

RESIDENT HANDBOOK SECTION VII: GME OFFICE RESPONSIBILITIES

RESIDENT PLAN IN THE EVENT OF A DISASTER OR EXTRAORDINARY CIRCUMSTANCE

INTRODUCTION

The Graduate Medical Education Committee (GMEC) established this policy to protect the well-being, safety and educational experience of residents and fellows in the Kirk Kerkorian School of Medicine at UNLV training programs in the event of a disaster or extraordinary circumstance. In this policy, the term resident will refer to all residents and fellows in Accreditation Council for Graduate Medical Education (ACGME) accredited programs. The purpose of this policy is to:

- I. Provide guidelines for communication with and immediate assignment of Kirk Kerkorian School of Medicine at UNLV residents in the event of a disaster.
- II. Provide guidelines for communication with the ACGME, program directors, and administrators and residents on efforts to reconstitute and restructure educational experiences as soon as possible after a disaster.
- III. Provide guidelines for determining the need to temporarily or permanently transfer residents and/or fellows if Kirk Kerkorian School of Medicine at UNLV graduate medical education (GME) programs cannot provide adequate educational experiences following a disaster.
- IV. Provide policy and procedure for addressing administrative support for Kirk Kerkorian School of Medicine at UNLV GME training programs and residents in the event of a disaster.

SCOPE

All Kirk Kerkorian School of Medicine at UNLV GME programs accredited by the ACGME and sponsored by the Kirk Kerkorian School of Medicine at UNLV and the residents who participate in these programs.

DEFINITION

A disaster is defined as an event or set of events causing significant alteration to the residency experiences at one or more training programs. This policy and procedure document acknowledges that there are multiple of natural or man-made disasters that include but are not limited to acute disaster with little or no warning (i.e. earthquake, bombings) and the insidious disruption or disaster (i.e. pandemic event).

POLICY

This policy and procedure will address disaster and disruption in the broadest of terms:

 At the Kirk Kerkorian School of Medicine at UNLV, a formal disaster declaration will be made only in accordance with the University of Nevada, Las Vegas disaster policies by the president of the university.



- II. Within any of the school's hospital partners, if a disaster occurs, the Office of GME will work with the identified site of training to determine whether a formal disaster declaration has been made based on the policies of that partner hospital.
- III. When warranted and after consultation with the GMEC, the Designated Institutional Official (DIO) will contact the ACGME to make a formal declaration of a disaster for particular programs or the entire sponsoring institution according to the ACGME policies and procedures. This information will be posted on the ACGME website and the declaration under ACGME policies creates significant flexibility for trainees to transfer to other programs/institutions (temporarily or permanently).

ACGME Policy: https://www.acgme.org/globalassets/PDFs/ab ACGMEPoliciesProcedures.pdf

- IV. Following declaration of a disaster, the DIO, the GMEC and other sponsoring institution leadership will strive to restructure or reconstitute the educational experience as quickly as possible.
- V. In order to maximize the likelihood that residents will be able to complete program requirements within the standard time required for certification in that specialty, the DIO and the GMEC will make the determination if transfer to another program is necessary.
- VI. Once the DIO and the GMEC determine that the sponsoring institution can no longer provide an adequate educational experience for its residents, the Kirk Kerkorian School of Medicine at UNLV will to the best of its ability arrange for the temporary transfer of residents to other Kirk Kerkorian School of Medicine programs or programs at other sponsoring institutions until such time as the Kirk Kerkorian School of Medicine is able to resume the training experience. Residents who transfer to other programs as a result of a disaster will be provided by their program directors with the estimated time that relocation to another program will be necessary. Should that initial time estimate need to be extended, the resident will be notified by their program director using written or electronic means identifying the estimated time of the extension.
- VII. If the disaster prevents the sponsoring institution from re-establishing an adequate educational experience within a reasonable amount of time following the disaster, then permanent transfers will be arranged to the extent reasonably possible.
- VIII. The DIO will be the primary institutional contact with the ACGME and the Institutional Review Committee Executive Director regarding disaster plan implementation and needs within the Kirk Kerkorian School of Medicine at UNLV programs.
- IX. In the event of a disaster affecting other sponsoring institutions of GME programs, the program leadership at Kirk Kerkorian School of Medicine at UNLV will use reasonable efforts to work collaboratively with the DIO who will coordinate, on behalf of the Kirk Kerkorian School of Medicine at UNLV the ability to accept transfer residents from other institutions. This may include the process to request complement increases with the ACGME that may be required to accept additional residents for training. Programs currently under a proposed or actual accreditation decision by the ACGME will not be eligible to participate in accepting transfer residents.

