

**MARSHALL COMMUNITY HEALTH CONSORTIUM
GRADUATE MEDICAL EDUCATION COMMITTEE
POLICY ON DISASTER/ INTERRUPTION IN PATIENT CARE**

SECTION 1. POLICY BACKGROUND

- 1.1. This policy is in accordance with the Accreditation Council for Graduate Medical Education (ACGME) Institutional Requirements, that the Marshall Community Health Consortium, as a Sponsoring Institution, must maintain a policy that addresses administrative support for ACGME-accredited programs and Residents in the event of a disaster or interruption in patient care.
- 1.2. This policy also addresses the ACGME requirement that Sponsoring Institutions are to include information in the Policy for Disaster/Interruption in Patient Care Policy regarding assistance for continuation of salary, benefits, and Resident assignments.

SECTION 2. DEFINITION

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

SECTION 3. PROCEDURE

- 3.1 Upon notification of the imminence or actual occurrence of a situation which threatens to interrupt medical care involving Residents, the Consortium Office of Graduate Medical Education via the Dean of the Joan C. Edwards School of Medicine or his/her designee and the Vice Dean of Graduate Medical Education in collaboration with the Consortium Designated Institutional Official (DIO) will take the lead in working with Program Directors and training site directors of the affected training sites and major affiliated institutions .
- 3.2. Acting collaboratively, the aforementioned will arrange, to the extent possible, a redeployment of trainees either on a temporary or permanent basis from their regular assignments at inoperable clinical sites to the sponsorship of local functioning affiliates with services that are capable of meeting the training and clinical needs of affected Residents. The Consortium will continue salary support of these residents for the duration of the temporary assignment.
- 3.3. The Consortium will collaborate in providing whatever administrative and financial support is needed for Residents' well-being by helping them cope with the kinds of highly stressful conditions that are common to disaster/catastrophic situations

including meals; environments made as safe as possible; adequate rest periods; and other forms of necessary assistance as they continue their training while caring for patients insofar as clinical circumstances permit.

- 3.4. To the extent feasible, community-wide, state and national disaster contingency plans will be consulted.

SECTION 4. COMMUNICATION WITH ACGME

To assure maintenance of program accreditation, the DIO will communicate with the ACGME and the Institutional Review Committees for guidance and, if necessary, approval.

Effective Date: August 8, 2014

Approved by CGMEC: August 8, 2014

Approved by DIO: August 8, 2014