs.

If it is determined that training must be discontinued for a period of time, the UHCOM will support residents/fellows transferring to another ACGME-accredited program to continue, and if necessary, complete training.

EFFECTIVE DATE: September 1, 2021

APPROVAL DATE: August 31, 2021

REVIEW DATE: September 1, 2024