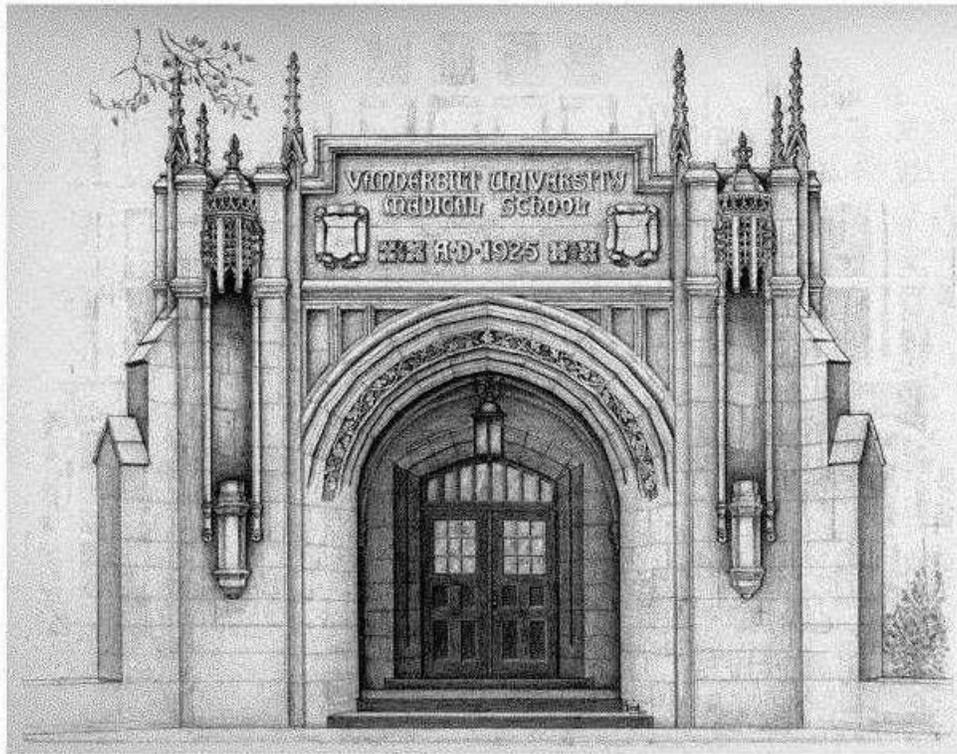


# House Staff Manual

## 2020-2021

Updated June 2020



VANDERBILT  UNIVERSITY  
MEDICAL CENTER

# TABLE OF CONTENTS

<b>TABLE OF CONTENTS</b>	<b>1</b>
<b>WELCOME</b>	<b>3</b>
<b>VANDERBILT UNIVERSITY SCHOOL OF MEDICINE COMPACT BETWEEN TEACHERS AND LEARNERS IN VUSM PROGRAMS</b>	<b>4</b>
<b>HOUSE STAFF INFORMATION</b>	<b>8</b>
<i>I. ADMINISTRATION</i>	<i>8</i>
A. CONDITIONS OF EMPLOYMENT AND CONTINUED EMPLOYMENT	8
B. BACKGROUND CHECK AND DISCLOSURE POLICY	15
C. HOUSE STAFF STIPENDS POLICY	16
D. POLICY ON CLINICAL AND EDUCATION WORK HOURS	16
E. EXTRACURRICULAR PROFESSIONAL ACTIVITY (MOONLIGHTING)	19
F. POLICY ON EXTERNAL RESIDENTS/FELLOWS VISITING VUMC	23
G. GUIDELINES FOR HOUSE STAFF SUPERVISION	24
H. OCCUPATIONAL EXPOSURE PREVENTION POLICY	26
I. TRAINING PROGRAM REDUCTION/CLOSURE POLICY	27
J. CONTINUATION OF GME SUPPORT IN THE EVENT OF A DISASTER – Extraordinary Circumstances Policy	27
K. HOUSE STAFF CALLED TO ASSIST IN THE EVENT OF A DISASTER	29
L. CERTIFICATE OF SERVICE	29
M. HOLIDAY/VACATION/SICK TIME	29
N. LEAVE POLICY	30
O. HOUSE STAFF ELIGIBILITY AND SELECTION POLICY	32
P. EQUAL EMPLOYMENT AND AFFIRMATIVE ACTION/ANTI-HARASSMENT/NON-DISCRIMINATION/ANTI-RETALIATION	34
Q. RETALIATION	37
R. COMPLIANCE PROGRAM	38
S. CONFLICT OF INTEREST POLICY/VENDOR INTERACTIONS	39
T. POLICY ON HOUSE STAFF TRANSFERS	39
U. ELECTIVE AWAY ROTATIONS (DOMESTIC AND INTERNATIONAL)	40
<i>II. BENEFITS</i>	<i>42</i>
A. CORE COVERAGE	42
B. VOLUNTARY COVERAGE	43
C. ADDITIONAL VOLUNTARY BENEFITS	46
D. TRAVEL INSURANCE	46
E. WORKERS' COMPENSATION	46
F. PROFESSIONAL LIABILITY COVERAGE	47
<i>III. SUPPORT SERVICES</i>	<i>48</i>
A. FACULTY / STAFF HEALTH & WELLNESS	48
B. VUMC CHILD AND FAMILY SERVICES	50
C. LACTATION ROOMS	50

D.	STRESS MANAGEMENT _____	51
E.	SLEEPING AND TRANSPORTATION OPTIONS FOR HOUSE STAFF TOO FATIGUED TO RETURN HOME SAFELY _____	52
F.	FITNESS FACILITIES _____	52
G.	RESOURCES FOR THE IMPAIRED PHYSICIAN _____	53
H.	HOUSE STAFF ADVISORY COUNCIL (HSAC) _____	53
IV.	GRADUATE MEDICAL EDUCATION EVALUATION AND DISCIPLINARY GUIDELINES _____	55
A.	EVALUATION _____	55
B.	COACHING _____	57
C.	CORRECTIVE ACTION (Disciplinary Action) _____	57
V.	HOUSE STAFF COMPLAINT/GRIEVANCE PROCEDURES _____	62
VI.	GENERAL INFORMATION _____	67
A.	PRESCRIPTIONS/DEA _____	67
B.	ESKIND BIOMEDICAL LIBRARY _____	67
C.	LONG DISTANCE CALLS (V-NET) _____	68
D.	MEAL MONEY _____	68
E.	WHITE COAT LAUNDERING _____	69
F.	FREE TICKETS FOR LOCAL ENTERTAINMENT/EVENTS _____	69
G.	DISCOUNTS _____	69
H.	VANDERBILT UNIVERSITY PUBLIC SAFETY _____	70
I.	HR EMPLOYEE SERVICE CENTER _____	71
K.	PERSONAL HEALTH AND WELLBEING – NEW PATIENT APPOINTMENTS _____	71
L.	MY HEALTH AT VANDERBILT _____	72
	<b>MEDICAL CENTER INFORMATION _____</b>	<b>73</b>
I.	PROFESSIONAL CONDUCT _____	73
A.	VUMC CREDO _____	73
B.	VANDERBILT PATIENT AND FAMILY PROMISE _____	73
C.	VUMC POLICIES _____	74
D.	DISCLOSURE _____	74
II.	VUMC COMPUTERS AND CLINICAL APPLICATIONS _____	75
III.	SYSTEMS ACCESS AND CONFIDENTIALITY _____	78
VI.	VIDEO POLICY FOR SIMULATION TRAINING _____	80
XI.	NEWS AND COMMUNICATIONS _____	81
A.	PHOTOGRAPHY _____	81
B.	LOBBYING POLICY MAKERS _____	81
XII.	GENERAL INFORMATION _____	82
A.	ADMISSIONS AND DISCHARGES _____	82
B.	VUMC QUALITY IMPROVEMENT ACTIVITIES _____	82
C.	VANDERBILT HOME CARE SERVICES (VHCS) _____	82
	<b>QUICK PHONE GUIDE _____</b>	<b>85</b>

# WELCOME

Welcome to Vanderbilt University Medical Center (VUMC). You are now part of an institution that has built a strong national and international reputation as a leader in medical education of health professionals, research in medical science and patient care. Beginning in 1925, Dr. Alfred Blalock and Dr. Tinsley Harrison were among the first House Staff to be trained at VUMC. We pride ourselves on integrating House Staff into the fabric of VUMC, encouraging House Staff to contribute to fundamental discoveries, to participate in translating those discoveries into practice, and to serve as part of the healthcare team striving to care for patients in a failsafe way. VUMC dedicates itself to your professional and personal development. Currently VUMC sponsors 98 Accreditation Council for Graduate Medical Education (ACGME) accredited programs, 1 Commission on Dental Accreditation (CODA) accredited program, and approximately 50 other fellowship programs, comprising approximately 1100 House Staff.

VUMC is strongly affiliated and closely linked with the Vanderbilt University School of Medicine. The School of Medicine, originally part of the University of Nashville, was incorporated into Vanderbilt University in 1874 and awarded its first Vanderbilt medical degrees in 1875. A national leader in medical education, the Vanderbilt School of Medicine works closely with VUMC to provide a nationally elite medical education program.



### Statement of Institutional Commitment to Graduate Medical Education

Vanderbilt University Medical Center (VUMC) seeks to advance health and wellness through preeminent programs in patient care, education, and research. VUMC's vision for the future includes:

- **Innovating the model for healthcare through systems-based care customized to individuals**
- **Learning matched to next generation health care, focused on the changing needs of society**
- **Discovery science, from fundamental basic research to clinical trials, to advance the understanding of human disease and opportunities to improve diagnosis and therapy**
- **A rapidly evolving translational architecture, instrumented by advanced information management, to accelerate the movement of discovery and learning to clinical practice**

The leadership of Vanderbilt University Medical Center understands that Graduate Medical Education (GME) is an integral part of this mission. We affirm our commitment to provide the educational, financial, research, administrative, and human resources necessary to accomplish the goals and objectives of all GME programs. The sponsoring institution will provide GME that facilitates residents' and fellows' professional, ethical, and personal development and will support safe and appropriate patient care through curricula, evaluation, and house staff supervision.

The leadership also supports an organized administrative system to oversee all residency and fellowship programs through the activities of the Graduate Medical Education Committee, the ACGME Designated Institutional Official, and the Office of Graduate Medical Education. These bodies will ensure the effective development of ACGME programs and substantial compliance with Program, Common, and Institutional Requirements.

The leadership of the sponsoring institution, the administration, and the teaching faculty and staff support this statement of commitment, developed and endorsed by the Graduate Medical Education Committee.

Jeffrey R. Balsler, M.D., Ph.D.  
President & Chief Executive Officer,  
Vanderbilt University Medical Center  
Dean, Vanderbilt University School of Medicine

5/29/20  
Date

C. Wright Pinson, M.B.A., M.D.  
Deputy Chief Executive Officer & Chief Health  
Systems Officer, Vanderbilt University Medical Center

5/29/20  
Date

Shon Dwyer, M.B.A., R.N.  
President, Vanderbilt University Adult Hospital

5/29/2020  
Date

Margaret G. Rush, M.D., M.M.H.C.  
President, Monroe Carell Jr. Children's  
Hospital at Vanderbilt

6/10/20  
Date

Donald W. Brady, M.D.  
Executive Vice President for Educational Affairs, VUMC  
Senior Associate Dean for Health Sciences Education, VU  
Professor of Medicine, Medical Education & Administration

6/2/20  
Date

Michael M.E. Johns, M.D.  
VUMC Board of Directors  
Chair, Quality and Safety Committee

6/11/20  
Date

Kyla P. Terhune, M.D., M.B.A., F.A.C.S.  
Vice President for Educational Affairs  
Associate Dean for Graduate Medical Education  
ACGME/NRMP Designated Institutional Official  
Associate Professor of Surgery and Anesthesiology  
Vanderbilt University Medical Center

6/4/20  
Date

Rebecca R. Swan, M.D.  
Assistant Dean for Graduate Medical Education  
Vice Chair for Education, Department of Pediatrics  
Associate Professor of Pediatrics  
Chair, Graduate Medical Education Committee  
Director, Pediatrics Residency Program

6/5/2020  
Date

209 Light Hall  
Nashville, TN 37232-5283

tel 615.322.4916  
fax 615.343.1496

www.mc.vanderbilt.edu

# VANDERBILT UNIVERSITY SCHOOL OF MEDICINE COMPACT BETWEEN TEACHERS AND LEARNERS IN VUSM PROGRAMS

## **Preamble**

As a community of teachers and learners, we acknowledge the fundamental importance of our professional values in creating and maintaining an environment that promotes the highest standard of learning and the highest quality of research, service and patient care. The following principles characterize this environment and guide us in making daily decisions: Respect, Service, Integrity, Accountability, Scholarship, and Compassion. Recognizing that in an academic community we are teachers and learners simultaneously, we make the following commitments with the understanding that each applies to all of us, regardless of our status, whether faculty, resident, clinical staff, or student.

## **Commitments of Teachers**

- We will respect students, colleagues, staff and patients as individuals. ‡
- We will strive to provide the highest quality instruction, by preparing adequately for all teaching sessions, using evidence-based content, arriving on time, and admitting any gaps in knowledge. We will strive for continuous improvement in our teaching efforts by responding to feedback and evaluation.
- We will demonstrate respect for our learners by turning off cell phones and silencing pagers during sessions we teach, unless they are required for service responsibilities.
- We will clearly express learning objectives for all courses and teaching sessions, and understand how these promote the learning objectives of the school. We will clearly define any specific academic and behavioral expectations for our classes.
- We will be aware of institutional and national policies, such as duty hours, and make sure that our expectations are consistent with those policies.
- We will assign tasks that are appropriate for the stage of learning, level of responsibility, and status as students. If an assigned clinical task conflicts with the personal ethics of a learner, we will discuss this with the learner and attempt to resolve the conflict in a manner that respects the learner while placing priority on the interests and well-being of the patient. We will seek not to require our learners to take actions inconsistent with their personal values.
- We will recognize the responsibilities implicit in our roles as mentors and coaches, and in the spirit of cultivating excellence in our learners, provide timely and constructive feedback.
- We will recognize our status as role models, and in our interactions with patients, staff, students, and colleagues, we will exhibit the same standard of professional behavior that we expect from others.
- We acknowledge that the teacher-learner relationship is a model for the clinician-patient relationship, and will strive to know our students as individuals, answer their correspondences promptly, exercise concern for their well-being, and treat them with compassion.
- We will respect the intellectual property of others and will use online resources,

- such as VSTAR and Brightspace, in a manner that is consistent with that respect.
- We will demonstrate honesty and integrity in all academic endeavors, including examinations, research efforts, and patient care entries.
- We will strive to create a culture of safety. This culture includes evaluation for disclosure, event analysis, and process change when a safety concern is identified.

### **Commitments of Learners**

- We will respect students, colleagues, staff, and patients as individuals‡
- We will strive for excellence in attaining the knowledge, attitudes, and skills needed for the highest standards of practice.
- We will attend all learning sessions designated as required by our programs' teachers. We will demonstrate respect towards teachers and peers by arriving on time, turning off cell phones, silencing pagers, and complying with other specific expectations defined by the faculty.
- We will wear appropriate attire. In the classroom setting, our attire should not cause distraction. In practice settings, it should comply with the standards published by the institution.\* We will adhere to any additional attire requirements of our programs and courses.
- We will work effectively in teams, respecting the contributions of all members, assuming a fair share of responsibility, and performing leadership tasks with a sense of service to others.
- In practice settings we will acknowledge and seek help if assigned a task that is beyond our level of skill. If an assigned task conflicts with personal ethics, we will discuss this with the supervising faculty or staff member and strive to reach a resolution that places priority on the interests of the patient.
- We will recognize our obligations as a collegial community, sharing knowledge and assisting peers in their quest to achieve professional and personal goals. We will assist our colleagues in distress.
- We will establish the habit of critical reflection, acknowledge gaps in our knowledge, recognize our limitations, and strive for constant self-improvement.
- We will respect the intellectual property of others and will use online resources, such as VSTAR and Brightspace, in a manner that is consistent with that respect.
- We will demonstrate honesty and integrity in all academic endeavors, including examinations, research efforts and patient care entries.
- We will strive to create a culture of safety. We will accept responsibility for errors and near-errors by disclosing them, analyzing them and implementing changes that would prevent similar events in the future.
- In the spirit of continuous quality improvement, we will accept the responsibility of constructive evaluation of our courses and teachers.

### **Acknowledgements**

This document draws heavily from the following sources:

1. Association of American Medical Colleges, Compact Between Teachers and Learners of Medicine.
2. National Board of Medical Examiners, Center for Innovation, The Behaviors of Professionalism.
3. ABIM Foundation, ACP-ASIM Foundation, and European Federation of Internal Medicine, Medical Professionalism in the New Millennium: A Physician Charter, *Annals of Internal Medicine*, 136:3, 243-6, 2002.

‡ In compliance with federal law, including the provisions of Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendment of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act (ADA) of 1990, the ADA Amendments Act of 2008, Executive Order 11246, the Vietnam Era Veterans Readjustment Assistance Act of 1974 as amended by the Jobs for Veterans Act, the Uniformed Services Employment and Reemployment Rights Act, as amended, and the Genetic Information Nondiscrimination Act of 2008, Vanderbilt University does not discriminate against individuals on the basis of their race, sex, sexual orientation, gender identity, religion, color, national or ethnic origin, age, disability, military service, covered veterans status, or genetic information in its administration of educational policies, programs, or activities; admissions policies; scholarship and loan programs; athletic or other university-administered programs; or employment. In addition, the university does not discriminate against individuals on the basis of their gender expression consistent with the university's nondiscrimination policy. Requests for information, inquiries, or complaints should be directed to these offices: Faculty and staff—Equal Employment Opportunity, Anita J. Jenious, director, [eeoinfo@vanderbilt.edu](mailto:eeoinfo@vanderbilt.edu), telephone (615) 343-9336; Students—Title IX and Student Discrimination, Molly Zlock, Title IX coordinator and director, [titleixandstudentdiscrimination@vanderbilt.edu](mailto:titleixandstudentdiscrimination@vanderbilt.edu), telephone (615) 343-9004, 110 21st Avenue South, Suite 975, Nashville TN 37203; Students—Student Access Services, Jamie Bojarski, director, [disabilityservices@vanderbilt.edu](mailto:disabilityservices@vanderbilt.edu), telephone (615) 343-9727.

\*Vanderbilt University Medical Center dress code may be found at [vanderbi.lt/yumcdresscodef](http://vanderbi.lt/yumcdresscodef)

# HOUSE STAFF INFORMATION

## I. ADMINISTRATION

The ACGME Designated Institutional Official (DIO) is charged with the administrative responsibilities for House Staff which in this document refers to all residents and fellows in ACGME-accredited or other accredited graduate medical education programs, who are primary appointees of the Graduate Medical Education (GME) office. This person also holds the position of Associate Dean for Graduate Medical Education within the Vanderbilt University School of Medicine.

The DIO is charged with administrative responsibility for oversight of all accredited (i.e., accredited, but not through ACGME) and non-accredited GME programs. For those individuals in one of these GME programs whose primary relationship with VUMC is as a credentialed provider and with the University through appointment to the faculty (usually at the rank of Instructor), the VUMC By-Laws/Policies/Procedures pertaining to faculty and the University's Faculty Manual serves as the principal document governing that person's roles and responsibilities. For those individuals in one of these GME programs whose primary relationship with VUMC is through the GME Office by appointment as a Clinical Fellow, the *House Staff Manual* serves this role, as it does for all individuals in ACGME-accredited programs.

