



UCF/HCA GME Consortium Catastrophic/Disaster
Event Planning for GME Programs and Trainee
Transfers (IV.M)



Purpose/Intent: Institutional sponsor must have a policy to address administrative support for GME programs and residents/fellows (Trainees) in the event of a catastrophic event, disaster or interruption in patient care. This policy includes information about assistance for continuation of Trainee assignments, salary and benefits (IV.M).

Policy summary: Trainees conform to clinical site schedules and needs during threatened or real disasters and not UCF closures. The UCF/HCA GME consortium is committed to assisting in restructuring Trainee's educational experiences (if necessary) as quickly as possible following a catastrophic event or disaster.

1. A catastrophic event is defined as an event or sequence of events resulting in a significant alteration or disruption of the residency training experience. This situation may be anticipated or unanticipated, and may have short term or longer term impact. Examples of a catastrophic event include threatened or real weather related disaster, significant loss of a major participating site's ability to provide patient care, and loss of a major participating site's loss of accreditation to perform patient care.
2. Each program must maintain comprehensive records for each Trainee including evaluations, procedures, training history, achievements available in online Trainee management system (MedHub). Each faculty member, Trainee, and staff member involved with GME must have regularly updated personal contact information maintained in MedHub or other cloud-based system available to both local and consortium GME offices (to include cell phone number, emergency contact person, and outside email address when possible). Each program should also maintain planned evacuation locations for each Trainee.
3. Each individual is responsible for monitoring UCF, GME, and hospital websites or other designated hospital command centers in the event of a local disaster (weather or other). Trainees conform to schedules of clinical sites during threatened or real catastrophic events and do not conform to UCF closures. Trainees are classified as essential or nonessential Personnel during disasters by the program director together with hospital administration. Clinical sites may also elect to ask for volunteers to staff essential services.
4. Trainees are expected to perform as physicians and professionals in the context of the specific disaster, taking into account their level of training, their specialty, and their demonstrated level of competence.
5. Trainees should always have appropriate supervision given their level of training and competence. Trainees without regular unrestricted Florida medical licenses must always work under supervision. Even with a regular medical license, Trainees should not be expected to perform in any situations outside their scope of competence and practice. Trainee safety must be taken into account.

- a. The duration of clinical work during a disaster must be considered, including impact on trainee education, achievement of milestones, and board eligibility status.
6. Program directors must first contact the DIO, VP for GME (Associate DIO) or local Assistant DIO (Administrative Director or ADME) with questions regarding catastrophic events. Trainees must first attempt to contact their program directors, local GME office or CGME office.
7. Upon notification of catastrophic event, each program director will determine location and status of each Trainee and report this information to both the local and consortium GME offices.
8. The CGMEC will meet as soon as possible following catastrophic event declaration. The CGMEC and consortium executive board will determine whether existing programs can continue with or without restructuring and whether temporary or permanent transfer of Trainees to another institution will be necessary.
9. If the disaster is expected to cause a serious or extended disruption of Trainee assignments that might affect programs' abilities to be in compliance with ACGME requirement, (program, common, institutional), the DIO or designee will contact both the HCA GME corporate office and the Executive Director of the Institutional Review Committee (ED-IRC) by telephone. This should be done within 10 days after declaration of a catastrophic event. The DIO will work with hospital and HCA leadership to establish a command center that will keep all individuals informed.
 - a. Once the ACGME has obtained sufficient information about the situation from the DIO, the ED-IRC will provide relevant information to the relevant Executive Directors of the Residency Review Committees (RRCs).
 - b. Due dates may be established by the ACGME to submit program reconfiguration requests to ACGME and to inform each program's trainees of the plan
 - c. The ACGME website provides phone numbers for key ACGME staff who may provide assistance. Instructions are available on the ACGME website on how to request adjustment of Trainee complement numbers and change email addresses.

Program directors may contact their respective ED-RRC to discuss specialty specific concerns.

10. If the program cannot provide adequate educational experiences for each Trainee, it will arrange temporary transfers to another ACGME accredited program by establishing a PLA, or assist the Trainees in obtaining a permanent transfer to another program. HCA Healthcare hospitals offering GME programs in the same specialty will be considered first. HCA corporate GME will work with the DIO, the VP for GME, and each hospital to transfer funded positions as applicable.
11. The DIO or designee will contact the ACGME Executive Directors with requests related to Trainee transfers.
12. Trainees who temporarily transfer to other institutions remain UCF employees and receive pay and benefits from UCF. Receiving institutions are responsible for requesting temporary complement increases from the respective RRC(s).

13. Trainees who permanently transfer will no longer be employees of UCF or receive pay or benefits from UCF. To initiate a permanent transfer, unless the program arranges the transfer, the Trainee should provide a written request to the original program director.
14. Documentation policy regarding Trainee transfers: The program director must provide written or electronic verification of previous educational experiences and a summative competency-based performance evaluation of the transferring trainee using ACGME milestones assessments. Similarly, before Consortium GME program accepts a Trainee who is transferring from another program, the program director must obtain written or electronic verification of previous educational experiences and a summative competency-based performance evaluation of the transferring trainee from the original program director in the form of either an ACGME or CanMEDS Milestones assessments.
15. The DIO will notify the ED-IRC when the disaster has been resolved.