Continuity of UW Graduate Medical Education and Administration in the Event of a Disaster

Scope: All residents and fellows participating in University of Washington (UW) graduate medical education (GME) training programs accredited by the Accreditation Council for Graduate Medical Education (ACGME) and Council on Dental Accreditation (CODA), and Senior Fellows in non-ACGME accredited programs.

There are multiple types of natural or man-made disasters that may occur within the Seattle area or other sites, including acute disaster with little or no warning (e.g., earthquake or bombing), intermediate disaster with some lead-time and warning (e.g., volcano), and social and economic disruption or disaster (e.g., pandemic flu). This document addresses disaster and disruption in the broadest terms.

Policy: The Designated Institutional Official (DIO) and program directors are responsible for ensuring continuity of the educational experience of residents and fellows in UW GME training programs in the event of a disaster. The policy should include information about assistance for continuation of salary, benefits and resident/fellow assignments (ACGME IR IV.M.1).

Definitions:

Disaster: A disaster is defined herein as an event or set of events causing significant alteration to the educational experience of one or more UW GME training programs.

Extraordinary Circumstances: A circumstance that significantly alters the ability of a sponsor and its programs to support resident education (ACGME Glossary of Terms).

Extreme Emergent Situation: A local event (such as a hospital-declared disaster for an epidemic) that affect resident education or the work environment but does not rise to the level of an extraordinary circumstance as defined in the ACGME Policies and Procedures, Section 20.00 (ACGME Glossary of Terms).

Communications/Response: In the event of a disaster, confirmation of resident and fellow well-being is of paramount importance to UWSOM and UW GME training programs. The institution has established the GME Disaster Response phone tree protocol to inform and notify GME administration, program directors and program administrators of the status of UW residents and fellows. All parties are requested to be available by phone (if they are operating) at the number listed on the GME Disaster Response phone tree list.

Communications: GME Office

A Resident and Fellow Roster containing contact information maintained in MedHub will be maintained by the UW GME Office.

Resident/Fellow Contacts Updates: Residents and fellows will maintain current contact information as follows:

- MedHub Residency Management System: under Tasks > Update Contact Information
- Workday UW HR/Payroll system: under Personal Information

Contact information will contain, at a minimum, current address, UW and personal email addresses, phone numbers (home, cell, pager), and emergency contacts. This information must be updated within 2 weeks of a new resident’s appointment start date, at least annually by July 15, and as appropriate.
Communications: UW
UW has developed UW Alert to disseminate official information via email, text messages, telephones, loudspeakers, website banners and other means to keep the campus community informed during emergencies and situations that might disrupt normal operations. UW Alert is available to all UW faculty, staff, and students in Bothell, Seattle, Tacoma and at UW Medicine.

University of Washington Policy on Suspended Operations
The President or his/her designee(s) may declare a temporary suspension of any or all University operations due to an emergency situation that adversely affects University operations, public health, or the well-being and safety of employees and students. However, organizations providing essential services including University Medical Centers, University Libraries, Physical Plant, Residence Halls, and University Police normally will be excluded from any temporary suspension decision.

Workforce/Resource Allocation During Disaster Response
The local Hospital Incident Command System (HICS) will be the organizational structure for disaster response at each of the training sites, as well as other training sites. All residents and fellows assigned to a specific training site are responsible to the respective Incident Commander and/or Medical Care Branch Director at that site as specified in the HICS chart designation.

The Incident Commander and/or Medical Care Branch Director of the HICS will determine as necessary faculty, resident and fellow reassignment or redistribution to areas of need, superseding departmental plans for workforce management. Information on the location, status and availability of residents and fellows during disaster response and recovery will be provided by the DIO or designee in coordination with GME administration, program directors and/or chief residents.

Exceptions to the Work Hours Standard: Residents may stay to care for their patients or return to the hospital with fewer than eight hours free between duty periods in circumstances such as a declared emergency or disaster. *(CPR VI.F.2.b).(1)*

Administrative Functions:

**Salary/Stipends & Benefits:** Residents and fellows will continue to receive stipends and fringe benefits during any disaster response and recovery periods, and/or accumulate salary and benefits until such time as utility restoration allows for fund transfer.

**Professional Liability Coverage:** UW professional liability (malpractice) coverage will be provided to residents and fellows acting as volunteers for UWMC, HMC, SCH, VA and/or other training sites in the event of a disaster. Adverse events involving patient care must be reported to Health Sciences Risk Management no matter where the volunteer service is rendered.

**MedHub Schedule Reporting:** Resident and fellow time reporting will continue during disaster response and recovery. Program and/or GME administrators will enter resident and fellow schedules in MedHub based on resident and fellow activity and assignment during disaster response and recovery efforts. Master rotation schedules will also be used as reference for assessing programs accounting of resident and fellow activity during disaster response and recovery.

**CMS Emergency GME Regulations:** The Centers for Medicare and Medicaid Services (CMS) has special rules for emergency Medicare GME affiliation agreements and related GME payments during a disaster, the rule is at 42 CFR 413.79 (f)(6)(i) and the final rule is explained in the August 19, 2008 Federal Register final rule, pages 48637 – 48650.
Resources

- ACGME Glossary of Terms
- ACGME Policies and Procedures
  - ACGME Policy and Procedures to Address Extraordinary Circumstances (Subject 21.00; Sections 21.10 – 21.70)