The GME Office is located in 303 Light Hall and can be contacted at (615) 322-4916 or [gme.office@vumc.org](mailto:gme.office@vumc.org) (email inquiries will be answered within 24 hours during weekdays). Business hours are 8:00 a.m. – 5:00 p.m., Monday through Friday, except for VUMC recognized holidays (<https://hr.vumc.org/holiday-calendar>) or as otherwise posted. Helpful information can be found on the GME Office website (<https://www.vumc.org/gme/>).

Interpretation of policies, verification of status, training, dissemination of information, loan deferments and application for licensure are handled by this office. The staff will assist House Staff with documents requiring institutional verification or notary seal. **House Staff must notify the GME Office within 14 days of any change in legal name, address, and/or telephone number, and provide supporting documentation at the time of notice.**

### A. *CONDITIONS OF EMPLOYMENT AND CONTINUED EMPLOYMENT*

Failure by House Staff to meet all Conditions of Employment, any provision by House Staff of false or misleading information, or omission of information deemed relevant for employment, may result in revocation of the offer of employment (this action is not appealable) or other action, including but not limited to corrective action, up to or including Immediate Dismissal (if currently employed). In this situation an NRMP waiver may be requested, as applicable.

## 1. Pre-Employment Screening and Other Requirements

All House Staff new to VUMC (VUMC) are given a conditional offer of employment. The offer is pending the satisfactory completion of the background check process, as well as other items set forth in the *House Staff Manual*. New House Staff will not be permitted to start work until the background check has been satisfactorily completed and the official transcript has been received. House Staff must complete all necessary paperwork, including any necessary releases, to initiate the background check and request the official transcript, and provide accurate and complete information as requested. The status of and/or results of the background check will be evaluated by the ACGME DIO, the Program Director, and other individuals deemed appropriate. (see [Section I.B. BACKGROUND CHECK AND DISCLOSURE POLICY](#))

### a. *NPI (National Provider Identification) Number*

All incoming House Staff are responsible for obtaining an NPI number prior to starting clinical work. More information on NPI numbers can be found at <https://www.vumc.org/gme/17595>.

### b. *Office of Inspector General*

In order to comply with federal law, VUMC will check all applicants against the Office of Inspector General's (OIG) list of individuals excluded from federal healthcare programs. Excluded individuals are not eligible for employment/continued employment.

### c. *National Practitioners Data Bank*

All incoming House Staff will be checked against the National Practitioner Data Bank (NPDB). The Data Bank is primarily a system intended to supplement a comprehensive review of the professional credentials of health care practitioners, providers, and suppliers; the information from the Data Bank is used in conjunction with, not as replacement of, information from other sources. More information can be found here: <https://www.npdb.hrsa.gov/topNavigation/aboutUs.jsp>.

### d. *Licensure*

House Staff must qualify for licensure or exemption for licensure under the Tennessee Board of Medical Examiners requirements.

### e. *Immunization and Screening*

Certain immunizations and screening tests are necessary to protect the health of House Staff, other employees and patients at VUMC and/or at other locations where the House Staff may provide professional services. Incoming House Staff can provide these records to Vanderbilt Occupational Health Clinic (VOHC) at orientation if they have received these services elsewhere. If not received elsewhere or otherwise exempted in accordance with VUMC procedure, VOHC provides any additional services to meet VUMC requirements. This webpage

explains the current requirements: <https://www.vumc.org/health-wellness/all-aboard/vumc-immunization-requirements>.

*f. Transcript*

An official final transcript showing the House Staff professional (M.D., D.O. or equivalent) degree conferred with their graduation date **must** be received by GME directly from the graduating institution before they commence training. All International Medical graduates must also submit a copy of their Educational Commission for Foreign Medical Graduates (ECFMG) Certificate, which the GME Office verifies directly with ECFMG's database. Under extraordinary circumstances, the ACGME DIO may grant a limited extension on the deadline by which the transcript is needed; in such cases, the DIO may accept an official letter from the degree-granting institution signifying completion of professional degree. This extension must be requested through the Office of Graduate Medical Education. International Medical Graduates whose graduating institutions do not issue official transcripts beyond the original issued to the graduate may bring their original official final transcript and diploma, with official translation if documents are not in English, to the GME Office to meet this transcript requirement. GME maintains a notarized copy of these documents.

Vanderbilt Office of Graduate Medical Education

5421 Hwy 100

P.O. Box 58316

Nashville, TN 37205 - 8316

Important: Photocopies are not acceptable, even if notarized.

Upon request, the Office of Graduate Medical Education will make unofficial copies of a House Staff transcript under the following conditions: 1) the requesting individual makes the request in person, 2) the requesting individual presents photo identification confirming that it is their own transcript, 3) the phrase "UNOFFICIAL COPY" will be stamped on the document if photocopying the transcript does not self-insert the word "COPY" on the document. The requesting House Staff will sign a form documenting the request, a copy of which will be retained in the House Staff file.

*g. Professional Degree Designation*

The degree suffix on all identification (i.e., ID Badge, white coats, certificates) will replicate the professional degree(s) conferred, at the time of graduation, by the medical school attended by the House Staff.

*h. Medical License*

House Staff who are participating in an approved training program are exempted from licensure (applies to training program only) by the Tennessee Board of

Medical Examiners. The GME Office will be responsible for the request of exemption to the Board annually.

External moonlighting (see [Section I.E. EXTRACURRICULAR PROFESSIONAL ACTIVITY](#)) and/or volunteer work as a physician requires an unrestricted license.

House Staff entering non-ACGME training programs with a primary appointment as a VUMC-credentialed provider and an appointment with Vanderbilt University as faculty (Instructor) are required to obtain an unrestricted medical license prior to entering the program.

*i. Resuscitation Training & Documentation*

House Staff must be in compliance with VUMC Policy CL 30-08.21 (summarized in figure 1 below) before the start of the program and must maintain current training throughout the program as required by this policy. Please note that ACLS and/or PALS DO NOT satisfy the BLS requirement. They are separate courses and a current, separate card or valid AHA eCard must be held for each.

Please note that individual programs or departments may require additional training beyond the requirements of hospital policy. House Staff should check with their program to confirm.

	<b>BLS for Healthcare Providers</b>	<b>PALS</b>	<b>ACLS</b>
<b>Adult<sup>+</sup> - PGY 1-3</b>	✓		✓*
<b>Peds<sup>+</sup> - PGY 1-3</b>	✓	✓*	
<b>Med/Peds - PGY 1-3</b>	✓	✓	✓
<b>Emergency Medicine - PGY 1-3</b>	✓	✓	✓
<b>Peds Emergency Medicine - Fellows</b>	✓	✓	✓
<b>PGY 4 and up</b>	✓		

Figure 1

\*The office of Graduate Medical Education (GME) maintains a list of residency programs that do NOT require ACLS and/or PALS training as approved by the Vanderbilt Health System Chief of Staff or designee.

Residency programs that do NOT require ACLS or PALS training are: Clinical Chemistry, Clinical Microbiology, ABMGG – LGG Certification in Laboratory Genetics & Genomics, Pediatrics/Medical Genetics and Genomics (Combined), Pathology, Psychiatry (PGY 2+) and Infectious Diseases. BLS training IS required for House Staff in these programs.

\*Child Neurology PGY 1-2 follows "Peds" requirements above; Child Neurology PGY 3 follows "Adult" requirements above.

Acceptable Agencies for Resuscitation Training – Only training from the following nationally recognized agencies is accepted at VUMC for Basic Life Support (BLS)/CPR, ACLS, and PALS courses:

- **American Heart Association – Preferred** for all BLS training, as well as ACLS and PALS.
- **American Red Cross** – Accepted for BLS/CPR training
- **Military Training Network** – Accepted for BLS/CPR training, as well as ACLS and PALS.

**CURRENT HOUSE STAFF:** Visit <http://www.vanderbiltcpr.com> to view available courses and to register.

**NEW HOUSE STAFF:** The GME Office must have verification of training with either a copy of course completion card(s) or valid AHA eCard Code(s) from an approved agency (see information directly below figure 1 for approved agencies). House Staff will not be permitted to start their until they have completed training (didactic and hands-on) and submitted proof of completion for the required Resuscitation Training. To provide this information, new House Staff log in to the House Staff Portal (<https://gme.app.vumc.org/GMEPortal>) and click the 'Resuscitation Status' link on the left side. If current certification(s) expire within the first three months of start date, incoming House Staff must renew prior to starting. Training is available at VUMC the week before House Staff Orientation and incoming House Staff can register at the House Staff Portal or complete training before arrival with an approved agency as noted above. TRAINING AT VUMC HAS LIMITED SPACE AND REQUIRES ARRIVING IN TOWN SEVERAL DAYS PRIOR TO ORIENTATION. SEEKING TRAINING PRIOR TO ARRIVAL IS RECOMMENDED. IMPORTANT: Incoming House Staff choosing to seek training prior to arrival should be aware that some training centers do not issue course completion cards or AHA eCards on-site immediately upon completion of the course but instead mail the cards to the trainee at a later date. House Staff should allow time for this when selecting a training date. Failure to provide copies of course completion card(s) or valid AHA eCard Code(s) to GME WILL affect start date.

The accountability for keeping BLS/ACLS/PALS training current rests with the House Staff member. It is strongly recommended that House Staff register for resuscitation classes at least three months in advance of their recommended renewal month.

*j. Training Assignments and other Compliance Items*

It is the House Staff's responsibility to stay up to date with any training assignments, including, but not limited to, other training/testing outlined below. Failure to do so may result in Corrective Action.

Training/Testing	Available at:	Frequency
eStar Training	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Once, prior to beginning clinical work
VUMC Managing Fatigue for Patient Safety for Providers	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Once, prior to beginning clinical work
FERPA Tutorial	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Once, prior to beginning clinical work
VUMC Guidelines for Standardized Handoffs – SBAR for Physicians	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Once, prior to beginning clinical work
VUMC Informed Consent for Physicians Training	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Once, prior to beginning clinical work
Procedural Minimal Sedation and Analgesia	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Once, prior to beginning clinical work
VUMC Patient Safety – Correct Patient, Procedure & Site	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Once, prior to beginning clinical work
Physician Response to Emergencies (NIMS)	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Once, prior to beginning clinical work
VUMC Physicians: Reporting Deaths to the Medical Examiner	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Once, prior to beginning clinical work
Clinical Alarm Systems Management Policy	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Once, prior to beginning clinical work
Patient Safety 100, 101, and 106; and Improvement Capability/Quality Improvement 101, 102, 105	<a href="http://www.ihio.org/education/ihio/peopleschool/courses/Pages/default.aspx">http://www.ihio.org/education/ihio/peopleschool/courses/Pages/default.aspx</a>	Once, during the first 6 months of training

Respirator Fit Testing	Sign up annually at <a href="https://www.vumc.org/safety/n-95">https://www.vumc.org/safety/n-95</a>	Prior to beginning clinical work and then annually
TB Skin Testing	Occupational Health Clinic all year	Prior to beginning clinical work
Immunizations	Occupational Health Clinic all year	Prior to beginning clinical work and then annual for some immunizations
Conflict of Interest Disclosure	<a href="https://coi.app.vumc.org">https://coi.app.vumc.org</a>	Annually
Addressing Adverse Events and Medical Errors, Documentation, and Reporting to the Medical Examiner	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Prior to beginning clinical work and then annually
Blood Borne Pathogens & Infection Prevention Curriculum	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Prior to beginning clinical work and then annually
VUMC Training Curriculum	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Prior to beginning clinical work and then annually
Central Venous Access Devices (CVAD) Lesson	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Prior to beginning clinical work and then annually
Magnetic Resonance Imaging (MRI) Safety Lesson	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Prior to beginning clinical work and then annually
Clinical Radiation Safety Training for VUMC House Staff	<a href="https://learnin.gexchange.vumc.org">https://learnin.gexchange.vumc.org</a>	Prior to beginning clinical work and then annually

*k. International Medical Graduates (IMG) (where applicable)*

An ECFMG certification is required for IMGs who come to the USA for clinical training. The House Staff is responsible for obtaining the ECFMG certification and notifying both VUMC and ECFMG of any change in status.

*l. Eligibility to Work in the US*

VUMC is a H-1B cap-exempt institution eligible to file for H-1B sponsorship throughout the calendar year. If you and your GME program would like to explore the possibility of H-1B sponsorship please reach out to the program director of the program to which you are applying and then the VUMC Immigration Services Office at [immigration@vumc.org](mailto:immigration@vumc.org) as soon as possible. It is important to note that the H-1B petition preparation process can be lengthy and USCIS regulations require sponsoring departments to cover all fees associated with the filing. The costs for the H-1B filing cannot be passed on to the foreign national beneficiary.

ECFMG is the only United States agency authorized to sponsor J-1 visas for physicians in clinical training programs. Therefore, the House Staff seeking J-1 visa status must be sponsored by ECFMG. The House Staff is required to comply with all J-1 visa requirements, and requirements that may be set forth by the ECFMG. If you have questions please reference the EVSP Reference Guide or contact the ECFMG. House Staff may be required to report information to the GME office in order for the GME office to comply with its reporting obligations to the ECFMG.

## **2. Restrictive Covenant Policy**

Participants in any ACGME accredited training program will not be required to sign a restrictive covenant or non-competition guarantee in order to participate in that training program.

## **3. House Staff Supported by NIH Training Grants**

VUMC policy and procedures are in place with the intent of making the support equitable and consistent across all programs therefore meeting all regulatory guidelines for House Staff that are supported by NIH training grants. Further information is available in the Office of Graduate Medical Education.

## **4. Clinical Education and Work Hours**

All House Staff are responsible for accurately and honestly reporting all clinical education and work hours, including the location as well as any internal and external moonlighting hours. Please see [I.D. POLICY ON CLINICAL EDUCATION AND WORK HOURS](#) for further information. Concerns regarding clinical education and work hours may be reported to the ACGME DIO, anonymously or through the Confidential Hotline, 1-866-783-2287 or online <https://www.tnwgrc.com/Vanderbilt/>. Concerns may be reported anonymously.

### ***B. BACKGROUND CHECK AND DISCLOSURE POLICY***

All House Staff new to VUMC must complete a background check, which may also include an international background check as appropriate and any offer of employment is conditional upon a determination by VUMC that the results are acceptable. House Staff must complete all necessary documentation, including any necessary releases, to initiate the background check. The status of and/or results of the background check will be evaluated by the ACGME DIO, the Program Director, and other individuals deemed appropriate.

A criminal background check may be required as part of the initial background check for new employees, or during employment, in accordance with applicable policies, procedures or practices of VUMC or clinical education sites.

There is an affirmative duty for House Staff to notify the DIO of arrests, convictions, pending malpractice suits and the disposition of any outstanding charges after the initial background

check for employment is completed. There is also an affirmative duty for House Staff to report any adverse information resulting from subsequent criminal background checks obtained at any site during their employment as a House Staff at VUMC.

**Failure by a House Staff to disclose an arrest or a criminal conviction to the DIO within five calendar days may result in corrective action, up to and including Immediate Dismissal from their training program.**

The facts and circumstances of each case will determine what, if any, action is taken, up to and including Immediate Dismissal, as appropriate.

*C. HOUSE STAFF STIPENDS POLICY*

It is the policy of VUMC that House Staff will be paid at the actual level at which they function in connection with their post-graduate training at VUMC. The pay level is intended to help House Staff defray their living and incidental costs while pursuing their education at the institution.

*D. POLICY ON CLINICAL AND EDUCATION WORK HOURS*

The Vanderbilt GMEC is committed to compliance with the ACGME Clinical and Education Work hour guidelines. Clinical and Education Work hours are defined as all clinical and academic activities related to the program; i.e., patient care (both inpatient and outpatient), administrative duties relative to patient care, the provision for transfer of patient care, time spent in-house during call activities, time spent at home doing clinical work (e.g., documentation) and scheduled activities, such as conferences. Clinical and Education Work hours do *not* include reading and preparation time spent away from the duty site. Effective July 1, 2020, the following requirements apply to all training programs at VUMC:

**General Guidelines**

1. House Staff are responsible for accurately reporting their Clinical and Education Work hours, **including all time spent in Internal and External Moonlighting** in New Innovations. The location of service must be designated.
2. Program Directors are responsible for monitoring and enforcing compliance with Clinical and Education Work hour guidelines.
3. If specialty/subspecialty-specific program Clinical and Education Work hour requirements as defined by an individual RRC for that specialty/subspecialty are more restrictive than the above requirements, then the Clinical and Education Work hour requirements of that RRC will be

included in the policy of that specialty/subspecialty program and will supersede the institutional requirements.

4. Concerns regarding Clinical and Education Work hours may be reported to the ACGME DIO or through the Compliance Integrity Line, 1-866-783-2287 or online <https://www.tnwgrc.com/Vanderbilt/>. Concerns may be reported anonymously.

### **Maximum Hours of Clinical and Education Work per Week**

5. Clinical and educational work hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house clinical and educational activities, clinical work done from home, and all moonlighting.
6. Time spent in Internal and External Moonlighting (as defined in the ACGME Glossary of Terms and in the Vanderbilt University House Staff Manual) will be counted toward the eighty-hour maximum weekly hour limit on Clinical and Education Work hours as outlined in #5 above. House Staff may not moonlight if on approved leave other than vacation.

### **Mandatory Time Free of Clinical and Education Work**

7. House Staff should have eight hours off between scheduled clinical work and education periods.
8. There may be circumstances when House Staff choose to stay to care for their patients or return to the hospital with fewer than eight hours free of clinical experience and education. This must occur within the context of the 80-hour and the one-day-off-in-seven requirements.
9. House Staff must have at least 14 hours free of clinical work and education after 24 hours of in-house call.
10. House Staff must be scheduled for a minimum of one day in seven free of clinical work and required education (when averaged over four weeks). At-home call cannot be assigned on these free days.

### **Maximum Clinical and Education Work Period Length**

11. Clinical and educational work periods for House Staff must not exceed 24 hours of continuous scheduled clinical assignments.
12. Up to four hours of additional time may be used for activities related to patient safety, such as providing effective transitions of care, and/or House Staff education. Additional patient care responsibilities must not be assigned to a House Staff during this time.

13. VUMC encourages House Staff to use alertness management strategies, including strategic napping, in the context of patient care responsibilities, especially after 16 hours of continuous clinical work and education and between the hours of 10pm and 8am.

### **Clinical and Education Work Hour Exceptions**

14. In rare circumstances, after handing off all other responsibilities, a House Staff, on their own initiative, may elect to remain or return to the clinical site in the following circumstances: to continue to provide care to a single severely ill or unstable patient, humanistic attention to the needs of a patient or family, or to attend unique educational events. These additional hours of care or education will be counted toward the 80-hour weekly limit.
15. Any program desiring to submit a rotation-specific exception for up to 10 percent or a maximum of 88 clinical and educational work hours to a Review Committee must have that request reviewed and approved by both the ACGME DIO and GMEC prior to submitting such a request.

### **Maximum In-House On-Call Frequency**

16. In-house call will occur no more frequently than every third night, averaged over a four-week period.

### **Night Float**

17. Night float must occur within the context of the 80-hour and one-day-off-in-seven requirements.

### **At-Home Call**

18. At-home call, or “pager call,” is defined as call taken from outside the assigned site.
19. Time spent on patient care activities by House Staff on at-home call must count toward the 80-hour maximum weekly limit. The frequency of at-home call is not subject to the every-third-night limitation, but must satisfy the requirement for one day in seven free of clinical work and education, when averaged over four weeks.
20. At-home call must not be so frequent or taxing as to preclude rest or reasonable personal time for each House Staff.

21. House Staff are permitted to return to the hospital while on at-home call to provide direct care for new or established patients. These hours of inpatient care must be included in the 80-hour maximum weekly limit.

Any concerns or questions concerning the hour guidelines must be directed to the ACGME DIO or Administrative Director for GME.

