

Title: <b>GME Disasters</b>	*Applicable to: <b>Beaumont Health</b>	Effective Date: <b>03/26/2018</b>
		Last Periodic Review Date: <b>03/26/2018</b>
Policy Owner: <b>Graduate Medical Education Committee</b>	Document Type: <b>Policy</b>	Functional Area: <b>GMEC Oversight</b>

**\*For This Document, Beaumont Health Includes:**

Beaumont Corporate Shared Services  
 Beaumont Hospital, Dearborn  
 Beaumont Hospital, Farmington Hills  
 Beaumont Hospital, Grosse Pointe  
 Beaumont Hospital, Royal Oak  
 Beaumont Hospital, Taylor  
 Beaumont Hospital, Trenton  
 Beaumont Hospital, Troy  
 Beaumont Hospital, Wayne  
 Beaumont Medical Group

**I. PURPOSE**

The purpose of this policy is to outline the role of and impact upon residents and fellows during a disaster; it also defines Graduate Medical Education (GME) responsibilities.

**II. POLICY**

- A. Beaumont Health (Beaumont) strives to provide a stable educational environment and employment for residents/fellows during a disaster or emergency.
- B. A declaration of an emergency will be made in accordance with [Beaumont Health Corporate Emergency Operations Plan](#) and the Emergency Manual of each site.
- C. **Resident & Fellows Role in Disasters or Emergencies:** Decisions regarding residents'/fellows' involvement in emergencies must consider the following:
  - 1. resident's/fellow's multiple roles as a trainee, a physician, and an institutional employee;
  - 2. the nature of the health care and clinical work that the individual is expected to deliver;
  - 3. safety, considering their level of training, professional judgment, and the nature of the emergency at hand;
  - 4. board certification eligibility during or after a prolonged emergency;
  - 5. reasonable expectations for duration of engagement in the emergency; and,
  - 6. self-limitations according to the individual's maturity to act under significant stress or even duress.

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- D. **Performance in emergencies should not exceed expectations for scope of competence or licenses as judged by Program Directors.** Individuals should not be expected to perform beyond the limits of self-confidence in their own abilities or be expected to perform in any situations outside of the scope of their individual license. Expectations for performance under extreme circumstances must be qualified by the scope of licensure.

Residents/fellows 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/fellow is working under an educational license, they must work under supervision. Fully licensed residents/fellows at an advanced level of training may be able to provide patient care independent of supervision.

### III. GME RESPONSIBILITIES

- A. In the event of a disaster or emergency, the GME Office will:
1. Gather data and information from training programs regarding the extent of damage and the impact of the disaster on the short- and long-term function of individual programs and/or sites of training.
  2. Work directly with medical and hospital administrations to determine the short-term and long-term impact on clinical operations caused by the disaster.
- B. The GMEC will hold an emergency meeting as soon as possible during or following the disaster to review the available information regarding the impact of the disaster on clinical operations and training programs.
- C. The Designated Institutional Official (DIO) will notify the Executive Director of the ACGME’s Institutional Review Committee if an extreme emergent situation causes – or is anticipated to cause – serious extended disruption to resident/fellow assignments, educational infrastructure, or clinical operations that might affect the programs’ ability to conduct resident/fellow education in substantial compliance with all ACGME requirements.
- D. The DIO will maintain contact with the ACGME and abide by its policies and procedures pertinent to GME-related disasters. He/she will also respond to any ACGME request for a written description of current, ongoing, and anticipated disruptions. Finally, he/she will notify the Executive Director of the Institutional Review Committee when the extreme emergent situation has been resolved.
- E. Program Directors are expected to follow Beaumont policies and procedures regarding communication and service during disasters. Additionally, they may contact the Executive Director of their Review Committee if necessary to discuss any program-specific concerns.

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**IV. IMPACT UPON RESIDENTS & FELLOWS**

- A. **Salary & Benefits:** Resident/fellow salary and benefits will continue during the time that the working and learning environment is disrupted during a disaster, or through the contract period.
  
- B. **Program Continuation:** If a disaster persists to the point of jeopardizing trainees’ continuation in their GME program, the Program Director and the DIO will assist all residents/fellow continue their training elsewhere, either temporarily or permanently, dependent upon the situation. Beaumont will minimize impact on residents/fellows in accordance with [GME Closures & Reductions](#).

**V. REFERENCES**

Accreditation Council for Graduate Medical Education (ACGME) Institutional Requirements, Section IV.M

Approved by the Beaumont Health Graduate Medical Education Committee (GMEC),  
June 20, 2017

**CORPORATE AUTHORITY:**

Beaumont Health (“BH”) as the corporate parent to William Beaumont Hospital, Botsford General Hospital, and Oakwood Healthcare Inc., (“Subsidiary Hospitals”) establishes the standards for all policies related to the clinical, administrative and financial operations of the Subsidiary Hospitals. The Subsidiary Hospitals, which hold all health facility and agency licenses according to Michigan law, are the covered entities and the providers of health care services under the corporate direction of BH. The Subsidiary Hospitals’ workforces are collectively designated as BH workforce throughout BH policies.