

HACKENSACK MERIDIAN *HEALTH* *OCEAN MEDICAL CENTER* GRADUATE MEDICAL EDUCATION POLICIES AND PROCEDURES

Subject: DISASTER/ EXTREME EMERGENT SITUATION POLICIES	Policy Number: 9.A
Approved by GMEC: March 7, 2016	Approved by MEC: June 7, 2018

1. INTRODUCTION AND PURPOSE

Ocean Medical Center (OMC) and Hackensack Meridian Health(HMH) facilities have adopted emergency plans to guide the institutional response to specific disasters. This policy is intended to augment these plans and specifically addresses the clinical duties, education, and the working environment of residents during disasters and local extreme emergent situations. It provides guidance to program leadership, in the event that a disaster or local extreme emergent situation occurs, to assure resident safety, continued administrative support for Graduate Medical Education (GME) programs and Residents, as well as other issues that may result from significant alterations to the residency experience in one or more training programs.

2. SCOPE

This document is intended to complement and coincide with all existing disaster plans, focusing specifically on residents in graduate medical education programs at OMC and HMH.

3. APPLICABLE REGULATIONS AND GUIDELINES

ACGME Institutional Requirements I.V.M., I.V.M.1
 Effective Date: July 1, 2018.

4. ATTACHMENTS

None

5. RESPONSIBILITY

Program Directors, Designated Institutional Official (DIO)

6. DEFINITIONS

A disaster is an event or set of events causing significant alteration to the residency/fellowship experience at one or more residency/fellowship programs. Hurricane Katrina is an example of a disaster.

An extreme emergent situation is a local event (such as a hospital-declared disaster for an epidemic) 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.

7. PROCESS OVERVIEW FOR RESPONSE TO A DISASTER

A. ACGME 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 of such will be posted on the ACGME website with information related to ACGME response to the disaster.

B. RESPONSIBILITIES/ REQUIREMENTS:

1. OMC is committed to ensuring a safe, organized and effective environment for training of its resident.
2. OMC is committed to maintaining full administrative support for GME programs and residents during a disaster or local extreme emergent situation.
3. OMC recognizes the importance of physicians at all levels of training in the provision of emergency care in the case of a disaster of any kind.
4. Residents must be expected to perform according to society's expectations of physicians as professionals and leaders in health care delivery, taking into account their degree of competence, their specialty training, and the context of the specific situation.
5. Residents' involvement in a disaster should not exceed expectations for their scope of competence as judged by Program Directors and other supervisors. Residents should not be expected to perform beyond the limits of self-confidence in their own abilities.
6. Expectations for performance under extreme circumstances must be qualified by the scope of licensure, as determined by the New Jersey Board of Medical Examiners and the resident's level of post-graduate education specifically regarding specialty preparedness.
7. Decisions regarding initial and continuing deployment of residents in the provision of medical care during an emergency will be made taking into consideration the importance of providing emergency medical care; the continuing educational needs

of residents; board certification eligibility during or after a prolonged disability and the health and safety of the residents and their families.

C. PROCEDURE FOLLOWING ACGME DISASTER DECLARATION

Responsibilities of the OMC DIO:

1. The DIO will immediately convene the GMEC and other institutional leadership in order to ascertain the status and operating capabilities of all OMC training programs.
2. Within ten (10) days after the declaration of a disaster, the DIO will contact the ACGME to discuss the due dates that the ACGME will establish for OMC programs to:
 1. submit program reconfigurations to the ACGME, and
 2. inform each Resident of the transfer decision.

The due dates for submission shall be no later than thirty (30) days after the disaster unless otherwise approved by the ACGME.

3. The OMC DIO should call or email the Institutional Review Committee Executive Director of ACGME with information and/or requests for information.

Responsibilities of the Program Directors:

1. Immediately verify the health and safety of all residents in their training program and relay this information to the DIO.
2. Arrange temporary transfers to other institutions until such time as OMC is able to resume providing an adequate educational experience.
3. If transfer to another institution is necessary, OMC assures residents will continue to receive their salary and benefits with minimal to no interruption; interruption would only happen if all systems are down. Should that occur, OMC will make every effort to restore compensation systems.
4. Assist residents in obtaining permanent transfers to other institutions, as needed, in order to continue and complete their training.
5. If a transfer to another institution is necessary and if more than one institution is available, the Program Director will consider the educational needs and preferences of each resident and make his/her best efforts to find an appropriate training site. Program Directors must make these transfer decisions expeditiously so as to maximize the likelihood that each resident will finish their training in a timely fashion.
6. At the outset of a temporary resident transfer, the program must inform each transferred resident of the minimum duration and the estimated actual duration of their temporary transfer, and continue to keep each resident informed of such durations. If and when a program decides that a temporary transfer will continue to, and/or through, the end of a residency year, it must so inform each transferred resident. Transferred residents will be allowed to return to OMC as soon as the

institution is operative, or they may stay at the transferred institution for a reasonable length of time in order to maintain a continuum of their education.

