Institutional Policies

The policies listed below are CAMC policies that may be of specific interest to residents and fellows. The CAMC Employee Handbook in its entirety can be found on CAMNET on the Human Resources page. You may also find a searchable database of all CAMC policies in the CAMC Document Management System here: http://vandaliahealth.policystat.com .

• Security
• Timely Care
• Paging and On-Call Duties
• Local Emergency Policy
• Dress Code

Security

It is the institution's policy to attempt to safeguard everyone and everything associated with CAMC. Uniformed guards are utilized to assist in this work. Residents/Fellows should report to their Program Director, Graduate Medical Education Office or to a security guard any suspicious person or circumstance. In the event a resident/fellow were to feel unsafe within the hospital, CAMC has issued employees a Strongline Panic Button to wear on their badge. Once activated, this button quickly directs security personnel to the scene. Any resident/fellow feeling unsafe and wanting the assistance of a member of the security team can stop by the security desk and request assistance or they may call Security directly with any concerns at 304-388-7200 at General Division; 304-388-5572 at Memorial; and 304-388-2171 at Womens and Children.

Residents/Fellows can also help by observing the rules and regulations of the various departments with regard to the proper securing of company property. CAMC cannot be responsible for loss or damage to personal property or valuables of the Residents.

Timely Care

It is strongly suggested that residents/fellows reside within the geographic service area of their hospital base, close enough to fulfill their resident/fellow responsibilities and to provide timely care for their patients for the duration of their residency period. Residents/fellows should live close enough to the hospital that a resident/fellow on-call who is requested to return to the hospital can return within 30 minutes of the request.

Paging and On-Call Duties

Whether using a CAMC issued pager, an ASCOM phone or the AMS Connect web-based application, residents/fellows are expected to return all pages within 15 minutes of the page. Those persons assigned to the cardiac arrest call schedule will respond to the 1-2-3 pages immediately.

Residents/Fellows must be prompt in their response to calls. When a call is received from the nursing unit involving an emergency situation, it is imperative that the Resident/Fellow go to the patient area as quickly as possible to see the situation rather than depend on telephone impressions. This is important to protect the welfare of the patient.

On-call duties are considered a residency training as well as clinical responsibility. Residents/Fellows may not at their discretion reassign these responsibilities without permission of the residency program director or their designee. In extenuating circumstances where a change in call schedules would be necessary, Residents/Fellows must follow institutional policies defined by the institution and the program requirements.

Local Emergency Policy

This policy addresses resident/fellow expectations during a local emergency situation when they may temporarily be asked to provide additional support until the emergent situation is under control.

Definition of a Local Emergent Situation

A local emergent situation is an event that affects resident/fellow education or the work environment temporarily but does not rise to the level of an ACGME or other accrediting institution's declared disaster policy. . In the event of a major disaster, the DIO would implement the steps as outlined in the ACGME required Extraordinary Circumstances policy.

PROCEDURES

Duties of Residents/Fellows during Local Extreme Emergent Situations

1. Residents/Fellows are first and foremost, physicians, pharmacists or psychologists, whether they are acting under normal circumstances or in emergent situations. Residents/Fellows must be expected to perform according to society's expectations as professionals and leaders in health care delivery, taking into account their degree of competence, their specialty training, and the context of the specific situation. Many residents/fellows at an advanced level of training may even be fully licensed in the state and therefore they may be able to provide care independent of supervision.

2. Residents/Fellows are trainees. Residents/Fellows should not be first-line responders without appropriate supervision given the clinical situation at hand and their level of training and competence. If a resident/fellow is working under a training license from a state licensing board, they must work under supervision. Resident/Fellow performance in emergent situations should not exceed expectations for their scope of competence as judged by program directors and other supervisors. Residents/Fellows should not be expected to perform beyond the limits of self-confidence in their own abilities. In addition, a resident/fellow must not be expected to perform in any situations outside of the scope of their individual license. Expectations for performance under emergent circumstances must be qualified by the scope of licensure.

3. Decisions regarding a resident/fellow's involvement in local emergent situations must take into account the following aspects of their multiple roles as a student; a physician, pharmacist or psychologist; and an employee:
    - The nature of the health care and clinical work that a resident/fellow will be expected to deliver;
    - The resident/fellow's level of post-graduate education specifically regarding specialty preparedness;
    - Resident/Fellow safety, considering their level of post-graduate training, associated professional judgment capacity, and the nature of the emergency at hand;
    - Board certification eligibility during or after a prolonged emergent situation;
    - Reasonable expectations for duration of engagement in the emergent situation; and,
    - Self-limitations according to the resident/fellow's maturity to act under significant stress or even duress.

4. In case of local emergent situation or disaster, all Residents/Fellows may be called and may be expected to work as scheduled, until the emergency is under control and declared so by the attending staff. Scheduling during an emergency situation will be done in collaboration with the

CAMC Incident Command staff. Staff in-house may be notified by audible page ("Code Triage is now in effect") and/or by paging with the same message. Off-duty house staff may be notified by the Command Center and may be asked to report to the hospital as assigned. Upon notification, all Residents/Fellows on in-house duty are to report to the Emergency Department for assignment to treatment areas unless otherwise assigned. Residents/fellows should have their identification badges with them at all times.

Dress Code

For safety considerations and to enhance communication and cultural sensitivity, Residents/Fellows are required to place a high value on personal appearance, including appropriate attire. Patient trust and confidence in the health care provider are essential to successful treatment experiences and outcomes. A professional dress and appearance plays a fundamental role in establishing trust and confidence and in considering the cultural sensitivities of patients and co-workers.

Non-Clinical Assignments

Time in lectures or other activities that do not involve patients, attire should be comfortable and not detract from the academic atmosphere. When on assignment at any public location, Residents/Fellows should wear neat, clean and professional attire, and avoid dress or attire that could be potentially offensive to the public, your peers, patients, faculty and co-workers. ID badges must be worn at all times while on assignment.

Clinical Assignments

Scrub Suits are to be worn in specified patient care areas only or as required by your program director or as defined by your department. Shoe covers, masks, and hair covers must be removed before leaving the clinical area. Stained or soiled scrub suits must be changed as soon as possible (source of contamination). The complete policies for Surgical Attire can be found in the DMS on CAMnet.

Residents/Fellows must abide by the dress code outlined in the CAMC Employee Handbook for work in all clinical and non-clinical areas including policies related to general dress, hair, hygiene, jewelry and other dress code requirements.

The program director or hospital administration may at any time prohibit a Resident/Fellow from any location based on appropriate and professional dress code and standards.