PROCEDURE

Kirk Kerkorian School of Medicine at UNLV strives to provide a stable educational environment for resident trainees. If an event or set of events causes significant alteration to the residency experience in one or more training programs, the Kirk Kerkorian School of Medicine at UNLV Office of GME and/or GMEC will take the following steps:

I. As soon as possible the GME office will:



- a. Gather data/information from facilities and training programs regarding the extent of damage and the impact of the disaster on the short term (days/weeks) and long term (weeks/months) function of individual programs and/or sites of training.
- b. Work with GMEC, the dean's office, and the hospital partners' medical directors' offices to determine the short term and long term impact on clinical operations at their sites (affected by the disaster).
- c. Work statewide to determine if local solutions for training can be implemented.
- II. The GMEC will hold an emergency meeting after the disaster to review the available information regarding the impact of the disaster on clinical operations and training programs. If circumstances dictate, an executive committee including the DIO, the institutional GME coordinator and a senior program director, will be formed. All actions taken by this executive committee will be reported to GMEC. The ACGME will be notified by the DIO.
- III. The GMEC will meet regularly as necessary to continue its assessment of the situation and to make decisions regarding Kirk Kerkorian School of Medicine training programs. The Office of GME will continue to provide administrative support to all affected programs during this period. When necessary the executive committee will be put into action.
- IV. Issues for the GMEC to review, assess and act upon include:
 - a. Patient safety
 - b. Safety of residents, faculty, and staff
 - c. Supply of available faculty and housestaff for clinical and educational duties
 - d. Extent/impact of damage to the physical plant/facilities
 - e. Extent/impact of damage to clinical technology and clinical information systems
 - f. Extent/impact of damage to communication technology (i.e. phones, pages, intra/internet, cellular devices)
 - g. Changes in the volume of patient activity in the short and long term
- V. If the DIO and the GMEC determine that a program or the institution cannot provide an adequate educational experience for a resident because of the disaster, both individual programs and the institution will work towards the following:
 - a. Temporarily relocate residents to a site of training within the institution or to a Kirk Kerkorian School of Medicine at UNLV program in the opposite part of the state if capacity exists.
 - b. Arrange a temporary transfer for individual residents to another program until the institution can provide an adequate educational experience for the resident. Time estimates will be provided regarding the minimum duration of the transfer and the anticipated total duration of the transfer if possible.
 - c. Assist the resident in a permanent transfer to another program/institution
- VI. Continuation of financial support in the event of a disaster will be dependent on the short term and long term impact on each program and the institution overall. It will also be dependent on current policies related to reimbursement.
 - a. For residents temporarily relocated to a non-Kirk Kerkorian School of Medicine or Kirk Kerkorian School of Medicine at UNLV program:



- i. Kirk Kerkorian School of Medicine at UNLV will work with the hospitals, CMS, and the receiving institution to provide salary (according to the Kirk Kerkorian School of Medicine salary schedule) through the end of the current academic year (if it lasts that long). Some benefits (i.e. health insurance, etc.) may need to be coordinated with the temporary training site based on the distance from Nevada.
- ii. As soon as possible prior to the end of the academic contract, the program will inform the resident of his/her status within the program for the next academic year.
- b. For residents permanently transferring to another institution, Kirk Kerkorian School of Medicine at UNLV typically will not cover salary and benefits
 - If the program is permanently closed, Kirk Kerkorian School of Medicine at UNLV may provide some transitional funding to the accepting institution.
 - ii. If the program is not permanently closed but a resident decides to permanently transfer to another institution, costs of salary and benefits will be covered by the accepting institution.
- VII. The DIO will contact the ACGME as soon as possible (within 10 days of implementing the disaster plan) to provide an update on the disaster and initial steps taken by the institution and the GMEC. Formal plans will be communicated within 30 days of their implementation.
- VIII. The DIO will continue to communicate with the ACGME regularly as needed to provide updates on any additional program or institutional issues for both the short and long term. The DIO will contact the ACGME with regard to the final plans to reconfigure any programs

Approved by Graduate Medical Education Committee April 2016