

POLICY ON SUBSTANTIAL DISRUPTIONS IN PATIENT CARE OR EDUCATION

PURPOSE:

This policy addresses Accreditation Council for Graduate Medical Education (ACGME) *Institutional Requirements IV.N. Substantial Disruptions in Patient Care or Education*:

The Sponsoring Institution must maintain a policy consistent with ACGME Policies and Procedures that addresses administrative support for each of its ACGME-accredited programs and residents/fellows in the event of a disaster or interruption in patient care.

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

DEFINITIONS:

See the *NSU Graduate Medical Education Glossary of Terms* dated April 1, 2021; the *ACGME Glossary of Terms* dated April 15, 2020; as well as the *Common Acronyms/Abbreviations Used in Graduate Medical Education* last updated April 4, 2019.

BACKGROUND:

The South Florida area is uniquely at risk for natural disasters such as hurricanes and tropical storms. The goal of emergency management at NSU is to ensure that all programs, including Graduate Medical Education programs, are prepared to respond to, recover from, and mitigate the impact of any emergency or disaster.

POLICY:

This policies and procedures specified below are intended to complement and coincide with all existing disaster plans at NSU:

- NSU Comprehensive Emergency Plan – found at: [Public Safety Information](#)
- NSU Emergency Notification System – found at: [Emergency Notification System](#)
- NSU Compensation Practice for University Closures – found at: nova.edu/portal/hr/policies/closure-compensation.html (must log in to the NSU employee portal to access)
- NSU University Closures – found at: [Hurricane Preparation Resources](#)

The NSU Office of Graduate Medical Education has adopted the following policy to define the basic procedures and assigned responsibilities to efficiently and effectively reconstitute and restructure resident training experiences in the event of a disaster.

A. Responsibilities of the Designated Institutional Official (DIO):

1. The DIO will have primary responsibility as liaison between the university, training sites and ACGME.
2. The DIO will coordinate all resident clinical and educational activities during a disaster.
3. The DIO will coordinate with the NSU Human Resources and Finance departments to ensure that information is provided to residents about assistance for continuation of salary and benefits.

B. Responsibilities of the Hospital Directors of Medical Education (DMEs):

1. Hospital DMEs will be responsible ensuring that all hospital or site-specific disaster/emergency management policies are communicated to trainees annually.
2. Hospital DMEs will be responsible for verifying, with the Program Directors, the health and safety of all staff and trainees assigned to their site(s), in accordance with hospital or site-specific emergency management policies, and will relay this information to the DIO.

C. Program Directors:

1. Program Directors will be responsible for verifying the health and safety of all trainees in their program and relay this information to the Hospital DME and DIO.
2. Program Directors will coordinate with the Hospital DME and DIO and training sites to ensure patient care is maintained.

3. Program Directors will notify the Hospital DME and DIO of any Duty Hour exceptions that occur just prior, during and immediately after a disaster situation.
4. If needed, Program Directors, with assistance from the Hospital DME, will arrange temporary transfers to other institutions until the original training site is able to resume providing an adequate educational experience.

Program directors will make their best efforts to ensure that each transferred trainee receives a quality educational experience at their new training site. The program director will regularly confer with the trainees and program director(s) at the site to make sure that educational needs are being met.

D. Responsibilities of the Trainees:

1. Trainees may be needed to stay at the hospital to ensure patient care is maintained.
2. Trainees should contact their Program Director, Supervising Faculty or Chief Residents for information regarding emergency coverage.
3. Duty hours and fatigue will be monitored in such situations. However, trainees may be required to stay in the hospital beyond their duty hour limit to maintain patient care or because it is unsafe to travel outside of the hospital.

PROCEDURE (if a disaster disrupts training at a site):

Refer to the NSU and hospital or training site-specific Emergency Management plans.

A. Designated Institutional Officer:

1. The DIO, or another credible source, will immediately notify the ACGME of the occurrence of a disaster at a training site. Upon notification from the DIO or another credible source, the ACGME Chief Executive Officer will make a declaration of a disaster. A notice of such will be posted on the ACGME website with information relating to the ACGME response to the disaster.
2. The DIO will convene the Graduate Medical Education Committee (GMEC) as soon as is safely possible and other appropriate institutional leadership in order to ascertain the status and operating capabilities of all training programs. In the event that training facilities are damaged and unable to continue operations, the GMEC will make a recommendation as to continuation of training.
3. Within ten days after the declaration of a disaster, the DIO will contact the ACGME to discuss the due dates that the ACGME will establish for programs to:
 - a. Submit program reconfigurations to the ACGME; and
 - b. Inform each trainee of any transfer decisions.The due dates for submission shall be no later than thirty days after the disaster unless otherwise approved by the ACGME.
4. The DIO may contact the Executive Director of the ACGME Institutional Review Committee with information and/or requests for information.

B. Program Directors with assistance from Hospital DMEs:

1. Will assist trainees in obtaining permanent transfers to other institutions, if needed, in order to continue and complete their training.
2. 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 trainee and make their best efforts to find an appropriate training site. Programs must make these transfer decisions expeditiously so as to maximize the likelihood that each trainee will finish their training in a timely fashion.
3. At the outset of a temporary resident transfer, the program must inform each transferred trainee of the minimum duration and the estimated actual duration of their temporary transfer and continue to keep each trainee informed of such durations. If and when a program decides that a temporary transfer will continue to and/or through the end of a training year, it must so inform each such transferred trainee. Transferred trainees will be allowed to return as soon as the institution is operational, or they may stay at the transferred institution for a reasonable length of time in order to maintain a continuum of their education.
4. The Program Director should call or email the appropriate Review Committee Executive Director with information and/or requests.

C. Trainees:

1. Trainees 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. Trainees shall follow hospital and departmental protocols to ensure that adequate provisions are made for patient care.
3. All transferred trainees should refer to instructions on the ACGME Web Accreditation System to change trainee email information.

Initial Approval by GMEC on July 7, 2017

Second Approval by GMEC on June 26, 2018

Reviewed and Approved by GMEC on April 8, 2021