**Revisions Reviewed and Approved by GMEC: 04/10/20**

**POLICY: EXCEPTIONS TO HOUSE STAFF WEEKLY CLINICAL AND EDUCATION WORK HOUR LIMITS**

House Staff duty hours have been defined by the ACGME as limited to an average of 80 hours per week. Requests for exception to the weekly limit on duty hours must have valid educational rationale and should not be predicated on service needs, and must be rotation-specific. Blanket exceptions for the entire program will not be considered. In preparing a request for an exception, the program director must follow the clinical and educational work hour exception policy from the *ACGME Manual of Policies and Procedures*.

All requests for duty hour extension must be reviewed and approved by the GMEC before forwarding by the program director to the appropriate RRC for review. Any program director requesting a rotation-specific exception to the weekly limit on duty hours (up to 10 percent or up to a maximum of 88 hours in compliance with ACGME Policies and Procedures for duty hour exceptions) must complete the procedure request form and submit it to the GMEC for review.

Duty hour monitoring for all programs with a rotation-specific exception to House Staff weekly duty hour limits will follow the same standard institutional monitoring as all other programs. In addition, prior to each site visit and review, the ACGME DIO and Graduate Medical Education Committee shall reevaluate both patient safety and the educational rationale for the exception, and append the findings to the program's request to the Review Committee for a continued exception.

***Moonlighting will not be permitted on any rotation for which a rotation-specific exception is granted by the relevant House Staff Review Committee.***

**Revisions Reviewed and Approved by GMEC: 04/10/2020**

**E. EXTRACURRICULAR PROFESSIONAL ACTIVITY (MOONLIGHTING)**

VUMC affirms that the primary responsibilities of members of the House Staff are to their own postgraduate medical education and to the patients charged to their care. In as much as

extramural professional activities, or “moonlighting,” may conflict with these responsibilities, VUMC generally discourages such activities.

In some departments, outreach programs at other medical facilities are approved activities, are a part of the established educational program, and are not considered moonlighting. Moonlighting is prohibited during regular VUMC duty hours, as defined by the VUMC DIO. Moonlighting during periods of authorized vacation time can occur provided that proper documented approval of moonlighting activity has been obtained.

House Staff may not moonlight on rotations or services to which they are currently assigned as part of their residency or fellowship program. House Staff also may not moonlight while on call or otherwise responsible for patients under their regular duty. Questions regarding whether a particular request for moonlighting would be prohibited under this section should be directed to the ACGME DIO.

VUMC or any individual department or division also reserves the right to deny any specific moonlighting activity that is deemed inconsistent with VUMC policy regarding conflict of interest or other relevant policies. The House Staff requesting moonlighting permission must be in good standing (i.e. not currently on any step of Corrective Action) and acknowledges that his or her performance will be monitored for the effect of the activity on their performance, and adverse impact or a change in standing may lead to revocation of permission. If privileges to moonlight are revoked, House Staff are required to reapply for moonlighting privileges through the mechanisms used for gaining initial approval.

All hours spent in moonlighting are subject to the Institutional Policy on Duty Hours and must be tracked through New Innovations. Failure to track moonlighting time, both internal and external, as duty hours may result in Corrective Action and revocation of moonlighting privileges.

Individual departments or divisions may impose additional restrictions on moonlighting activity. In addition, House Staff with a secondary faculty appointment must comply with the requirements of the VMG Bylaws and their VMG participation agreement.

Violation of the Moonlighting Policy, including non-compliance with any requirements listed below, constitutes a breach of the House Staff Agreement between VUMC and the individual and may lead to corrective action up to and including Immediate Dismissal. Violation of the Moonlighting Policy also may result of revocation of moonlighting privileges. Contact the Office of GME for any clarification of these requirements.

PGY-1 House Staff and J-1 Visa holders are not permitted to moonlight.

***ALL MOONLIGHTING - General Requirements:***

1. Be in “good standing” in the training program (i.e., not on Corrective Action).
2. Moonlighting cannot be used to fulfill a training requirement of the current training program.

3. Possess an unrestricted license to practice medicine in the state of Tennessee (or the appropriate state if moonlighting out of state).
4. All requests for moonlighting must be submitted to the GME Office for review and final approval. No moonlighting is permitted until this approval has been given. Moonlighting without this approval may result in Corrective Action. House Staff should consider this provision, and all requirements for moonlighting, before entering into any external moonlighting agreement.
5. Approval to moonlight remains in effect from the date of approval until June 30th of that academic year (July-June), unless the approval has been revoked for one of the reasons stated above. To moonlight in the following academic year (i.e., July 1st or later), the House Staff must reapply for moonlighting privileges.
6. All moonlighting hours, both internal and external, must be recorded as duty hours.
7. J-1 Visa sponsorship and full military support prohibit moonlighting. Restrictions may apply for other visa types or contractual arrangements. House Staff members are responsible for understanding, advising the GME Office, and complying with any external restrictions on moonlighting activity related to their immigration status or other sponsoring organization.

#### **INTERNAL MOONLIGHTING – Definition and Additional Requirements:**

Practicing medicine for pay at VUMC outside the requirements of the training program is considered internal moonlighting. Work performed in violation of the Moonlighting Policy may not be separately compensated and may be considered as work done as part of the normal training program.

Under the internal moonlighting policy, there are both general guidelines (listed above under General Requirements for All Moonlighting) and group specific guidelines. House Staff are divided into two groups, Group 1 and Group 2. These groups are as defined below and the requirements for each group are as follows:

##### ***GROUP ONE:***

House Staff in an advanced or second residency program (i.e., board eligible/certified in another specialty) who wish to bill through the VMG for their professional services.

These House Staff may practice the specialty for which they are board certified/eligible in an outpatient setting or an emergency department only. These individuals may bill third party payers for their professional services in accordance with the VMG and Medical Staff Bylaws. NOTE: Moonlighting is prohibited during regular VUMC duty hours, as defined by the VUMC DIO.

##### **Additional Requirements for Group One:**

In order to qualify for internal moonlighting as a Group One physician, the House Staff must fulfill all of the following prerequisites:

1. Successful completion of an ACGME Training Program;
2. Board eligible/certified in a specialty for which they are moonlighting;
3. The House Staff must have a part-time Vanderbilt School of Medicine faculty appointment in the hiring department/division and obtain appointment to the Medical Staff through the usual credentialing process. However, the primary appointment will remain through GME.
4. Professional Liability coverage will be provided through the VUMC Self Insurance Trust. The additional cost will be prorated to the hiring department.
5. Within a department and/or division, internal moonlighting opportunities should be made known to all qualified House Staff at any specific level of training. **However, the House Staff should not be or feel pressured to participate in moonlighting activities.**

**GROUP TWO:**

House Staff who are not board certified/eligible and/or are not billing for their professional services.

These House Staff may **not** bill for their professional services. NOTE: Moonlighting is prohibited during regular VUMC duty hours, as defined by the VUMC DIO.

**Additional Requirements for Group Two:**

In order to qualify for internal moonlighting as a Group Two physician, the House Staff must fulfill all of the following prerequisites:

1. Professional Liability coverage will be provided through the VUMC Self Insurance Trust. The additional cost will be prorated to the hiring department.
2. Within a department and/or division, internal moonlighting opportunities should be made known to all qualified House Staff at any specific level of training. **However, the House Staff should not be or feel pressured to participate in moonlighting activities.**
3. This individual cannot bill for their services. If the service is to be billed by the attending, the House Staff must be supervised, and work

documented, under CMS guidelines. All attending billing must comply with Medicare requirements.

4. There must be an identified supervising attending physician.

**EXTERNAL MOONLIGHTING – Definition and Additional Requirement:**

External moonlighting is any extracurricular clinical employment outside of VUMC (VUAH, MCJCHV, VUPH or the Vanderbilt Clinics).

**Professional liability coverage is the responsibility of the individual House Staff. VUMC Self-Insurance Trust does not provide professional liability coverage for this external moonlighting.**

**Revisions Reviewed and Approved by GMEC: 04/10/2020**

*F. POLICY ON EXTERNAL RESIDENTS/FELLOWS VISITING VUMC*

VUMC values the variety of experiences that Visiting Residents/Clinical Fellows bring to our programs. Visiting rotations are subject to approval by the appropriate Program Director(s) and the ACGME DIO.

**VUMC requires that an affiliation contract be in place between the Visiting Resident/Fellows institution and VUMC.** Without exception, documents **must** be submitted to VUMC **at least 90 calendar days before the start date of the desired rotation.**

The GME Office **must** be advised of, approve, and process all Visiting Residents/Clinical Fellows from other institutions who are rotating with VUMC programs. Visiting Resident/Clinical Fellow applications are available on the GME website at <https://www.vumc.org/gme/13341>.

All approved Visiting Residents/Clinical Fellows must physically check in at the GME Office in Light Hall on the first day of their visiting rotation.

The following requirements must be met and documents **MUST** be submitted 90 calendar days before the Visiting Resident/Clinical Fellow's desired start date:

1. A Visiting Resident/Clinical Fellow must provide a letter from their current program director that they are currently enrolled and in good standing within an ACGME accredited training program.
2. Prior to starting the rotation, the applicant must provide proof of professional liability coverage of a minimum of \$1,000,000/\$3,000,000 and health insurance to the GME Office.

3. The applicant must provide documentation that their stipend will be continued by their training program while on the approved rotation.
4. International Medical Graduates must also provide a copy of a valid ECFMG certificate in addition to the requirements stated above.
5. **Office of Inspector General/Excluded Individuals**  
In order to comply with federal law, VUMC will check all Visiting Resident/Clinical Fellows against the Office of Inspector General's list of individuals excluded from federal healthcare programs. Any Visiting Resident/Clinical Fellows identified as excluded will not be allowed to start or complete the rotation, and their home institution will be notified.
6. **National Practitioners Data Bank (NPDB)**  
All Visiting Residents/Clinical Fellows will be checked through the NPDB. If the NPDB query yields any adverse information, further investigation and/or action may be required.
7. The additional requirements for background checks set forth in [Section I.B.](#) will be applicable to Visiting Residents/Clinical Fellows.
8. **Immunization Records**  
All Visiting Residents/Clinical Fellows must provide documentation of immunization and testing satisfactory to Vanderbilt Occupational Health 30 calendar days prior to the desired rotation date. View the immunization and screening requirements at: <http://prd-medweb-cdn.s3.amazonaws.com/documents/gme/files/Immunization%20Form%20for%20Visiting%20Residents.pdf>

**Revisions Reviewed and Approved by GMEC: 04/10/20**

***G. GUIDELINES FOR HOUSE STAFF SUPERVISION***

It is the policy of the Graduate Medical Education Committee (GMEC) to follow requirements of the ACGME, or other applicable accrediting body, regarding supervision of House Staff in accredited training programs. These trainees will be supervised by appropriately-credentialed and privileged attending physicians in a manner that is consistent with ACGME program requirements for the applicable residency or fellowship program, or other applicable accrediting body requirements, as well as VUMC policies and Medical Staff Rules and Regulations. House Staff shall be given a clear means of identifying supervising physicians who share responsibility for patient care on each rotation. Both House Staff and attending physicians will inform each of their patients of their respective role in that patient's care.

The Program Director shall provide explicit written descriptions of lines of responsibility for the care of patients, which shall be made clear to all members of the teaching teams. In outlining those lines of responsibility, the Program Director will define supervision using the following classification of supervision:

1. Direct Supervision: the supervising physician is physically present with the House Staff and patient;
2. Indirect Supervision with Direct Supervision Immediately Available: the supervising physician is physically within the hospital or other site of patient care and is immediately available to provide Direct Supervision;
3. Indirect Supervision with Direct Supervision Available: the supervising physician is not physically present within the hospital or other site of patient care but is immediately available by means of telephonic and/or electronic modalities, and is available to provide Direct Supervision;
4. Oversight: the supervising physician is available to provide review of procedures/encounters with feedback provided after care is delivered; and

Interpretation of any of the above terms 1-4 should be referred to the ACGME DIO, the Office of Healthcare Compliance, or the Office of Legal Affairs.

Supervision shall be structured to provide House Staff with progressively increasing responsibility commensurate with their level of education, ability and experience. The Program Director in conjunction with the program's faculty members shall make determinations on advancement of House Staff to positions of higher responsibility and readiness for a supervisory role in patient care and conditional independence through assessments of competencies based on specific criteria (guided by national standards-based criteria when available). Supervising physicians should assign portions of care to House Staff based on the needs of the patient and the skills of the House Staff. Based on these same criteria and in recognition of their progress toward independence, senior House Staff should serve in a supervisory role of junior House Staff when appropriate.

Each program must set guidelines for circumstances and events in which House Staff must communicate with appropriate supervising faculty members/attending physicians, such as the transfer of a patient to an intensive care unit, taking a patient for a procedure or an operation, or end-of-life decisions. Each House Staff must know the limits of their scope of authority and the circumstances under which they are permitted to act with conditional independence. PGY-1 House Staff will be supervised either directly or indirectly with direct supervision immediately available. Programs will define, based on the appropriate Residency Review Committee's (RRCs) guidelines, the competencies that PGY-1 House Staff must achieve in order to progress to be supervised indirectly with direct supervision available. Additional institutional policies may apply.

The faculty supervisor(s) assigned for each rotation or clinical experience (inpatient or outpatient) will be requested to provide to the Program Director a written evaluation of each trainee's performance during the period that the House Staff was under his or her supervision. The Program Director (or their designee) will structure faculty supervision assignments of sufficient duration to assess the knowledge and skills of each House Staff and delegate to them the appropriate level of patient care authority and responsibility.

**Revisions Reviewed and Approved by GMEC: 04/10/20**

H. *OCCUPATIONAL EXPOSURE PREVENTION POLICY*

VUMC is committed to promoting a safe and healthful work environment for all personnel, including House Staff and students, and to minimizing personnel exposure to occupational hazards, including those associated with bloodborne pathogens. All House Staff and other care providers at VUMC observe Standard Precautions with all patients in accordance with Occupational Safety and Health Administration (OSHA) standards to prevent occupational exposure to such materials.

Faculty and House Staff are important role models for students and less experienced House Staff and should be guided in the clinical situation first by safety and second by educational benefits. In order to provide the appropriate level of care for patients and safety for learners in the clinical setting, medical students and less experienced House Staff will not be required to perform a first time procedure on patients who are hepatitis C positive, HIV positive or have other known diagnoses that would put the medical student or House Staff at risk.

A House Staff or student that experiences a blood borne pathogen exposure must submit a Veritas report and seek immediate evaluation and consultation with:

- **Occupational Health Clinic** at 640 Medical Arts Building during regular business hours of 7:00am-5:30pm Monday-Friday or
- **Adult Emergency Room**, if the injury occurs after the regular business hours listed above. The injured person should contact Occupational Health the following business day to initiate follow up care.

When a House Staff is aware of a student who experiences an occupational exposure, they should direct that student to follow these same steps. The House Staff also may direct the student to the Student Health Clinic for further counseling after following the above guidelines.

Medical students and House Staff should be advised to follow all radiation safety guidelines. In the event of personal contamination with radioactive material, or loss of containment of radioactive material, the House Staff / medical student should contact **Vanderbilt Environmental Health and Safety** at (615) 322-2057 for an immediate risk assessment and decontamination if needed. House Staff working around radioactive material or x-ray devices who become pregnant should review the VEHS Declared Pregnant Worker site at: <https://www.vumc.org/safety/rad/declared-pregnant-worker>.

**Revisions Reviewed and Approved by GMEC: 05/08/2020**

*I. TRAINING PROGRAM REDUCTION/CLOSURE POLICY*

All decisions regarding reduction of size in an ACGME-accredited training program(s), closure of such a program(s), or the intention of VUMC to cease being a Sponsoring Institution must be communicated to the ACGME DIO, the Graduate Medical Education Committee, affected Program Directors, and affected House Staff as soon as possible after such decisions are made.

If an ACGME-accredited training program at VUMC reduces its size or ceases to exist, the House Staff in that program will be notified as soon as possible by the Program Director of that program.

In the event of closure or reduction, every reasonable effort will be made to allow House Staff currently in the program(s) affected to complete their education if satisfactory progression of the House Staff has been demonstrated.

If House Staff are displaced because of reduction or closure, the appropriate Program Director(s) will make every effort to assist the House Staff in enrolling in an ACGME-accredited program(s) in which they can continue their education.

**Revision reviewed and Approved by GMEC: 01/09/2009**

*J. CONTINUATION OF GME SUPPORT IN THE EVENT OF A DISASTER – EXTRAORDINARY CIRCUMSTANCES POLICY*

For the purposes of this policy, a disaster is an event or set of events at VUMC causing significant alteration to the residency/fellowship experience at one or more VUMC residency/fellowship programs.

## Policy

In the event of a disaster, VUMC will continue to provide administrative support for its GME programs through the disaster and will abide by ACGME Policy and Procedures to Address Extraordinary Circumstances. In the event that such a disaster or its consequences warrant reduction or closure of a program(s), then the Training Program Reduction/Closure Policy will take effect.

If, because of a disaster, an adequate educational experience cannot be provided for each House Staff the sponsoring institution will, where possible:

1. Revise its educational program to comply with the applicable Common, specialty specific Institutional and Program Requirements within 30 days of the invocation of the policy.
2. Arrange temporary transfers to other programs/institutions until such time as the residency/fellowship programs can provide an adequate educational experience for each of its House Staff. VUMC in collaboration with the receiving programs/institutions will work to ensure continuation of salary and benefits for each House Staff while they remain employed by VUMC.
3. Cooperate in and facilitate permanent transfers to other programs/institutions. Programs/institutions will, to the extent possible, make the keep/transfer decision expeditiously so as to maximize the likelihood that each House Staff will complete the residency year on schedule and, to the extent possible, will maintain continuity of salary and benefits.
4. Work to reconstitute the program and/or arrange for temporary or permanent transfers of the residents and/or fellows so as to maximize the likelihood that each resident or fellow will complete the academic year with the least disruption to her or his education.

The DIO will call or email the ACGME Institutional Review Committee Executive Director with information and/or requests for information. When appropriate, the DIO will contact executive directors of specific residency review committees (RRCs).

The DIO will determine the need and will contact the ACGME to discuss due dates that the ACGME will establish for the programs as necessary. This may include but is not limited to the following:

1. To submit program reconfigurations to the ACGME and
2. To inform each program's House Staff of the decision to reconstitute the program and/or transfer the House Staff either temporarily or permanently.

The due dates for submission shall be no later than 30 days after the invocation of the ACGME policy unless other due dates are approved by the ACGME.

See the ACGME Policy and Procedures at [www.acgme.org](http://www.acgme.org) for more information and contact information for DIOs, Program Directors and House Staff to utilize in the event of a disaster or extraordinary circumstances.

**Revisions Reviewed and Approved by GMEC: 05/08/2020**

**K. *HOUSE STAFF CALLED TO ASSIST IN THE EVENT OF A DISASTER***

In the event of a disaster affecting VUMC or the surrounding region, House Staff may be called on to assist by doing tasks that are different than their usual tasks as determined to be appropriate with training and supervision, including additional training if necessary.

In order to be as prepared as possible for a disaster, House Staff should do the following:

- Complete annual training on Learning Exchange.
- Familiarize themselves with the Quick Reference Guide and know the specific emergency response plans for each area in which they work and where these plans are documented. Since the most common disaster threat to the region is tornados, House Staff should especially learn plans for responding to a tornado threat in each area.
- Participate in drills – including fire drills – whenever possible.
- Also learn the emergency response plans for any location outside of VUMC where they rotate. Note that overhead announcement codes for other institutions may be different than they are at VUMC.

More information about emergency preparedness at VUMC is available here: <https://emergency.vanderbilt.edu/vumc/index.php>. The VUMC Department of Emergency Preparedness is also available to provide guidance or give presentations (if requested).

**L. *CERTIFICATE OF SERVICE***

The GME office will provide a Certificate of Service to each House Staff. This certificate will be provided no earlier than 4 weeks prior to completion of training/appointment at the discretion of the ACGME DIO. In the event of loss or destruction of the certificate, a copy of the original will be provided. Once you have finished training, the name on the certificate will not be changed and will remain consistent with the name used during the period of training and the name on the original certificate.

**M. *HOLIDAY/VACATION/SICK TIME***

The amount of time a House Staff can be away from residency duties and still meet Board requirements varies among the specialties. It is the House Staff's responsibility to be aware of their specialty requirement. Time under any of the following may not be counted toward Board eligibility.

**1. Holidays**

All time off, including holidays, is scheduled at the discretion of the Program Director. Official VUMC holidays are not automatically observed as time off for House Staff.

**2. Vacation**

All House Staff on one-year appointments are eligible for three weeks of vacation upon their start date. For appointments less than one year, vacation will be prorated accordingly. House Staff must schedule vacation days with the Program Director. Vacation time must be used in the appointment year in which it is accrued. Any unused time does not carry over and is not paid out at the appointment year-end.

**3. Sick Time**

Time off due to illness must be reported to the Program Director at the time of the illness. House Staff accrue paid sick time at the rate of one day per month except when they are on unpaid leave. House Staff on unpaid leave do not accrue sick time. House Staff are not paid for unused sick time. If a House Staff is reappointed and has unused and accrued sick time, that unused and accrued sick time will carry over to the next appointment year. Sick time can only be used for time off due to the House Staff's illness or the illness of an eligible family member. For the purpose of this policy, eligible family members are defined as: spouse, domestic partner, parent, grandparent, sibling, biological child, stepchild, adopted child, foster child and child (ren) of the staff member. Sick time must be utilized prior to going into unpaid status, if available. If the House Staff wants to continue receiving full salary for time off due to an injury or occupational disease which is compensable under the Tennessee Workers' Compensation Act, workers' compensation benefits may be supplemented by available sick or vacation time up to the House Staff's full weekly salary.

**Revisions Reviewed and Approved by GMEC: 05/08/2020**

*N. LEAVE POLICY*

VUMC recognizes that House Staff may need to be away from work due to medical or certain family reasons. Leaves of absence are defined as approved time away from residency duties, other than regularly scheduled days off as reflected in a rotation schedule. All leaves will be scheduled with prior approval by the Program Director or Chief of Service, with the exception of family emergencies or unexpected illnesses. In unexpected/emergency

situations, the House Staff should contact the Program Director or Chief of Service at the earliest possible time.

Each residency or fellowship program will provide its House Staff with a written policy in compliance with its Program Requirements and Board requirements concerning the effect of leaves of absence, for any reason, on satisfying the criteria for completion of that residency or fellowship program and subsequent Board certification.

The amount of time a House Staff can be away from residency or fellowship duties and still meet board requirements varies among the specialties. It is the House Staff's responsibility to be aware of their specialty board's requirement. Information relating to access to eligibility for certification by the relevant certifying board is available upon request from the Program Director. If leave time is taken beyond what is allowable for the specialty board and the House Staff is required to extend their period of activity in the training program to meet board requirements, the House Staff should request permission to extend and should establish a schedule for doing so in consultation with the Program Director and DIO.

Leave time under any of these categories should be considered in conjunction with Board requirements. When the need/request for leave is foreseeable, the request should be submitted at least thirty (30) days prior to the leave. When the need for the leave is unforeseeable or the thirty days' notice cannot be given, the request should be submitted as soon as practical.

In order to remain in a paid status during leave, the House Staff member will utilize sick time first for a leave related to their (or a qualifying family member's) medical condition, then vacation time, and then any additional leave will be unpaid once all available paid leave has been exhausted.

House Staff on medical leave **MUST** obtain a *Return to Work/Physician Release* form and return it to Occupational Health who will notify the Program Director or their designee **BEFORE the House Staff may return to work. If the House Staff is released with restrictions that affect their duties, the House Staff should contact the Graduate Medical Education office. In addition, if the restrictions may necessitate an accommodation, the House Staff should make the GME Office aware of the request for accommodation and may also need to engage VUMC Employee Relations.**

### **1. Family and Medical Leave Act (FMLA) and Tennessee Maternity (Parental) Leave Act (TMLA)**

House Staff will be granted FMLA and TMLA Leave as required by applicable law and consistent with the [VUMC FMLA and TMLA Leave Policy](#). Please initiate the process through the GME Office and contact the Office of GME for specific questions about such leave.

The VUMC Parental Leave Policy provides two weeks paid leave for eligible House Staff, subject to terms of the policy. See policy here:

<https://vanderbilt.policytech.com/docview/?docid=10874>

**2. Military Leave Duty**

House Staff will be granted military leave as required by applicable law and consistent with the [VUMC Military Leave of Absence Policy](#). Please contact the Office of GME for specific questions about such leave.

**3. Jury Duty**

House Staff will be granted leave for jury duty as required by applicable law and consistent with the [VUMC Administrative Leave policy](#). Please contact the Office of GME for specific questions about such leave.

**4. Non-FMLA and Personal Leave**

Leave requested by House Staff that does not qualify for FMLA or TMLA or Personal Leave may be permitted as determined by the Program Director in consultation with the ACGME DIO and consistent with the [Non-FMLA Medical and Personal Leave of Absence Policy](#). House Staff should consult with their Program Director to understand how leave may impact their progression towards their specialty board.

**5. Bereavement Leave**

House Staff will be granted leave for bereavement as required by applicable law and consistent with the [VUMC Bereavement Leave policy](#). Please contact the Office of GME for specific questions about such leave.

**6. GME Administrative Leave**

Administrative Leave is a general leave status, initiated by the Program Director, in consultation with the ACGME DIO, or initiated by the ACGME DIO. Administrative Leave is paid. Examples of when a House Staff member may be placed on administrative leave include but are not limited to: an internal review or investigation or for an investigation of an external event involving the House Staff, such as an arrest.

**Revisions reviewed and approved by GMEC: 6/24/2020**

*0. HOUSE STAFF ELIGIBILITY AND SELECTION POLICY*

House Staff in accredited programs at VUMC are selected based on qualifications that meet or exceed the standards outlined below.

One of the following qualifications must be met to be eligible for appointment to a residency or fellowship program at VUMC:

- Graduate of a medical school in the U.S. or Canada accredited by the LCME; OR,
- Graduate of a college of osteopathic medicine in the U.S. accredited by the American Osteopathic Association Commission on Osteopathic College Accreditation (AOACOCA); OR,
- Graduate of medical schools outside the U.S. or Canada meeting one of the following additional qualifications:
  - who hold a currently valid certificate from the ECFMG prior to appointment; OR,
  - who hold a full and unrestricted license to practice medicine in Tennessee.

For fellowship programs, there may be additional qualifications that must be met and can be found in the fellowship application as well as the ACGME Program Requirements where applicable.

Programs will select only from among the pool of eligible applicants, evaluating each applicant on the basis of their preparedness, ability, aptitude, academic credentials, communication skills, and qualities such as motivation, honesty, and integrity. House Staff must also qualify for licensure or exemption from licensure under the Tennessee Board of Medical Examiners requirements.

In compliance with federal law, including the applicable provisions of Title VI of the Civil Rights Act of 1964, Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendment of 1972, Family and Medical Leave Act of 1993, Sections 503 and 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act (ADA) of 1990, the ADA Amendments Act of 2008, Executive Order 11246, the Uniformed Services Employment and Reemployment Rights Act, as amended, and the Genetic Information Nondiscrimination Act of 2008, VUMC does not discriminate against individuals on the basis of their race, sex, religion, color, national or ethnic origin, age, disability, military service, veteran status, or genetic information in its employment. In addition, VUMC does not discriminate against individuals on the basis of their sexual orientation, gender identity, or gender expression consistent with the VUMC's Anti-harassment, Non-Discrimination and Non-Retaliation policy.

All requisite prior training must be successfully completed prior to beginning any residency or fellowship program. All prerequisite post-graduate clinical education required for initial entry or transfer into ACGME-accredited residency or fellowship programs must be completed in ACGME-accredited residency programs, Royal College of Physicians and Surgeons of Canada (RCPSC)-accredited or College of Family Physicians of Canada (CFPC)-accredited residency programs located in Canada, or residency programs with ACGME International (ACGME-I) Advanced Specialty Accreditation. Residency and fellowship programs must receive verification of each resident or fellow's level of competency in the

required clinical field using ACGME, CanMEDS, or ACGME-I Milestones evaluations from the prior training program upon matriculation.

If allowed by the program's ACGME Review Committee, an eligibility exception to the aforementioned pre-requisite requirement may be considered by VUMC's GMEC and DIO for review and approval of the applicant's exceptional qualifications following the guidelines outlined in the ACGME common program requirements. Applicants accepted through this exception must have an evaluation of their performance by the program's Clinical Competency Committee within 12 weeks of matriculation. The program director must submit evidence of completion of that evaluation within 14 weeks of matriculation to the GMEC for documentation that it was conducted.

All applicants that are granted interviews will be interviewed in person, by telephone or video conferencing, in the manner determined by the Program Director. The Program Director evaluating House Staff attempting to transfer from other educational programs (prior to completion of training offered in that discipline in that institution) will directly contact the referring Program Director, Chair, and/or other appropriate references for recommendations and/or evaluations to assess the educational qualifications of the House Staff prior to making any offer of employment. Additional information will be required upon transfer, as is noted below.

Whenever possible, all accredited House Staff training programs at VUMC will participate in an organized matching program, such as the National Residency Matching Program (NRMP).

A program director may not appoint more House Staff than approved by both VUMC and, for ACGME-accredited programs, by their respective ACGME Residency Review Committee. All complement increases must be approved by both VUMC (by and through its GME expansion process) and, for ACGME-accredited programs, by the respective ACGME Residency Review Committee.

#### **Revisions Reviewed and Approved by GMEC: 05/08/2020**

*P. EQUAL EMPLOYMENT AND AFFIRMATIVE ACTION/ANTI-HARASSMENT/NON-DISCRIMINATION/ANTI-RETALIATION*

**1. Equal Employment Opportunity**

VUMC Equal Opportunity and Affirmative Action Policy is reflected in the following statement: "In compliance with federal law, including the provisions of Title VI of the Civil Rights Act of 1964, Title VII of the Civil Rights Act of 1964, Title IX of Education Amendment of 1972, Family and Medical Leave Act of 1993, Sections 503 and 504 of the Rehabilitation Act of 1973, the Age Discrimination in Employment Act (ADEA) of 1967, the Americans with Disabilities Act (ADA) of 1990, the ADA Amendments Act of 2008, Executive Order 11246, the Uniformed Services Employment and Reemployment Rights Act, as amended, and the Genetic

Information Nondiscrimination Act of 2008, VUMC does not discriminate against individuals on the basis of their race, sex, religion, color, national or ethnic origin, age, disability, military service, veteran status or genetic information in its employment. In addition, VUMC does not discriminate against individuals on the basis of their sexual orientation, gender identity, or gender expression. For more information, see VUMC's Equal Opportunity and Affirmative Action Policy. <https://vanderbilt.policytech.com/dotNet/documents/?docid=13912>

## **2. Anti-Harassment**

VUMC's Anti-Harassment, Non-Discrimination and Anti-Retaliation Policy, <https://vanderbilt.policytech.com/dotNet/documents/?docid=13911>, explains VUMC's prohibitions against sexual and other lawful harassment, examples of prohibited conduct, how to report it, VUMC's prohibition against retaliation against anyone who makes a complaint or participates in an investigation, and how VUMC investigates and resolves complaints of its anti-harassment policy.

The VUMC Anti-Sexual Harassment – Standard Operating Procedure (SOP), provides additional details and examples of prohibited conduct, means of reporting, and how VUMC responds to reports of sexual harassment. Although violations of VUMC's sexual harassment policy are dealt with on a case-by-case basis, the SOP explains VUMC's four levels of violations and the type of disciplinary action that may be appropriate for each level of violation. For more information, see <https://hr.vumc.org/system/files/employee-relations/HowWeAddressConcerns.pdf>.

VUMC also has special procedures for addressing complaints of Sexual Violence (rape, fondling, incest, statutory rape, dating violence, domestic violence, and stalking). When an allegation of sexual harassment or sex discrimination involves Sexual Violence, VUMC will respond in accordance with the VUMC Violence Against Women Act Policy. See [link will be inserted upon completion of policy.]

## **3. Disability Discrimination and Accommodations**

In accordance with VUMC EEO/AA policy, VUMC does not discriminate in its admissions or selection of House Staff. Selection decisions are made without regard to disabilities or other protected categories. Applicants to VUMC's residency or fellowship programs who may need reasonable accommodations at any point in the selection process, as well as incoming or current House Staff who may require reasonable accommodations, should contact Employee & Labor Relations at 615-343-4759 or [employeerelations.vumc@vumc.org](mailto:employeerelations.vumc@vumc.org). Requests for accommodations are evaluated on a case-by-case basis. For more information, visit Employee & Labor Relations website at <https://hr.vumc.org/>.

## **4. For More Information**

Inquiries or complaints should be directed to Rochelle Johnson, Director Employee and Labor Relations.

**VUMC location and Mailing Address:**

2525 West End Ave, Suite 500, Nashville, TN 37203

Telephone: (615) 343-4759

Email: [employeerelations.vumc@vumc.org](mailto:employeerelations.vumc@vumc.org)

*a. Racial and Other Harassment in the Work Environment*

Harassment against individuals on the basis of their race, color, religion, or national origin is a form of unlawful discrimination and is prohibited under Title VII of the Civil Rights Act of 1964 and other applicable federal and state laws. When harassment based on an individual's race, color, religion, or national origin has the "purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment," it rises to the level of unlawful discrimination. In addition, these principles apply to harassment on the basis of age, disability, and genetic information under the Age Discrimination in Employment Act, the Americans with Disabilities Act, and the Genetic Information Nondiscrimination Act, respectively. Finally, VUMC, through its nondiscrimination statement, applies these principles to harassment on the basis of an individual's sexual orientation, gender identity, and gender expression.

The following examples of harassment are intended to be guidelines and are not exclusive when determining whether there has been a violation of this policy:

Verbal harassment includes comments that are offensive or unwelcome regarding a person's nationality, origin, race, color, religion, gender, sexual orientation, age, body, disability or appearance, including epithets, slurs and negative stereotyping.

Nonverbal harassment includes distribution, display or discussion of any written or graphic material that ridicules, denigrates, insults, belittles or shows hostility, aversion or disrespect toward an individual or group because of national origin, race, color, religion, age, gender, sexual orientation, pregnancy, appearance, disability, sexual identity, marital or other protected status.

*b. Procedures for Review of Matters Involving Sexual Violence*

When a matter involves "Sexual Violence" (sexual assault, domestic violence, dating violence, or stalking) as defined by and covered by the applicable VUMC policies, the Title IX Coordinator will work with GME leadership, and if applicable, the Review Committee, to provide training on the investigation and

adjudication of matters involving Sexual Violence and to modify the procedures in this manual to comply with applicable sexual misconduct policy, as applicable. Those modifications will include the following:

1. *Notice of meetings.* Both the complainant and respondent will receive timely notice of the meetings that they are permitted to attend.
2. *Advisors.* Both the complainant and the respondent will be permitted to have an advisor of their choosing present during meetings where their attendance is permitted. The advisor may accompany and confer privately with the complainant or respondent, but the advisor may not interrupt, speak on behalf of the complainant or respondent, or otherwise actively participate in any meeting. An advisor's failure to comply with these guidelines may result in the termination of the meeting or the advisor no longer being permitted to be present. VUMC personnel employed in the offices responsible for the disciplinary proceedings described in this policy, along with those in the chain of command, personnel employed by the Office of Legal Affairs, and others whose participation could create a conflict of interest with their VUMC duties are not eligible to serve as advisors. If there is a question or concern about a possible advisor, the House Staff should consult with Employee & Labor Relations. If either the complainant or respondent chooses to have an attorney present as an advisor, he or she must provide advance notice so that a member of the VUMC Office of Legal Affairs can attend any meeting at which another attorney will be present.
3. Subject to any applicable privilege, the complainant and respondent will have timely and equal access to any information related to Sexual Violence that will be used during the process.
4. The preponderance of the evidence standard will be used to determine whether the applicable policy has been violated.
5. Subject to any applicable privilege, the complainant and respondent will receive simultaneous written notification of (i) the result of any disciplinary proceeding that arises from an allegation of Sexual Violence; (ii) the ability, if any, for the respondent to appeal the result; (iii) any change to the result; and (iv) when the results become final.
6. Proceedings will not be conducted by officials who have a conflict of interest or bias for or against a complainant or respondent.

*Q. RETALIATION*

In compliance with law, VUMC does not retaliate against individuals for 1) filing or encouraging one to file a complaint of unlawful discrimination, 2) participating in an investigation of unlawful discrimination, or 3) opposing unlawful discrimination. In

addition, VUMC does not retaliate against individuals for filing or encouraging one to file a complaint of discrimination, participating in an investigation of discrimination, or opposing discrimination based on grounds not necessarily protected by federal or state law, but protected by the VUMC's nondiscrimination policy, such as sexual orientation. "Retaliation" includes any adverse employment action or act of revenge against an individual for filing or encouraging one to file a complaint of discrimination, participating in an investigation of discrimination, or opposing discrimination.

House Staff who file a grievance/complaint, report activity which they believe to be unlawful, or participate in the grievance, review, or compliance process in good faith, will be protected against retaliation.

House Staff who believe that they have been subjected to retaliation as a result of any of these actions should contact the Employee & Labor Relations, which will investigate complaints of retaliation.

#### *R. COMPLIANCE PROGRAM*

VUMC and the healthcare related entities affiliated with VUMC provide healthcare and healthcare-related services in compliance with all state, and federal laws governing its operations, and consistent with the highest standards of business and professional ethics. Regulatory compliance is adherence to the laws, rules, codes, standards and regulations of government healthcare and research programs and the contractual obligations entered by VUMC for healthcare operations or research. VUMC utilizes a Compliance Program Plan that has established an operational structure and processes to monitor and support compliance efforts. In accordance with the Compliance Program Plan, VUMC has appointed a Chief Compliance Officer, along with Compliance Officers who are charged with reviewing and enforcing VUMC compliance policies and addressing specific compliance situations that may arise to provide consistency in the application of compliance policies. For more details, the VUMC Compliance Program Plan is available at <https://vanderbilt.policytech.com/docview/?docid=16232>.

The compliance program consists of a number of components, one of which is training and education. Prior to entering training, all VUMC House Staff must complete a number of required compliance training modules which are accessed via the House Staff Compliance Dashboard (<https://learningexchange.vumc.org>).

There are specific federal, state, and payer regulations related to billing for physician services in a teaching hospital that House Staff should be aware of. The general rule states "If a House Staff participates in a service furnished in a teaching setting, a physician fee schedule payment is made only if a teaching physician is present to perform or observe the House Staff perform the key portion of a service, procedures or surgery for which payment is sought." However, there are certain situations where teaching physician presence is required throughout. During your residency training at VUMC, you will receive more details

regarding these requirements. It is important for all House Staff to review the following VUMC policies and guidance to help gain familiarity with what is expected of you:

[VUMC Code of Conduct](#)

[VUMC Conflict of Interest and Commitment Policy](#)

[VUMC False Claims Act and Whistleblower Protection](#)

[VUMC Documentation Standards in the Medical Record](#)

[VUMC Documentation Standards for Providers](#)

[VUMC Documentation Standard Timeframes](#)

[Charge Capture for Resident/Fellow Work and Teaching Physician Guidelines](#)

[CMS Guidelines for Teaching Physicians, Interns, and Residents](#)

If a House Staff has questions concerning compliance issues or would like more information, contact the Compliance Office at 615-343-7266 or visit our website at [Office of Healthcare Compliance](#). There is a confidential 24-hour VUMC Compliance Integrity Line 1-866-783-2287 or on which he or she may report concerns.

**S. *CONFLICT OF INTEREST POLICY/VENDOR INTERACTIONS***

The relationships between VUMC, the individual members of its community, and the healthcare industry have grown increasingly complex. As a result, there may be opportunities for professional interaction and development that may benefit VUMC and its individual members but which may also present the potential for or the appearance of conflicting loyalties and responsibilities for the individuals within the VUMC community. Given this, VUMC maintains policies that address conflict of interest between its employees (including House Staff) and the health care industry and how vendors are allowed to interact with House Staff. The core of the policies state that House Staff may not accept gifts from health care industry (HCI), may not accept meals funded directly by HCI, may attend certain educational activities sponsored by industry that are approved and comply with the COI policy, and under certain conditions may be sponsored by grants from HCI. For more information regarding the Conflict of Interest and Vendor Interaction policies, please see the following link to the policies.

<https://vanderbilt.policytech.com/dotNet/documents/?docid=10927>

**T. *POLICY ON HOUSE STAFF TRANSFERS***

When an individual wishes to transfer from another residency or fellowship program to a VUMC program and is evaluated as listed above, prior to transfer, in accordance with the requirements set forth below the VUMC Program Director must obtain an appropriate release signed by the individual seeking transfer. They must obtain a final verification of the previous educational experiences as well as a statement regarding the performance evaluation of the transferring House Staff, with compliance with residency training requirements and a summative assessment of competence in the following areas:

- Patient Care
- Medical Knowledge
- Practice-Based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-Based Practice

Additionally, the program director must obtain Milestones evaluations from the prior program upon matriculation.

The VUMC Office of Graduate Medical Education must be notified prior to accepting a transferring House Staff as described above. All House Staff transferring into VUMC GME training programs must satisfy the conditions of employment as contained in this manual ([Section I.A. CONDITIONS OF EMPLOYMENT AND CONTINUED EMPLOYMENT](#)).

The transferring House Staff (either coming to VUMC or VUMC House Staff leaving) will be required to sign a “Release of Information and Waiver of Liability” form to facilitate information exchanged between institutions. Any other “release of information and waiver of liability forms” will be used at the discretion of the Office of Legal Affairs.

In addition, VUMC Program Directors are required to document verification of program completion for all graduation residents and fellows within 30 days, and after the appropriate release is signed, provide verification of an individual trainee’s completion upon the trainee’s request, within 30 days. Program directors should also provide, after the appropriate release is signed, residency education and summative performance evaluations to other requesting residency and fellowship programs for any House Staff who may leave the program prior to completion of their education or on completion of the program.

**Revisions Reviewed and Approved by GMEC: 05/08/2020**

#### *U. ELECTIVE AWAY ROTATIONS (DOMESTIC AND INTERNATIONAL)*

The Office of Graduate Medical Education will consider Away Rotations for House Staff as approved by the Program Director and the ACGME DIO as part of the educational training program. Advance planning and careful coordination with your program director and program coordinator is necessary for all the items that must be in place prior to an away rotation. Please follow the link for additional information on the timeline and process: (<https://gme.app.vumc.org/GHEPortal>.)

Away rotation requests must be submitted (minimum of 7 months prior for international away rotations or minimum of 4 months prior for domestic away rotations) on the GME Away Rotation Management System (<https://gme.app.vumc.org/GHEPortal>). Final approval is required by the ACGME DIO before travel arrangements are made or the away rotation initiated.

## II. BENEFITS

For a full summary of benefits, please see the Benefits Overview available on the HR website at <https://hr.vumc.org/benefits>. This link will connect you to more information on each of the benefits below along with decision tools, FAQs, and other important resources.

You must enroll or waive coverage within 30 days of your start date or you will be enrolled in default coverage (Aetna Plus, employee only coverage) and may miss out on the opportunity to enroll in certain voluntary benefits.

Full-time House Staff paid through VUMC are eligible for:

- Health Care Plan, Dental Insurance, Vision Insurance, Long-term Disability, Life Insurance and Accidental Death & Dismemberment (AD&D) coverage immediately;
- Short-term Disability on the first of the month after thirty days;
- Flexible Spending Accounts (FSAs) on the first of the month after 30 days of employment;
- Retirement Plan participation on first of month after hire. Participation is mandatory after one full year and completion of 1,000 hours of service.

**THE FOLLOWING INFORMATION IS A SUMMARY ONLY.** Plan descriptions and detailed information are available on the Human Resources web site (<https://hr.vumc.org/benefits/sbc-eoc>).

### A. CORE COVERAGE

#### 1. HEALTH CARE PLAN

VUMC offers three health plan options:

- Plus
- Select
- Health Savers (High Deductible Health Plan with HAS)

Prescription drug coverage is included when you enroll in one of the health plan options.

Please review the benefits overview, online decision tools, summary plan description, and evidence of coverage booklets before selecting a health plan option.

#### 2. LIFE INSURANCE

Basic life insurance coverage provided by VUMC is equal to the employee's annual base benefits rate and includes Dependent coverage (spouse, \$10,000 increments up to \$250,000 or 50% of your supplemental; children, \$5,000 increments up to \$15,000) is also provided for eligible dependents. Additional Supplemental coverage of up to eight times the employee's annual base benefits rate may be purchased by the employee.

### **3. RETIREMENT PLAN**

The VUMC Retirement Plan is optional for new employees and is mandatory for eligible employees upon their one-year anniversary. When the employee has completed 12 months and 1,000 hours of service, they will be automatically enrolled in mandatory contributions and start receiving matching contributions. Fidelity Investments provides administrative services for plan accounts and offers a variety of investment options. If the employee does not complete their enrollment online at [www.netbenefits.com/vumc](http://www.netbenefits.com/vumc) prior to their 1-year anniversary, their contributions will default to a fund established by the Plan.

### **4. LONG-TERM DISABILITY (LTD)**

There are 3 options for long-term disability:

- Full LTD: Automatic enrollment in this plan occurs on the employee's hire date. Full LTD insurance provides a monthly income of 60% of the employee's salary and includes an additional 10% monthly contribution to the employee's retirement account, should they become totally disabled and are unable to work for more than six months.
- Core LTD: This option provides a monthly income of 60% of the employee's salary but does not include the additional retirement contribution.
- Base LTD: This option provides a monthly income of 60% of the first \$24,000 of salary and does not include the additional retirement contribution.

VUMC pays for Base LTD insurance covering the first \$24,000 of the employee's annual base pay. The employee pays the premium to cover the amount of their salary above \$24,000 in the Core and Full LTD options. The employee can elect the Core or Base LTD coverage by logging into My VUMC Benefits if they do not want the full coverage.

## **B. VOLUNTARY COVERAGE**

### **1. ACCIDENTAL DEATH AND DISMEMBERMENT**

Accidental Death and Dismemberment (AD&D) insurance pays a benefit if the employee loses their life, limbs, eyes, speech or hearing due to an accident. The

employees can purchase coverage for themselves only, or for their family in increments of \$10,000 up to a maximum of 10 times their Annual Base Benefits Rate or \$500,000, whichever is less.

## **2. DENTAL INSURANCE**

VUMC offers three voluntary dental plans:

- BCBS DentalBlue PPO
- Delta Dental PPO
- CIGNA Dental Care (DHMO)

There are different provider networks, co-pays, and deductibles for each dental option. Please review the details carefully before making an election.

## **3. FLEXIBLE SPENDING ACCOUNTS (FSAs)**

If the employee or their family has regular, foreseeable medical or dependent care expenses, FSAs allow them to set aside a limited amount of money on a pre-tax basis (before Federal income and FICA taxes) to pay for these eligible expenses.

Employees save money by paying less tax. They then file receipts (for eligible expenses along with a claim form) to benefit express for reimbursement. There are two types of FSAs available to VUMC employees:

- **Health Care FSA** — A health care FSA is used to pay for unreimbursed, out-of-pocket medical expenses, such as prescription copays, vision care appointments, eyeglasses/contacts, and other eligible expenses for employees and any tax dependents in their households.
- **Dependent Day Care FSA** — A dependent day care FSA is used to pay for expenses to place the employee's children (under the age of 13) or other eligible dependents in day care or other custodial care to enable the employee to be gainfully employed.

## **4. SHORT-TERM DISABILITY**

Short-Term Disability is a benefit that would pay 66 2/3% of the employee's income (up to \$2,500 a week) if they become sick or injured outside of the workplace.

Newly eligible staff with less than one year of service have access to VUMC's traditional short-term disability insurance. After 1 year of service, enhanced short-term disability provides a no-cost base coverage on the first \$24,000 of annual base salary, which is paid for by VUMC, and "buy-up" coverage, which is paid for by the employee. Automatic enrollment in both the base and buy-up enhanced short-term disability plan occurs on the first of the month after your one-year anniversary.

## **5. VISION INSURANCE**

The optional Vision Plan is administered through Superior Vision. Coverage provides for one vision exam every 12 months after co-pays and a benefit towards the purchase of eye glasses or contact lenses.

## **6. SUPPLEMENTAL INDIVIDUAL DISABILITY INSURANCE**

Long-Term Disability is a benefit that protects an employee from loss of income in the event that they are unable to work for an extended period of time due to illness, injury, or accident. Employer-provided Long-Term Disability plans may not meet the full financial needs of a disabled employee and the benefits may be treated as taxable income. Supplemental Individual Disability benefits will help bridge this income gap.

VUMC's Supplemental Individual Disability program provides significant discounts off individually owned policies.

- Unisex rates can provide discounts of 40-45% depending on medical specialty.
- Coverage is available without any medical or financial underwriting.
- Benefits are paid if you can't work in your specialty even if working in another job.
- This Supplemental coverage is fully portable with the same discounted rates when the policyholder finishes residency or fellowship at VUMC.
- Supplemental coverage pays benefits in addition to the group Long-Term Disability plan provided through VUMC or any further employer.
- Benefit amounts can be increased to cover your future earnings without medical screening.

This exclusive plan is administered by Marsh & McLennan Agency (MMA). For more information and individualized quotes please contact Marc Flur - [marc.flur@marshmma.com](mailto:marc.flur@marshmma.com) or (919) 418-8630.

## **7. ACCESS TO INTERIM HEALTH INSURANCE PRIOR TO YOUR START DATE**

Your health insurance coverage at VUMC will begin on your start date. The Office of Graduate Medical Education is providing access to information regarding interim coverage you can purchase if desired to cover potential gaps in coverage prior to your start date at VUMC. If you need interim health insurance coverage prior to your start date at VUMC please contact Marsh and McLennan Agency at 1-844-854-9142 and indicate you are an incoming House Staff member at VUMC and will need quotes for short-term interim health insurance coverage prior to your start date.

*C. ADDITIONAL VOLUNTARY BENEFITS*

**1. AUTO & HOMEOWNERS INSURANCE**

Group Auto and Homeowners Insurance is offered by MetLife. The employee can call 800-GETMET8 for more information, including a free insurance review and a no-obligation quote. No enrollment deadline.

**2. PET INSURANCE**

Pet Insurance is offered through Nationwide Insurance. For more information, employees should contact Nationwide Insurance at (877) 738-7874, or online at <http://www.petinsurance.com/vanderbiltumc> and mention that they are a VUMC employee. No enrollment deadline.

*D. TRAVEL INSURANCE*

From the date of employment, the employee is automatically covered while traveling on approved VUMC business. Authorization for travel plans happens at the department level through effective planning, communication, and management. If an event occurs while traveling on VUMC business, all necessary documentation should be provided to the Office of Risk and Insurance Management at (615) 936-0660.

*E. WORKERS' COMPENSATION*

We hope you never have a work injury, but you should know what to do just in case. An example of a common work injury encountered in healthcare is exposure to bodily fluids, such as a needle stick injury.

Always immediately notify your supervisor when you sustain a work-related injury or illness. You must report all injuries to the Risk Management Office via the VERITAS application: [Work Injury / Illness Reporting](#). Your supervisor or another individual may also report the injury if you are unable to.

If you need medical attention, proceed to the Occupational Health Clinic (OHC) at 640 Med Arts Building, 7:30am-5:30pm, M-F. Faculty/staff with a blood exposure are given priority at OHC. Appointments are not necessary for any work-related injury or illness. **To reduce the risk of bloodborne infections, seek medical care immediately after a blood or body fluid exposure.**

Employees who work at off-site clinics may be seen at the nearest Vanderbilt Health walk-in clinic.

If your injury occurs after hours, or if you need emergency care, go to the VUMC Adult ED or to the nearest Emergency facility if you are off campus. Always notify the Occupational Health Clinic the next day at (615) 936-0955 if you are seen in the Emergency Department so that appropriate follow up care is assured.

Please check with the Workers' Compensation [Administrator](#) for a list of other authorized medical providers. If you choose to seek treatment with your personal physician, medical charges will not be paid by Workers' Compensation.

**Workers' Compensation information related to the following. Please visit our VUMC Risk Management website at <https://www.vumc.org/risk-management/workers-compensation>**

[Benefits Overview](#)

[Reporting a Claim](#)

[HR work comp policy](#)

[Return to work policy](#)

[Out of State Employees](#)

[Work Comp FAQ's](#)

[OSHA Log](#)

*F. PROFESSIONAL LIABILITY COVERAGE*

VUMC established a self-insurance trust fund to provide professional and general liability coverage for VUMC, its faculty, House Staff, nurses, and staff. All employees are covered while acting within their scope of duties. Some of the affiliate institutions provide coverage to the House Staff while on rotation there. Otherwise, coverage is provided by the trust and by several layers of excess insurance coverage. House Staff primary coverage is written on an "occurrence" basis. This means that they are covered for events occurring while they are part of VUMC and includes claims made after they leave. "Tail" coverage need not be purchased. However, it is of utmost importance that House Staff notify the Risk and Insurance Management office of any adverse outcome or potential claim as soon as they are aware of it. For further information, contact the Office of Risk and Insurance Management at (615) 936-0660.

### III. SUPPORT SERVICES

#### A. *FACULTY / STAFF HEALTH & WELLNESS*

The award winning [Faculty/Staff Health & Wellness Program](#) offers a variety of specialized services to support the productivity and well-being of VUMC House Staff. The program is composed of three departments:

- The Occupational Health Clinic (OHC) – <https://www.vumc.org/health-wellness/occupational-health>; (615) 936-0955; Suite 640 Medical Arts Building; Hours: Monday-Friday, 7:00am-5:30pm (after hours/weekend answering service)
  - Vanderbilt Faculty/Staff Express Care – Suite 112 Medical Arts Building  
Hours: Monday-Friday 7:30 am-4:00pm
- Health Plus – <https://www.vumc.org/health-wellness/healthplus>; (615) 343-8943; 2700 Children’s Way; Suite 127; Hours: Monday-Friday, 7:30-am-5:30pm
- Work/Life Connections-EAP, including the Faculty and Physician Wellness Program – <https://www.vumc.org/health-wellness/worklife-connections>; (615) 936-1327; Suite 010 Medical Arts Building; Hours: Monday-Friday, 8:00am-5:00pm (after hours/weekend answering service)

To stay up to date on Faculty/Staff Health and Wellness programs follow them on [Instagram](#) and [Twitter](#) @WellVanderbilt.

#### **1. Occupational Health Clinic (OHC)**

The OHC protects House Staff health at work. OHC physicians and nurse practitioners are here to provide timely evaluation and treatment of work-related injuries, illnesses and exposures. We also manage over 40 different programs to protect employees against specific work hazards. Travel vaccines and pre-travel consultations are available at no charge for House Staff going on international electives or other business travel. Minor acute care services are also available. In addition, OHC operates, the [Faculty/Staff Express Care](#), which provides treatment for non-work-related minor illnesses. OHC’s Exposure Advisor, at 5-STIK (875-7845) provides 24/7 guidance for needle-sticks and other infectious exposures. Same day/next day online scheduling for minor non-work-related illnesses is available for House Staff via the MyHealth portal or through the Health and Wellness Information Portal at [https://hwip.app.vumc.org/hwip/ohc\\_express\\_care.jsp](https://hwip.app.vumc.org/hwip/ohc_express_care.jsp)

Medical Center immunization and screening requirements may be found under “[Welcome to Vanderbilt](#)” on our home page. OHC does not charge faculty/staff for clinic visits or work-related immunizations.

To learn more about how OHC can help keep you safe and healthy, visit us on the web at <https://www.vumc.org/health-wellness/occupational-health>.

## 2. **Health Plus**

The Health *Plus* program advances healthy lifestyle practices through a comprehensive worksite health promotion program. With Health *Plus*, House Staff can find support to be more physically active, eat better, maintain a healthy weight, manage stress, and become tobacco-free. Programs and services are offered at no additional cost in a wide array of formats, times, and locations to meet the needs of VUMC's diverse population.

Here is a brief list of some of our programs and services:

- **Go for the Gold:** Three-step health incentive program that begins with the **Compass Health Assessment**, which helps you identify health risks, and the **Wellness Actions Log** and the **Game Plan for Your Health** video that help you take action. Complete all 3 steps and earn a \$240 wellness credit towards your deductible and be eligible to receive partial reimbursement per quarter for membership to the Vanderbilt Recreation and Wellness Center. See our [Go for the Gold](#) web page for details.
- **Weight Management programs:** Lifestyle Coaching, Diabetes Prevention Program
- **Nutrition programs:** CORE Nutrition, TASTE, National Nutrition Month, Vandy Cooks, Farmers' Market
- **Physical Activity programs:** START! Physical Activity Program, Online Workouts, Vandy Walks
- **Health Care support:** Know Your Numbers, "Control is the Goal" Blood Pressure Management Program, Babies and You, Health Expos

For more information about our programs and services, contact Health *Plus* at (615) 343-8943 or visit our web site: <https://www.vumc.org/health-wellness/healthplus>

## 3. **Faculty and Physician Wellness Program (FPWP) of Work/Life Connections-EAP (Employee Assistance Program)**

The mission of the [FPWP](#) is to provide psychological support for faculty and physicians. The FPWP offers a range of coaching and counseling services to help House Staff and their spouses address personal or work-related problems. For more information of problem areas frequently addressed and services available contact FPWP/EAP at: (615) 936-1327 (24-hour answering service) or visit the web site at <https://www.vumc.org/health-wellness/work-life> (website also includes access to online, anonymous screenings for depression, anxiety, stress, substance abuse). For specific FPWP information visit: <https://www.vumc.org/health-wellness/faculty-physician-wellness-program>.

Work/Life Connections-EAP administers the Faculty and Staff Hardship Fund for those who are experiencing a temporary hardship due to a significant life event. The criteria require that it be a temporary hardship and the employee must be employed full time for at least a year. The award is intended to be a major step for the employee in the return to financial stability. <https://www.vumc.org/health-wellness/news-resource-articles/faculty-and-staff-hardship-fund>

#### **4. The SHARE Center**

SHARE provides confidential counseling and consultation for VUMC faculty and staff who have been impacted by workplace sexual harassment. We also offer programming and education. For more information, visit our website at <https://www.vumc.org/health-wellness/SHARE-Center> . To make an appointment with SHARE, call (615) 936-1327.

#### **5. Health & Wellness Information Portal**

The Health & Wellness Information Portal is a one-stop shop where faculty and staff can access information about themselves from the Health & Wellness departments. Faculty and staff can review gender/age specific prevention recommendations; access safety compliance records, immunization records, and blood/body fluid exposure information; and schedule same-day and next-day acute care appointments (from the Occupational Health Clinic); take a confidential mental health screening (developed by Work/Life Connections-EAP); and obtain information about Go for the Gold participation status, biometric data, and activity participation (from *Health Plus*). Employees can log in with their VUMC ID and password at <https://hwip.app.vumc.org/hwip/>.

### ***B. VUMC CHILD AND FAMILY SERVICES***

VUMC Child and Family Services links families with resources that support balancing work and home life including child care, an annual baby shower event, and lactation resources. VUMC employees have options for backup childcare and unlimited access to a digital platform connecting you to nannies, caregivers, and other household help through Care.com. The home-grown Sitter Service portal is another resource for backup care, connecting VUMC employees with VU students available for babysitting.

For more information or how to enroll, visit the web site: <https://hr.vumc.org/cfc>.

### ***C. LACTATION ROOMS***

A lactation room specifically for House Staff has recently been created (Spring '20) and is located inside the House Staff Lounge which is on the 2<sup>nd</sup> floor (ground floor) of The Vanderbilt Clinic (TVC) and the room number is 2806. Contact the GME office or your

program coordinator for the code to the House Staff Lounge. The House Staff Lounge is nicely furnished with a small computer work space, lounge space, dining space, restroom and kitchenette so if you need to wait for the Lactation Room you can be comfortable. This space is managed by the GME office so please let us know if you have any concerns.

Additional lactation rooms are available and supported through Human Resources with some being available only to VUMC staff and others also open to staff and patients/families.

A listing of these rooms can be found here:

<https://vumcchildandfamilyservices.as.me/schedule.php#>

**VA lactation** rooms include:

Nashville Campus: Room F – 153, ACRE Building (first floor in the building between the VA and Light Hall where resident outpatient continuity clinics are located.) This lactation room is just inside the ground floor entrance to the VA from VUMC in the hallway to the left as you enter from the outside.

York (Murfreesboro) Campus: Room G-22, Building 3

#### **D. *STRESS MANAGEMENT***

Stress is a normal part of the work-life of a physician. At times, however, House Staff may find a need to reach out for help in managing stressful situations or events. In addition to the Faculty and Physician Wellness Program of Work/Life Connections-EAP mentioned above, the Office of Graduate Medical Education and the Faculty and Physician Wellness Committee has information about other resources and support group networks.

Information about such support group networks is available from the Faculty and Physicians Wellness Committee at:

Center for Professional Health

<https://medsites.mc.vanderbilt.edu/cph/home>

1107 Oxford House

Phone: (615) 936-0678

The following advisors have access to other resources if special problems need to be addressed:

**Graduate Medical Education**

Kyla Terhune, M.D., M.B.A. – (615) 322-6035

Patricia Craft, M.S. – (615) 322-4916

### **Faculty and Physician Wellness Committee**

Charlene Dewey, M.D. – (615) 936-3227

#### *E. SLEEPING AND TRANSPORTATION OPTIONS FOR HOUSE STAFF TOO FATIGUED TO RETURN HOME SAFELY*

For House Staff who are too fatigued to safely return home, several options are available through the Office of Graduate Medical Education including the following:

1. Call Room space is available on an as needed basis for House Staff who are too fatigued to safely return home. If the call rooms assigned to your service are not available there is a napping call room in VUH with bunk beds. The room number and code will be available through Program Coordinators or can be obtained from the GME Office at (615) 322-4916. Please notify Environmental Services via the number posted in the room if the bed should be changed after your nap before the evening for the next House Staff.
2. For House Staff too fatigued to safely transport themselves home and for whom resting in a call room is not an option, transportation home with a return trip the next day is available through **Music City Taxi** Company from VUMC or any affiliated site at which you are rotating. **Call (615) 256-7000** for a pick-up and be specific about your location and that you are a House Staff at VUMC and the GME account should be charged. The Office of Graduate Medical Education will cover the cost of the transportation, but you must **indicate to the dispatcher and driver to charge the GME Account**. Please note that the cab that arrives for you may be branded any of the following: Checker Cab, Pink Cab, or Music City Taxi.

#### *F. FITNESS FACILITIES*

##### **1. THE VANDERBILT DAYANI CENTER FOR HEALTH AND WELLNESS**

House Staff are eligible for a GME-supported membership at the Dayani Center. The facility includes an indoor pool, indoor track, stationary exercise equipment, locker rooms and a variety of land and aquatic based group fitness classes. The facility is open M-Th 6:30 AM – 6:00 PM and Friday from 6:30 AM -5:00 PM. The facility is closed on weekends. The application/release form is available at the Dayani Center. More information is available on their website here:

<http://www.vanderbilthealth.com/dayani/>.

## **2. THE DAVID WILLIAMS II RECREATION AND WELLNESS CENTER**

At the Vandy Rec, we aim to be a hallmark of the Vanderbilt University experience by offering elite resources. The Vandy Rec experience includes basketball courts, badminton courts, racquetball courts, squash courts, group fitness class studios, more than 14,000 square feet of weight/fitness room space, a climbing wall, two indoor tracks, and an indoor turf Field House.

Membership pricing and more information on all programs can be found at:

<https://www.vanderbilt.edu/recreationandwellnesscenter/memberservices/membershiprates.php>.

House Staff are eligible to receive a \$90 per quarter reimbursement to the cost of their Vandy Rec membership if all three (3) steps of the Go for the Gold program have been completed. The reimbursement will occur if the House Staff member has visited the Vandy Rec at least 30 times during that quarter. For more details, please go to <https://www.vumc.org/health-wellness/go-gold-incentives-vumc>.

### ***G. RESOURCES FOR THE IMPAIRED PHYSICIAN***

VUMC has long been concerned for the impaired professional. Greater awareness has led to increased recognition of addictions, depression, stress management, inappropriate anger displays, and behavior problems in our faculty and staff and a continued interest in the treatment of the impaired professional. Physicians can become dysfunctional in a variety of ways, just like the patients they treat. Their individual problems often manifest in ways that can harm the patients whom they serve, the institutions that employ them, their families, and the colleagues with whom they work. Physicians often have difficulty admitting their problems with drugs or alcohol, and too often, do not get the help they need until a crisis is reached. Early interventions in confronting physicians who are heading for trouble are needed and if necessary, intensive treatment programs for the compromised professional can be made available. Initiating this process can be difficult for colleagues and supervisors. If advice or recommendations are needed, please contact the Faculty and Physician Wellness Program within Work/Life Connections-EAP at (615) 936-1327.

(See Medical Center Information, [section I.C.](#))

### ***H. HOUSE STAFF ADVISORY COUNCIL (HSAC)***

The Council meets monthly and is composed of House Staff representatives from each clinical department and training program. Matters of hospital policy that impact the House Staff are discussed and information is disseminated through monthly minutes. Any issue pertaining to House Staff experience can be referred to and discussed by the Council. House Staff from HSAC also serve on various institutional committees, including but not limited to:

- Medical Center Medical Board
- Graduate Medical Education Committee
- Medical Alumni Association Board
- Ethics Committee
- Executive Policy Review Committee
- Institutional Critical Care Committee
- Physician Wellness Committee
- Pharmacy & Therapeutics Committee
- Transfusion Committee
- Inpatient Medical Director Forum
- Infection Prevention Executive Committee
- Task Force on Physician Well-Being & Empowerment

The Council organizes the annual VUMC Research Forum and selects the recipient of the Grant W. Liddle Award. A member of the Council serves as the House Staff representative on most of the Standing Committees of the Hospital Medical Board.

For more information, please visit: <https://www.vumc.org/gme/2779>.

## IV. GRADUATE MEDICAL EDUCATION EVALUATION AND DISCIPLINARY GUIDELINES

The following evaluation and disciplinary guidelines apply to House Staff as part of their VUMC training programs. The purpose of these guidelines is to provide a system for evaluation of the performance of House Staff and procedures to deal with unsatisfactory academic performance and/or other conduct.

### **Length of Appointment**

Appointments are made for a one-year term, with renewal of the appointment based on satisfactory performance by the House Staff and the availability of a position. Terms and conditions of the appointment are specified in the yearly House Staff Agreement and are further described in this *House Staff Manual*.

#### **A. EVALUATION**

Each program will develop educational goals and objectives for its House Staff which are consistent with the ACGME criteria for the specialty. Evaluations shall use criteria and procedures appropriate to the program and shall include, but are not limited to the core competencies (Patient Care, Medical Knowledge, Communication and Interpersonal Skills, Problem-Based Learning and Improvement, Professionalism, and Systems-Based Practice) as defined by ACGME. All programs, even non-ACGME accredited programs, must adhere to these educational standards for best practice. Regarding rotation evaluations, semi-annual evaluations, and annual evaluations, the following must take place:

1. A written (or electronic) evaluation of a House Staff addressing medical knowledge, competence in patient care, professionalism, system-based practice, interpersonal and communication skills, and practice-based learning and improvement will be completed at the end of each rotation or assignment.
2. Programs should use multiple evaluators, including examples such as faculty members, peers, patients, self, and other professional staff members.
3. The Program Director or faculty designee will share evaluations with the House Staff and provide feedback. These meetings must occur at least semi-annually, will include a written review of performance, and should also include a discussion of areas of deficiency and plans for improvement. If a House Staff member needs it, the Program Director or their designee must develop plans for House Staff failing to progress, following institutional policies and procedures.

4. At least annually, there must be a summative evaluation of each House Staff that includes their readiness to progress to the next year of the program, if applicable.
5. The written evaluation and any documentation regarding these meetings should be permanently maintained in the departmental file until the final summative evaluation after completion of or leaving the program.
6. The Program Director or their designee must meet with and review with each resident or fellow their documented semi-annual evaluation of performance, including progress along the competencies above. The Program Director or their designee must assist resident and fellows in developing individualized learning plans to capitalize on their strengths and identify areas for growth.
7. Any information, materials, incident or other reports, statements, memoranda, or other data which are subject to the Tennessee Patient Safety and Quality (Medical Peer Review) statutes (T.C.A. §63-1-150 and T.C.A. §68-11-272) are privileged and are not to be copied or released without the prior authorization of the ACGME DIO or their designee.
8. Copies of correspondence between the House Staff and the Program Director, or any other correspondence directed to or on which the House Staff was copied, will be provided to the House Staff upon request to the Program Director. This provision only applies to correspondence maintained in program, departmental, or GME files.
9. Additional correspondence, for example electronic communications, used in the evaluation process to inform the Program Director regarding a House Staff member's performance and/or conduct, and/or is used as an evaluation and/or part of determination of promotion or status, will be considered part of the departmental file.
10. The evaluations, evaluation summaries and/or other non-privileged documents provided by the GME Office and/or department to the Review Committee may be reviewed by the House Staff with the Program Director, the DIO, or an individual designated by the DIO upon request. Peer names in the above referenced documents and/or communications will be redacted.
11. If a member of the House Staff requests to review their departmental or GME file an appointment will be scheduled with the GME office and the individual house staff member. Either the DIO or designee will be present at the time of review. The House Staff may not remove anything, make copies or photographs of the contents of the file. The House Staff may take notes.

## B. *COACHING*

In addition to evaluations, Program Directors and attending or supervising physicians provide and document timely feedback on an ongoing basis, which includes positive feedback as well as minor performance or conduct concerns as they occur and are documented as such.

## C. *CORRECTIVE ACTION (DISCIPLINARY ACTION)*

Corrective Action is taken to address any concern about the House Staff's performance or conduct which is too serious to be resolved by Informal Counseling or was not corrected by Informal Counseling. Performance or conduct issues subject to corrective action include, but are not limited to, the following examples:

- Insufficient medical knowledge
- Inability to apply medical knowledge effectively, whether in patient care, research, or performance of technical skills
- Any deficiency or conduct which adversely bears on the individual's performance, such as attitude, conduct, interpersonal or communication skills, or other misconduct
- Failure to progress or perform at the expected level of training
- Violations of professional responsibility, applicable VUMC by-laws, policies and procedures, state or federal law or any other applicable rules and regulations

### **1. Initiation of Corrective Action**

There may be concerns regarding the performance or conduct of a House Staff which have not been remedied or should not be addressed solely with feedback or Informal Counseling.

In those situations, one of the disciplinary actions listed below (Warning(s), Probation, Summary Suspension, Dismissal or Non-renewal) is initiated, depending on the nature and/or severity of the deficiency, actions, or conduct. In determining which level of intervention is appropriate, the Program Director should consider the House Staff's overall performance, including previous evaluations, Informal Counseling, Warnings, and Probationary Periods.

#### *a. Warning*

A Warning is appropriate if concerns arise or continue regarding the performance or conduct of a House Staff which are not appropriate to be dealt with by Informal Counseling. Examples of such unacceptable

conduct/performance include, but are not limited to, failure to respond to Informal Counseling, unprofessional conduct, poor in-service scores, or other actions that may adversely impact the health or safety of patients or others but are not serious enough to be addressed by Probation, Summary Suspension and/or Immediate Dismissal. A Warning will be given to the House Staff explaining why the conduct or performance is unacceptable, expectations for improvement of the deficiency or conduct as well as a time frame in which to meet these expectations and for re-evaluation. This letter of Warning must be documented. This will also be shared verbally with the House Staff whenever possible and the meeting documented. A copy must be given to the House Staff and the ACGME DIO.

During or at the end of the Warning Period the House Staff will meet with the Program Director or designee to advise the House Staff whether the deficiency or conduct has been corrected or whether further corrective action will be taken. At the end of the Warning period, or if the House Staff does not correct or improve the conduct or deficiency within the Warning Period, or if the same or additional conduct or deficiency occurs within that period, then the Program Director may

- i. lift the Corrective Action of Warning
- ii. extend the Corrective Action of Warning,
- iii. immediately place the House Staff on Probation,
- iv. initiate summary suspension,
- v. recommend non-renewal, or
- vi. recommend immediate dismissal.

At any time, whether before or after the Warning Period has passed, the Chair, Program Director, and/or DIO may recommend further action.

If the House Staff wishes a review of the Warning, they must follow the process and procedures in Section V of the House Staff Manual, found below.

*b. Probation*

If a House Staff's performance, including but not limited to, academic performance, performance of duties, conduct, professionalism, or interpersonal or communication skills, falls below acceptable standards or other deficiencies exist which are not corrected by Informal Counseling or a Warning, or are of a serious nature such that Informal Counseling or a Warning is not appropriate, the House Staff is placed on Probation by the Department Chair, Program Director, or DIO. The House Staff will be informed in writing by the Department Chair, Program Director, or DIO that they are being placed on Probation. The notification should include an explanation of the deficiencies, performance or conduct giving rise to Probation, expectations for improvement and the time period of the

Probation. The length and conditions of the Probationary Period are determined by the Department Chair and/or Program Director, after consultation with the DIO for GME. This letter of Probation must be documented. This will also be shared verbally with the House Staff whenever possible and the meeting documented. A copy must be given to the House Staff and the ACGME DIO.

The effective date of the Probationary Period will be the date of the written notification unless stated otherwise in the written notification.

During the Probationary Period, efforts are made to advise and assist the House Staff to address the performance issues and/or correct deficiencies or conduct with the goal of the House Staff successfully completing the program.

If at any time during the Probationary Period additional performance or conduct issues arise, or if the issues which resulted in the Probation continue, the Program Director may extend the Probation, recommend Nonrenewal, or move to Summary Suspension or Immediate Dismissal.

At the end of the Probationary Period, the Department Chair or Program Director determines which of the following actions will be taken and notifies the House Staff and DIO:

- i. Remove the House Staff from probationary status.
- ii. Extend the probationary period.
- iii. Notify the House Staff of non-renewal of their appointment.
- iv. Notify the House Staff of their immediate dismissal.

At any time, whether before or after the Probationary Period has passed, the Chair, Program Director, and/or DIO may recommend further action.

If the House Staff wishes a review of the Summary Suspension, they must follow the process and procedures in Section V of the House Staff Manual, found below.

c. *Summary Suspension*

If at any time a House Staff's conduct requires that immediate action be taken to protect the health or safety of patients or others, or to reduce the substantial likelihood of immediate injury or damage to the health or safety of patients or others, any member of the Medical Staff, the Hospital Administrator on Call, or the DIO shall have the authority to summarily suspend the House Staff.

The Department Chair, Program Director or DIO may also summarily suspend a House Staff who exhibits performance or conduct that the Department Chair, Program Director or DIO deems too serious to warrant a Warning or Probation.

The Summary Suspension will be reported immediately in writing to the DIO and the House Staff's Program Director and Department Chair, with a copy to the House Staff. The House Staff will remain in paid status while on Summary Suspension.

The DIO, after review of the circumstances giving rise to the Summary Suspension and after consultation with the Chairman and Program Director, determines a course of action which includes one or more of the following:

- i. Lifting, modifying or extending the Summary Suspension;
- ii. Coaching;
- iii. Warning;
- iv. Probation;
- v. Notification of non-renewal of their appointment;
- vi. Immediate Dismissal.

The House Staff is notified in writing, with copies to the House Staff's Program Director and Chair, of the action taken, and that they may not be present in the clinical areas or otherwise participate in work-related activities unless specifically instructed, with the exception of personal medical care and/or engagement with the Employee Assistance Program.

If the House Staff wishes a review of the Summary Suspension, they must follow the process and procedures in Section V of the House Staff Manual, found below.

*d. Immediate Dismissal*

Performance issues or conduct not resolved by a Warning, Probation, or Summary Suspension, or other serious actions or behavior may result in Immediate Dismissal. If, at any time, the Department Chair, Program Director or DIO determines that Immediate Dismissal is warranted, the Department Chair or Program Director will consult with the DIO to determine the effective date of dismissal, which serves as termination of employment with VUMC. Upon notification of the Immediate Dismissal, the House Staff is relieved of all clinical duties.

The House Staff will be notified in writing of the action taken, and they may not be present in the clinical areas or otherwise participate in work-related activities unless specifically instructed, with the exception of personal medical care and/or engagement with the Employee Assistance Program.

Any Medical Center equipment including, but not limited to, pagers, ID badges, keys, parking cards, laptops must be immediately returned upon dismissal. In addition, all access to VUMC systems and email is terminated.

If the House Staff wishes a review of the Immediate Dismissal, they must follow the process and procedures in Section V of the House Staff Manual, found below.

*e. Other Actions: Non-renewal or non-promotion*

Non-renewal of a House Staff's contract or non-promotion of a House Staff to the next level of training may be appropriate for a number of reasons, including but not limited to, insufficient medical knowledge, incompetence in patient care, lack of professionalism, inability to effectively use resources, poor interpersonal and communication skills, inability to participate in practice-based learning, and or reasons related to one of the Corrective Actions above.

Where possible, written notice of non-renewal of a House Staff's contract or non-promotion of a House Staff to the next level of training generally shall be given no later than three months prior to the end of the House Staff's current contract. In the event that notice cannot be given within three months, it shall be given as soon as possible.

If the House Staff wishes a review of the non-renewal or non-promotion, they must follow the process and procedures in Section V of the House Staff Manual, found below.

**Revisions reviewed and approved by GMEC: 6/12/2020**

## V. HOUSE STAFF COMPLAINT/GRIEVANCE PROCEDURES

Situations may arise in which a member of the House Staff disagrees with decisions and/or actions that they believe have adversely affected them or their training. The grievance processes outlined below may be utilized accordingly to address specific instances of concern.

Retaliation against a member of the House Staff or any other individual for taking part in the complaint/grievance procedures will not be tolerated and may result in disciplinary actions against the person who engages in retaliation.

Any potential witness who has concerns about practicing in the Review process should contact the DIO or Employee and Labor Relations.

### **1. Complaint/Grievance Procedure for Warning, Probation, Non-Renewal and/or Non-Promotion**

In the event of Warning, Probation, Non-Renewal and/or Non-Promotion, if the House Staff wishes to grieve their placement on Warning, Probation, Non-Renewal and/or Non-Promotion, they should as soon as possible, but *not later than fourteen (14) calendar days from the date the notification was issued placing the House Staff member on Warning, Probation, Non-Renewal and/or Non-Promotion*, contact in writing (via e-mail or hand delivery) the person(s) who initiated the Corrective Action of Warning, Probation, Non-Renewal and/or Non-Promotion to appeal the decision. Every effort should be made to resolve the problem fairly and promptly at this level, within *fourteen (14) calendar days, when possible, of receiving notification of the appeal from the House Staff*. A resolution and/or decision should be communicated in writing (via e-mail or hand delivery).

If the House Staff disagrees with the appealed decision above, the House Staff may then appeal the decision further to the DIO in writing (via e-mail or delivery to the GME Office during the business hours 8:00 a.m. – 4:30 p.m.) as soon as possible but *not later than fourteen (14) calendar days from the date of notification of the appealed decision*.

The DIO will seek to resolve the issue *within fourteen (14) calendar days, when possible, of receiving notification of the appeal to the DIO from the House Staff*, and the DIO may, at their discretion, seek advice from other members of the faculty, House Staff, or staff as deemed appropriate. After such evaluation and/or consultation the DIO will make a decision. This decision should be communicated in writing (via e-mail or hand delivery).

If the House Staff disagrees with the decision of the DIO and wishes to appeal the decision of the DIO, they must, *within fourteen (14) calendar days after the date of*

*notification of the DIO's decision*, notify the DIO in writing (via e-mail or delivery to the GME Office during the business hours 8:00 a.m. – 4:30 p.m.) that they wish to continue to grievance process. The DIO will then direct the chair of the GMEC to convene the Review Committee to address the appeal.

All meetings and communications in the review process, whether written, virtual, or telephonic, must be conducted without the presence of third parties, with the exception of witnesses called. However, any party to a review process may consult with counsel prior to the review process or during a break in the process.

(See “Review Committee” below.)

A House Staff's failure to follow the above directions within the noted time frames is considered acceptance of the Corrective Action.

## **2. Complaint/Grievance Procedure for Summary Suspension and/or Immediate Dismissal**

In the event of Summary Suspension or Immediate Dismissal, if the House Staff wishes to grieve their placement on Summary Suspension and/or Immediate Dismissal, they must notify the DIO in writing (via e-mail or delivery to the GME Office during the business hours 8:00 a.m. – 4:30 p.m.) *within seven (7) calendar days of the date the notification was issued placing the House Staff member on Summary Suspension and/or of their Immediate Dismissal*.

The DIO will then direct the chair of the GMEC to convene the Review Committee to address the appeal.

(See “Review Committee” below.)

A House Staff's failure to follow the above directions within this time frame is considered acceptance of the Corrective Action.

## **3. Complaint/Grievance Procedure for Issues other than Corrective Action**

If the complaint involves allegations of sexual harassment and/or discrimination and/or retaliation, refer to this *House Staff Manual*, [Section I.P.](#)

In the event the House Staff member wishes to grieve work-related issues which may not be covered elsewhere in this House Staff Manual, they should as soon as possible, but *not later than sixty (60) calendar days from the event*, contact in writing (via e-mail or hand delivery) the person(s) actions or inactions have given rise to the complaint. If the person(s) involved is not the department chair or Program Director, the House Staff should consult with their Program Director and/or department chair to seek their

assistance in the resolution of the issue. Every effort should be made to resolve the problem fairly and promptly at this level.

If the House Staff disagrees with the proposed resolution, the House Staff may then appeal the decision further to the DIO in writing (via e-mail or delivery to the GME Office during the business hours 8:00 a.m. – 4:30 p.m.) as soon as possible but *not later than thirty (30) calendar days from the date of notification of the appealed decision* .

The DIO will seek to resolve the issue and may at their discretion seek advice from other members of the faculty, House Staff, or staff as deemed appropriate. After such evaluation and/or consultation the DIO will make a decision.

If the House Staff disagrees with the decision of the DIO and wishes to appeal the decision of the DIO further, they must, *within fourteen (14) calendar days after the date of notification of the DIO's decision*, notify the DIO in writing (via e-mail or delivery to the GME Office during the business hours 8:00 a.m. – 4:30 p.m.) that they wish to continue to grievance process. The DIO will then direct the chair of the GMEC to convene the Review Committee to address the appeal.

All meetings and communications in the review process, whether written, virtual, or telephonic, must be conducted without the presence of third parties, with the exception of witnesses called. However, any party to a review process may consult with counsel prior to the review process or during a break in the process.

(See “Review Committee” below.)

#### **4. Review Committee**

##### *a. Timing*

The Review Committee will meet, when possible, within 30 calendar days after notification of the chair of GMEC by the DIO in the event of Warning, Probation or events classified under Issues other than Corrective Action, and within 14 calendar days after notification of the chair of GMEC by the DIO in the event of Summary Suspension, Immediate Dismissal, Non-Renewal or Non-Promotion.

##### *b. Composition of the Review Committee*

The Review Committee consists of no fewer than six members of the current GMEC. The Executive Vice President for Medical Affairs and the DIO are not eligible to serve. In addition to the chair of the Review Committee, the Review Committee must contain an equal number of House Staff and faculty members,

but no fewer than three House Staff and three faculty members, none of which may be from the appealing House Staff's department.

Any member of the Review Committee (faculty or House Staff) who has a conflict or potential conflict of interest involving the appealing House Staff such that he or she cannot make an impartial and unbiased decision must recuse himself or herself from the committee and a new member of the Review Committee will be appointed by the Chair of the GMEC. However, to the extent the recused member has knowledge of or was involved in the events leading up to the corrective action, they may still be a witness. Likewise, if there is a conflict or potential conflict of interest between the Chair of the GMEC and the appealing House Staff, the Review Committee will elect an alternate chair for the purposes of the review. Otherwise, the Chair of the GMEC will chair the Review Committee.

If there is failure to reach a quorum, due to multiple recusals or other reasons, the DIO, or Chair of the Review Committee of the GMEC, shall appoint (a) new member(s) to the Review Committee. If, due to multiple recusals or other reasons, there are insufficient program directors from GMEC to meet the number required for composition of the Review Committee, the DIO or Chair of the Review Committee will appoint (a) new program director member(s) to the Review Committee from the broader pool of active program directors, none of which may be from the appealing House Staff's department. Likewise, if, due to multiple recusals or other reasons, there are insufficient House Staff from GMEC to meet the number required for composition of the Review Committee, the DIO or Chair of the Review Committee will appoint (a) new House Staff member(s) to the Review Committee from the pool of House Staff at VUMC, as long as the member has served more than 24 months in their current program. None of the appointees may be from the appealing House Staff's department.

The Review Committee may review the appeal only when a quorum of the Review Committee is present. A quorum shall consist of at least two of the House Staff members and at least two of the faculty members of the Review Committee. The Review Committee will meet in person. If an in-person meeting is not possible, measures will be taken to comply with the confidentiality of the process, utilizing a HIPAA complaint and secure conferencing format, either telephonic or video formats.

*c. Process for Review Committee*

All relevant records, including without limitation both the program and the GME file, and other documentation related to the disciplinary action, as well as names of potential witnesses will be provided to the Review Committee as a part of the

review process. The House Staff will be given equal access to all documents provided to the Review Committee.

The House Staff may, if they so desire, appear before the Review Committee and be given an opportunity to provide a statement, either verbal, written, or both. The House Staff may identify additional documents that they wish to be considered by the Review Committee. The House Staff also may identify witnesses they wish to be called and should provide a list of such witnesses to the Chair of the Review Committee who may request the witnesses to appear before the Review Committee. For each requested witness, the House Staff will provide first and last name, title, area of work, and reason they are being called as a witness.

The Review Committee will determine which witnesses, documents, and information that they will review in connection with the matter before them. The Review Committee can request additional witnesses or documents based on its review of available information. Witnesses are limited to those who were directly involved with the circumstances giving rise to the action or who are otherwise knowledgeable of the circumstances.

If there are allegations of discrimination, harassment or retaliation that have been investigated by VUMC Employee Relations, a representative of Employee Relations may appear as a witness and present their findings to the Review Committee.

The Chair of the Review Committee determines the appropriateness and number of witnesses to be called in order to provide a full and fair review of all relevant facts.

The review is conducted without the presence of attorneys in the room. However, any party to a review process may consult with counsel prior to such review or during a break in the proceedings. A transcript of the proceedings will be made.

After completion of the review, the Review Committee submits a written summary of the proceedings, evidence, and recommendations to the VUMC Executive Vice President for Educational Affairs, who makes the final decision. A copy of the summary is maintained in the GME Office and by the Chair of the Review Committee.

The VUMC Executive Vice President for Educational Affairs provides written notification of the final decision to the House Staff, the Program Director, the Department Chair/Clinical Service Chief, the DIO, and other appropriate persons for whom notification of the Review Committee's actions is deemed necessary.

**Revisions reviewed and Approved by GMEC: 6/12/2020**

## VI. GENERAL INFORMATION

### A. *PRESCRIPTIONS/DEA*

House Staff are assigned the Vanderbilt Hospital DEA number plus an identifying suffix. The DEA number is to be used for **VUMC patients only**. The Vanderbilt DEA number is **not** to be used for patients seen at affiliated hospitals/clinics (including VA), or family members or friends who are not Vanderbilt patients under the care of the House Staff. House Staff are not to self-prescribe.

For those House Staff who have a full, unrestricted Tennessee medical license and their own DEA number, a copy of their valid DEA certificate should be provided to the GME office. The House Staff may continue to use the institutional DEA for all practice at VUMC in which they are supervised by a VUMC faculty member, including internal moonlighting. The personal DEA number must be used for all external moonlighting, including that at VUMC if the House Staff is practicing independently.

### B. *ESKIND BIOMEDICAL LIBRARY*

The Annette and Irwin Eskind Biomedical Library (EBL) supports the education, research, and patient care mission of Vanderbilt University and the VUMC. It occupies the lower level and first floor of the Eskind Biomedical Library and Learning Center (EBL&LC). The library's comprehensive biomedical and health sciences collection is comprised of more than 40,000 print volumes. Online resources include 55 databases, 3,000 journals, and over 2,000,000 books. Reference and Instruction Librarians act as partners with the Vanderbilt community by providing research assistance and support such as literature searching and consultations, and training on various information resources and citation management programs. Appointments for library services are scheduled through our main number or the *Ask Biomedical* online form. Research assistance for current students, staff, and faculty is available in-person, or electronically through Skype for Business. Subject guides have been created by reference librarians to assist users with quickly identifying selected databases, books, and journals for specific courses or clinical specialties. The Interlibrary Loan/Document Delivery service can assist with finding and acquiring items not available in the Vanderbilt Library collection.

The library is physically open for an average of 100 hours per week, Sunday through Saturday. The library facility has a seating capacity of 200, 10 study rooms, and a new training/meeting room with flexible configurations that seats up to 36 persons. Technologically, the library has wireless network access throughout the facility, 14 desktop computers, three laptops available for checkout, and two multi-function printers.

The History of Medicine Collections is located on the third floor of EBL&LC. It maintains a unique collection of rare books, manuscripts, photographs, archival materials, and other items documenting the history of medicine and medical education at Vanderbilt University and in the State of Tennessee.

Additional print and electronic resources are available to the entire Vanderbilt community through the other campus libraries and special collections that form the Jean and Alexander Heard Libraries.

Contact Information	
Information Desk	(615) 936-1410
EBL Special Collections	(615) 936-1406
Library Links	
Homepage	<a href="http://www.library.vanderbilt.edu/biomedical/">http://www.library.vanderbilt.edu/biomedical/</a>
Special Collections	<a href="http://www.library.vanderbilt.edu/biomedical/special-collections/">http://www.library.vanderbilt.edu/biomedical/special-collections/</a>

**C. LONG DISTANCE CALLS (V-NET)**

Individual V-Net access codes are issued to House Staff authorized to place long distance calls. **Under no circumstances should a personal long distance call be charged to VUMC.**

**D. MEAL MONEY**

The GME Office provides funds for meals during some call hours. House Staff with overnight in-house call or predictable, continuing late evening patient care obligations (after 8:00 p.m.) are issued a Meal Money account for use on meals anywhere on VUMC campus (except the VUH Gift Shop) that accepts the Badge Bucks, accessed by presenting a VUMC ID Badge. The meal plan consists of dinner/breakfast for overnight in house call and dinner for predictable late evening patient care obligations after 8 p.m. A maximum of \$20.00 for any single purchase and/or a maximum of \$40.00 per day may be spent from the account. The dollar amount is reallocated each July 1<sup>st</sup>. Balances from the previous year **do not** carry forward. Questions regarding Meal Money may be directed to the GME Office at 615-322-4916.

Meal Money may not be used to purchase non-food items, including gift cards, at any outlet. If such purchases, including but not limited to gift cards and movie tickets, are made with Meal Money, then the amount of the purchase may be deemed taxable income and subject to reimbursement to the GME office for the amount of the purchase.

Additionally, House Staff may open a personal Badge Bucks account in order to add money via debit or credit card for use when on call funds are exhausted or if they want to have money on their card for other purchases. House Staff can access and manage their accounts online at: <https://get.cbord.com/vumc> by following the instructions at the GET link. Questions regarding Badge Bucks may be directed to the Card Services office at [newcard.vumc@vumc.org](mailto:newcard.vumc@vumc.org) or by calling 615-936-3350.

The Courtyard Café (hospital cafeteria) is located on the second floor of The Vanderbilt Clinic (TVC) and operates from 6:00 a.m. to 2:00 a.m. Also located on the second floor of the Vanderbilt Children's Hospital (VCH) is the Children's Way Café.

### **Policy revision effective 07/20/18**

#### **E. *WHITE COAT LAUNDERING***

House Staff can drop off their white coats for laundering in the South Lobby of Light Hall. A drop box is available toward the VA end of the lobby for white coats only: complete a ticket and place your coats and ticket in a bag (tickets and bags are in the small cabinet at the top of the drop bin). Pick up is in the GME Office in 303 Light Hall between 8am and 4:30pm. There is no charge to House Staff for white coat laundering.

#### **F. *FREE TICKETS FOR LOCAL ENTERTAINMENT/EVENTS***

From time to time, VUMC makes tickets available to the House Staff for a variety of local events.

Tickets are to be used by the House Staff and their guest or immediate family only. If the House Staff finds they cannot use the tickets they requested, the tickets must be returned prior to the event to the GME Office for redistribution. The House Staff is not to give the tickets to a third party including other House Staff, and may not under any circumstances resell tickets.

#### **G. *DISCOUNTS***

Human Resources maintains an extensive list of discounts available to VUMC employees at this link: <https://hr.vumc.org/secure/discounts-old>. Discounted options may include offerings under the "Health & Wellness" category.

All VUMC House Staff are eligible for ***two discounted season tickets*** for Vanderbilt Athletics (football, men and women's basketball and baseball). There are no discounts on single game tickets. Contact the Vanderbilt Athletic Ticket Office at (615) 322-GOLD (4653) or visit 2601 Jess Neely Dr. Nashville, TN 37211.

#### **H. *VANDERBILT UNIVERSITY PUBLIC SAFETY***

As one of Tennessee's larger law enforcement agencies, Vanderbilt University Public Safety (VUPS) provides comprehensive law enforcement and security services to all components of Vanderbilt University; including the academic campus, and a variety of University-owned facilities throughout the Davidson County area and VUMC and Vanderbilt Health at One Hundred Oaks. All of Vanderbilt's commissioned officers have completed officer training at a state-certified police academy. Vanderbilt University police officers have the same authority as municipal law enforcement officers, while on property owned by Vanderbilt, on adjacent public streets and sidewalks, and in surrounding neighborhoods.

Vanderbilt University police and Community Service Officers are first responders to any non-medical emergency, act of violence, or criminal act that occurs within and around VUMC. Direct radio and phone communications with local police and emergency medical personnel ensure that officers can initiate and direct additional emergency responders to the area if necessary. In an emergency situation, dialing 911 from any Vanderbilt telephone or (615) 421-1911 from a cell phone will contact the Vanderbilt University Public Safety communications center. A trained dispatcher will then direct the appropriate response to the emergency. For non-emergency calls to the Vanderbilt University Public Safety, call 2-2745 from any Vanderbilt phone or (615) 322-2745 from other phones. For more information about the department, programs and services go to <https://publicsafety.vanderbilt.edu>.

#### **Safe Walk/Safe Ride Services**

VUPS provides walking escorts to faculty, students, staff and guests walking to and from any location on campus. Call (615) 421-8888 (1-8888) from campus phones) for a safe walk. VandyRide shuttle-bus services are also available. For more information on VandyRide services go to [https://www.vanderbilt.edu/traffic\\_parking/alternative-transportation.php](https://www.vanderbilt.edu/traffic_parking/alternative-transportation.php).

## *I. HR EMPLOYEE SERVICE CENTER*

There are two HR Employee Service Center locations. HR Express–MCN is house in Medial Center North, while the other HR Express is located on the 2<sup>nd</sup> floor of 2525 West End Ave.

The Employee Service Center’s HR Express-MCN office provides in-person assistance with general Human Resources questions, such as employment or benefits.

Employees can also:

- purchase RTA/Music City Star tickets, movie tickets, and stamps, take advantage of [discounts](#) on products and services from participating businesses

### **Locations and Times**

- Medical Center North, D-2101 (HR Window):
  - Monday-Friday, 7:30 am – 11 am and 12 pm – 4:30 pm (lunch 11 am – 12 pm)
  - Note: HR Payroll, HR Benefits, W-4, and Personal Information Change forms accepted at this location.
- 2<sup>nd</sup> Floor, 2525 West End Avenue
  - Monday-Friday, 7:30 am – 5:30 pm

Questions regarding either HR Express Office can be directed to the Employee Service Center at (615) 343-7000 or [human.resources.vumc@vumc.org](mailto:human.resources.vumc@vumc.org) or visit their website: <https://hr.vumc.org/esc/>.

## *K. PERSONAL HEALTH AND WELLBEING – NEW PATIENT APPOINTMENTS*

In order to take the best care of one’s patients, one also must attend to one’s own health needs and well-being. VUMC, both through its own services and those of the Vanderbilt Health Affiliated Network (VHAN), provides House Staff with numerous outlets to obtain primary health care services.

VUMC health plan members now have access to a dedicated phone number — called Appointments Direct — that gives you preferred access to appointments with VUMC providers. Call (855) 724-2454 to schedule an appointment with a Tier 1 provider. <https://hr.vumc.org/news/appointments-direct-access-line-vumc-health-plan-members-now-available>

If a House Staff needs to establish themselves as a new patient with a Vanderbilt primary care physician, please send an email to [pc4newHS@vumc.org](mailto:pc4newHS@vumc.org) and state that you are VUMC House Staff. You will get a reply email that may ask for any preferences you have. You also

may sign up for My Health at Vanderbilt (the patient portal) and request a PCP through the portal at <https://www.myhealthatvanderbilt.com/>.

For women seeking primary care through a VUMC OB/GYN practice, please contact the access center by calling (615) 343-5700 and identify yourself as a Vanderbilt House Staff. You also may sign up for My Health at Vanderbilt at <https://www.myhealthatvanderbilt.com/> and request a PCP. As a new patient, you may also schedule an appointment through the portal at: <https://www.myhealthatvanderbilt.com/https://opensched.app.vumc.org/web/#/question/1417?specialtyId=53>. For newly pregnant patients, you can participate in our maternity bundle. Information is available at: <https://select.vanderbilthealth.com/mymaternitybundle.html>.

For Vanderbilt House Staff seeking providers within the Vanderbilt Health Affiliated Network (VHAN) but not specifically within VUMC, please refer to the Human Resources website, <https://hr.vumc.org/benefits>, for instructions on finding other providers within VHAN (all being Tier 1 level providers for all 3 VUMC-offered health plans).

For health care needs that are unexpected or immediate, use the Vanderbilt urgent care options. Find urgent care options at <http://vhan.com/quickcare>.

*L. MY HEALTH AT VANDERBILT*

My Health at Vanderbilt is a secure health information portal through which Vanderbilt patients can contact their physicians, request appointments, and view medical information and lab results. If House Staff are also patients of VUMC (including off-site locations), they may learn about it and sign up at <https://www.myhealthatvanderbilt.com/>.

# MEDICAL CENTER INFORMATION

## I. PROFESSIONAL CONDUCT

All VUMC personnel are expected to conduct themselves in a professional, collaborative, and cooperative manner consistent with VUMC Credo behaviors and applicable Vanderbilt University and VUMC policies and procedures, and to treat patients, visitors, students, and each other with courtesy, respect, and dignity. VUMC fosters a just and safe culture by addressing unprofessional, inappropriate, intimidating, disruptive, threatening, and violent behavior within the workplace.

### A. *VUMC CREDO*

- We provide excellence in health care, research, and education.
- We treat others as we wish to be treated.
- We continuously evaluate and improve our performance.

#### **Credo Behaviors**

- I make those I serve my highest priority
- I respect privacy and confidentiality
- I communicate effectively
- I conduct myself professionally
- I have a sense of ownership
- I am committed to my colleagues

### B. *VANDERBILT PATIENT AND FAMILY PROMISE*

VUMC is committed to excellence. We are taking our commitment a step further with the Patient and Family Promise:

- **Include** you as the most important member of your health care team
- **Personalize** your care with a focus on your values and needs

- **Respect** your right to privacy
- **Communicate** clearly and regularly
- Work with you to **coordinate** your care
- Serve you and your family with **kindness** and **respect**

We expect everyone at Vanderbilt to keep these promises to you and your family.

### *C. VUMC POLICIES*

All VUMC personnel (including House Staff) are required to abide by all VUMC Policies. VUMC Policies are all accessible on [PolicyTech. The PolicyTech system](#) is a robust document management system that provides a centralized repository for effective, streamlined content management. To access the most updated versions of all VUMC Policies refer to PolicyTech. The website is compatible with Internet Explorer, Google Chrome, Firefox and Safari. See the Learning Exchange website for directions about finding a policy on PolicyTech. Once you are on the Learning Exchange homepage, enter “PolicyTech” in the keyword search field.

If a current or incoming House Staff member requests to review any VUMC Policies and does not have a VUMC ID, they should contact the GME office.

### *D. DISCLOSURE*

There is an affirmative duty for House Staff to notify the ACGME DIO of arrests, convictions, and the disposition of any outstanding charges after the initial background check for employment is completed. There is also an affirmative duty for House Staff to report any adverse information resulting from subsequent criminal background checks obtained at any site during their employment as a House Staff at VUMC.

Failure by a House Staff to disclose an arrest or a criminal conviction to the DIO within five calendar days may result in corrective action, up to and including Immediate Dismissal from their training program. The facts and circumstances of each case will determine what, if any, action is taken, up to and including Immediate Dismissal, as appropriate.

## II. VUMC COMPUTERS AND CLINICAL APPLICATIONS

### General Information

- Clinical Workstations (CWS) provide staff access to VUMC applications.
- Icons for these applications and others are located on the desktop.
- The Digital Library Page at <https://www.library.vanderbilt.edu/biomedical//> has other available sources.
- All computers containing protected health information (PHI) or research health information (RHI) must be encrypted.

### To Access a VUMC Computer

- Due to the confidential nature of information contained in a patient's medical record users are authorized access to computerized patient records only after reading, signing and agreeing to the terms in the **VUMC CONFIDENTIALITY AGREEMENT**.
- House Staff receive their **VUMC CONFIDENTIALITY AGREEMENT** in their welcome packets in April.
- Also in their welcome communications, House Staff receive information about their VUMC ID and establishing a confidential password.

### To Receive Computer Assistance

House Staff can call the **Help Desk – (3-HELP or 3-4357)** 24 hours/day, 7 days/week. They may need to give the Help Desk their VUMC ID so that Help Desk staff can identify them in the system. It is acceptable for the House Staff to tell Help Desk staff their VUMC ID. Device & printer IDs may also be requested when applicable. Help Desk staff will triage the call to appropriate staff if unable to assist the House Staff.

### Mobile Phone Policy for House Staff

All House Staff and other VUMC employees are required to communicate patient and other VUMC Confidential Information securely and in compliance with applicable VUMC policies\*, laws, and regulatory requirements, including but not limited to those issued by The Joint Commission and Center for Medicare and Medicaid Services.

If a House Staff member with GME appointment is provided with a cell phone, all mobile communications regarding patient care are expected to occur within the secure applications

provided on the VUMC device. These phones will be serviced through the VUMC Help Desk and any damage or loss should be reported immediately to the VUMC Help Desk and the GME office. The House Staff member assigned the phone will be responsible for the proper care of the device. If it is determined that the device was damaged through improper use and lack of care in handling, the House Staff member may be required to pay for replacement.

House Staff appointed prior to July 2020 and who have a device with MDM installed, may continue to use a personal device for secure patient care communications and messaging. House Staff electing this option will be required to sign a memorandum of understanding that they will continue to use MDM and secure formats for patient care communications and will not be provided compensation for the phone, carrier service or other expenses related to their personal device. The choice for a GME issued iPhone or personal device must be made during the 2020 deployment of iPhones for House Staff.

\* The following policies are relevant and you may want to reference:

- Acceptable Use Policy  
<https://vanderbilt.policytech.com/dotNet/documents/?docid=11860>
- Electronic Messaging of Individually Identifiable Patient and Other VUMC Confidential or Sensitive Information  
<https://vanderbilt.policytech.com/dotNet/documents/?docid=16237>
- and the corresponding SOP Approved Messaging Mechanisms  
<https://vanderbilt.policytech.com/dotNet/documents/?docid=15548>
- Use of Mobile Devices to Conduct VUMC Business  
<https://vanderbilt.policytech.com/dotNet/documents/?docid=12525>
- and the corresponding SOP MDM Device Requirements:  
<https://vanderbilt.policytech.com/dotNet/documents/?docid=12526>

### **Pager Policy for House Staff**

Pagers will be provided for residents and fellows if a pager is required.

Pagers are an important part of the current communication system within VUMC and should be maintained and monitored while on and off campus and at other off-site rotations. If a member of the House Staff is not on call or does not have the ability to have their pager with them, it should be rolled to an appropriate number for that service in order to provide the best continuity of patient care.

Repair/replacement of damaged or malfunctioning pagers is handled through American Messaging. The pager office is located inside the entrance to Medical Center North across from the coffee shop or through contact with Shelley Moore  
[Shelley.Moore@americanmessaging.net](mailto:Shelley.Moore@americanmessaging.net). All pager numbers provided through GME will be maintained as GME pagers and assigned to specific training programs for re-use as new house staff join the training program. Pagers must be returned to the program

coordinator/program manager or program director at the end of the GME appointment and conclusion of training.

If a pager owned by the GME office is damaged or lost, requiring a replacement, the House Staff member will be expected to pay ½ the cost for a replacement (\$25) to VUMC through the GME office.

### III. SYSTEMS ACCESS AND CONFIDENTIALITY

Adherence to the highest standards of professionalism and to the VUMC information privacy and security policies is expected in the use of the electronic medical record. Maintaining and protecting the accuracy, integrity, and confidentiality of patient information entrusted to Vanderbilt providers is of paramount importance to safeguard patient safety, to provide high quality care supported by evidence-based decision support, and to minimize institutional risk associated with billing and regulatory compliance. Failure to preserve the integrity of the unique user identification associated with each individual granted access for use of the clinical information systems undermines the integrity of the clinical documentation and communication, as well as the privacy and confidentiality of the patient information.

It is recognized that technology solutions must be evaluated and implemented to facilitate the user sign-on process in busy clinical settings. However, commitment to the integrity of the unique user identification must not be compromised in the interim.

**Employee user IDs and passwords are equivalent to signatures. Employees should NEVER share passwords with others and never use or work under another person's ID/password. Users should always log off or lock their computer screens by pressing CTRL+ALT and DELETE and selecting "Lock Computer" anytime that they walk away from a computer. This practice helps ensure others do not use the computer under the wrong user ID and see confidential information they may not be authorized to access. Employees are accountable for any action taken under their user IDs and passwords.**

Clinicians may only access information related to the treatment of patients with whom they have a clinical relationship, for which they have been asked to provide a consultation, or whose records the clinician has written permission from the patient to access. Personnel are not authorized to access the medical record of co-workers, friends, or family members without written authorization (Communication with Family and Friends) from the patient unless they are directly involved in the care of that patient. Access to your own Electronic Medical Record (EMR) is view-only; changes, updates or any other actions inside your EMR are not allowed.

Electronic audit trails of accesses to patient information are conducted and maintained. These audit trails record the machine name, user, date, time and patient identification.

One of the VUMC Credo Behaviors is: "I respect privacy and confidentiality". Information that is obtained about a patient is strictly confidential and is legally protected from disclosure. It may be given to another employee or health care provider only when it is necessary to do so for the following reasons: (1) for the continuity of care, (2) in certain situations when required by law, or (3) when otherwise authorized by the patient. It must never be discussed with any other unauthorized person. Divulging such confidential information or any other departmental information deemed and explained by the department chair as confidential may result in

disciplinary action. HIPAA is a Federal Law and violations are FELONIES and can be tried in Federal Court, resulting in fines or potential imprisonment.

**Whenever a user prints a document containing patient information, it should always be placed in a shredder bin when finished.** Users should never throw patient information away in a regular trash can. Users should maintain appropriate confidentiality of papers listing patient identifiable information that they possess, as the papers can easily be left in a conference room or other area utilized by non-authorized individuals, thereby putting privacy and confidentiality of the information at risk.

If a clinician has an authorized business purpose for storing patient identifiable information on their computer, flash drive, or other mobile device, they are accountable for protecting the security and confidentiality of the information as outlined in VUMC policies, including encryption of the device.

Any violation of confidentiality and/or the terms in the **Confidentiality Agreement** may result in disciplinary action, including termination of access to the systems, and disciplinary action in accordance with [House Staff Information Section IV](#) of the House Staff Manual.

House Staff can direct questions or concerns about privacy to the Privacy Office at (615) 936-3594 or email: [Privacy.Office@vumc.org](mailto:Privacy.Office@vumc.org).

## VI. VIDEO POLICY FOR SIMULATION TRAINING

The Center for Experiential Learning and Assessment (CELA) is a state-of-the-art facility where House Staff will interact with high fidelity technologies and standardized patients, all designed to integrate simulation experiences with House Staff clinical training.

A powerful resource of CELA is the capability of videotaping House Staff learning and assessment experiences that take place there. Associated with this feature, Vanderbilt has established a detailed video policy and procedures document that governs the fair use of these video records. The policy outlines House Staff rights as learners and our responsibilities as faculty with regard to video records from CELA. It is House Staff responsibility to review the policy and acknowledge that House Staff are familiar with it.

Note that video recording is an integral part of the educational process established at Vanderbilt. As such recording House Staff performance in simulations is not an optional part of House Staff training.

Please follow this link, and type “CELA” in the “Find a Course” window:

<https://learningexchange.vumc.org/#/search/all/CELA>

## XI. NEWS AND COMMUNICATIONS

### A. *PHOTOGRAPHY*

Please reference the Patient Photography and Video Imaging policy in PolicyTech.

### B. *LOBBYING POLICY MAKERS*

VUMC's Office of Federal Relations and Office of State Government and Community Affairs (state and local government) coordinate government relations and lobbying activities in collaboration with senior leadership. No member of the VUMC community shall contact federal, state, or local officials on behalf of VUMC for purposes of lobbying or public policy advocacy without advance approval of either VUMC Office of Federal Relations or VUMC Office of State Government and Community Affairs, as determined by the level of government contact.

This policy only addresses the official representation of VUMC. Nothing in this policy is intended to restrict protected personal expression by a VUMC faculty, House Staff member, or staff member including expression on behalf of a professional society or other organization, on personal time using personal resources. Furthermore, this policy is not intended to restrict a VUMC faculty, House Staff member, or staff member from identifying their profession or place of employment in the context of personal communication with a government official. However, a VUMC faculty, House Staff member, or staff member expressing personal views must make it clear that they are expressing such views and is not stating an official position of VUMC, unless previously authorized to do so. The VUMC Office of Federal Relations or VUMC Office of State Government and Community Affairs assists faculty, House Staff member and staff in drafting statements that ensure that such views are placed in the correct context.

For assistance with federal lobbying efforts, contact the VUMC Senior Director of Federal Relations Alex Currie, [alex.currie@vumc.org](mailto:alex.currie@vumc.org). <https://www.vumc.org/federal-relations/>

For assistance with state or local lobbying efforts, contact the VUMC Senior Director of the Office of State Government and Community Affairs Matthew Scanlan, [matthew.j.scanlan@vumc.org](mailto:matthew.j.scanlan@vumc.org). <https://www.vumc.org/ogca/>

Selection from VUMC Policy: [Lobbying on Behalf of Vanderbilt University Medical Center](#)

## XII. GENERAL INFORMATION

All members of the House Staff are under the supervision of the Medical Staff. Members of the Medical Staff exercise that supervision under the guidelines established by the VUMC and its departments. House Staff who are approved to provide patient care may write orders. However, supervising members of the Medical Staff are responsible for the patient care and documentation activities of the House Staff they supervise.

### A. *ADMISSIONS AND DISCHARGES*

All patients will be admitted by a physician, certified nurse midwife or dentist member of the Active Staff or Visiting staff. The acceptance of a patient for treatment, including all related decisions, is the responsibility of the attending physician. Further information may be found in the "[Rules and Regulations of the Medical Staff of VUMC.](#)"

### B. *VUMC QUALITY IMPROVEMENT ACTIVITIES*

VUMC supports and maintains an integrated, systematic, and comprehensive improvement program designed to enhance the effectiveness, appropriateness, efficiency and processes of patient care. Systematic monitoring and evaluation of care is conducted at various levels in the organization which House Staff are active participants. These include activities including but limiting to mortality and morbidity conferences, departmental meetings and other ad hoc groups. Specific medical staff functions are monitored hospital wide and reported on a regular basis to the clinical services, Medical Board, Hospital Committee of the Board of Trust and other groups as needed.

### C. *VANDERBILT HOME CARE SERVICES (VHCS)*

The Vanderbilt Home Care mission is to provide excellence in home care with the high standards that we would expect for our own family and loved ones. Our vision is to support community-based home services through excellence in clinical practice and education. The values which drive our care, include patient safety and quality, strong interdisciplinary collaboration, communication and partnership, evidenced based practice, clinical expertise, and technology enhanced innovation.

Vanderbilt Home Care is a wholly owned subsidiary of VUMC and offers a streamlined process for transitions of care. In addition, our nurses and staff, many with advanced degrees, are willing to work in a variety of environments and situations.

VISITING TEAM: Our clinicians are specially trained in the complex care of pediatric and adult patients and provide treatments under a physician order.

**SKILLED NURSING:** Frequent services provided by our nurses include intravenous therapy (IV), wound care, medication management, assessment/evaluation, patient/caregiver education, and behavioral health.

**REHABILITATION SERVICES:** Physical, speech and occupational therapists establish and carry out rehabilitation programs.

Physical Therapy- Restore or improve mobility and function, home safety assessment (falls risk), transfer techniques and use of assistive devices (walker, wheelchair), home exercise program (strengthening exercises), equipment needs assessment

Occupational Therapy -Self-care training and assistance for activities of daily living (bathing, dressing, eating, grooming), functional limitations assessment, splint and adaptive equipment construction, low vision program, medication management program

Speech Therapy- Evaluation and treatment of speech, language, and communication difficulties, evaluation and treatment of swallowing difficulties, adaptive skills for sensory deficits (attention, memory, reasoning)

Medical Social Services: Services enhance medical treatment and support and maximize the psychosocial functioning and adjustments of patients and their families to meet their health care goals.

Home Health Aide Services: Support with bathing, dressing, and grooming.

**PRIVATE DUTY SERVICES:** Vanderbilt Home Care Services provides skilled nursing services up to 24 hours a day in the home for medically fragile children and adults. Home Health Aide services are available with varying hours to assist with personal care needs and safety issues. Companion services for individuals needing non-medical staffing in the home. Services may be covered by insurance or private pay arrangements.

**CASE MANAGEMENT AND REIMBURSEMENT SPECIALISTS:** Staff to assist with verification of benefits, pre-authorization of service and re-certification of continued care.

**Ordering Home Care Services/Referral Process:** Referrals can be sent by:

- Epic eStar Ambulatory Referral for Home Care
- Aidin
- Fax: (615) 936-2115

**Documents needed for a complete referral:**

- Order signed by a Doctor of Medicine (MD), Doctor of Osteopathy (DO), or a Podiatric Medicine (DPM).

- It is important to ensure that the order includes the discipline that the patient needs, skilled nurse to assess and instruct on disease process and medication management or physical therapy to evaluate and treat.
  - Ancillary staff can be ordered in addition to skilled nursing and physical therapy: occupational therapy, social work, speech therapy, and home health aide.
- Face to Face
  - A signed physician encounter within the past 90 days. It is important to ensure that the order includes the discipline that the patient needs (Skilled Nurses, Physical Therapy, Occupational Therapy, Social Work, Speech Therapy, and/or Home Health Aid) and that the encounter is directly correlated with the skilled need for home care.
- Homebound
  - Defined by CMS as someone that is normally unable to leave the home unassisted and infrequently because of an illness, injury or medical contraindication. Leaving the home must require a considerable and taxing effort by the patient. Patients only leave the home infrequently and for a short duration of time, such as going to church or to the barber.
- Intake Specialist are available to assist by phone at (615) 936-0336.

# QUICK PHONE GUIDE

For these or other VU and VUMC numbers, you can also go to the online directory (<https://peoplefinder.app.vumc.org/>).

VUMC Phone Use: To dial on campus phones (excluding VA) use last five digits of number

VUMC to VA communication: Calling VAMC: Dial 9-615-327-4751; if you know the extension, dial 9-615-873- \_\_\_\_ (4 digit extension).

- Office of Graduate Medical Education.....615-322-4916
- Emergency Services.....911 (or 615-421-1911 from a cell phone)
- Admitting (VCH).....615-936-4338
- Admitting (VUH).....615-343-0179
- Appointments Direct Access.....855-724-2454
- Center for Professional Health.....615-936-0678
- Federal False Claims Act Reporting hotline.....800-424-5197
- Emergency Registration (VCH).....615-343-7663
- Emergency Registration (VUH).....615-322-3391
- Eskind Biomedical Library.....615-936-1410
- First Report of Work Injury.....<https://veritas.app.vumc.org/>
- Occupational Health Clinic .....615-936-0955
- Office of Legal Affairs – Medical Center.....615-936-0323
- News and Communications.....615-322-4747
- Employee Relations.....615-343-4759
- Patient Relations.....615-322-8008
- Faculty and Staff Health and Wellness.....615-936-0961
- Pharmacy (Central).....615-322-0703

- Pharmacy (OHO).....615-322-2688
- Pharmacy (MCE) .....615-936-1040
- Pharmacy (TVC Outpatient).....615-322-6480
- Pharmacy (VCH).....615-322-0708
- Pharmacy (VCH Outpatient).....615-936-6337
- Risk and Insurance Management.....615-936-0660
- The SHARE Center.....615-936-1327
- Tennessee Donor Service.....888-234-4440
- Vanderbilt Environmental Health & Safety.....615-322-2057
- Vanderbilt University Public Safety.....615-322-2745
- VUPS Emergency.....615-421-1911
- VUPS Walking Escorts .....615-322-2745
- Vanderbilt Home Care.....615-936-0336
- Work/Life Connections-EAP.....615-936-1327