POLICY ON LOCAL EXTREME EMERGENT SITUATIONS

I. **Purpose:**
This policy is intended to address the impact of local extreme emergent situations (e.g. epidemics) on resident education and work environment at the sponsoring institution, a participating institution or another clinical setting. These situations differ from events characterized as “disasters” which impact an entire community or region for an extended period of time.

II. **Definition:**
A local extreme emergent situation is defined as a situation which causes serious, extended disruption to resident assignments, educational infrastructure, or clinical operations that might affect the sponsoring institution's or its programs’ ability to conduct resident education in substantial compliance with Accreditation Council for Graduate Medical education (ACGME) standards.

III. **Background:**
In considering action plans for residents during these local extreme emergent situations, DIOs and program directors should carefully consider their decisions from the perspective of resident education in light of current ACGME standards and the overriding commitment of all physicians to patient care during an emergency. Decisions regarding a resident’s involvement in local extreme emergent 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; 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; 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.

IV. **Procedures:**
Reporting procedures must document the local extreme emergent situation in order to explain any significant variations in resident clinical experience, case volume, or educational assignments identified in future program or institutional accreditation reviews.

A. Program directors must first consult and coordinate with the Director of Medical Education/Designated Institutional Official (DIO) concerning the impact of the local extreme emergent situation.

B. The DIO will report events to the Executive Director, Institutional Review Committee (ED-IRC) by 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.
C. 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.

D. The DIO will submit a written description of the disruptions at the Institution and details regarding activities the Institution has undertaken in response, if requested by ED-IRC. Additional updates to this information may be requested based on the duration of the event.

E. The DIO will receive electronic confirmation of communication with the ED-IRC which will include copies to all EDs of Residency Review Committees (RRCs).

F. Upon receipt of this confirmation by the DIO, Program directors may contact their respective EDs-RRCs if necessary to discuss any specialty-specific concerns regarding interruptions to resident education or effect on educational environment.

G. The program directors will update the DIO on the results of conversations with EDs-RRCs regarding any specialty-specific issues.

H. The DIO will notify the ED-IRC when the institutional extreme emergent situation has been resolved.

I. The DIO will reference the Emergency Preparedness Manual: IHDM Pandemic Flu Emergency Response Plan regarding its impact on resident assignments and duties during a declared Pandemic Flu Emergency or other extreme infectious disease situation.