

## SUBSTANTIAL DISRUPTIONS IN PATIENT CARE OR EDUCATION POLICY

### PURPOSE

In the event of a substantial disruption(s) in patient care or education, or a disaster or catastrophic event altering the ability of the University of Tennessee College of Medicine (“UT College of Medicine” or “Sponsoring Institution”) and the ACGME-accredited graduate medical education programs sponsored by UT College of Medicine (each a “Program”) to support its residents and fellows (individually a “resident” or collectively “residents”), the policies and procedures in this Substantial Disruptions in Patient Care or Education Policy apply.

### REFERENCE

Consistent with Section IV.N. of the ACGME Institutional Requirements, the Sponsoring Institution must have a policy consistent with the ACGME Policies and Procedures that addresses support for each of its Programs and residents in the event of a disaster or other substantial disruption(s) in patient care or education. This policy must include information about assistance for continuation of salary, benefits, professional liability coverage and resident/fellow assignments.

### POLICY

#### I. General

The UT College of Medicine follows the University of Tennessee Health Sciences Center Emergency Response Plan available at: [UT Emergency Response Plan](#). In the event of a disaster or a substantial disruption in patient care significantly alters the ability of the UT College of Medicine and its Programs to support graduate medical education, the UT College of Medicine will follow the procedures set forth in the ACGME’s Extraordinary Circumstances Policy, ACGME Policy 25.00, as it may be updated from time to time (the “Extraordinary Circumstances Policy”), as further detailed below.

#### II. UT College of Medicine Disaster Response

During a disaster or other substantial disruption in patient care, Program Directors or their designees, working with Program Site Directors (as applicable) shall take an immediate accountability of the location and safety of all Program resident(s) affected by the disaster or interruption. Program Directors will contact the DIO to confirm the safety of all residents. All ACGME Requirements continue to apply.

The Program Director and/or designated Site Director at each participating site will be responsible for determining the operational status of each participating site and advise the Program Director or DIO, as applicable, of any necessary relocation of resident education and patient care activities as a result of the disaster or disruption. The DIO, working with the affected Program Directors, the UT College of Medicine Office of Graduate Medical Education (“Office of GME”) and the GMEC will assess what steps need to be taken to assist any residents who are facing a potential disruption in their training.

The GMEC shall oversee any Program closures or Program reductions consistent with the UT College of Medicine *Institutional and/or Program Closure/Reduction Policy* and shall review and approve any major changes to a Program’s structure or duration of education, including a change in the designation of a Program’s primary clinical site. If the request is associated with a declaration of extraordinary circumstances, below, ACGME Review and Recognition Committees expediate review of ACGME-accredited program requests to add or delete participating sites or change program educational formats.

If residents have been transferred in accordance with the Extraordinary Circumstances procedures, below, UT College of Medicine will begin to immediately coordinate the residents' return to training in their Program.

### **III. Extraordinary Circumstances**

#### **A. Extraordinary Circumstances – Procedures**

In response to circumstances that significantly alter the ability of UT College of Medicine and its Programs to support graduate medical education, the ACGME may invoke the Extraordinary Circumstances Policy. Examples of extraordinary circumstances include an abrupt closure of a hospital, a natural disaster, or a catastrophic loss of funding.

The ACGME may invoke the Extraordinary Circumstances Policy at the request of the DIO. The ACGME may also invoke the Extraordinary Circumstances Policy in response to verified public information or on the basis of other information received by the ACGME. The ACGME President and Chief Executive Officer, consults with the ACGME Board Chair to determine if a sponsoring institution's ability to support graduate medical has been significantly altered.

If the ACGME invokes its Extraordinary Circumstances Policy, a notice will be posted on the ACGME website with information relating to the ACGME's response to the extraordinary circumstance(s) and relevant ACGME contact information upon invocation of the Policy.

The DIO, or designee(s), on behalf of the UT College of Medicine, once the Extraordinary Circumstances Policy is invoked, shall:

1. Within ten (10) days of the invocation of the policy, contact the ACGME President and Chief Executive Officer, or designee, to provide information regarding then available and known major changes to the Sponsoring Institution and its Programs resulting from the extraordinary circumstance;
2. Within thirty (30) days of the invocation of the policy, unless another due date is approved by the ACGME, provide a plan describing the continuation of residents' educational experiences and any major changes to the Sponsoring Institution and its Programs, to the ACGME President and Chief Executive Officer, consistent with the applicable ACGME requirements;
3. Arrange timely reassignment of residents, including their temporary or permanent transfers to other ACGME-accredited programs, and ensure that residents are prospectively informed of the estimated duration of any temporary transfer to another ACGME-accredited program; and
4. Ensure that residents receive timely, continual information regarding reassignments, transfer assignments and/or major changes to UT College of Medicine or its Programs.

#### **B. Extraordinarily Circumstances - Resident and Fellow Transfers**

When coordinating temporary or permanent transfers due to extraordinary circumstances, the preferences of the affected resident(s) shall be considered and UT College of Medicine and its

Programs must minimize the disruption to resident education. Training sites within the University of Tennessee system may provide the best option for minimizing disruption to resident education, particularly for temporary transfers.

Receiving programs must appoint transferring residents to approved positions. Temporary or permanent increases in resident complement requests should be made through each program's respective ACGME Review and Recognition Committees on the Accreditation Data System. If applications for new programs that intend to accept transferring residents under extraordinary circumstances will occur, notice of the expedited review, including information about submission due date(s), will be posted on the ACGME website.

Residents will continue to receive salary and benefits from UT College of Medicine (or the applicable affiliate pay source) during temporary relocations subject to any restrictions in benefit plans, laws or regulations. Professional liability coverage will continue for residents temporarily relocated to programs within the State of Tennessee to the extent professional liability protection remains available under the Tennessee Claims Commission Act.

For permanent transfers, including permanent program closures/disruptions, residents will continue to receive salary and benefits from UT College of Medicine, subject to any restrictions in benefit plans, laws and regulations, until the resident is appointed and begins training at another institution, or until the end of the resident's contract, depending on the circumstances. Professional liability coverage may also continue for permanently transferring residents until the resident is appointed and begins training at another institution, if coverage remains available under the Tennessee Claims Commission Act. Only the DIO has the authority to negotiate financial arrangements for transfer of residents into another program, however administrative assistance will be made available to all transferring residents through the Office of GME, with appropriate GMEC and DIO oversight.

Adherence to the following steps will expedite the temporary/permanent transfer process, should it be required:

1. Initial identification and verification of resident contact information by Program Directors and coordinators. By July 15th of each year, Program Directors will confirm the contact information (including phone numbers, alternate email addresses and emergency contacts) for each resident/fellow.
2. Using all available resources (ACGME, Specialty Board) to search and find an accepting ACGME-accredited program for transfer. Responsibility for identifying a program will be shared by department Chair, Program Director and DIO, as indicated above.
3. The receiving program timely requests resident complement increases, if applicable from the ACGME.
4. Program Directors complete transfer letters for residents, if needed.