7. Program Directors will make their best efforts to ensure that each transferred resident receives a quality educational experience at their new training site. The Program Director will regularly confer with the residents and Program Director(s) at the site to make sure that educational needs are being met.
8. The Program Director should call or email the appropriate ACGME Review Committee Executive Director with information and/or requests.

Responsibilities of the Residents:

1. Residents should contact their Program Director as soon as reasonably possible to verify their safety, current/anticipated location, and any changes to their contact information.
2. Residents should call or email the appropriate ACGME Review Committee Executive Director with information and/or requests for information.
3. All transferred residents should refer to instructions on the ACGME Web Accreditation System to change resident email information.

Communication with ACGME:

1. On its website, the ACGME will provide phone numbers and email addresses for emergency and other communication with the ACGME from disaster affected institutions and programs. The DIO shall ensure that each Program Director and resident is provided
In general: The DIO will call or email the Institutional Review Committee Executive Director with information and/or requests for information.

Program Directors will call or email the appropriate Review Committee Executive Director with information and/or requests for information.

Residents call or email the appropriate Review Committee Executive Director with information and/or requests for information, if they are unable to reach their Program Director or DIO.

9. PROCESS OVERVIEW FOR RESPONSE TO EXTREME EMERGENT SITUATIONS

A. DECLARATION OF AN EXTREME EMERGENT SITUATION:

Declaration of an extreme emergent situation may be initiated by a Program Director or by the DIO. Declaration of a qualifying local disaster is made by the DIO, in collaboration with the hospital CEO, the COO, the CMO, affected Program Directors, and Department Chairs. When possible, an emergency meeting of the GMCC – conducted in person, through conference call, or through

web-conferencing – shall be convened for discussion and decision-making as appropriate.

B. AFTER DECLARATION OF AN EXTREME EMERGENT SITUATION:

1. The Program Director of each affected residency/fellowship program shall meet with the DIO and hospital officials, as appropriate, to determine the clinical duties, schedules, and alternate coverage arrangements for each residency program sponsored by the Institution. ACGME's guidelines for development of those plans should be implemented, including:
 - i. Residents and fellows must be expected to perform according to the professional expectations of them as physicians, taking into account their degree of competence, level of training, and context of the specific situation. Residents who are fully licensed in this state may be able to provide patient care independent of supervision in the event of an extreme emergent situation, as further defined by the applicable medical staff by-laws.
 - ii. Residents are also trainees/students. Residents/fellows should not be first-line responders without consideration of their level of training and competence; state licensing board training certificate supervision requirements; the scope of their individual license, if any; and/or beyond the limits of their self-confidence in their own abilities.
2. Program Directors will remain in contact with the DIO about implementation of the plans to address the situation, and additional resources as needed.
3. The DIO will call the ACGME IRC Executive Director if (and, only if) the extreme emergent situation causes serious, extended disruption that might affect the Institution/Program's ability to remain in substantial compliance with ACGME requirements. The ACGME IRC will alert the respective RRC. If notice is provided to the ACGME, the DIO will notify the ACGME IRC ED when the extreme emergent situation has been resolved.
4. The DIO and GMEC will meet with affected Program Directors to establish monitoring to ensure the continued safety of residents and patients through the duration of the situation; to determine that the situation has been resolved; and to assess additional actions to be taken (if any) to restore full compliance with each affected resident's completion of the educational program requirements.

10. OTHER CONSIDERATIONS, REFLECTING INSTITUTION SPECIFIC DECISIONS RELATED TO BOTH A DISASTER AND AN EXTREME EMERGENT SITUATION:

1. The GME office will maintain a database containing the pertinent contact information for all residents, Program Directors and program coordinators. Each training program will be responsible for providing and updating this information

on an annual basis. This database will be located in the OMC Command Center and the Office of Academic Affairs.

2. The OMC DIO will collaborate with regional teaching institutions for purposes of establishing contacts and potential relationships at these institutions that may ultimately prove useful and beneficial in the event of a disaster.