

UCSF FRESNO  
MEDICAL EDUCATION PROGRAM

Housestaff Handbook



Academic Year  
2009/2010

<http://www.fresno.ucsf.edu/ucsfhandbook/>

Note: UCSF Fresno policies described or referred to in this handbook are located at:  
<http://connections.fresno.ucsf.edu/ome> (GMEC Policies)

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# TABLE OF CONTENTS

Welcome to UCSF Fresno .....	4
Our mission: To Seek, Teach and Serve .....	4
UCSF Fresno's History .....	4
UC San Francisco .....	4
The University of California .....	4
The University of California Campuses .....	4
<b>Section I: HANDBOOK ORGANIZATION .....</b>	<b>5</b>
A. Purpose .....	5
B. Revision/Annual Review .....	5
C. Location and Distribution of Copies .....	5
<b>Section II: ABOUT UCSF FRESNO .....</b>	<b>5</b>
A. Mission and Goals .....	5
B. General Philosophy of the UCSF Fresno Medical Education Program .....	6
C. Medical Education Building and Offices .....	6
D. Customer Service Standards – Standards of Conduct and Principles of Community .....	7
<b>Section III: GRADUATE MEDICAL EDUCATION COMMITTEE (GMEC) .....</b>	<b>8</b>
A. Resident Educational Administration .....	8
B. ACGME Requirements and Resident Responsibilities .....	8
C. Responsibilities of GMEC .....	9
D. GMEC Membership .....	10
<b>Section IV: PROGRAM DIRECTOR – ACGME Requirements .....</b>	<b>11</b>
A. ACGME Requirements (effective July 2007) .....	11
<b>SECTION V. COMMISSION ON DENTAL ACCREDITATION - Requirements .....</b>	<b>12</b>
<b>Section VI: RESIDENT ACADEMIC AND ADMINISTRATIVE ISSUES .....</b>	<b>13</b>
A. Stipends and Benefits/Retirement Contributions .....	13
1.a. Benefits and Health Insurance .....	13
1.b. Retirement Contribution .....	13
2. Call Rooms .....	13
3. Certificate of Training Completion .....	14
4. Disaster Policy .....	14
5. Educational Funds .....	14
6. Employee Assistance .....	14
7. Fresno House .....	14
8. Health Exams, Immunizations and Blood Borne Pathogens .....	14
9. Housing/Living Quarters .....	15
10. Laundry .....	15
11. Reasonable Accommodation .....	15
12. Resident Time Off .....	15
a. General .....	15
b. Vacation leave .....	16
c. Bereavement Leave (Sick Leave) .....	16
d. Educational Leave .....	16
e. Jury Duty .....	16
f. Military Leave .....	16
g. Sick Leave .....	17
h. Leave of Absences .....	17
i. Make-up for Time on Leave .....	17
13. License Application Fees .....	17
14. Meal Allowance .....	18

15. Orientation Processing .....	18
16. Stipends.....	18
a. General.....	18
b. Chief Resident Stipend.....	19
B. Academic Issues.....	19
1. Appointment.....	19
3. Certification Requirements .....	19
4. DEA Requirements .....	19
5. Due Process/Grievance.....	19
6. Duties and Responsibilities .....	20
7. Duty Hours .....	20
8. Evaluation, Advancement, and Academic Records .....	20
a. Evaluations .....	20
b. Resident Academic and Employment Records.....	21
c. Review of Academic Records .....	21
9. Final Evaluation of Residents .....	21
10. Change of Resident Records .....	21
11. Job Description - Resident .....	22
12. Mechanisms to Raise Concerns.....	24
13. Medical Licensure.....	24
14. Moonlighting .....	25
15. Narcotic Registration (DEA) .....	25
16. Non Discrimination and Harassment.....	25
a. Non-Discrimination .....	25
b. Harassment .....	25
c. University Resident Wellness Committee .....	26
d. The Disruptive Resident.....	26
17. Professional Liability Coverage and Risk Management.....	26
a. Professional Liability.....	26
b. Risk Management – UCSF.....	26
18. Record Retention – Applicants to Residency Programs .....	27
19. Resident Forum .....	27
20. Resident Selection.....	27
21. Rotations (Off Campus Rotations) for UCSF Fresno Residents .....	27
22. Rotations to UCSF Fresno Medical Education Program .....	27
23. Separation Process (Check out).....	27
24. Standards of Conduct.....	28
25. Termination and/or Separation .....	28
C. Administrative Issues .....	28
1. Chief Resident Committee.....	28
2. Committee Membership.....	28
3. Confidentiality of Medical/Patient Information .....	28
4. E-mail Accounts.....	29
5. Medical Records Completion and Delinquency Policy .....	29
6. Mid-level Practitioners in the Training of Residents .....	29
7. Use of the World Wide Web, University Name, Seal or Logo and Publishing Guidelines, .....	29
8. Vendor Policy.....	30
APPENDIX A – Graduate Medical Education Committee .....	31
APPENDIX B – Contact List.....	32

## **Welcome to UCSF Fresno**

### **Our mission: To Seek, Teach and Serve**

Welcome to the UCSF Fresno Medical Education Program, a regional campus of the University of California San Francisco's School of Medicine. UCSF Fresno represents a unique medical education and physician training program that is a model for community/university partnership. This training program gives Central San Joaquin Valley residents access to the highest quality health care services while enabling doctors in training – working alongside the finest physicians – to experience the dynamic interplay of scholarship, research, patient care and health service in California's rural and agricultural center.

### **UCSF Fresno's History**

Establishment of a local medical school program had long been of interest in the Central San Joaquin Valley, where a shortage of physicians, special needs in rural health services, and limited access to continuing professional education were chronic problems. After several earlier attempts to attract a medical school to the Valley, interest and effort revived when a 1970 report of the Carnegie Commission of Higher Education and the Nation's Health identified Fresno as a desirable site for a "Health Science Center."

Under the leadership of Milo E. Rowell, a prominent Fresno attorney, the community gathered support for greater involvement of the University of California in local medical education. Mr. Rowell was influential in founding the San Joaquin Valley Health Consortium; an organization dedicated to the betterment of health care in the Valley, with particular focus on health professional education.

The feasibility of a permanent medical education program in the Central San Joaquin Valley was explored in a report prepared under the auspices of the Consortium with the aid of grant funds from the City and County of Fresno. The report was persuasive and resulted in the University's decision to plan a permanent clinical branch in the Valley with responsibility assigned to the UCSF campus. In 1975 the California State Legislature gave assurance of continued support of the program, and the UCSF Fresno Medical Education Program (MEP) was inaugurated. Since then the program has grown in size and scope, and continues to play an important role in answering the health care needs of the communities of the Central San Joaquin Valley.

Beginning in 2009, UCSF Fresno established an affiliation with the UCSF School of Dentistry. The Oral Maxillofacial Surgery training program. Policies, procedures and guidelines in this handbook apply to the OMFS residents.

### **UC San Francisco**

UCSF is one of ten campuses of the University of California and the only one devoted solely to the health sciences. Its reputation is hard to match. Peers rank the School of Medicine as one of the top five in the country. UCSF graduate programs in the basic and behavioral sciences attract students from around the world.

### **The University of California**

One of the largest and most renowned centers of higher education in the world, the University of California is dedicated to excellence in teaching, research and public service. The University was chartered in 1868 as the state's only Land Grant institution. The UC System as a whole continued to expand; to discover, promote and pioneer research in the years that followed. From 10 faculty members and 38 students, UC has grown to ten campuses, an enrollment of approximately 209,000 students, and employment of approximately 170,000 faculty, staff and academic personnel statewide. The University's revenues are generated from the State Treasury, local government, the Federal government, student fees and tuition, the teaching hospitals, endowments, gifts, grants, contracts, and a variety of educational activities.

### **The University of California Campuses**

The ten campuses of the UC system include Berkeley, Davis, Irvine, Los Angeles, Merced, Riverside, San Diego, San Francisco, Santa Barbara and Santa Cruz. Each campus boasts a unique environment and a variety of achievements, honors and academic disciplines.

## **Section I: HANDBOOK ORGANIZATION**

### **A. Purpose**

The purpose of this handbook is to outline the policies and procedures of the UCSF Fresno Medical Education Program (MEP) established by its Graduate Medical Education Committee (GMEC). These policies and procedures pertain to all medical students, medical and OMFS residency and fellowship programs and to all institutions affiliated with the UCSF Fresno MEP. For purposes of this handbook references to residents includes fellows. This handbook is not intended to replace the policies and procedures of individual participating institutions, medical departments, or residency programs. If areas of conflict develop, this handbook holds precedence; any such conflicts are to be evaluated by the GMEC.

### **B. Revision/Annual Review**

Revisions of this handbook are made by the GMEC as needed. The GMEC established a policy on the distribution of the handbook, inclusion of new policies, and policy changes or revisions. When additions, changes or revisions are made to the on-line residents' handbook, notice is sent to Program Directors, residency coordinators, residents and holders of the UCSF Fresno Housestaff Handbook as listed in Section 1.C.

### **C. Location and Distribution of Copies**

Copies of the UCSF Fresno Housestaff Handbook are located in the Office of the Associate Dean of the UCSF Fresno MEP, the Office of Medical Education and the residency program offices. The latest edition of the UCSF Fresno Housestaff Handbook can also be found at [www.fresno.ucsf.edu/ucsfhandbook/](http://www.fresno.ucsf.edu/ucsfhandbook/)

As part of orientation, residents are instructed about accessing the handbook on the UCSF Fresno web page: [www.fresno.ucsf.edu/ucsfhandbook/](http://www.fresno.ucsf.edu/ucsfhandbook/). By signing their annual Appointment Contract residents acknowledge access to the current UCSF Fresno Housestaff Handbook and their responsibility for understanding its contents. Questions about the handbook can be directed to individual Program Directors or the UCSF Fresno Office of Medical Education.

## **Section II: ABOUT UCSF FRESNO**

### **A. Mission and Goals**

The mission of the UCSF Fresno Medical Education Program is to improve the health of residents of California's Central San Joaquin Valley in the broadest sense. This mission is achieved by the following means:

- Providing academic stimulus to the health care community through continuing education and research;
- Providing the residents of the Central San Joaquin Valley access to the state-of-the-art primary and tertiary care of the University and affiliated clinical programs;
- Conducting medical student education with special emphasis in primary care, and residency training with emphasis in comprehensive primary and emergency care;
- Promoting the education of allied health professionals under the University aegis in the Central San Joaquin Valley;
- Providing patient and family care in the community through the medical education program;
- Facilitating a community of diverse peoples and languages to avoid illness and disability through public health concepts of health education, maintenance and prevention;
- Conducting research that emphasizes clinical, outcome-based, community-based, epidemiological and multidisciplinary studies.

In the tradition of excellence of the University of California, San Francisco, the UCSF Fresno MEP serves to provide the region with faculty whose academic aspirations and standards reflect that institution with emphasis on medical education, patient care, and clinical research. The goals of the Program are as follows:

- Teaching is directed at the clinical phases of medical education, including programs for medical students, residents, and physicians in practice;
- Fostering inter-institutional cooperation among affiliated hospitals to allow for the creation of

- successful integrated residency training programs, and with other institutions of higher education to strengthen capabilities for scholarly activities of teaching;
- Sustaining its integrity by maintaining close academic ties to the parent campus in San Francisco, while maintaining its regional perspective and the balance and interdependence of its local component programs.

In addition, the Program must be directly involved in health promotion for the people of the region. This includes active involvement of its leadership in community programs and educational activities, as well as promoting innovative health care delivery. The citizens of California's Central San Joaquin Valley should be aware of the important role played by UCSF Fresno in the professional, academic, and cultural life of the region.

## **B. General Philosophy of the UCSF Fresno Medical Education Program**

Although the care of patients remains the primary responsibility of each medical center, we recognize that effective teaching and research improve the quality of care we provide and benefit the larger community we serve. Using the variety of professional skills and technical knowledge available to us, we seek to develop the most effective diagnostic and therapeutic program for each patient. By applying the scientific research of our faculty, we strive to give each patient the benefits of the most advanced technology. By encouraging and supporting the efforts of our staff, we strive to guarantee each patient a sensitive, informed and caring experience. Maintaining high standards of technical and personal service not only ensures the best possible care for our patients but also provides the best possible learning environment for the many health professionals who train at UCSF Fresno.

We value the ethnic, cultural and social diversity of our patients. We seek to recognize the individual and complex needs of patients and their families while guaranteeing all are served promptly, courteously and with dignity. In working with the agencies that pay for care, we seek to reduce the financial barriers for those who wish to use our services. By communicating effectively and sharing the information we gain, we ensure patients, with their families and referring physicians, can participate appropriately in the care they receive.

Our ability to respond effectively to our patients begins with our commitment to work together and to serve each other with courtesy and mutual respect. In helping each other perform our responsibilities successfully and to develop our skills, we increase the resources available to our patients and promote the quality of services we provide. By managing our resources prudently, we assure effective care at the lowest possible cost. This allows us to develop new programs in response to the changing health care needs of our patients and advances in medical science and technology.

By anticipating changing health care needs and keeping abreast of new technology and new systems for the delivery and financing of health care, we insure that the medical centers affiliated with UCSF Fresno remain a valuable resource to the people of the Central San Joaquin Valley.

## **C. Medical Education Building and Offices**

***The Associate Dean's Office*** is the administrative base for the UCSF Fresno MEP. The Dean's office is located on the second floor of the UCSF Fresno Center for Medical Education and Research (UCSF Fresno Center). It provides administrative support and coordination of overall program activities and serves as the principal liaison with the parent campus in San Francisco. The Associate Dean serves as the Designated Institutional Official (DIO) for the UCSF Fresno residency program.

The state-of-the-art UCSF Fresno Center is part of the Community Medical Centers (CMC) Regional Medical Center campus in downtown Fresno. The UCSF Fresno Center features virtual classrooms, a standardized patient center, a medical library and research facilities. The Center allows centralization of key administrative functions.

***Office of Medical Education*** (Suite 251 in the UCSF Fresno Center) has responsibility for administrative oversight of residency programs, medical student and CME educational activities for the UCSF Fresno MEP. This includes policy development and adherence monitoring; organization and presentation of issues to GMEC; regulatory accreditation and site visit preparation; oversight and coordination of program budgets; coordination of residency recruitment and orientation activities; maintenance of overall training records and verification; assistance with licensure regulations, core competency development, etc.

***Office of Undergraduate Medical Education*** (Suite 251 in the UCSF Fresno Center) is delegated the responsibility of medical student placement and education throughout the UCSF Fresno program. As a regional campus of the UCSF School of Medicine, UCSF Fresno offers medical students core and elective clinical clerkships.

The offices of ***Continuing Medical Education*** and ***Continuing Dental Education*** (Suite 251 in the UCSF Fresno Center) are responsible for coordinating continuing education activities for physicians and dentists in the Central San Joaquin Valley. Their mission includes ongoing development, conduct and evaluation of courses, conferences and materials that provide lifelong learning opportunities and enhance patient care delivery. Participants gain CME credits toward licensure requirements under the auspices of the UCSF School of Medicine.

#### **D. Customer Service Standards – Standards of Conduct and Principles of Community**

The following standards incorporate policies and principles of conduct for customer service, professional behavior and expectations of all health care providers and staff. These standards apply to all faculty, staff, residents, and medical students while at any of the facilities affiliated with the UCSF Fresno MEP and are founded on common sense and courtesy. All persons with whom you interact are to be treated with courtesy, sensitivity, and respect at all times. It is an expectation that all staff, residents and medical students make the "extra effort" to insure a professional, gracious, and overtly hospitable environment for patients, visitors, and colleagues. It is our goal to maintain an atmosphere of personal and institutional excellence where outstanding performance is expected. Physicians are held to the highest standards of professionalism. It is expected that the learning environment will facilitate and reinforce behaviors and attitudes of mutual respect between teachers (faculty, residents and staff) and medical learners (residents and students). (See UCSF Fresno intranet <http://connections.fresno.ucsf.edu/ome/> GMEC Policies, 'Code of Conduct, and the UCSF Medical Student Statement of Principles'.)

UCSF third year medical students participate in a number of programs in Fresno. Fourth year students from UCSF and other medical schools come to UCSF Fresno for elective rotations. Residents are expected to fulfill their role as patient care providers and as teachers. All programs place high priority on the resident's responsibility for teaching and acting as role models to the medical students. The main points of the "Student Statement of Principles" include maintaining the highest standards of honesty, confidentiality, respect for others, and responsibility. [http://medschool.ucsf.edu/professional\\_development/careers/pdfs/nuts2.pdf](http://medschool.ucsf.edu/professional_development/careers/pdfs/nuts2.pdf)

Patients and visitors are guests in our institutions. As such, all staff, students and residents are encouraged to:

- treat patients and their families with respect and dignity both in their presence and in discussions with other members of the health care team;
- interact with patients in ways that ensure their privacy and respect their modesty;
- interact with all members of the health care team in a considerate and cooperative manner;
- not tolerate discrimination on the basis of race, gender, religion, sexual orientation, age, disability or socioeconomic status;
- judge colleagues fairly and attempt to resolve conflicts in a manner that respects the dignity of every person involved;
- address patients and visitors by their surnames unless asked to do otherwise by the patient or visitor;
- wear photo identification badges at all times while on duty. ID badges should be worn above the waist and clearly visible (in compliance with Title XXII of the California Administrative Code.);
- maintain a neat and professional personal appearance at all times.

In addition, the University has established a Statement of Principles emphasizing dedication to an environment of teaching, research, patient care and public service.

[http://www.ucsf.edu/about\\_ucsf/principles.html](http://www.ucsf.edu/about_ucsf/principles.html)

"Several principles of community life are established to guide individual and group actions on the campus. Adherence to these principles is essential to ensure the integrity of the University and to achieve campus goals. UCSF faculty, staff and

students are asked to acknowledge and practice these basic principles of community life:

- We affirm that members of the campus community are valued for their individual qualities and members are encouraged to apply their unique talents in creative and collaborative work.
- We recognize value and affirm that social diversity contributes richness to the University community and enhances the quality of campus life for individuals and groups. We take pride in our various achievements and we celebrate our differences.
- We affirm the right of freedom of expression within the UCSF community and also affirm commitment to the highest standards of civility and decency toward all persons. We are committed to creating and maintaining a community where all persons who participate in University activities can work together in an atmosphere free of all forms of abusive or demeaning communication.
- We affirm the individual right of public expression within the bounds of courtesy, sensitivity and respect. We recognize the right of every individual to think and speak as dictated by personal belief, to express individual ideas and to state differences with other points of view, limited only by University requirements regarding time, place and manner.
- We reject acts of discrimination, including those based on race, ethnicity, gender, age, disability, sexual orientation, and religious or political beliefs.
- We recognize that UCSF is devoted to public service and we encourage members of the campus community to participate in public service activities in their own communities and we recognize their public service efforts in off-campus community settings.
- We affirm that each member of the campus community is expected to work in accord with these principles and to make individual efforts to enhance the quality of campus life for all. “

### **Section III: GRADUATE MEDICAL EDUCATION COMMITTEE (GMEC)**

#### **A. Resident Educational Administration**

The Accreditation Council for Graduate Medical Education (ACGME) requires that there be an organized administrative system to oversee all residency programs sponsored by an institution. In addition, there must be a designated institutional official (DIO) who has the authority and responsibility for the oversight and administration of the GME programs. Institutional officials, administrators of GME, Program Directors, faculty, and residents must have access to adequate communication technologies and technological support to include at least computers and access to the Internet.

#### **B. ACGME Requirements and Resident Responsibilities**

Institutions must have a GMEC that has the responsibility for monitoring and advising on all aspects of residency education in compliance with the requirements of the ACGME (Institutional Requirements IV.A, IV.B). Voting membership on the committee must include residents nominated by their peers. It must also include appropriate Program Directors, administrators, the accountable DIO, and may include other members of the faculty. The committee must meet at least quarterly. Minutes must be kept and be available for inspection by accreditation personnel.

The GMEC of UCSF Fresno hereby adopts the following responsibilities for the Committee as per ACGME Institutional Requirements (*GMEC Adopted March 2007*).

Residents and fellows have the responsibility for understanding and following requirements of ACGME (and/or ADA if applicable), both institutional and program-specific. These include but are not limited to participation in annual resident surveys, participation on committees and councils, completion of required documentation for institutional and program accreditation (e.g. duty hour reporting, evaluations, Program Information Forms (PIFs), case logs, etc.). Residents and fellows must also understand and follow

established policies and procedures regarding ACGME required core competency standards and other program-specific requirements.

### **C. Responsibilities of GMEC**

The ACGME institutional requirements state that the UCSF Fresno Graduate MEP must:

- Establish and implement policies and procedures regarding the quality of education and the work environment for the residents in all ACGME-accredited programs.
- Review annually and make recommendations to the Sponsoring Institution on resident stipends, benefits, and funding for resident positions to assure that these are reasonable and fair.
- Establish and maintain appropriate oversight of and liaison with program directors and assure that program directors establish and maintain proper oversight of and liaison with appropriate personnel of other institutions participating in the ACGME-accredited programs of the Sponsoring Institution.
- Establish and implement formal written policies and procedures governing resident duty hours in compliance with the Institutional and Program Requirements. The GMEC must assure that the following requirements are met:
  - Each ACGME-accredited program must establish formal written policies governing resident duty hours that are consistent with the Institutional and Program Requirements. These formal policies must apply to all participating institutions used by the residents and must address the following requirements:
    - The educational goals of the program and learning objectives of residents must not be compromised by excessive reliance on residents to fulfill institutional service obligations. Duty-hours and call schedules must be monitored by both the Sponsoring Institution and programs and adjustments made as necessary to address excessive service demands and/or resident fatigue. Duty hours, however, must reflect the fact that responsibilities for continuing patient care are not automatically discharged at specific times. ACGME-accredited programs must ensure that residents are provided appropriate backup support when patient care responsibilities are especially difficult or prolonged; and,
    - Resident duty hours and on-call time periods must be in compliance with the Institutional and Program Requirements. The structuring of duty hours and on-call schedules must focus on the needs of the patient, continuity of care, and the educational needs of the resident.
  - The GMEC must develop and implement procedures to regularly monitor resident duty hours for compliance with the Sponsoring Institution's policies and the Institutional and Program Requirements.
  - The GMEC must develop and implement written procedures to review and endorse requests from programs prior to submission to an RRC for exceptions in the weekly limit on duty hours up to 10 percent or up to a maximum of 88 hours. All exceptions requested must be based on a sound educational rationale. The procedures must outline the process for endorsing an exception in compliance with the ACGME policies and procedures for duty-hour exceptions. The procedures and their application, if the institution has utilized them, will be assessed during the institutional review.
- Assure that ACGME-accredited programs provide appropriate supervision for all residents consistent with proper patient care, the educational needs of residents, and the applicable Program Requirements. Supervision of residents must address the following:

- Residents must be supervised by teaching staff in such a way that the residents assume progressively increasing responsibility according to their level of education, ability, and experience.
- On-call schedules for teaching staff must be structured to ensure that supervision is readily available to residents on duty.
- The teaching staff must determine the level of responsibility accorded to each resident.
- Assure that each program provides a curriculum and an evaluation system to ensure that residents demonstrate achievement of the six general competencies listed in Section III.E and as defined in each set of Program Requirements.
- Establish and implement formal written institutional policies for the selection, evaluation, promotion, and dismissal of residents in compliance with the Institutional and Program Requirements.
- Regularly review all ACGME program accreditation letters and monitor action plans for the correction of concerns and areas of noncompliance.
- Regularly review the Sponsoring Institution's Letter of Report from the IRC and develop and monitor action plans for the correction of concerns and areas of noncompliance.
- Review and approve prior to submission to the ACGME:
  - all applications for ACGME accreditation of new programs and subspecialties;
  - changes in resident complement;
  - major changes in program structure or length of training;
  - additions and deletions of participating institutions used in a program;
  - appointments of new program directors;
  - progress reports requested by any Review Committee;
  - responses to all proposed adverse actions;
  - requests for increases or any change in resident duty hours;
  - requests for "inactive status" or to reactivate a program;
  - voluntary withdrawals of ACGME-accredited programs;
  - requests for an appeal of an adverse action; and,
  - appeal presentations to a Board of Appeal or the ACGME.
- Conduct internal reviews of all ACGME-accredited programs including subspecialty programs to assess their compliance with the Institutional Requirements and the Program Requirements of the ACGME Residency Review Committees in accordance with the guidelines in Section V of the Institutional Requirements.

#### **D. GMEC Membership**

The Associate Dean of the UCSF Fresno Medical Education Program is responsible for making appointments to the GMEC. Voting membership is comprised of the Associate Dean, the DIO, one voting member per residency program, all residents present, one institutional partner vote per major institution and others as

determined by the GMEC. Currently there are a total of twenty-four (24) members. A quorum will have been established at eight (8) voting members. GMEC membership is outlined in Appendix A.

## **Section IV: PROGRAM DIRECTOR – ACGME Requirements**

### **A. ACGME Requirements (effective July 2007)**

#### **Qualifications of a Program Director**

#### II. Program Personnel and Resources

##### A. Program Director

1. There must be a single Program with authority and accountability for the operation of the program. The sponsoring institution's GMEC must approve a change in Program Director. After approval, the Program Director must submit this change to the ACGME via the ADS.  
*... and details as further specified by the specific Review Committee*
2. The Program Director should continue in his or her position for a length of time adequate to maintain continuity of leadership and program stability.
3. Qualifications of the Program Director must include:
  - a) requisite specialty expertise and documented educational and administrative experience acceptable to the RC;
  - b) current certification in the specialty by the American Board of (*as appropriate*), or specialty qualifications that are acceptable to the RC; and
  - c) current medical licensure and applicable medical staff appointment.  
*...and as further specified by the Review Committee*
4. The Program Director must administer and maintain an educational environment conducive to educating the residents in each of the ACGME competency areas. The Program Director must:
  - a) oversee and ensure the quality of didactic and clinical education in all sites that participate in the program;
  - b) approve a local director at each participating site who is accountable for resident education;
  - c) approve the selection of program faculty as appropriate;
  - d) evaluate program faculty and approve the continued participation of program faculty based on evaluation;
  - e) monitor resident supervision at all participating sites;
  - f) prepare and submit all information required and requested by the ACGME including but not limited to the program information forms and annual program resident updates to the ADS, and ensure that the information submitted is accurate and complete;
  - g) provide each resident with documented semiannual evaluation of performance with feedback;
  - h) ensure compliance with grievance and due process procedures as set forth in the Institutional Requirements and implemented by the sponsoring institution;
  - i) provide verification of residency education for all residents, including those who leave the program prior to completion;

j) implement policies and procedures consistent with the institutional and program requirements for resident duty hours and the working environment, including moonlighting, and, to that end, must:

- (1) distribute these policies and procedures to the residents and faculty;
- (2) monitor resident duty hours, according to institutional policies, with a frequency sufficient to ensure compliance with ACGME requirements.
- (3) adjust schedules as necessary to mitigate excessive service demands and/or fatigue; and
- (4) if applicable, monitor the demands of at-home call and adjust schedules as necessary to mitigate excessive service demands and/or fatigue;

k) monitor the need for and ensure the provision of back up support systems when patient care responsibilities are unusually difficult or prolonged.

l) comply with the sponsoring institution's written policies and procedures in compliance with the Institutional Requirements for selection, evaluation and promotion of residents, disciplinary action, and supervision of residents;

m) be familiar with and comply with ACGME and RC policies and procedures as outlined in the ACGME Manual of Policies and Procedures;

n) obtain review and approval of the sponsoring institution's GMEC/DIO before submitting to the ACGME information or requests for the following:

- (1) all applications for ACGME accreditation of new programs;
- (2) changes in resident complement;
- (3) major changes in program structure or length of training;
- (4) progress reports requested by the RC;
- (5) responses to all proposed adverse actions;
- (6) requests for increases or any change to resident duty hours;
- (7) voluntary withdrawals of ACGME-accredited programs;
- (8) requests for appeal of an adverse action;
- (9) appeal presentations to a Board of Appeal or the ACGME; and
- (10) proposals to ACGME for approval of innovative educational approaches; and

o) obtain DIO review and co-signature on all program information forms, as well as any correspondence or document submitted to the ACGME that addresses:

- (1) program citations, and/or
- (2) requests for changes in the program that would have significant impact, including financial, on the program or institution;

... and as further specified by the RC.

## **SECTION V. COMMISSION ON DENTAL ACCREDITATION - Requirements**

The Commission is recognized by the public, the profession and the US Department of Education as the specialized accrediting agency in dentistry. Accreditation, a voluntary effort of all parties involved, ensures accredited training programs are in compliance with published standards.

The Department of Oral and Maxillofacial surgery is accredited by the CDA.

The CDA specifically outlines qualifications and expectations of the Program Director and Teaching Staff, details of curriculum and program content, eligibility and selection of students/residents, evaluation and due process, rights and responsibilities as well as research requirements. Details of CDS requirements and standards can be located at [www.ada.org](http://www.ada.org).

The CDA Standards require that the program must develop clearly stated goals and objectives appropriate to advanced specialty education; document its effectiveness using a formal and ongoing outcomes assessment process to include measures of advanced education student/resident achievement.

- The financial resources must be sufficient to support the program's stated goals and objectives.
- The sponsoring institution must ensure that support from entities outside of the institution does not compromise the teaching, clinical and research components of the program.

All policies and procedures, benefits and requirements referred to in this handbook apply to oral maxillofacial surgery residents as well as medical residents and fellows.

## **Section VI: RESIDENT ACADEMIC AND ADMINISTRATIVE ISSUES**

### **A. Stipends and Benefits/Retirement Contributions**

#### 1.a. Benefits and Health Insurance

Residents are employees of the University of California, San Francisco and are eligible to participate in resident benefits such as health, dental and vision plans offered through UCSF. Coverage begins on the first day of employment. There are two health plans from which to select.

At the time of employment, information will be provided regarding the specific health plans available. Residents should read the information and select the coverage best suited to their needs and situation. Residents must register themselves and their qualified dependents on the enrollment forms provided and return all such forms to UCSF Fresno Human Resources within thirty (30) days of employment.

UC policy requires that changes to coverage for 'major life changes' must be made within thirty (30) days of the event (i.e. marriage, divorce, birth of child, etc.)

**Open enrollment for residents is established by the University. Currently open enrollment for residents is during the months of June/July each year.**

Insurance coverage ends on the last day of employment. As part of end-of-employment processing (check-out) residents are provided information about eligibility and instructions for arranging coverage under COBRA. Residents have 60 (sixty) days from the last date of employment to arrange COBRA coverage.

For questions and detailed information about pay and benefits, residents should contact the UCSF Fresno Human Resources Office at (559) 499-6416 or on line at <http://www.fresno.ucsf.edu> (Medical Education, Information for Residents) or <http://atyourservice.ucop.edu/>

#### 1.b. Retirement Contribution

Based on your employment by the University as a Resident Physician you are required to contribute 7.5% of your monthly wages to the UC's Defined Contribution Plan-Safe Harbor Account. (NOTE: Only a few/rare exceptions to this requirement might prevail, e.g., due to visa/tax-treaty status). Enrollment is automatic and begins the first day of an eligible appointment. This automatic contribution into your own pre-tax UC Retirement Savings account is in lieu of the requirement to pay Social Security payroll taxes.

There are no provisions to opt-out of DCP SH participation nor are there any options to opt-in to Social Security. Upon separation from the University you may request a distribution to be paid to you or arrange for a direct rollover of your money to an IRA or other qualified employer plan.

These contributions default into a relatively conservative investment option among the UC-managed CORE Funds availability at Fidelity Retirement Services. To learn more about changing prospective investment options and/or making changes to existing accumulations/investments, the participant would be well-advised to log into Fidelity's website at [www.netbenefits.com](http://www.netbenefits.com)

### 2. Call Rooms

Resident call rooms are located at each affiliated training site. The number and location of call rooms vary according to training site and program. It is the resident's responsibility to check with his/her program office for specific locations of call rooms, access codes and/or keys.

### 3. Certificate of Training Completion

Upon recommendation of the Program Director, residents will receive a certificate indicating completion of training in the UCSF Fresno MEP. Both the resident's respective Program Director and the Associate Dean of the UCSF Fresno MEP sign the certificate. The certificate is presented to the resident upon completion of the routine checkout procedure. In the event original certificates are misplaced or destroyed, only a photocopy of the official file copy (with a UC seal) can be provided to the resident after receipt of a written request from the resident. (See current policy on the UCSF Fresno intranet.)

### 4. Disaster Policy

The ACGME requires every Sponsoring Institution have a written plan to address administrative support for GME programs and residents in the event of a disaster or interruption in patient care. If an adequate educational experience cannot be provided for each resident/fellow due to a disaster, UCSF Fresno will follow established procedures to assess the event's effect on training programs; communicate with ACGME and training partners on plans for program reconfigurations and/or resident transfer decisions; and assist with dissemination of appropriate training records when necessary. (See *Disaster Policy* on the UCSF Fresno intranet site under "GMEC Policies")

### 5. Educational Funds

In order to provide additional resources to enhance the educational environment, funds are provided to each program. Each year approximately \$500 per resident FTE (as of September 1) will be available for educationally related activities. Disbursement of the funds is at the discretion of the chief/program director of the program.

### 6. Employee Assistance

The UCSF Fresno MEP offers assistance to residents who may be having trouble due to chemical dependency, or physical, psychological, financial, or emotional problems. Please refer to the Impairment Policy on the UCSF Fresno OME intranet, under GMEC policies <http://connections.fresno.ucsf.edu/ome/> and references noted below.

#### Resident Resources and Resident Well-Being Committee

Dr. Craig Campbell is available to consult with residents who are experiencing academic difficulty on an "as needed" referral or self-referral basis. Dr. Campbell may be reached at (559) 499-6580 or 320-0580. UCSF Fresno also has a Resident Well Being Committee for referrals for resident impairment issues. (See Section B.15.c. for additional information on the University Resident Wellness Committee.)

#### INSIGHT

As employees of UCSF, residents have access to the INSIGHT Employee Assistance Program. INSIGHT is a program established to promote employee health and wellness. The services are confidential and free to residents as UCSF employees. INSIGHT provides counseling assistance for such personal challenges as marital/family issues, drug/alcohol dependencies, or emotional and work related problems. The service is available to residents and members of their household. You may contact INSIGHT directly at (559) 226-7437.

### 7. Fresno House

UCSF Fresno maintains a 3-bedroom apartment near the UCSF campus in San Francisco for use by residents, faculty and staff while on official business in San Francisco. Please refer to GMEC Fresno House Policy at <http://connections.fresno.ucsf.edu/ome/> for details, reservation forms and instructions. Use of the Fresno House is on a first come, first served basis and preference is given to residents on approved rotations. If you have questions, please call the Office of Medical Education at 499-6520.

### 8. Health Exams, Immunizations and Blood Borne Pathogens

a. Physical examination. California law requires that documentation of a recent physical examination be received prior to employment. In order to satisfy this requirement, a Pre-Placement Health Statement will be provided to new residents prior to employment for completion and signature by a Licensed Health Care Provider. This statement will verify that the individual resident is free of symptoms indicating the presence of infectious disease.

b. Rubella, Measles, Mumps and Varicella Screening. The US Public Health Service and the California Department of Health Services recommend that health care personnel be screened for rubella and measles

antibodies. In order to satisfy this requirement, a Pre-Placement Health Statement will be provided to new residents prior to employment to document the required screening tests and/or vaccinations. Submission of supporting documentation will be required.

c. Hepatitis B. A safe and effective vaccine is available for hepatitis B and is strongly recommended for all residents. The vaccine consists of three (3) injections at predetermined intervals. The initial dose should be received prior to employment. Arrangements may be made through CMC Employee Health to initiate and/or complete the series. If a resident declines the hepatitis B vaccination, the vaccination declination form within the Pre-Placement Health Statement must be signed.

d. Tuberculin Skin Test. Under current CDC guidelines, individuals in high-risk areas are required to have a two-step tuberculin skin test prior to employment and be tested annually thereafter. All staff with patient contact are considered to be in high-risk areas and must comply with this testing requirement. These tests will be provided by Community Medical Centers free of charge. Program offices will be notified when residents are due for tuberculin screening tests. UCSF Fresno Human Resources will monitor compliance with this requirement.

e. Workers Compensation (On-the-job injuries, Blood/Body Fluid Exposures). Initial management of OJI's, Blood/Body Fluid Exposures including counseling, assessment of risk and treatment (including medications) will be initiated at the training site where the exposure occurs. Report to Employee Health Services during office hours or the Emergency Department after hours. **You must contact UCSF Fresno Human Resources at (559) 499-6416 within 24 hours of the occurrence for further instructions.**

Residents may be required to sign a release of information so that records can be obtained from the site where the incident occurred.

Reappointment and continued employment may be held in abeyance pending resident participation each year in required health screening.

#### 9. Housing/Living Quarters

UCSF Fresno does not provide housing to residents in Fresno. Information from third parties about housing opportunities, apartments, realtors and relocation services is made available to new residents as part of orientation in-processing. Information about the community is available on line and may also be made available to applicants at the time of interview.

#### 10. Laundry

Provision of laundry services varies according to training site. It is the resident's responsibility to check with his/her program office regarding specifics.

#### 11. Reasonable Accommodation

UCSF Fresno provides reasonable accommodations to otherwise qualified residents/fellows who become disabled and need assistance to perform the essential functions of their positions. Contact Human Resources and your Program Director for further assistance.

#### 12. Resident Time Off

**Please note: Effect Leave May Have on Training Completion:**

**Absences from the training program may jeopardize the resident's credit for training and additional training may be required by the specialty Board or the RC. Each Board and RC has established requirements for maximum allowed time away from the training program. Residents should discuss leave issues with their Program Director prior to arranging leaves of absence to determine any implications leave time may have on training requirements.**

##### a. General.

As employees of UCSF, residents' time off is established as follows:

1. At the beginning of each academic year, residents who are expected to be in the program for the entire year shall be given a bank fifteen (15) days of vacation leave, twelve (12) days of sick leave and up to five (5) days of educational leave.
2. Residents in the program less than a full academic year will be given a prorated allocation

- of hours for their time in the program.
3. Residents are exempt, salaried employees under state and federal wage and hour laws and are not eligible for overtime compensation.
  4. Residents may utilize accrued leave to receive pay for approved absences for vacation, medical/dental care, dependent care or personal business. Failure to provide required notification of unscheduled leave usage will be grounds for denial of said vacation and/or sick leave for the duration of the absence and/or Corrective Action.
  5. Members of the program support staff in the resident's home program office are responsible for maintaining records of leave time used and reporting same to UCSF Fresno Human Resources. Therefore, all unscheduled absences must be reported immediately both to the resident's home program office and the rotation site or service affected by the absence, regardless of rotation site.
  6. A resident's failure to provide accurate, timely reporting of absences may be grounds for corrective action up to and including dismissal. See Leave Policy for Residents at [www.fresno.ucsf.edu/intranet/ome](http://www.fresno.ucsf.edu/intranet/ome) (GMEC Policies link.)

b. Vacation leave

Each resident is entitled to use the defined number of vacation days established by policy. Residents wishing to use vacation leave shall submit their requests in writing and receive advanced approval from their Program Director (or designee), except in emergencies. In considering requests for the use of vacation leave, Program Directors shall consider the desire of the resident as well as the needs of the program.

**It is UC policy that vacation time does not accrue from year to year  
and must be scheduled and taken in the same academic year the vacation is accrued.**

c. Bereavement Leave (Sick Leave)

The UCSF Fresno leave policy allows sick time to be used to make arrangements for and attend the funeral of designated family members. Please see the UCSF Fresno Resident Time Off for additional information [www.fresno.ucsf.edu/intranet/ome](http://www.fresno.ucsf.edu/intranet/ome) (under GMEC Policies).

d. Educational Leave

- Residents shall be entitled to up to five (5) days of educational leave each academic year.
- Resident's educational leave not used during an academic year may not be carried over to the following year.
- Educational leave may be used for private study as well as attendance at medical conferences, seminars, or symposia as approved by the Program Director.
- All requests for educational leave must be approved in advance by the appropriate Program Director and should be submitted as early in the academic year as possible. Requests made late in the academic year may be subject to denial.

e. Jury Duty

A resident called to Jury Duty or to Grand Jury Duty will not suffer a loss of regular pay for those days when one would otherwise be scheduled to perform their resident duties. A resident is obligated to keep their department, and appropriate rotation service supervisor apprised of the status once a jury summons has been received. Only the court, pursuant to the procedure outlined in your Jury Summons Notice, can grant deferment or excused absence from jury service. Deferment or excused absence is generally not granted for inconvenience but may be granted for reasons of personal health or undue hardship, as determined by the court on a case-by-case basis.

If a resident receives a jury summons they should contact their program office for required modifications of schedules and/or patient responsibilities.

f. Military Leave

If a resident is called for military duty, they should contact their program office. UCSF Fresno residents are eligible for Short Term Military leave (30 days) with pay or Extended Military Leave (up to 4 yrs) without pay. Please refer to the UCSF Fresno 'Leave Policy for Residents' at [www.fresno.ucsf.edu/intranet/ome](http://www.fresno.ucsf.edu/intranet/ome) (GMEC policies).

g. Sick Leave

Each resident is entitled to twelve (12) days per academic year for personal illness or disability (or bereavement as noted in 'c.' above). In addition, any available educational or vacation leave may be used to cover illness or disability that exceeds twelve (12) days of sick leave. Any incident of sick leave over 3 days may require medical certification from the resident's health care provider. Residents on sick leave for 3 days or more will receive Family and Medical Leave information that describes rules and regulations under the policy.

Members of the program support staff in the resident's home program office are responsible for maintaining records of leave time used. Therefore, all unscheduled absences must be reported immediately both to the resident's home program office and the rotation site or service affected by the absence, regardless of rotation site.

A resident who becomes ill or injured during scheduled vacation will not be permitted to change their leave status to sick leave for the duration of the vacation.

When on sick leave, residents shall give notification to the Program Director and off service rotation (if applicable) each day they are scheduled to work but are unable to report. In the event of a prolonged illness/injury the Program Director may waive this requirement.

**Sick leave balances do not carry over from year to year. It is UC policy that sick leave remaining at the time a resident leaves the training program is forfeited. Please refer to the UCSF Fresno Leave Policy for Residents for details [www.fresno.ucsf.edu/intranet/ome](http://www.fresno.ucsf.edu/intranet/ome) (GMEC Policies).**

h. Leave of Absences

UCSF Fresno supports a work and training environment that offers solutions to the complex issues individuals face in balancing their work and family commitments. <http://connections.fresno.ucsf.edu/ome/> (GMEC Policies 'Leave Policy for Residents'.)

Various types of leaves of absences are available to residents such as:

- Medical Leave (Includes Family and Medical Leave)
- Personal Leave
- Extended Military Leave

i. Make-up for Time on Leave

If it is determined that training necessary for successful completion of an academic year or to satisfy Board requirements is lacking due to excessive leave time, additional time to make up these experiences will need to be negotiated on an individual basis with the program and involved members of UCSF Fresno. Pay status for the time spent in making up training will be determined prior to commencement of the make-up activity. The provision of make-up training is subject to the availability of an appropriate residency position; the operational needs of the program (including funding constraints); the requirements of applicable law; and University policy.

13. License Application Fees

Residents who apply for licensure within the first six (6) months of eligibility for licensure\* will receive a check for the initial application fee (amount applicable at the time of application) made payable to the appropriate medical licensing authority. Residents who transfer in to a UCSF Fresno residency program may be eligible for fee reimbursement if their 6-month eligibility period occurs while at UCSF Fresno. Medical license renewals are not included in this application fee reimbursement benefit. Contact your program office regarding required documentation and paperwork completion.

Exceptions to this eligibility period for the purpose of fee reimbursement are made only in extraordinary circumstances and are made at the discretion of the Associate Dean or his/her designee.

\*Eligibility is defined by guidelines from the licensing authority (Medical Board of California or Osteopathic Medical Board). US graduates (MDs and DOs) are eligible for licensure after having completed one year of

residency. International medical school graduates are eligible after having completed two years of residency. All residency training in the United States (or Canada) is counted toward these requirements.

International medical school graduates pay medical license application fees at the time they obtain their Postgraduate Training Authorization Letter from the Medical Board of California. Residents may be eligible for reimbursement of the license application fee when the required residency training is complete (i.e. at the end of two years of residency training). Please check with your program office regarding documentation requirements for reimbursement of the fee. See also: Medical Licensure, Section B.12.

#### 14. Meal Allowance

Residents on duty have access to adequate and appropriate food services 24 hours a day in all institutions. Each facility has its own policies regarding the provision food for residents. Residents should check with their program office for information regarding meal benefit and charging policies at the various rotation sites.

##### a. Community Medical Center (CMC) facilities

- Breakfast and lunch is available at the CRMC Physician Lounges Monday through Friday. Lunch is available at the Cedar Campus Monday through Friday
- Residents are responsible for food purchased from CRMC cafeteria between 7 am to 6 pm weekdays. Residents using their badges to obtain food in the CRMC cafeteria during these hours will be billed at the end of the academic year. Each resident will be responsible to pay the balance of their account before advancing or graduating.
- When on call (6 pm to 7 am on weekdays, all day Saturday, Sunday and holidays) residents can obtain food through the cafeteria line.
- Meals in the physician lounges are limited to physicians and residents only while on-site for professional reasons, and should **not** be obtained for family members, hospital staff, or any other individuals
- Use of this benefit is monitored and abuses will result in corrective action or withdrawal of this benefit.

##### b. Veteran's Administration Central California Health Care System

While performing in-house call at the VA Central California Health Care System, dinner and breakfast are provided in the resident call room. Residents should check with their program office for additional information.

##### c. Children's Hospital Central California (CHCC)

Residents may charge meals while on duty at CHCC. Residents receive a credit of \$20.00 for each day on call (including at-home call). Night float can accumulate and carry over credit. Bills should be paid within one month of leaving the facility. At the time of check out, residents will be required to pay any outstanding amount owed.

#### 15. Orientation Processing

Before beginning duty at UCSF Fresno new residents must complete an orientation program organized by the Office of Medical Education and Human Resources. Residents will be asked to complete paperwork necessary to enroll them in health plans, provide data for the UC pay and benefit system, and meet University and other regulatory requirements. Additionally, before beginning duty residents will be asked to complete a comprehensive health history evaluation and have a physical examination completed by a physician (or qualified nurse practitioner or physician's assistant). At the discretion of the Associate Dean, residents will not be allowed to begin duty until such health information is provided to UCSF Fresno.

#### 16. Stipends

##### a. General

Concurrent with appointment to the UCSF Fresno MEP residents are employees of UCSF. Residents are exempt, salaried employees of UCSF and are not eligible for overtime compensation or extra duty pay.

- Salary scales for residents are set by the Regents of the University of California and are reviewed annually by the UCSF Fresno GMEC. Employment packages describe Fresno pay and benefits.
- Salary amounts are contained in the UCSF Fresno appointment contract and are also available from each program office, the UCSF Fresno Office of Medical Education, or on the UCSF Fresno intranet site ([www.fresno.ucsf.edu](http://www.fresno.ucsf.edu)). See "Pay and Benefits" link under each residency program home page.

b. Chief Resident Stipend

Chief Residents shall be compensated one hundred fifty dollars (\$150) per calendar month for their services. Co-chief resident assignments are compensated at appropriate prorated amounts.

- Chief Residents will be selected by their Program Director with concurrence from the Office of Medical Education.
- The duties of the Chief Residents will be defined by their Program Director and may be rotated among the residents.
- Residents who are appointed to an additional year beyond the normal residency training period for that program to serve as Chief Resident (i.e. PG4 residents in Internal Medicine) will be compensated at the appropriate PG level pay range and are not be eligible for the additional monthly chief resident stipend.

## **B. Academic Issues**

### 1. Appointment

Residents are given University appointments at the UCSF School of Medicine. Each resident is appointed for a duration of not more than one (1) year. Titles for resident appointment are postgraduate year 1 through 6 and Chief Resident. During training residents are employees of the University of California San Francisco (UCSF).

Appointments for postgraduate years 1 through 6 are made by the School of Medicine after nomination by the Program Director based upon the number of years of training accepted by the Board in the particular specialty or subspecialty. Residents must be graduates of medicine or osteopathic medicine and must adhere to regulations established by the State of California for licensure.

Reappointment to the training program for a subsequent year is not automatic. Reappointment for a period of not more than one (1) year may be arranged, contingent on mutual agreement, an annual review of satisfactory performance or better, funding availability, and program need.

### 2. Transfers

ACGME Common Program Requirements (III.C.) contain the following language regarding core competence verification for residents transferring from one residency program to another:

#### Resident Transfers

1. Before accepting a resident who is transferring from another program, the program director must obtain written or electronic verification of previous educational experiences and a summative competency-based performance evaluation of the transferring resident.
2. A program director must provide timely verification of residency education and summative performance evaluations for residents who leave the program prior to completion.

Additionally, residents transferring to UCSF Fresno from other programs must meet all applicable program, University, and California regulatory requirements.

### 3. Certification Requirements

All programs require certification in ACLS and/or PALS before beginning clinical work. Training is offered to new residents during orientation week. Recertification may be arranged by contacting CMC's Systems Education at (559) 459-3936. The course is free; however, there is a charge for class materials.

### 4. DEA Requirements

All programs require residents to obtain DEA certificates. Residents should check with their program offices regarding specific requirements and procedures for obtaining the tamper-proof triplicate prescription blanks. Some programs may qualify for a DEA fee exemption. Please see the Resident Licensure policy for more information. [www.fresno.ucsf.edu/intranet/ome](http://www.fresno.ucsf.edu/intranet/ome)

### 5. Due Process/Grievance

The UCSF Fresno 'Academic Due Process' policy is a guideline for an orderly means of resolving differences.

This policy is a guideline to inform residents of their right to due process when appealing or grieving an academic action taken by UCSF Fresno. (See UCSF Fresno intranet, GMEC Policies [www.fresno.ucsf.edu/intranet/ome](http://www.fresno.ucsf.edu/intranet/ome))

## 6. Duties and Responsibilities

Residents are responsible to the Program Director to whom they have been assigned for all matters pertaining to the professional care of patients. They are responsible to the Associate Dean and the Chief Medical Officer/Chief of Staff at each facility to which they are assigned for matters of administrative policy and procedure.

Within the resident appointments, order of rank is Chief Resident and resident steps 6 through 1. Residents participate in the care of all teaching patients (subject to the jurisdiction indicated above) and perform other miscellaneous duties of a professional nature. Residents are responsible for the review and co-signature of clinical records as directed by policy and procedures established by the institutions to which they are assigned.

Residents will adhere to the duty schedules (rotation and call) as announced by the Program Director or designee. Requests for changes in assigned schedules must be cleared using procedures established by the appropriate program office. Informal, unapproved "switches" in schedules between residents are not acceptable.

### **Call Schedules**

The location of on-line call schedules varies by program. Residents should check with their program office for information about the location of and access to call schedule information. Each program is responsible for keeping schedules up-to-date. Questions about the posted schedule should be directed to program offices directly. Residents taking call from home should check with their respective Program Director regarding any response time requirements.

### **Rotation schedules**

The location of program rotation schedules varies by program. Residents should check with their program office for further information. Residents should check with their home program office prior to beginning rotations at an affiliated site to obtain the necessary procedures for reporting to the rotation site. Upon arrival for a rotation in an affiliated hospital, residents must report to the appropriate office to complete necessary paperwork. Residents are responsible for adhering to the policies and procedures established by the GMEC, the institutions in which they function and their individual residency programs.

## 7. Duty Hours

Resident duty hours are governed by ACGME guidelines and are monitored by the Graduate Medical Education Committee via its Duty Hours Subcommittee and individual programs. All efforts should be made to maximize educational opportunities while minimizing fatigue and service requirements. Monitoring duty hours is intended to minimize the possibility of fatigue related errors and to enhance the learning environment. Residents are required to comply with the duty hours requirements and report their hours completely and accurately. Failure to report hours completely and accurately constitutes grounds for disciplinary action ranging up to and including dismissal from the UCSF Fresno (See UCSF Fresno intranet, <http://connections.fresno.ucsf.edu/ome/> 'Comprehensive Resident Duty Hour Policy').

As part of the orientation process residents sign a statement that includes language from the ACGME Common Program Requirements indicating their understanding and agreement that it is the resident's responsibility to report duty hours accurately, honestly and in a timely fashion.

## 8. Evaluation, Advancement, and Academic Records

### a. Evaluations

Residents will normally receive written evaluations from the faculty and supervising residents at the end of rotations and summary evaluations semi-annually. Evaluation documentation must meet or exceed requirements in published ACGME/RC guidelines. UCSF Fresno residency programs utilize a residency management software program called E\*Value. Evaluations track the knowledge, skills and professional growth of the residents using appropriate criteria and procedures. Residents will be notified if an evaluation indicates unsatisfactory performance and should be provided with a mechanism for correcting any

deficiencies. If remediation is not satisfactory, it may be cause for probation or dismissal from the program. A resident's advancement to a position of higher responsibility will be made only on the basis of an evaluation of his/her readiness for advancement, as appointment is on a year-to-year basis only.

b. Resident Academic and Employment Records

The UCSF Fresno MEP upholds the highest standards regarding the management of resident academic records and confidentiality. Faculty and administrative staff may have access to resident records on a need-to-know basis in the course of employment, performance improvement, research, or education/training. All such information is confidential in accordance with Civil Code Section 1798-1798.1 and Civil Code Section 56.20-56.245 for medical information confidentiality laws, rules and regulations. A violation of this policy may result in corrective action up to and including termination of employment or training. Misuse of medical data and/or inappropriate release or disclosure of information may result in penalties for violation of medical privacy, as covered under Federal law (HIPAA).

Disclosure of resident information and requests from outside parties shall require an appropriate signed release from the resident specifying what information UCSF Fresno shall disclose. Exceptions to this policy may apply for requests from State and/or Federal agencies where UCSF Fresno is required to respond to requests for information, inspections, or investigations.

c. Review of Academic Records

The UCSF Fresno GMEC established a policy for review of academic records. See UCSF Fresno intranet, <http://connections.fresno.ucsf.edu/ome/>. Residents shall have access to their own academic records, both while employed and after termination of their academic training by written request. Resident review of academic files shall be scheduled at a reasonable time by appointment. Residents may request an appointment by completing a 'Request to View Academic File' form and submitting the form to the residency program or the Office of Medical Education. The form is available on the UCSF Fresno intranet site: [www.fresno.usf.edu/intranet/ome](http://www.fresno.usf.edu/intranet/ome) (within the policy).

A resident may not remove any items from his/her record. Record review shall occur while in the presence of an appropriate individual as designated by the Office of Medical Education or the Program Director. Residents may request a copy of their academic file; however, photocopying charges may be assessed. Residents may request that responses to evaluations or disciplinary actions or other relevant information be inserted as a part of their academic record. Additional file requirements may apply as defined in the UCSF Fresno 'Academic Due Process' policy.

9. Final Evaluation of Residents

The Program Director or his/her designee will provide a written final evaluation for each resident who satisfactorily completes the program. The evaluation will be based on performance during the final period of training and must verify that the resident has demonstrated sufficient professional ability to practice competently and independently. ACGME Common Program Requirements (II.A.4.i.) also outline the Program Director's responsibility for providing verification of residency education for any resident who may leave the program prior to completion of his/her training.

10. Change of Resident Records

As it pertains to any trainee's academic training/employment record, an individual may request a correction or deletion of a record under the Academic Due Process policy by submitting a written request to the Program Director of the trainee's clinical program. Within thirty (30) days of receipt of a written request to amend or delete a record, the Program Director will either make the amendment or deletion or inform the individual in writing that the request has been denied.

Within thirty (30) calendar days of the Program Director's response, the individual may request that the Associate Dean, or designee, review the request to amend or delete the record. The Associate Dean or designee will respond to the individual in writing within thirty (30) days from the receipt of the request to review. If the Associate Dean or designee refuses to amend or delete the record(s), the individual shall have the right to enter into the record a statement setting forth the reasons for the individuals disagreement with the record. (Please see UCSF Fresno intranet, <http://connections.fresno.ucsf.edu/ome/> GMEC Policies, 'Academic Due Process Policy')

## JOB DESCRIPTION – RESIDENT

### 11. Job Description - Resident

A resident is an individual at any level of graduate medical education in a program accredited by the Accreditation Council for Graduate Medical Education (ACGME) or sponsored by UCSF Fresno and having a developed curriculum and course of study. Trainees in subspecialty programs and in fellowships are specifically included. Graduate medical education programs focus on the development of clinical skills and professional competencies. Residents are classified according to their postgraduate year (PGY 1-6) of training.

#### General Duties and Accountabilities of Residents-in-Training

1. Provide safe, effective, and compassionate patient care under supervision of the faculty licensed independent physician (LIP) commensurate with level of training and responsibility.
2. Residents, as individuals, must be aware of their limitations and must not attempt to provide clinical services or do procedures for which they are not trained. They must know the graduated level of responsibility described for their level of training and not practice outside of that scope of service. Each resident is responsible for communicating to the supervising faculty physician LIP significant issues as they relate to patient care. Such communication must be documented in the record.
3. As a part of their training program, residents will be given progressive responsibility for the care of the patient. The determination of a resident's ability to provide care to patients without a supervising physician present, or act in a teaching capacity, will be based on documented evaluation of the resident's clinical experience, judgment, knowledge, and technical skill. This includes the direct supervision of more junior residents and students within the supervising resident's defined competencies and remains under the responsibility of the supervising faculty LIP. Ultimately, it is the decision of the supervising faculty LIP as to which activities the resident will be allowed to perform within the context of the assigned levels of responsibility. The overriding consideration must be the safe and effective care of the patient that is the personal responsibility of the supervising faculty LIP. The faculty LIP may delegate some aspects of supervision to more senior residents who have been delegated these responsibilities by virtue of their more senior training and experience. Because neither the resident nor allied health professionals are faculty LIP's, neither can formally supervise the other and both must remain under the supervision of their respective faculty LIP. Any procedure performed must be within the defined competencies of one and its responsibility falls back to that individual's faculty LIP.
4. Fulfill all requirements established by the Accreditation Council for Graduate Medical Education (ACGME; Residency Review Committee (RC) for medical residents; the American Dental Association (ADA) for OMFS residents; and the Bylaws and Rules and Regulations of the Medical Staff of facilities to which residents may rotate.
5. Perform all duties in accordance with the established practices, procedures, and policies of the institution, and those of its programs, clinical departments, and other institutions to which the resident is assigned, including California state licensure requirements for physicians in training.

#### Resident Responsibilities:

The UCSF Fresno Medical Education Program is centered on the six core competencies of the ACGME. These competencies are reflected in all aspects of the residency program. The goal of this competency-based education is to graduate physicians who are at level of competency comparable to that of a privately practicing physician. To this end, several job responsibilities prepare the resident for this aim:

1. Residents are expected to document all procedures and/or case logs according to their specialty requirements. (*Professionalism, Patient Care*)
2. Residents are expected to participate in the evaluation processes specified by the program. (*Practice-Based Learning and Improvement, Professionalism*)
3. Residents are expected to act professionally towards all staff, patients, and colleagues. This includes answering pages, being responsive to families, program offices, and GME administration. (*Professionalism, Interpersonal Communication Skills*)
4. Residents are expected to have medical record documentation that is timely, accurate, and legible, and indicates appropriate supervision and identifiers (name, ID#) as determined by the institution's office of

- medical records. (*Professionalism, Patient Care, Interpersonal Communication Skills*)
5. Residents are expected to abide by duty hours restrictions and document duty hours as specified by the program. (*Professionalism*).
  6. Residents are expected to accurately report duty hours in the manner determined by their program. (*Professionalism*)
  7. Residents are expected to keep patient safety as their primary priority. (*Patient Care, Professionalism, Systems-Based Practice*)
  8. Residents are expected to assist both medical students and fellow residents in meeting their professional obligations by serving as teachers and role models. (*Practice-Based Learning and Improvement*)
  9. Residents are expected to satisfactorily complete all rotations. (*Patient Care, Medical Knowledge*)
  10. Residents are expected to be knowledgeable about rotation goals and objectives prior to the start of a rotation. Questions about goals and objectives of a rotation should be clarified with the supervising faculty at the outset of the rotation. (*Medical Knowledge*)
  11. Residents are expected to develop a personal program of self-study and professional growth. (*Medical Knowledge, Practice-Based Learning and Improvement*)
  12. Residents are expected to participate fully in the educational and scholarly activities of the program. Expected levels of attendance for educational activities will be set by each program and these should be met. (*Medical Knowledge, Practice-Based Learning and Improvement*)
  13. Residents are expected to participate in program improvement activities for programs as well as health care institutions. (*Systems-Based Practice*)
  14. Residents are expected to inform the person(s) that the program designates in the case of an absence. (*Professionalism*)
  15. Residents are expected to participate in institutional programs and activities involving the medical staff and adhere to established practices, procedures and policies of the institution. (*Professionalism, Systems-Based Practice*)
  16. Residents are expected to perform assigned duties in a safe and healthful manner, observing established safety policies and practices, calling to management's attention actual or potential hazards requiring correction. Attend training sessions identifying safety hazards. (*Patient Care, Systems-Based Practice*)
  17. Residents are expected to perform all duties in compliance with applicable regulatory standards. This includes required licensing, knowledge base and education to ensure compliance with JCAHO, Title XXII, and other guidelines. (*Medical Knowledge, Practice-Based Learning*)
  18. Residents are expected to notify management of any breaches of standards and contribute to improvement processes. (*Systems-Based Practice*)
  19. Residents are expected to perform other related duties as assigned.

MOONLIGHTING POLICY: UCSF Fresno has specific policies regarding moonlighting. Please refer to Appendix A "Duty Hours Monitoring" policy.

Job Qualifications:

Before beginning residency training, UCSF Fresno and the State of California require medical residents to be eligible for physician licensure, including graduation from an accredited school and passage of required examinations.

Licensure:

Licensure is required for graduates of US schools before they may begin their 25th month of residency training. Licensure for international graduates is required before the beginning of their 37th month of residency training.

Program Specific Resident Procedural Competencies:

See listing of procedural competencies by Postgraduate (PG) year available in program offices. For residents on off-service rotations, procedural competencies will travel with the resident. Other procedures beyond those listed by program and PG year will require additional or direct supervision.

- End of Resident Job Description -

## 12. Mechanisms to Raise Concerns

UCSF Fresno has several mechanisms in place to allow residents to raise and resolve concerns. These options are discussed at resident forums, on-line via the Housestaff Portal, in program meetings and via posters placed in resident areas.

- The DIO/Associate Dean meets on a rotating basis with residents from each of the programs
- A resident forum is held quarterly
- Residents may meet individually with the DIO/Associate Dean, and
- Confidential communication is available via email, phone and a suggestion box.

## 13. Medical Licensure

The California Medical Practice Act permits US (Canadian and Puerto Rican) medical and osteopathic school graduates to practice medicine within the scope of their ACGME-approved training program without a license for the first 24 months of residency, but requires registration with the Medical Board of California. Registration forms are provided to new residents by and are processed through the UCSF Fresno Office of Medical Education. For US school graduates (medical and osteopathic), if, at the end of the 24th month of training, a license is not obtained, all privileges and exemptions shall automatically cease. (California Business and Professions Code, Section 2065.)

California law permits all graduates of international medical schools to practice within the scope of their ACGME-approved training program without a license for the first 36 months of postgraduate training (or meet other specific requirements if licensed in another state in the US). All residents are required to register with the Medical Board during such training. They then have an additional year in which to obtain medical licensure. Graduates of international medical schools must have a California medical license before beginning their 37th month of residency training. If, at the end of the 36th month of training, a license is not obtained, all privileges and exemptions shall automatically cease.

**It is the responsibility of the resident to know, understand and meet all applicable licensure laws.**

Trainees who have not obtained a license within the applicable time frame will not be allowed to perform further clinical duties. If licensure is pending, and with the approval of the Program Director and the Office of Medical Education, the resident may request an unpaid leave of absence in accordance with UCSF Fresno policies. If an unpaid leave of absence is granted, the resident must first use all available paid leave. Resumption of training once a California medical license has been obtained will be at the sole discretion of the residency program. A resident may not continue to be registered with UCSF until a license from the State of California is obtained as required.

### License Renewals

Once residents are licensed, they are professionally responsible for maintaining a current, valid medical license. Practicing medicine without a valid license may lead to disciplinary action. California state law specifically prohibits licensed physicians from practicing with an expired license. It is the expectation of the UCSF Fresno residency training programs to require residents to meet state law and have no clinical contact if they don't have a valid license. If a resident's license has expired, the program may choose to assign the resident to strictly academic, laboratory, library, research or other types of duties not involving patient care responsibilities, use vacation if available, or other appropriate leave which may include suspension without pay or termination from the residency training program.

### Licensure resources:

UCSF Fresno organizes a 'license fair' each spring, providing an opportunity for residents to obtain licensure photographs, fingerprinting and notary public services. Eligible residents will be provided details.

Medical license packets are available on line.

MD licensure applications: <http://www.medbd.ca.gov>

DO licensure applications: [http://www.ombc.ca.gov/application\\_pkg.pdf](http://www.ombc.ca.gov/application_pkg.pdf)

For residents unable to attend the scheduled license fair:

Photographs can be provided by the UCSF Fresno Educational Graphic Arts Department (EGAD).

Contact EGAD (499-6672) to obtain your current photo or to make an appointment for a new photo.

LiveScan fingerprints (required for anyone residing in California) are **not** provided by UCSF Fresno except during the license fair. Further information about agencies that provide LiveScan fingerprints, locations and fees, is available online through the Medical Board of California website. [www.medbd.ca.gov](http://www.medbd.ca.gov)

#### 14. Moonlighting

UCSF Fresno believes that the first priority of each resident is to achieve the goals and objectives of the training program. This is to produce, in the broadest sense, a fully competent physician capable of providing high quality care to his/her patients. Without compromising this goal, it may be feasible for some residents to seek outside professional activities - "moonlight" - if the resident adheres to the guidelines within this policy.

Moonlighting is defined as "working as a physician outside of one's authorized training program".

UCSF Fresno has adopted a policy regarding moonlighting which is included in the policy section of this handbook. (See the UCSF Fresno intranet <http://connections.fresno.ucsf.edu/ome/> GMEC Policies,

"Comprehensive Resident Duty Hours" Each individual must understand that UCSF malpractice insurance does not cover external moonlighting activities.

ACGME Institutional Requirements require all sponsoring institutions to have a written policy addressing professional activities outside the educational program (to include moonlighting). UCSF Fresno policy specifies that residents must not be required to engage in moonlighting. Additionally, all residents engaged in moonlighting must be licensed for unsupervised medical practice in the state where the moonlighting occurs. The institution hiring the resident is responsible for determining whether such licensure is in place, that adequate liability coverage is provided, and that the resident has the appropriate training and skills necessary to carry out assigned duties.

ACGME and UCSF Fresno policy require that the resident submit a prospective, written request to his/her Program Director detailing the proposed moonlighting activities. The request must be approved by the Program Director and is made part of the resident's file. Such request indicates that the resident's performance will be monitored for the effect of these activities upon performance and that adverse effects may lead to withdrawal of permission to moonlight.

#### 15. Narcotic Registration (DEA)

All UCSF Fresno training programs require residents to obtain DEA certificates. Residents should check with their program offices regarding specific requirements and procedures for obtaining DEA numbers and the tamper-proof triplicate prescription blanks. Some programs may qualify for a DEA fee exemption. Please see the licensure policy for more information.

#### 16. Non Discrimination and Harassment

##### a. Non-Discrimination

UCSF Fresno prohibits harassment and other forms of discrimination. No member of the UCSF Fresno MEP will be discriminated against because of race, color, religion, marital status, national origin, ancestry, sex, sexual orientation, physical or mental handicap, mental condition (as defined in Section 12926 of the California Government Code), status as a Vietnam-era veteran or special disabled veteran, or within the limits imposed by law or University regulations, because of age or citizenship. For full text of the policy, please refer to the web site: <http://www.ucsf.edu/oshpr/fresno.html> (Visit the UCSF Fresno web site located at [www.fresno.ucsf.edu](http://www.fresno.ucsf.edu) for the names of persons trained in the confidential handling of harassment allegations.)

A resident is entitled to use the UCSF Fresno's confidential harassment procedure if he/she feels that harassment has occurred. For further information, contact Katie Hightower, UCSF Fresno Human Resources Manager at (559) 499-6420.

##### b. Harassment

UC San Francisco is committed to creating and maintaining a community in which all persons who participate in University programs and activities can work together in an atmosphere free of all forms of

harassment, exploitation, or intimidation, including sexual. Each member of the University community should be aware that the University is strongly opposed to sexual harassment and that such behavior is prohibited by law and by University policy. The UCSF Fresno campus supports and adheres to the UCSF policy on harassment. See the UCSF Fresno intranet <http://connections.fresno.ucsf.edu/ome/> GMEC Policies, 'Sexual Harassment'.

**UCSF Fresno Contact: K. Hightower (559) 499-6420**

c. University Resident Wellness Committee

The University Wellness Committee addresses issues of health and well-being that influence the professional and personal lives of medical residents in the UCSF Fresno MEP. Residents may self refer or be referred by their program director for help with depression, loss and grief, anxiety, relationship or family problems, academic difficulties, the disruptive resident, alcohol or substance use, and many other issues which negatively influence job performance. Our goal is to take a proactive approach to handling resident issues that promotes a healthier learning and working environment at UCSF Fresno and assists our residents with the broad range of challenges that can arise during their medical education.

Referral by or consultation with this committee is confidential.

**Contact: Craig Campbell, M.D. (559) 499-6580 or 320-0580.**

d. The Disruptive Resident

The UCSF Fresno MEP, via the authority of the involved Program Director or the bylaws of the involved hospital(s), may restrict the duties of a resident exhibiting disruptive behavior in the work/learning environment. Disruptive behavior may include but is not be limited to conduct, performance level or competence, or significant physical or emotional disability that appears to require that immediate action be taken to protect the life or well-being of a patient(s) or to reduce a substantial and imminent likelihood of significant impairment of the life, health, or safety of any patient, prospective patient, or adversely influence the welfare of the UCSF Fresno MEP and/or parts including the affiliated hospitals and staff.

Written notice of the imposed restriction must be given to the involved individual as soon as possible. This notice must include the reason for the restriction and the requirements (if applicable) for the reinstatement of duties.

17. Professional Liability Coverage and Risk Management

a. Professional Liability

Residents, fellows (and medical students who are regularly matriculated and following a regularly prescribed course of study in the health sciences) in approved UCSF Fresno training programs are provided professional liability coverage by the Regents of the University of California self-insured program. This coverage is for claims that occur within the course and scope of their University training activities (provided actual fraud, corruption or malice on the part of the individual is absent). This includes claims reported or filed after the completion of the program (in private occurrence-based policies, this is known as 'tail' coverage. Insurance coverage for elective, off-site rotations is not automatic. Coverage for elective off-site rotations is determined on a case-by-case basis as part of the off-site rotation approval process.

A copy of a generic Professional Liability Certificate can be located on the UCSF Fresno Housestaff Portal (right column under General Resources).

**NOTE: UCSF professional liability coverage does not include external moonlighting activities (e.g. activities which have not been assigned or approved as part of UCSF Fresno residency training).**

b. Risk Management – UCSF

UCSF Fresno Risk Management Services serves as an active, cooperative liaison between UC physicians and the risk management programs of affiliated facilities. For questions about risk management issues, contact UCSF Fresno Risk Management at (559) 499-6407. Contact Risk Management immediately upon receipt of any legal notice such as a deposition, subpoena, notice of intent to sue, or legal complaint. The UCSF Fresno Risk Management office can also provide verification of coverage when required.

18. Record Retention – Applicants to Residency Programs

The GMEC has established a policy for the retention of records of applicants to the UCSF Fresno MEP residency and fellowship programs. This policy ensures that all documents/files/paperwork related to an application to a residency/fellowship program are preserved for four (4) years or the length of the particular residency program, whichever is greater. (See the UCSF Fresno intranet <http://connections.fresno.ucsf.edu/ome/> GMEC Policies 'Record Retention')

19. Resident Forum

UCSF Fresno has several mechanisms in place to allow residents to raise and resolve concerns (see also "Mechanisms for Resolving Issues".) A quarterly forum is arranged for housestaff to meet to discuss issues of interest or concern. Announcements are emailed and posted in program areas.

20. Resident Selection

Minimum Qualifications. The GMEC has established a policy for minimum qualifications for acceptance into the UCSF Fresno MEP. (See the UCSF Fresno intranet, <http://connections.fresno.ucsf.edu/ome/> GMEC Policies, 'Minimum Qualifications for the Selection of Housestaff'.

21. Rotations (Off Campus Rotations) for UCSF Fresno Residents

The Associate Dean's office and the GMEC encourage specialized rotations when educationally appropriate. Such rotations are subject to established policy guidelines. Please see current policy on the UCSF Fresno intranet. [www.fresno.ucsf.edu/intranet/ome](http://www.fresno.ucsf.edu/intranet/ome)

22. Rotations to UCSF Fresno Medical Education Program

Residents or fellows in good standing from an ACGME approved program (or a Canadian LCGME approved program) may serve a short term elective in one of the UCSF Fresno training programs. Candidates requesting such a rotation must obtain application materials directly from the appropriate UCSF Fresno residency program office. (Programs may obtain required forms from on line at [www.fresno.ucsf.edu/intranet/ome](http://www.fresno.ucsf.edu/intranet/ome) - GMEC Policies)

Residents wishing to do rotations at UCSF Fresno should work with the program to which they are interested in rotating. Complete application material must be submitted to the UCSF Fresno Office of Medical Education at least thirty (30) days in advance of the requested rotation. The Associate Dean will review the application and a response will be forwarded to the appropriate program office within ten (10) days of receipt of the completed application.

23. Separation Process (Check out)

a. Approximately one month prior to their actual termination date, residents will be provided with required checkout information and forms by their home program. Checkout forms must be completed prior to release of training certificates (where applicable) and/or final paychecks. The check-out procedure includes completion of all outstanding medical records, return of program materials including pagers, keys, PDA's, etc., return of name badges and parking placards, completion of any outstanding program projects or other training requirements, payment of outstanding fees, etc.

b. Leave time may not be used to extend a resident's date of separation from employment.

c. No payment will be made for unused vacation, educational or sick leave upon termination.

d. Further information and instructions will be provided at check out and/or from UCSF Fresno Human Resources.

e. At the time of check out residents will be provided with information regarding the option of continuing health insurance through (COBRA).

#### 24. Standards of Conduct

The UCSF Fresno MEP Code of Conduct expresses the values and ethical practices collectively prized by the UCSF Fresno community. It declares the expectations that all members of the campus community will exercise integrity and highly ethical conduct when making their contributions to the organization. (See the UCSF Fresno intranet <http://connections.fresno.ucsf.edu/ome/> GMEC Policies.

#### 25. Termination and/or Separation

Termination or separation from the training program may occur under various circumstances, including:

a. A resident completes his/her training satisfactorily under the current guidelines of the residency program and graduates from the program.

b. A resident will not complete his/her training satisfactorily under the current guidelines of the residency program. Residents will be notified of non-renewal of contract according to guidelines as outlined in the UCSF Fresno Academic Due Process Policy.

c. A resident may wish to be released from his/her training program at the end of the current academic year before completion of training. Prior to March 15 of the current academic year the resident must notify both the Program Director and the GMEC of their intention to leave.

d. Resident termination (dismissal) prior to the end of an academic year shall be only for cause. Appeal of the decision for termination (dismissal) must be made in accordance with the UCSF Fresno Academic Due Process Policy.

### **C. Administrative Issues**

#### 1. Chief Resident Committee

UCSF Fresno has established a Chief Resident Committee charged with providing input to the Associate Dean on matters affecting medical education. Membership includes chief resident representatives from each training program.

Members of the Chief Resident Committee are in a unique position to share information with their peers and bring questions/concerns to the attention of administrative staff. As part of their Chief Resident assignment, they are encouraged to disseminate information to and bring forth issues from their colleagues.

A Chief Resident orientation is held at the beginning of each academic year to review responsibilities and expectations.

#### 2. Committee Membership

There are a number of other committees that encourage resident representation. If you are asked to serve, your participation on these various committees is invaluable and appreciated.

#### 3. Confidentiality of Medical/Patient Information

The UCSF Fresno MEP upholds the highest standards regarding record confidentiality. Residents, faculty, medical students and administrative staff may have access to confidential medical records and patient account information on a need-to-know basis in the course of employment, performance improvement, research, or education/training. All such information is confidential in accordance with patient medical record and information confidentiality laws, rules and regulations. Confidential information shall not be disclosed or otherwise made available to any other person other than the affected patient or appropriate persons involved with the medical care of the patient, research activity or educational process. All discussions of patients among members of the health care or educational team shall be limited to settings removed from the public ear (e.g. not in elevators, hallways, cafeterias, etc.)

“Confidential information” denotes all information acquired in the course and scope of employment that is obtained by discussion, consultation, examination, treatment, and/or direct access to records. This includes, but is not limited to hospital, medical, or computer records and may include any information held in patient files or any electronic medical record or patient account record.

Faculty, residents, medical students, and administrative staff are expected to abide by the policies and procedures established in each institution in which they work/learn regarding patient confidentiality. A violation of policy may result in corrective action up to and including termination of employment or training. A misuse of medical data and/or inappropriate release or disclosure of information may also result in monetary loss and/or prison term for violation of medical privacy, as covered under Federal law (HIPAA).

#### 4. E-mail Accounts

All residents will be assigned a UCSF Fresno e-mail account at the time they begin training. Accounts are set up by the UCSF Fresno Information Technology Services (499-6660). UCSF Fresno email accounts can be set up to automatically forward mail to another e-mail account if so desired. Communication to residents will be done via e-mail. **Residents are expected to check their UC email accounts on a regular basis.**

#### 5. Medical Records Completion and Delinquency Policy

Members of the UCSF Fresno MEP are expected to complete medical records in a timely manner. Residents are expected to adhere to the same policy as members of the medical staff in regard to medical record completion. Furthermore, academic credit can be withheld, at the prerogative of the Program Director; residents may also be suspended for failure to comply with the timely completion of medical records. The involved individual has the right to challenge this decision via the established UCSF Fresno Academic Due Process policy. See CMC Policies – Medical Staff – ‘Medical Record Suspension’.

NOTE: This policy applies to and is followed by all UCSF Fresno training sites.

#### 6. Mid-level Practitioners in the Training of Residents

Mid-level practitioners are used in many residency programs. These practitioners are highly skilled in their particular roles and have specific accountability to staff physicians within their service/department. Some are expected to provide patient care services independent of residents while others are supervised by or provide supervision to residents. Working with mid-level practitioners forms the type of collaborative patient care becoming the norm in the community. Because the mid-level practitioner may play varying roles, each program must provide guidelines for these interactions as a part of its curriculum. The following are suggested guidelines for use of mid-level practitioners in resident training:

##### Guidelines:

- a. Curriculum. The role of the mid-level practitioner is defined in the curriculum goals.
- b. Supervision. The program will define the staff supervision of the mid-level practitioner.
- c. The program will indicate the role of the mid-level practitioner in teaching residents and provide a mechanism for evaluation by the residents.
- d. The program will define a mechanism for resolving conflicts between mid-level practitioners and residents.
- e. Training
  1. The use of a mid-level practitioner should not interfere with training of residents.
  2. Whenever residents and mid-level practitioners are in training together, their roles will be defined by the program.

#### 7. Use of the World Wide Web, University Name, Seal or Logo and Publishing Guidelines,

The University of California has a detailed policy regarding the "Conditions of Use" of the World Wide Web" emphasizing applicable laws regarding copyright restrictions; reference to University policies and public laws; restrictions regarding criminal and civil activities; These restrictions also apply to the restricted use of any University name, seal or logo. Guidelines are established for individuals and/or units publishing information on UCSF servers or commercial servers funded by University budgets, advertising, or use of resources for personal purposes.

The guidelines also state that "Supervisors shall apply necessary and appropriate corrective action whenever (an employee) fails to meet the required standards of conduct or performance." Residents and students should work with their research coordinators, preceptors, or Program Directors to obtain prior permission if they are searching the World Wide Web for research purposes or for information that may be construed as an illegal activity. Complete guidelines, they are available at:

[http://pubaffr.ucsf.edu/new\\_media/guidelines/policies.html](http://pubaffr.ucsf.edu/new_media/guidelines/policies.html)

## 8. Vendor Policy

### (Relationships between (Pharmaceutical) Vendors and Clinicians)

UCSF Fresno complies with the UC policy and guidelines regarding acceptance of gifts and gratuities by employees (which includes housestaff) under California's Political Reform Act (January 2001). In addition to compliance with the requirements of law, University officers and employees must avoid the appearance of favoritism in all of their dealings on behalf of the University. All University officers and employees are expected to act with integrity and good judgment and to recognize that the acceptance of personal gifts from those doing business or seeking to do business with the University, even when lawful, may give rise to legitimate concerns about favoritism depending on the circumstances.

This policy applies to all university employees and students who are at the UCSF Fresno location. The entire text of the policy can be found on the UCSF Fresno intranet (Office of Medical Education, GMEC Policies).  
<http://connections.fresno.ucsf.edu/ome/>

(End of Handbook Text)

**APPENDIX A – Graduate Medical Education Committee**

(Reviewed and updated July 2009)

**Leadership**

Joan Voris, M.D., Associate Dean, DIO, Chair GMEC

**Residency / Fellowship Program Membership**

Cardiovascular Disease Program Director	John Ambrose, M.D.
Emergency Medicine Chief Program Director	Gene Kallsen, M.D. James Comes, M.D.
Family and Community Medicine Chief Program Director	Roger Mortimer, M.D. Ivan Gomez, M.D.
Gastroenterology Program Director	Muhammad Sheikh, M.D.
Infectious Disease Program Director	Naiel Nassar, M.D.
Internal Medicine Chief Program Director	Michael Peterson, M.D. Ivy Darden, M.D.
Minimal Invasive Surgery Program Director	Keith Boone, M.D.
Obstetrics/Gynecology Chief and Program Director	Conrad Chao, M.D.
Orthopedic Surgery Program Director	Eric Lindvall, D.O.
Pediatrics CHCC GMEG representative Program Director	Robert Dimand, M.D. Robert Kezirian, M.D.
Psychiatry Chief Program Director	Scott Ahles, M.D. Craig Campbell, M.D.
Psychosomatic Medicine Program Director	Hoyle Leigh, M.D.
Pulmonary Disease and Critical Care Medicine Program Director	Kathy Bilello, M.D.
Surgery Chief and Program Director	Steven Parks, M.D.
Surgery Critical Care Program Director	Krista Kaups, M.D.

**Resident Membership** (Resident members as nominated by peers for each academic year)

**Institutional Partner Membership includes representatives from:**

Children's Hospital Central California  
Community Medical Centers  
VA Central California Health Care System

**Other Membership**

Continuing Medical Education, Director	Charles Farr, M.D.
Undergraduate Medical Education, Director	Adriana Padilla, M.D.
Grants and Research Office, Director	Donna Hudson, PhD
Program Director, Oralmaxillofacial Surgery	Robert Julian, D.D.S.

UCSF FRESNO MEDICAL EDUCATION PROGRAM  
ASSOCIATE DEAN'S OFFICE  
155 North Fresno Street  
Fresno, California 93701-2302  
Phone: (559) 499-6410  
FAX: (559) 499-6411  
Email: deansrp@fresno.ucsf.edu

OFFICE OF MEDICAL EDUCATION  
155 North Fresno Street, Suite 251  
Fresno, California 93701-2302  
Phone: (559) 499-6520  
FAX: (559) 499-6521  
Email: [ome@fresno.ucsf.edu](mailto:ome@fresno.ucsf.edu)

## **APPENDIX B – Contact List**

(Main directory: <http://connections.fresno.ucsf.edu/directory.htm>)

### **RESIDENCY/FELLOWSHIP PROGRAM OFFICES**

	<b><u>UCSF Fresno Center</u></b>	<b><u>Alternate (CRMC, CHCC, etc)</u></b>	
	<b><u>Location</u></b>	<b><u>Phone (Area code: 559)</u></b>	
Office of Medical Education	Suite 251	499-6520	
Cardiovascular Disease Fellowship email: <a href="mailto:jambrose@fresno.ucsf.edu">jambrose@fresno.ucsf.edu</a> PD: John Ambrose, M.D.		--	459-3872
Emergency Medicine email: <a href="mailto:emergency@fresno.ucsf.edu">emergency@fresno.ucsf.edu</a> PD: James Comes, M.D.	Suite 206	499-6440	--
Family/Community Medicine email: <a href="mailto:family@fresno.ucsf.edu">family@fresno.ucsf.edu</a> PD: Ivan Gomez, M.D.	Suite 326	499-6450	--
Gastroenterology Fellowship email: <a href="mailto:gi@fresno.ucsf.edu">gi@fresno.ucsf.edu</a> PD: Muhammad Sheikh, M.D.		459-3385	
Infectious Disease Fellowship email: <a href="mailto:internal.medicine@fresno.ucsf.edu">internal.medicine@fresno.ucsf.edu</a> PD: Naiel Nassar, M.D.		499-6500	--
Internal Medicine email: <a href="mailto:internal.medicine@fresno.ucsf.edu">internal.medicine@fresno.ucsf.edu</a> PD: Ivy Darden, M.D.	Suite 308	499-6500	--
Minimal Invasive Surgery Fellowship email: <a href="mailto:jjankowski@fresno.ucsf.edu">jjankowski@fresno.ucsf.edu</a> PD: Keith Boone, M.D.		499-6592	--
OB-Gyn email: <a href="mailto:obgyn@fresno.ucsf.edu">obgyn@fresno.ucsf.edu</a> PD: Conrad Chao, M.D.	Suite 233	499-6540	459-2383
Orthopedic Surgery email: <a href="mailto:surgery@fresno.ucsf.edu">surgery@fresno.ucsf.edu</a> PD: Eric Lindvall, DO		499-6590	
Pediatrics email: <a href="mailto:pediatrics@fresno.ucsf.edu">pediatrics@fresno.ucsf.edu</a> PD: Robert Dimand, M.D.	Suite 219	499-6560	353-5141
Pulmonary Disease/Critical Care Medicine Fellowship email: <a href="mailto:internal.medicine@fresno.ucsf.edu">internal.medicine@fresno.ucsf.edu</a> PD: Kathy Bilello, M.D.		499-6500	459-5713
Psychiatry email: <a href="mailto:psychiatry@fresno.ucsf.edu">psychiatry@fresno.ucsf.edu</a> PD: Craig Campbell, M.D.	Suite 338	499-6580	--
Psychosomatic Medicine Fellowship email: <a href="mailto:hleigh@fresno.ucsf.edu">hleigh@fresno.ucsf.edu</a> PD: Hoyle Leigh, M.D.		--	459-6887
Surgery email: <a href="mailto:surgery@fresno.ucsf.edu">surgery@fresno.ucsf.edu</a> PD: Steven Parks, M.D.	Suite 206	499-6590	459-5196
Surgical Critical Care Fellowship email: <a href="mailto:surgery@fresno.ucsf.edu">surgery@fresno.ucsf.edu</a> PD: Krista Kaups, M.D.		--	459-3770

**UCSF Fresno Center for Education and Research – Departments (Area code: 559)**

Main Information/Reception		499-6400	
Associate Dean's Office	Suite 266	499-6400	
Grants and Research	Suite 317	499-6661	
Human Resources (Residents)	Suite 266	499-6416	
ITS – UCSF Fresno email information	Suite 317	499-6660	
Library	First Floor	499-6510	
Office of Medical Education	Suite 251	499-6520	residency.programs@fresno.ucsf.edu
Risk Management	Suite 266	499-6407	
Undergraduate Medical Education	Suite 251	499-6523	medical.students@fresno.ucsf.edu

**Children's Hospital Central California**

	Main:	353-3000
Clinical Education (PALS)		353-5910
Medical Staff Office		353-6115
Health Information Management		353-5402
IS - Computer Help Desk		353-7300
Security		353-5115

**Community Medical Centers (CMC Fresno)**

	Main:	459-6000
Medical Staff Office		459-3948
Systems Education (CPR, ACLS, PALS)		459-3936
IS Internet Help Desk		459-6560
Health Information Management (Divisadero office)		459-3925
Incomplete chart room – CMC Fresno		459-2430
Security		459-6575

**VA Central California Health Care System**

	Main:	225-6100
Systems Education – See Program Office for details		
IS Help Desk – See Program Office for program-specific ADPAC		
Medical Records		225-6100, ext 5577
Security		225-6100, ext 6981