PURPOSE
The GMEC establishes this policy to protect the safety, well being, and educational experience of our trainees in the event of a disaster or interruption in patient care.

DEFINITIONS
Disaster: An event or set of events causing significant alteration to the residency experience at one or more residency programs.

When warranted, the ACGME Executive Director, with consultation of the ACGME Executive Committee and the Chair of the Institutional Review Committee, will make a declaration of a disaster.

Extreme Emergent Situation: A local event (such as a hospital-declared disaster for an epidemic) that affect 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.

The following principles will guide specific planning:

1. Residents are, first and foremost, physicians, whether they are acting under normal circumstances or in extreme emergent situations. 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. Many residents at an advanced level of training may even be fully licensed, and, therefore, they may be able to provide patient care independent of supervision.

2. Residents are trainees. Residents should not be first-line responders without appropriate supervision given the clinical situation at hand and their level of training and competence. If a resident is working under a training certificate, s/he must work under supervision. Resident performance in extreme emergent situations should not exceed expectations for the 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. In addition, a resident must not be expected to perform in any situations outside of the scope of his/her individual license. Expectations for performance under extreme circumstances must be qualified by the scope of licensure. Decisions regarding a resident’s involvement in local extreme emergent situations must take into account the following aspects of his/her multiple roles as a student, a physician, and an institutional employee:
   a. the nature of the health care and clinical work that a resident will be expected to deliver;
   b. the resident’s level of post-graduate education specifically regarding specialty preparedness;
   c. resident safety, considering their level of post-graduate training, associated professional judgment capacity, and the nature of the disaster at hand;
d. board certification eligibility during or after a prolonged extreme emergent situation; reasonable expectations for duration of engagement in the extreme emergent situation; and,
e. self-limitations according to the resident’s maturity to act under significant stress or even duress.

**Educational Experience**: If an adequate educational experience cannot be provided for each resident/fellow the sponsoring institution will:

1. Arrange temporary transfers to other programs/institutions until such time as the residency/fellowship program can provide an adequate educational experience for each of its residents/fellows.
2. Cooperate in and facilitate permanent transfers to other programs/institutions. Programs/institutions will make the keep/transfer decision expeditiously so as to maximize the likelihood that each resident will timely complete the resident year.
3. Inform each transferred resident of the minimum duration of his/her temporary transfer, and continue to keep each resident informed of the minimum duration. 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 such transferred resident.

**Financial support**: The Designated Institutional Official (DIO) will collaborate with leadership of appropriate funding institutions to identify ongoing arrangements for salary and benefits for displaced residents.

**Communications: At the Institutional Level**:

1. The program directors' (PDs) first point of contact for answers to questions regarding a local extreme emergent situation is the GME Office/DIO. The GME Office will provide guidance and information.
2. The DIO will contact the Executive Director, Institutional Review Committee (ED-IRC) via telephone only if an extreme emergent situation causes serious, extended disruption to resident assignments, educational infrastructure or clinical operations that might affect the Sponsoring Institution’s or any of its programs’ ability to conduct resident education in substantial compliance with ACGME Institutional, Common, and specialty-specific Program Requirements. On behalf of the Sponsoring Institution, the DIO will provide information to the ED-IRC regarding the extreme emergent situation and the status of the educational environment for its accredited programs resulting from the emergency.
3. Given the complexity of some events, the ED-IRC may request that the DIO submit a written description of the disruptions at the Institution and details regarding activities the Institution has undertaken in response. Additional updates to this information may be requested based on the duration of the event.
4. The DIO will receive electronic confirmation of this communication with the ED-IRC which will include copies to all EDs of Residency Review Committees (RRCs).
5. Upon receipt of this confirmation by the DIO, PDs may contact their respective EDs-RRCs if necessary to discuss any specialty-specific concerns regarding interruptions to resident education or effect on educational environment.
6. PDs will copy the DIO on communications (electronic and telephonic) with EDs-RRCs regarding any specialty-specific issues.
7. The DIO will notify the ED-IRC when the institutional extreme emergent situation has been resolved.

**Communications: At the Resident/Fellow Level**: 

Graduate Medical Education Policies and Procedures

1. Residents and Program Directors will contact each other regarding specific assignments.
2. Residents may call or email the appropriate Review Committee Executive Director with information and/or requests for information.