

**LEHIGH VALLEY HEALTH NETWORK
System Manual**

GME – DISASTER – DEPARTMENT OF EDUCATION (DOE)

SCOPE:

Lehigh Valley Health Network (LVHN) adopts this policy for the following selected licensed entities:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Lehigh Valley Hospital | <input type="checkbox"/> Transitional Skilled Unit |
| <input type="checkbox"/> Lehigh Valley Hospital – Dickson City | <input type="checkbox"/> Lehigh Valley Home Care |
| <input type="checkbox"/> Lehigh Valley Hospital – Hazleton | <input type="checkbox"/> Lehigh Valley Hospice |
| <input type="checkbox"/> Lehigh Valley Hospital – Pocono | <input type="checkbox"/> Pocono VNA / Hospice |
| <input type="checkbox"/> Lehigh Valley Hospital – Schuylkill | <input type="checkbox"/> Lehigh Valley Home Care – Schuylkill |
| <input type="checkbox"/> LVHN Children’s Surgery Center | <input type="checkbox"/> Lehigh Valley Home Care – Hazleton |
| <input type="checkbox"/> LVHN Surgery Center – Tilghman | |
| <input type="checkbox"/> Lehigh Valley Hospital – Coordinated Health
Allentown | <input type="checkbox"/> Lehigh Valley Hospital – Coordinated Health
Bethlehem |
| <input type="checkbox"/> LVHN Ambulatory Surgery Center of Lopatcong (NJ) | <input type="checkbox"/> LVHN East Stroudsburg Ambulatory Surgery Center |

Medical and Dental Resident and Fellow Physicians

LINKS TO ATTACHMENTS: N/A

LIST OF ASSOCIATED FORMS: N/A

DISCLAIMER:

This policy and the implementing procedures are intended to provide a description of recommended courses of action to comply with statutory or regulatory requirements and/or operational standards. It is recognized that there may be specific circumstances, not contemplated by laws or regulatory requirements that make compliance inappropriate. For advice in these circumstances, consult with the Departments of Risk Management and/or Legal Services, as appropriate.

REVIEW:

Origination: mm / yyyy
Review / Revision: mm / yyyy, mm / yyyy

Approved by the Graduate Medical Education Committee

Approved by: Joseph Patruno (Physician)	Approval Date: 02/06/2023
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I. POLICY:

It is an ACGME institutional requirement that the sponsoring institution develop a Disaster Policy for graduate medical education (GME) activities. This policy defines the process for allowing graduate trainee transfer in the event of a disaster that prevents the Network from continuing the operation of graduate training programs.

II. DEFINITIONS:

Disaster: An event or set of events deemed by the DIO, in consultation with appropriate GMEC members, LVHN disaster response coordinators and Senior Management, to cause significant disruption or alteration to the educational experience at one or more LVHN campuses for an extended period.

DIO- Designated Institutional Official

Senior Management – Chief Executive Officer, Chief Financial Officer, Chief Medical Officer, Chief Academic Officer, Appropriate governing accreditation body or committee: The ACGME, RRC, AOA, or AOA Committee, or CODA Committee which oversees the inspection and approval of the program in which the graduate trainee is currently contracted.

ACGME – Accreditation Counsel for Graduate Medical Education

CODA – Commission on Dental Accreditation

AOA – American Osteopathic Association

RRC – Residency Review Committee

GMEC – Graduate Medical Education Committee

Graduate Trainee: Any postgraduate M.D., D.O., D.D.S., D.M.D., physician in training, whether or not in an ACGME training program.

III. PROCEDURE:

1. Procedure for Transfer to an Outside Institution and Program Reconfiguration

If because of a disaster, an adequate educational experience cannot be provided for each graduate trainee, LVHN will:

- a.) arrange temporary transfers to other programs/institutions until such time as the residency/fellowship program can provide an adequate educational experience for each of its graduate trainees or
- b.) cooperate in and facilitate permanent transfers to other programs/institutions.
- c.) make keep/transfer decisions expeditiously so as to maximize the likelihood that each graduate trainee will have a timely completion of the trainee year.

Upon the declaration of a disaster, the Designated Institutional Official (DIO) of LVHN or her/his designee will contact the appropriate accrediting body to discuss due dates that the accrediting body will establish for the programs (a) to submit program reconfigurations to each respective accrediting body and (b) to inform each program's graduate trainees of graduate trainee transfer decisions. The due dates for submission shall be no later than 30 days after the disaster unless other due dates are approved by the accrediting body.

2. Temporary Graduate Trainee Transfer

At the outset of a temporary graduate trainee transfer, a program must inform each transferred graduate trainee of the minimum duration of his/her temporary transfer, and continue to keep each graduate trainee informed of the minimum duration. If and when the LVHN program decides that a temporary transfer will continue to and/or through the end of a graduate training year, it must so inform each such transferred graduate trainee.

3. Communication with accrediting bodies

The DIO or designee will contact the appropriate governing accreditation body (for the ACGME the Institutional Review Committee Executive Director) with information and/or requests for information.

The Program Directors or designee will contact the appropriate governing accreditation body or committee (for the ACGME the appropriate Review Committee Executive Director) with information and/or requests for information.

Graduate Trainees should contact the appropriate governing accreditation body or committee (for the ACGME the appropriate Review Committee Executive Director) with information and/or requests for information.

Of note, all of the above parties should check the websites of the accrediting bodies for updates and information prior to direct contact.

Disaster Policy Flow Chart

