



INSTITUTIONAL GRADUATE MEDICAL EDUCATION POLICY

SUBJECT: GME Administrative Support Disaster Response Policy

DATE EFFECTIVE: July 16, 2008

POLICY: Disaster

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I. PURPOSE:

This policy addresses administrative support for training programs in the event of a disaster or disruption in patient care. As the institutional sponsor of Graduate Medical Education (GME) programs, Children's Nation Hospital (CH) will ensure there is assistance by minimizing the impact of such a situation on the educational experience of the graduate medical trainees, protecting the well-being and safety of the trainees, and assisting with provisions for continuation of the educational experience and assignments.

II. POLICY SCOPE:

All Accreditation Council for Graduate Medical Education (ACGME) accredited or non-ACGME residency and fellowship programs sponsored by CH.

III. DEFINITIONS:

Trainee

Trainee refers to all interns, residents and fellows participating in ACGME accredited, or non-ACGME training programs sponsored by CH.

Training Program

Training program or program refers to an ACGME accredited or non-ACGME internship, residency or fellowship training program sponsored by CH.

Disaster

Disaster refers to an extraordinary event or set of events which may be determined by Federal, State and/or local governments and, as defined by the ACGME, cause significant disruption to the GME experience at CH. Within CH, a formal disaster declaration will be made only in accordance with the Children's National Hospital Disaster Plans.

IV. POLICY:

In the event of a disaster, the Department leadership, and Program Directors in collaboration with the Designated Institutional Official (DIO) and GME Office will make reasonable efforts to ascertain the whereabouts of Trainees and endeavor to ensure their safety.

Trainees are physicians and are expected to perform according to society's expectations of physicians as professionals and leaders in health care delivery. Trainees are to follow departmental instructions as well as departmental and GME disaster policies and procedures and maintain communication with their assigned supervisors.

Trainees should not be first-line responders without appropriate supervision given the clinical situation at hand and their level of training and competence. A Trainee's performance should not exceed expectations for their scope of competence as judged by program directors and supervisors or by the limits of self-confidence in their own abilities. During a disaster, the ACGME work hour requirements must remain unchanged to continue to assure the safety of patients and trainees.


V. PROCEDURE:

1. As soon as possible, but no later than five days of declaring such a disaster, the DIO will convene a meeting with CH's Department Chairs, Chief Academic Officer, and Chief Medical Officer(s) to determine whether or not each program can provide adequate educational experience to its Trainees.
 - a. In the event that any of the above individuals are unable to participate in the meeting, designees determined by the senior ranking physician official at CH may serve as substitutes.
 - b. When warranted and after consultation with the Graduate Medical Education Committee (GMEC), if possible, the DIO may ask the ACGME to make a formal declaration of a disaster for particular programs or the entire institution according to ACGME policies and guidelines. This information will be posted on the ACGME website. This formal declaration under ACGME policies creates significant flexibility for Trainees to transfer to other institutions.
2. For any training programs unable to provide adequate training, alternative training arrangements will be sought expeditiously, using all available measures as follows:
 - a. CH will expedite transfer of Trainees to other training programs able to provide such training, on either a temporary or permanent arrangement.
 - b. If more than one transfer option exists for an individual Trainee, that Trainee's preferences will be considered in any decision.
 - c. ACGME will be consulted in all such transfer arrangements.
 - d. The overall goal will be for all Trainees to finish their training on schedule while receiving high quality education.

3. In general, free and open communication among all parties will be encouraged.
 - a. The DIO will serve as the central resource to facilitate communication between internal CH personnel and the ACGME and other training programs
 - b. Program directors and Trainees may contact the appropriate Review Committee Executive Director for further information.
 - c. Direct contact between affected Trainees and other training programs is permitted, but all are encouraged to use centralized resources (DIO, ACGME, and RC) before considering any transfer offers.

VI. APPROVAL

Approved by:



DIO/Vice Chair, Medical Education

5/8/2024

Date

VII. REVIEW OR REVISION DATE

- Approved by the GMEC: July 16, 2008
- Modified and Approved by the GMEC: May 19, 2010
- Modified and Approved by the GMEC: January 20, 2017
- Modified and Approved by the GMEC: March 19, 2019
- Modified and Approved by the GMEC: September 20, 2020
- Reviewed and Approved by the GMEC: October 13, 2021
- Reviewed and Approved by the GMEC: June 15, 2022
- Modified and Approved by GMEC: September 13, 2023
- Reviewed and Approved by GMEC: May 8, 2024