

Policies for Resident/Fellow and Faculty Member Well-Being

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SPARTANBURG MEDICAL CENTER
DEPARTMENT OF OBSTETRICS AND GYNECOLOGY
RESIDENCY PROGRAM
WELLNESS RESOURCE GUIDE

Definitions:

- Burnout – Long-term exhaustion and diminished interest in work. Dimensions of burnout include emotional exhaustion, depersonalization, and feelings of lack of competence or success in one's work. Burnout can lead to depression, anxiety and substance abuse disorders.
- Resilience – The ability to withstand and recover quickly from difficult conditions or situations.
- Well-being – The state of being healthy, happy, and successful.

Institutional-Level Support:

Burnout Prevention Tools & Resources (HUB Under Favorites)

<https://srhsonline.sharepoint.com/SiteDirectory/EmpBurnout/SitePages/Home.aspx>

Anyone is at risk for burnout; a syndrome that includes exhaustion, depersonalization, compassion fatigue, and a sense that your work is not worthwhile. Burnout has a prevalence rate in healthcare approaching 50 percent of all providers. Burnout affects your ability to perform your job and affects interpersonal relationships. If you are feeling burned out, you are not alone.

This intranet site provides online resources and links to access private, free tests.

Instruction will be provided as part of the daily rounding and handoff process as outlined below. Each member of the patient care team is expected to provide an accurate and concise handoff as well as provide feedback to other members of the healthcare team to improve their handoff abilities.

Chapel (1st floor) & Associate Renewal Room (3rd floor)

The Chapel is located on the 1st floor of the Main Building close to the Surgery Waiting Room. In addition to the chapel, we have access to an Associate Renewal Room which is located on the 3rd floor beside the Chaplain Offices.

Compassionate Care Rounds

Compassionate Care Rounds are generally scheduled for the 4th Wednesday every other month @ Gibbs Cancer Center Auditorium. This bi-monthly series offers an

interdisciplinary format where cases are presented to the group, and participants are encouraged to share and discuss challenging and ethical issues. These sessions are meant to promote compassionate healthcare and strengthen relationships among caregivers

Counseling & Support Services

Counseling and support services are a necessary and important adjunct to the Graduate Medical Education Programs. Counseling through the Palmetto Employee Assistance Program (EAP) is confidential and is a benefit of employment.

Palmetto Employee Assistance Program (EAP): Toll Free: 866-216-1996

CRISIS LINE: 864-704-7931

The EAP is designed to provide professional and confidential assistance to employees for personal problems, which may disrupt home or work life. Employee dependents are also eligible (spouse and children ages 12-18). These problems may be due to stress, family, legal or financial difficulties, alcohol and drug dependency, emotional illness, or any other personal crisis. EAP counselors assist in clarifying thoughts and feelings and help to identify possible solutions. Information about community agencies, short-term counseling, and referrals to outside resources are available for many types of problems including marital/family difficulties, aging parents, chemical/alcohol dependency, financial budgeting and emotional stress. To ensure confidentiality, EAP records:

- Will never appear in personnel file
- Will be kept locked in the off-site EAP counselor's office
- Will not be discussed with anyone else without written permission, and
- Will not be used in performance review

Discounts for Local Businesses

Discounts are a unique benefit for SRHS employees. Area businesses have committed to give SRHS employees agreed upon discounts. Typically, you can present your official SRHS ID badge to receive a discount at participating locations. A complete list of participating vendors is available on the HUB.

Discounts for local & regional attractions

<http://www.spartanburgregionalemployeediscounts.com/>

Discounts are also available for SRHS employees to local and regional attractions. Some of those attractions include Biltmore House (NC), Dollywood (TN), Carowinds (NC), South Carolina Aquarium (SC), Stone Mountain Park (GA), Big Air Trampoline Park (Spartanburg), and others.

Employee fitness gym & the heart wellness center

An on-site gym is available at SMC-Church Street Campus for residents/fellows and associates on the 2nd floor, Main Building. Entry to the gym is via badge access.

The Heart Wellness Center is located across from Spartanburg Hospital for Restorative Care @ 299 East Pearl Street. The center is FREE to all employees! You do not have to be part of the wellness program to join. All you need is your hospital badge to sign up, and they have all the same equipment as a regular gym, and even offer a personal training session. The hours are Monday-Thursday 6am – 8pm, Friday 6am – 12pm, Saturday 8am – 12pm, and closed on Sundays.
Call 560-4250 for any additional questions.

Employee health services

Employee Health (2nd floor, Physician Office Building) provides numerous physical health services including:

1. Immediate evaluation and first aid treatment for on the job illnesses and injuries
2. Immunizations (annual influenza, tetanus, pertussis, hepatitis B, varicella, MMR and other vaccines as recommended)
3. Annual health assessments, and free annual lab tests
4. Access to online risk factor assessment: Pathways to Health
5. Acute Care services for minor acute illnesses; provided for a minimal fee.

*Payroll deduction is available

Health and wellness programs

<https://srhsonline.sharepoint.com/SiteDirectory/wellness/SitePages/Home.aspx>

Programs relating to stress management, exercise, nutrition, smoking cessation and general good health are offered, and participation in the wellness program provides discounted health insurance premiums.

Outdoor dining with food trucks (SMC courtyard)

Outdoor dining is available in the courtyard between the main building and The Gibbs Cancer Center, and a variety of food trucks are frequently scheduled during the warm months of spring, summer and fall.

Financial wellness

The programs occasionally bring expert speakers into conference to share financial guidance on personal finance with the residents and faculty.

Medical insurance

SRHS offers a choice of medical plans for residents/fellows and includes a family coverage option. The plans vary in their benefit provisions and the premium amounts. Coverage for health insurance (medical, dental, and prescription) begins on the first day

of the month following your employment hire date with SRHS. For most residents/fellows, that will be July 1. *See HR Benefits Information Guide for details.

Physical environment

- SRHS is a tobacco-free campus.

Policy #24 – Wellness Policy

- Residents have dedicated lounges for relaxing, informal gathering, and strategic napping.
- Study areas are provided in addition to the lounges, and residents/fellows have 24/7 access to the Health Sciences Library, 3rd floor across from 3rd North Boardroom.
- Private call rooms are located on 4th East.

Regional massage therapy

Massage Therapy is located on the ground floor of the Gibbs Cancer Center, Spartanburg. The hours are Monday-Thursday 8am – 7pm and Friday 8am – 4pm, and they can be reached by calling 864-560-6140 (66140 if calling from within the hospital). Employee rates are available, and they accept payments by cash, check or credit card. A prescription is required for any recent surgery, pregnancy, or if you are currently under a physicians' care.

Social events

- The month of December includes “Jingle Mingle.” Jingle Mingle is a hospital-sponsored meal for all associates to gather for a full breakfast buffet. Members of Administration are present to welcome all associates.
- The Bedpan Open Golf Tournament is held each year in the spring and residents/fellows/faculty are encouraged to create a team and participate in this competitive event.
- In May, the hospital sponsors “Hospital Week” with treats for all on various days: an ice cream sundae social on one day, lunch outdoors provided by Fuddruggers on another day, and a special recognition dinner for associates with 20+ years of service.

Suicide prevention hotline (national)

The National Suicide Prevention Hotline is available 24/7 by calling or by texting. The phone number is 1-800-273-TALK (8255), or text “TALK” to the Crisis Text Line, 741741.

Vacation & holidays

Vacation/Sick Days - All residents/fellows will receive twenty (20) vacation-sick days

per residency/fellowship year. Vacation-sick days do not carry over from year to year. See GMEC Policy for details.

Holidays - Resident physicians are entitled to take the following holidays: Memorial Day, July 4th (Independence Day), Labor Day, Thanksgiving, Christmas and New Year's Day. If the schedule requires working on an official designated holiday, another day may be substituted and should be taken within 30 days of the holiday worked. During certain rotations, those who work on the holiday are sometimes unable to schedule another day off within the required 30-day period. In this case, he/she must take the holiday off as soon as feasible upon completion of the rotation.

Walking Trail & Garden @ Liberty Park

Liberty Park is located on the back side of Spartanburg Hospital for Restorative Care and adjacent to Wofford College, at 299 E. Pearl St. Spartanburg, SC 29303. The Liberty Park loop provides a wonderful and convenient open-air track for times when you just need to get outside, but still remain close to the hospital. Three times around the track is a mile. Enjoy the beauty of nature, waterfalls and being outdoors when visiting the Liberty Garden.

Wellness Committee(s)

<https://srhsonline.sharepoint.com/SiteDirectory/Wellness/SitePages/Home.aspx>

There is a SRHS Wellness Committee that is facilitated by Misty Sloan of Employee Health. GME has resident representation on the committee, and you are encouraged to engage with this committee if you have a specific interest.

Wellness Track (inside @ SMC-Church Street Campus)

The SMC main campus has a clearly marked walking track on 2nd floor of the Main Building. The track is ½ mile in length and touches all the main corners of the hospital. Employees can start in the Heart Center, Regional Outpatient Center, Montgomery Tower or the main building and walk the entire half mile track in 8-10 minutes. Directional and motivational signs are posted along the route to provide Wellness tips. This track is available 24 hours a day.

GMEC-Level Support:

GME orientation

The annual June orientation includes educational sessions for new House staff by Program Directors and the Co-System Chief Medical Officers on Physician Wellness, Clinical and Educational Work Hours, and Fatigue Mitigation. Residents, fellows and faculty are encouraged to take time for personal wellness.

Meals

Meals are provided to House staff at no charge in the hospital cafeteria, Physicians' Dining Room, and Tower Café, if name badges are worn. SRHS provides the residents with access to free meals while on duty.

Recreational Benefits

Upward Star Center – 9768 Warren H Abernathy Hwy, Spartanburg, SC 29301
This year GME sponsored an interdepartmental rec league basketball team at the local Upward Star Center facility. Residents from Family Medicine, Surgery and Transitional Year all participated. Other sports such as soccer and volleyball will be considered as interest arises.

The Carolina Country Club – 2355 Carolina Country Club Rd, Spartanburg, SC 29306
Each resident/fellow can play golf as a “guest” at The Carolina Country Club for a small fee of \$26.75 per visit which includes green fees, practice range fees and cart fees (2020 prices). Advance tee time reservations (for as much as 5 days in advance) can be made by calling the Golf Shop and identifying yourself as a SMC resident or fellow. Identification will be required. Additionally, residents/fellows may bring one (1) guest per visit to the Club, while not allowing the same guest more than three (3) times per year. Guests will be charged the standard guest fee. Proper golf attire is required; collared shirts are required and no denim, or t-shirts.
Carolina Country Club: Golf Shop (864)573-9385 or Main Office (864)583-1246

Spartanburg Athletic Club - 2420 Andrews Road, Spartanburg, SC 29302
(864)582-5050

Membership to a local health and exercise facility is provided at no charge to House Staff and their families.

The Spartanburg Athletic Club caters to people of all ages. They have facilities for tennis, pickleball, indoor/outdoor pools, a fitness gym with over 85 group fitness classes, personal training, and a convenient, free coffee bar.

Resident Lounges

Residents have dedicated lounges for relaxing, informal gathering, and strategic napping. Lounges and work areas are centrally located on 5th East of the SMC Main Building. All areas have televisions and access to computers.

Social Events

- Each year the programs enjoy a GME-sponsored early outing to the Greenville Drive minor league baseball game. Residents from all programs are encouraged to attend for a night out with your family and coworkers.
- In January/February residents are often provided the opportunity to attend for free Wofford College Men's Basketball games. Group tickets are provided by our friends at the Spartanburg Regional Sports Medicine Institute.
- The Criterium Bike Race is held in the spring as well, in conjunction with the

Spartanburg Spring Fling event in downtown Spartanburg. The bike race is another fun family event and opportunity to gather with other residents/fellows and faculty.

- In June GME hosts the annual Hail-Farewell Party to celebrate our graduates and our incoming residents. This event is always held at a location in downtown Spartanburg, and all residents/faculty and staff are encouraged to attend.

Program-Level Support

When circumstances arise in which the resident is unable to attend work, including but not limited to, illness and family emergencies, the program has policies and procedures in place to ensure that the resident will not have negative consequence relating to these events.

During orientation the resident is educated on the following:

- Where and how to access food during clinical and educational programs
- Where the sleep/rest facilities are located for each clinical learning site
- Where the lactation facilities are located along with the safe refrigeration resources for the storage of breast milk for each clinical learning site

The program will sponsor educational events on well-being to enhance the fellow's knowledge base and skill set to develop and maintain wellness and resilience

Call-me List

At the start of each academic year, the resident will identify 3 "call me" individuals. There must be at least 1 resident and 1 faculty member on the "call me" list. A third individual could be a spouse, family member or friend not associated with the program. Each resident's list will be posted electronically such that any concerned individual can reach out to the resident's contacts if necessary.

**SPARTANBURG MEDICAL CENTER
GRADUATE MEDICAL EDUCATION
POLICY STATEMENT**

SUBJECT: Counseling & Support Services	POLICY NUMBER: 4
EFFECTIVE DATE: 7/1/97	APPROVED BY GMEC: 6/20/97;5/8/98;7/10/98;5/28/99; 5/26/00;7/27/01;5/24/02;7/25/03;5/21/04;5/27/05;5/26/06;5/25/07; 5/23/08; 5/22/09;7/23/10;7/22/11;7/27/12;7/26/13;7/25/14;7/24/15;7/22/16;7/28/17; 9/28/18;9/27/19;9/25/20;9/24/21;9/23/22

PURPOSE

To establish an institutional policy regarding counseling and support services, mentoring and acculturation and resident/fellow working environment for all GME programs of Spartanburg Regional Healthcare System and to assist program directors in the development of their individual program policies.

POLICY

COUNSELING AND SUPPORT SERVICES

During a residency/fellowship training program at Spartanburg Regional Healthcare System, the following guidelines or principles shall be adhered to regarding counseling for residents/fellows:

- A counseling service is necessary and an important adjunct to the Graduate Medical Education Programs for maintaining the psychosocial balance of the residents/fellows.

- Any responsible member of the various departments may alert the program director of a potential need for counseling.
- A mechanism for referral and selection of counselors is available to all house staff members.
- Cultural differences should be recognized, and the appropriate provisions should be made.
- Counseling will be confidential.

EMPLOYEE ASSISTANCE PROGRAM (EAP)

The EAP is designed to provide free professional and confidential assistance to employees, and any employee's dependents are also eligible (spouse and children ages 11 and above, residing in the employee's home or on the employee's insurance plan) for personal challenges, which may disrupt home or work life. These challenges may be due to stress, family, professional, legal or financial difficulties, substance abuse, emotional illness, or any other personal crisis.

EAP counselors assist in clarifying thoughts and feelings and help to identify possible solutions. Information about community agencies, short term counseling, and referrals to outside resources are available for a wide range of services, including: mental wellness sessions, life coaching, financial consultation, legal consultation, work-life resources and referrals, personal assistant, medical advocacy, and wellness.

To ensure confidentiality, EAP counseling records:

- Will never appear in personnel file
- Will be kept locked in the counselor's office
- Will not be discussed with anyone else without written permission
- Will not be used in performance review

MENTORING AND ACCULTURATION

A very important area of concern regarding the resident/fellow and their success in Graduate Medical Education Programs is counseling for professional and personal matters.

In order to accomplish the task of this mentoring and acculturation, a program has been developed in each department whereby members of the teaching staff of the department will be assigned a resident/fellow for the academic year.

The assignment of the faculty advisor will occur at the beginning of each academic year. The resident/fellow will be encouraged to contact his/her faculty advisor for counseling or assistance as needed for either professional and/or personal guidance and/or assistance in resolving challenges or conflicts which may arise in the course of their training program.

Provision should be made to allow either the resident/fellow or faculty advisor to request assignment to another individual if after the first six months of the year the relationship is determined to be less than optimal by either party or by both parties mutually.

Faculty advisors have a unique opportunity to assist in the maturation process of the physician in training, and this incurs a significant responsibility. The faculty advisor should always be willing to allow the residents/fellows to ventilate his/her feelings and to accept the role of a confidant. The faculty advisor should offer advice when appropriate or refer the resident/fellow for appropriate counseling.

Documentation of meetings between the advisor or Program Director and the resident/fellow should be signed and considered mandatory and added to the resident/fellow file. These reports will be considered confidential and may be submitted without substantive content but merely reflective of the process.

In addition, to the faculty advisor, the chief residents in the department are expected to act as a resource and counselor for residents within his/her department.

Cultural differences should be recognized and appropriate provisions made for residents/fellows in the resolution of problems. Program Directors are encouraged to take cultural differences and concerns into consideration in the assignment and selection of faculty advisors.

RESIDENT CLINICAL AND EDUCATIONAL WORK ENVIRONMENT

Each program **must** establish formal policies regarding the residents'/fellows' working environment that are optimal for both resident/fellow education and the care of patients. The Institution and individual

programs must provide services and develop systems to minimize the work of residents/fellows that is extraneous to their educational programs, ensuring that the following conditions are met:

- Residents/Fellows on duty in the hospital must be provided food services, safe, quiet sleeping quarters, and clean and private facilities for lactation with refrigeration capabilities.
- Patient support services, such as intravenous services, phlebotomy services, and laboratory services, as well as patient transport services, must be provided in a manner appropriate to and consistent with educational objectives and quality patient care.
- An effective laboratory pathology, medical records, and radiologic information retrieval system must be in place to support timely and quality patient care.
- Appropriate security measures must be provided to residents/fellows in all locations including but not limited to parking facilities, on-call quarters, hospital and institutional grounds, and related clinical facilities (e.g., medical office building).

Reference SRHS Policy #: IM1000.606 Employee Assistance Program

Reference Institutional Requirements (IRs): II.F., III.B.5., III.B.7. 7/1/22

Reference Common Program Requirements (CPRs): I.D. 7/1/22

SPARTANBURG MEDICAL CENTER

GRADUATE MEDICAL EDUCATION

POLICY STATEMENT

SUBJECT: Fatigue and Sleep Deprivation POLICY NUMBER: 10
EFFECTIVE DATE: 3/25/22 APPROVED BY GMEC: 3/25/22;11/18/22

PURPOSE

To establish an institutional policy on fatigue and sleep deprivation of graduate medical education programs and of the faculty in accordance with ACGME guidelines.

POLICY

The Sponsoring Institution must oversee systems of care and learning and working environments that facilitate fatigue mitigation for residents/fellows and an educational program for residents/fellows and faculty members in fatigue mitigation.

Fatigue Education/Management/Prevention:

1. Faculty and residents/fellows are educated annually on the signs of fatigue and sleep deprivation, alertness management and fatigue mitigation processes and processes for managing fatigue.
2. Faculty and residents/fellows are also educated regularly on resident wellness, stress reduction strategies, and other related topics by our behavioral science faculty who is also available to residents/fellows for one-on-one discussion.
3. Private sleeping accommodations are provided on site and readily available 24 hours a day for resident/fellow use for strategic napping, sleeping, showering, etc.
4. Residents/Fellows who feel too fatigued to drive following work are encouraged to utilize any of the lounges or call rooms for sleep, ask another person for a ride or take a taxi or uber home.
 - One-way taxi/uber fare will be reimbursed by the residency/fellowship program, if used for this purpose and must be PD approved.
5. If fatigue or sleep deprivation concerns arise, residents/fellows or faculty should notify the resident's/fellow's program director immediately and the following will occur without reprisal:
 - Schedules will be adjusted as necessary to mitigate excessive service demands and/or fatigue; (to include clinic, surgery, rotation and on-call schedules).
 - Other accommodations will be decided on a case-by-case basis.

It is the responsibility of everyone to ensure fitness for duty, and reporting any concerns so that support can be given to a fatigued/compromised resident/fellow without repercussions or lapses in patient care.

Reference Institutional Requirements (IRs): III.B.5.a).(2), III.B.5.a).(3) 7/1/22

SPARTANBURG MEDICAL CENTER
GRADUATE MEDICAL EDUCATION
POLICY STATEMENT

SUBJECT: Impaired Resident/Fellow Physician	POLICY NUMBER: 13
EFFECTIVE DATE: 07/1/97	APPROVED BY GMEC: 6/20/97;5/8/98;9/11/98;9/10/99;
	9/22/00;9/28/01;9/27/02;11/21/03;9/24/04;9/23/05;9/22/06;9/28/07;9/26/08;
	9/25/09;11/19/10;11/18/11;11/30/12;11/22/13;11/21/14;11/20/15;11/18/16;
	9/22/17;11/30/18;11/22/19;11/20/20;11/19/21;11/18/22

PURPOSE

To establish a medical education policy and procedure to address resident/fellow physician impairment and provision of appropriate and confidential counseling and support.

POLICY

Residency programs expect that: 1) residents/fellows are not under the influence of, nor consume, alcohol or drugs while engaged in work or educational activities; and perform their educational and assigned duties unimpaired by alcohol, drugs, psychological, medical, or behavioral illness/disorders; and 2) residents/fellows will not engage in unlawful or unethical acts. These criteria include terms that warrant definition: 1) Impaired - the inability to exercise medical judgment and skill to the degree held to be the professional standard; 2) Drugs - those substances obtained in an illegal or unethical manner for the purpose of consumption or distribution, or those legal substances used/abused in a manner inconsistent with normal prescription standards; 3) Unethical - behaviors which fail to reflect the accepted principles of the profession of medicine; 4) Work - those activities and functions which reflect the provision of medical care; and 5) Educational - those activities which contribute to the acquisition of skills, knowledge and attitudes necessary to provide medical care.

Residency/Fellowship programs expect the same from the physician attendings in relation to their performance. If a resident suspects an attending may have an impairment, he/she should follow the same procedures as outlined for resident/fellow impairment.

GOALS OF A RESIDENT/FELLOW IMPAIRMENT POLICY

1. Identification of resident/fellow impairment
2. Evaluation and treatment of the impaired resident/fellow
3. Reintegration of the resident/fellow in the educational process
4. Monitoring and supportive aftercare of the impaired resident/fellow

SIGNS AND SYMPTOMS OF IMPAIRMENT

PERSONAL

CHARACTERISTICS	SIGNS/SYMPTOMS	PERFORMANCE
Anxiety	Insomnia	Late or absent to work
Depression	Somatization	Excessive use of Anger
Anger	Poor grooming	Sporadic or poor charting
Negative attitude	Chronic illness	Unusual hours
Erratic behavior	Weight change	Unavailable by pager
Quick to blame	Tremors	Unusual increase in or
Irritable/easily agitated	Seizures	competitiveness
Complaining	Fatigue	Complaints from others
Loss of motivation	Bloodshot eyes	Errors in dosing, procedures,
Mistrust/paranoia		and appointments
Marital difficulty		

OBJECTIVES

Early Identification and Evaluations

Behavioral changes are the key to early identification of impairment in the resident/fellow physician. Impairment can be indicated by changes in the areas of personality, physical condition and/or professional performance. (See the list above). Any observation of such changes in the resident/fellow physician's behavior made by residency/fellowship or non-residency/fellowship personnel are brought to the attention of the resident's/fellow's faculty advisor. The Residency/Fellowship Program Director, the Designated Institutional Official, the CMO, and Residency/Fellowship Faculty as appropriate are made aware of the concerns. The faculty advisor documents the observations/reports and meets with the resident/fellow to present the documentation and to elicit his/her cooperation in making appropriate changes in the problem behavior(s).

At this meeting, the resident/fellow and faculty together develop a plan to address the behavioral concerns and eliminate the unacceptable behavior(s). The resident/fellow receives written documentation outlining the problematic behavior(s), the expected behavioral changes(s) and/or medical treatment (in the case of an untreated medical condition), a timeline for expected changes and the consequences for failing to make these changes. The resident/fellow physician is required to sign the document signifying his/her

understanding and acceptance of the plan. The residency/fellowship Program Director and residency/fellowship faculty are made aware of the identified behavioral concerns and the resident's/fellow's plan for making the change(s).

In the event that the problem behavior(s) continue, the faculty advisor presents the documentation and report of failed remediation to the residency/fellowship Program Director.

Suspicion of Impairment

The Program Director determines if there is reasonable suspicion of impairment and will, in consultation with the residency/fellowship faculty and legal counsel, determine if the case warrants referral to a professional resource for formal evaluation.

The identified resident/fellow physician is required to comply with the evaluation process. The resident/fellow physician receives and is required to sign a written document outlining the expectation to cooperate with the evaluation process and the consequences for failing to comply. Failure to comply with

the evaluation process results in the resident/fellow physician being reported to the State Board of Medical Examiners and discharged from the residency/fellowship program.

Alternately, the resident/fellow physician may identify him/herself as having an impairment and willingness to voluntarily seek professional evaluation and treatment. In either case – mandated or voluntary – referral is made to a professional resource for evaluation and treatment planning/implementation. There is no charge to the resident/fellow for the professional evaluation.

Impairment Not Suspected

Cases of behavioral concerns in which impairment is not suspected are not referred for evaluation. In such cases the residency/fellowship Program Director and residency/fellowship faculty determine appropriate responses to the continued problem behavior(s). These responses may include placing the resident/fellow on academic probation or requiring precepting of all the resident's/fellow's clinical work. The resident/fellow physician receives and is required to sign written documentation outlining the continuing problematic behavior(s), the expected behavioral change(s), timeline, and potential consequences. Failure on the part of the resident/fellow physician to cooperate in

making the expected change(s) results in the resident/fellow physician being discharged from the residency/fellowship program. If the resident/fellow feels that he/she is being unfairly charged, the resident/fellow has the right to invoke and follow the established Grievance Policy.

Treatment

If an impairment is substantiated through evaluation, the identified resident/fellow physician will be required to comply with the evaluation and treatment plan prescribed by the professional resource. The resident/fellow physician will receive specific documentation to sign outlining the expectation of cooperation with the professional resource's evaluation and

recommended treatment process and the consequences for failing to comply. Failure to comply with the professional resource's recommendations will result in the resident/fellow

physician being reported to the State Board of Medical Examiners and discharge from the residency/fellowship program.

All charges not covered by the group health insurance will be the responsibility of the identified resident/fellow physician. During treatment, the resident/fellow physician may be placed on medical leave from the residency/fellowship not to exceed 90 days.

Follow-up/Aftercare

At the successful completion of the prescribed treatment and the recommendation of the professional treatment resource and residency/fellowship faculty, the resident/fellow returns to the residency/fellowship program to continue in residency/fellowship training. Upon return to the residency/fellowship, efforts are made, within the requirements of the program, to adapt the resident's /fellow's schedule to reflect the resident's/fellow's health status and need for aftercare.

The resident/fellow physician will be required to comply with all follow-up, aftercare and monitoring recommendations made by the professional treatment resource. These recommendations may include, but are not limited to: individual counseling, peer-group counseling, on-site monitoring, contingency contracting, random drug testing, or pharmacological therapy. The resident/fellow physician receives and is required to sign written documentation outlining the expectation of cooperation with the follow-up/aftercare plan and the consequences for failing to comply. Failure to comply with the aftercare recommendations results in the resident/fellow physician being reported to the State Board of Medical Examiners and discharge from the residency/fellowship program.

Relapse is often part of the impairment process, particularly in cases of impairment due to substance abuse/dependence, and is addressed in a manner similar to the initial identification

of an impairment. In such cases the professional treatment resource is notified and recommendations solicited regarding prescribed evaluation and treatment. The identified resident/fellow physician will be required to comply with the recommendations of the

professional resource. The resident/fellow physician receives and is required to sign written documentation outlining the expectation of cooperating with the recommended evaluation and treatment process and the consequences for failing to comply. Failure to comply with the recommendations results in the resident/fellow physician being reported to the State Board of Medical Examiners and discharge from the residency/fellowship program. Recurrent relapses result in the identified resident/fellow being reported to the State Board of Medical Examiners and may result in discharge from the residency/fellowship program.

Adapted from: Oyama, O., Spear T., Junker J., The American Journal of Primary Care Medicine, 1996, 1(1): 9-15.

Reference Common Program Requirements (CPRs): VI.C.1.e) 7/1/22

SPARTANBURG MEDICAL CENTER

GRADUATE MEDICAL EDUCATION POLICY STATEMENT

**SUBJECT: Medical Care for Residents/Fellows
& Students**

POLICY NUMBER: 38

**EFFECTIVE DATE: 7/1/2015 APPROVED BY GMEC: 5/22/15;5/27/16;5/26/27;5/25/18;
5/24/19;9/25/20;5/28/21;5/27/22**

PURPOSE

To provide a policy which seeks to avoid actual and perceived conflicts of interest related to the provision of medical care by faculty members to the residents, fellows and medical students for which they provide an evaluation.

PROCEDURE AND POLICY

An essential role of faculty members in medical education is to provide evaluation and feedback to learners. Evaluation feedback provides the trainee with information about how the trainee's observed performance compares to accepted performance standards, and is given with the intent of assisting the trainee with improved performance. Evaluation and feedback is also used to determine advancement and graduation. Therefore, with adoption of this policy, Spartanburg Regional Graduate Medical Education seeks to avoid actual and perceived conflicts of interest between the faculty and those whom the faculty members evaluate.

Faculty and other healthcare professionals who provide medical, psychiatric or psychological care to residents, fellows and medical students must not be in the position to evaluate academic performance,

or participate in decisions regarding advancement and/or graduation. Resident, fellow, and medical student privacy is to be preserved at all times.

Faculty has the authority of teaching and therefore the evaluation of all students, residents and fellows. Given the inherent risk for conflicts of interest, it is imperative that faculty members remain objective about the performance of the trainees. Therefore, faculty must not provide healthcare and/or prescribe controlled substances to residents, fellows, medical students or their immediate family members.

Residents, fellows, medical students and their immediate family members must seek healthcare outside of the Department of Medical Education, with the following exceptions: episodic acute care (which does not require a prescription for controlled

substances), emergency medical care (including emergent maternity care), maternal-fetal specialty care, and surgical needs.

SPARTANBURG MEDICAL CENTER

GRADUATE MEDICAL EDUCATION

POLICY STATEMENT

SUBJECT: Residents'/Fellows' Vacation and Other

POLICY NUMBER: 11

Leaves of Absence

EFFECTIVE DATE: 7/1/97

APPROVED BY GMEC: 6/20/97;5/8/98;9/11/98;9/10/99;

9/22/00;9/28/01;11/22/02;11/21/03;9/24/04;1/27/06;9/22/06;9/28/07;9/26/08;

9/25/09;9/24/10;9/23/11;9/28/12;11/30/12;9/27/13;9/26/14;9/25/15;9/23/16;

REVISED EFFECTIVE DATE:

7/1/17;9/22/17;11/30/18;11/22/19;11/20/20;7/29/22;3/24/23

PURPOSE

To develop an institutional policy to describe time off and leave of absence for trainees of Spartanburg Regional Healthcare System. This policy will describe the type of absence allowed with, or without pay, and the affect each absence will have on residency/fellowship training, if any.

This policy is not intended to prescribe decisions regarding time of resident/fellow graduation and attestation that the resident/fellow is ready for autonomous practice. It only provides guidance for maximum allowable time away from training before the program would have to extend training.

POLICY

Spartanburg Regional Healthcare System will honor requested time off as described below. Note, each Program Director must review the board requirements and State licensing laws and notify the resident/fellow if time off will affect his/her board eligibility or licensure.

Any absence, regardless of the circumstance, must be requested on the "Authorization For Absence/Leave" form located in each Program Coordinators' office and in New Innovations. The Director of the Program must approve leave, and leave must be communicated to the director of the rotation. Requests should be made ninety (90) days prior to the dates requested off. The resident is responsible to arrange coverage of patients, clinics, etc., before approval

can be granted. Residents' leave limits are subject to the specific program requirements of the Specialty Board and Program Review Committee. Residents/Fellows should refer to their Program Director for specific program requirements.

Absence from duty is authorized under the following circumstances:

TIME OFF

(A) **Vacation/Time Off** - All residents/fellows will receive twenty (20) paid days off (includes vacation/sick days) per residency year.

- Employee Health clearance for illness or injury is required for absences of 3 or more consecutive days. Once cleared by Employee Health, documentation must be provided to the program administration.

(B) **Paid Holidays** – Resident/Fellow physicians are entitled to six (6) paid hospital holidays (New Years, Memorial Day, Independence Day, Labor Day, Thanksgiving, Christmas), or compensatory time off. Residents may be granted a holiday if the department/rotation facility in which they are assigned observes the holiday and are closed.

Residents required to work during any part of the holiday (12 Midnight. – 12 Midnight), will be eligible for compensatory time off.

The compensatory day off must be used at the next available time during the academic year it was earned, and due to limited coverage, cannot be added to Christmas/New Years' holidays.

(C) **Bereavement Leave** – Emergency paid absence (up to three days; separate from vacation/time off days) may be approved upon the discretion of the Program Director for death of an immediate family member. Immediate family members defined by the hospital are the associate's spouse, domestic partner, mother, father, sister, brother, children, grandchildren, grandparents, stepparents,

stepbrother/sister, stepchildren, step-grandchildren, step-grandparents, mother-in-law, and father-in-law, including parents in loco parentis (standing in place of a parent).

(D) **Conference, Wellness and/or Administrative Leave** – Initiated by the Program Director on a case-by-case basis. Per contract: up to five (5) paid days annually; approved upon the discretion of the Program Director.

(E) **Jury Duty**

- Residents/Fellows who are requested to serve as jurors will be granted time off for this purpose. The resident/fellow will present the summons for duty to his/her Program Director prior to absence from work.
- The resident/fellow must present to his/her Program Director court verification indicating the time served.
- Residents/Fellows who are released early from jury duty are expected to immediately contact their Program Director or Attending regarding their work status and assignments.
- Residents/Fellows may retain any stipends received from the court for serving on jury duty.

(F) **Military Leave** – Residents/Fellows required to participate in temporary military duty qualify to receive a maximum of fifteen (15) regularly scheduled workdays of military pay by Spartanburg Regional per military fiscal year (October to September). A copy

of military orders must be given to the Program Director and DIO. The GME Office will contact Human Resources who will complete a Military Leave Change of Status Form (MIL COS Form) on the resident/fellow. When the resident/fellow returns to work, the program will need to contact Human Resources to have the resident/fellow placed back to active status from Military Leave.

Residents/Fellows on military leave will return from active service at the same point in rotation, in so far as possible. Necessary adjustments will be implemented to accomplish this goal. Residents moved into the position vacated by another resident called into active duty need to be fully informed of this fact.

(G) **Medical, Parental, & Caregiver Leave** – Residents/Fellows may take family and personal leave from training for certain significant life events:

- A resident's own serious health condition requiring prolonged evaluation and treatment.
- The birth and care of a newborn, adopted child, or fostered child (maternal/paternal).

- The care of an immediate family member with a serious health condition, including end of life care.

Use of family and personal leave does not waive any ACGME, program or specialty board requirements for academic advancement, graduation or board eligibility. Residents/Fellows should engage in careful planning with their advisor and Program Director to ensure all training requirements are met.

- Residents/Fellows may be provided 6 weeks of approved continuous leave of absence for the qualifying reasons as listed above, starting the day the resident is required to report.
 - Resident/Fellow salary benefits will be paid the equivalent of 100% for the first 6 weeks of the first approved medical/parental/caregiver leave of absence taken. *This benefit is only offered once for the program length of training.*
 - The resident/fellow will be expected to utilize the first three weeks (15 weekdays) of paid vacation days, and will reserve the remaining one week (5 weekdays) of paid time off for use at a later date. *Exception: When STD is requested and approved.*
 - Health and disability insurance benefits will continue during any approved medical/parental/caregiver leave of absence.
-

- Residents/Fellows taking family and personal leave must complete all required rotations, and other educational requirements.
- The CCC will work with the Program Director to determine if the resident/fellow has met the criteria to advance to the next year of training, or for graduation, with or without an extension of training.
- Extended residency/fellowship past graduation may be unpaid.

This leave policy applies to all ACGME-accredited training programs.

Family Medical Leave Act (FMLA) of 1993 – Spartanburg Regional complies with requirements established by Family Medical Leave Act of 1993. The Family Medical Leave Act entitles eligible residents up to twelve (12) weeks of **job protection** during one year's time for specified family and medical reasons. Spartanburg Regional complies with requirements outlined in the Americans with Disabilities Act (See Spartanburg Regional policy # IM1000.101) in relation to any resident on Family Medical Leave.

Resident eligibility for FMLA:

- Worked for Spartanburg Regional 12 months or longer.
- Worked 1,250 hours or more in the preceding 12 months, prior to commencement of leave.
- Program approval required for time requested prior to FMLA application.

Resident's responsibility:

- The resident must contact New York Life Group Benefit Solutions, the Administrator of the Family Medical Leave Act plan, to complete an application for FMLA (1-888-842-4462).

Short Term Disability (STD) – