

# REORIENTATION OF IMPORTANT POLICIES AND PROCEDURES FOR HOUSESTAFF Harbor-UCLA Medical Center

The Accreditation Council for Graduate Medical Education (ACGME) requires that the Sponsoring Institution and respective training program provide each resident with a supportive learning environment. Each new house officer receives an enormous amount of information at orientation. However, later they are unlikely to successfully identify or recall specific policies and/or related content. It is important that each resident is knowledgeable of important policies and procedures required by ACGME to allow for successful matriculation and completion of training. This document briefly details important and vital information related to the proper oversight and administration of residency training. In most circumstances knowledge of the specific policy is not necessary, simple recognition that it exists is adequate. In addition, each Program Director has a Policy and Procedure manual available for their trainees to review or reference.

## Evaluations:

- ❑ All residents must provide confidential evaluation and feedback for faculty and supervising residents at least annually.
- ❑ You should be familiar with the web-based evaluation system called Verinform at HUCLA.
- ❑ Each trainee is required to meet with his or her respective Program Director (PD) or designee at least twice annually to review evaluations, emotional stress and fatigue as well as compliance with duty hours. Career planning may also occur.

Curriculum: Each program is responsible for providing appropriate curriculum to the trainee. The curriculum must be competency-based and include both specific specialty content as well as general training in quality improvement, bioethics, etc.

- ❑ Program curricula are based on the ACGME common and specialty requirements.
- ❑ Residents receive goals and objectives before the beginning of a new rotation.
- ❑ Residents provide feedback to faculty and program director regarding curriculum success and content. This is done at least annually in each program.
- ❑ **THE SIX GENERAL COMPETENCIES ARE:** Medical Knowledge, Patient Care, Practice-based Learning, Systems-based Practice, Interpersonal and Communication Skills and Professionalism.

Surveys and Questionnaires: Your institution or program distributes a number of surveys. You may have ignored or forgotten these surveys so here's a reminder.

- ❑ Duty hour survey – this survey is distributed approximately each quarter via Verinform.
- ❑ Annual Resident Survey – this survey is usually sent in the winter and asks questions about evaluation, educational goals, ancillary support, and resident safety.
- ❑ Exit Questionnaire – this survey is given only to graduating residents and solicits overall feedback regarding residency training.

Policy and Procedures: All residents are informed of the following P&P's when beginning their training at Harbor-UCLA Medical Center. It is more important that you know they exist rather than the specific content. Please be able to refer to the existence of the specific policies below:

1. Policy in the event of resident absence
2. Conferences Attendance
3. Program goals and objectives (competency-based)
4. Academic due process
5. Resident evaluation and advancement
6. Elective rotations
7. Faculty evaluation
8. Continuous quality improvement in medical education
9. Resident work hours and working conditions (Duty Hours)
10. Moonlighting Policy
11. Resident stress and the potentially impaired physician
12. Resident Fatigue Policy

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- 13. Supervision and lines of responsibility for patient care
- 14. Sexual Harassment
- 15. Resident Eligibility and Selection
- 16. Resident medical record deficiencies
- 17. Parental and family leave
- 18. Resident Grievance and Due Process

- You should all be able to recite **the Duty Hour Requirements**
  - o 1 day off in 7 averaged over 4 weeks
  - o No more frequent than q3 on call, averaged over 4 weeks
  - o 10 hours off between shifts
  - o No more than 30 hours of continuous duty
  - o No more than 80 hours/week when averaged over 4 weeks
- Methods for monitoring Duty hours – Verinform, quarterly surveys, the Duty Hour Hotline (x2965), meeting with program director, annual resident survey.

**Joint Council of Residents and Interns (JCIR):** All county employed residents who so choose, are members of the represented union (JCIR). There are several *peer-selected* residents who provide representation on a number of key Institutional committees such as Utilization Review, Surgical Case Review, Trauma Quality Improvement, Blood Utilization, Health Information, Bioethics, Pharmacy and Therapeutics, Graduate Medical Education (GMEC), etc.

- The Resident Members of GMEC are JCIR Representatives. Your JCIR Delegates for 2009-2010 are: Linda Sharp, Internal Medicine; Mark Song, Family Medicine; Sergio Hernandez, Emergency Medicine; Krishi Chanduri, Internal Medicine; Nicholas Drakos, Emergency Medicine; Michael Core, Family Medicine; Hossein Samadi, Psychiatry.
- At orientation, each of you received a copy of the Memorandum of Understanding (MOU) between JCIR and L.A. County. The current MOU was made effective November 21, 2006 and expires September 30, 2009 and stipulates conditions of employment related to resident trainees.

**Institutional Support:** The JCIR MOU above stipulates that Harbor-UCLA must provide *adequate* resources for training including meals, call-rooms, ancillary services, information systems technology, etc. It is important that you remember the operational term *ADEQUATE* and remember that although not ideal the training environment is adequate to meet you educational goals.

**Grievance and Due Process:** There are several avenues to respond to grievances including chief residents, immediate faculty supervisor, program director, chair, JCIR rep, and Dr. Harrington.

**\*Autopsies:** The overall autopsy rate of deaths is approximately 12%. Residents are notified of all deaths undergoing autopsy in the following ways: Your program director/chair receives a copy of the report, a list of the cases reviewed in the Thursday morning autopsy review is sent to each department weekly, and all deaths are reviewed at the respective departments' Morbidity and Mortality Conference. All Autopsy reports are readily available for review.

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**I acknowledge that I have received and read the above *Reorientation of Important Policies and Procedures for Housestaff* form.**

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Print Name

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Signature

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Date