Policy of the Graduate Medical Education Committee Section: Resident Supervision/Work Environment

**Subject: Environmental Disruption of the Educational Process** 

**Number: 3.610** 

Date Developed: 10/2009 Last Review/Revision: 5/2014

**Replaces:** 

ACGME Requirements: Institutional I.A.1.; II.F.2.; IV.M;

## **Purpose**

The purpose of this policy is to establish reporting mechanisms and procedures in the event of disruption of the resident/fellow educational process.

## **Definitions**

**Environmental Disruption**: An event which causes serious, extended disruption to resident assignments, educational infrastructure, or clinical operations in which the sponsoring institution's or its programs' ability to conduct resident education in substantial compliance with ACGME standards may be affected. The event may be localized to one sponsoring institution, a participating institution or another clinical setting (e.g. epidemics, weather-related situations).

**Disaster:** An event which impacts an entire community or region for an extended period of time. For educational accreditation purposes, the ACGME will declare a disaster in accordance with *ACGME Policies and Procedures, II.H.2.* 

## **Policy**

The GMEC will ensure a safe environment for education and patient care. Resident performance during an environmental disruption of their education should not exceed expectations for their scope of competence as judged by program directors and other supervisors, nor should they be expected to perform beyond the limits of self-confidence in their own abilities.

Decisions regarding a resident's involvement in these situations must take into account the following aspects of his/her multiple roles as a student, a physician, and an institutional employee:

- the nature of the health care and clinical work that a resident will be expected to deliver;
- reasonable expectations for duration of engagement in the extreme emergent situation; and,
- self-limitations according to the resident's maturity to act under significant stress or even duress;
- resident's level of post-graduate education specifically regarding specialty preparedness;
- resident safety, considering their level of post-graduate training, associated professional judgment capacity, and the nature of the disaster at hand;
- board certification eligibility during or after a prolonged extreme emergent situation.

## Procedure

- 1. Residents and fellows are expected to abide by policies and procedures of the affected clinical setting.
- 2. Upon learning of an environmental disruption of education at a clinical site, either the program director (PD) or the Designated Institutional Official (DIO) may take initial action.
- 3. Once safety of the residents/fellows is assured, decisions regarding their involvement, including reassignment require PD and DIO consent.
- 4. The DIO should 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.
- 5. 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. The DIO will receive electronic confirmation of this communication with the ED-IRC which will include copies to all Executive Directors (EDs) of Residency Review Committees (RRCs).
- 6. Upon receipt of this confirmation, PDs will contact their respective EDs-RRCs if necessary to discuss any specialty-specific concerns regarding interruptions to resident education or effect on educational environment.
- 7. PDs are expected to follow their institutional disaster policies regarding communication processes to update the DIO on the results of conversations with EDs-RRCs regarding any specialty-specific issues.
- 8. DIO is expected to notify the ED-IRC when the institutional extreme emergent situation has been resolved.
- 9. This reporting serves to document the event in order to explain any significant variations in resident clinical experience, case volume, or educational assignments identified in future program or institutional accreditation reviews.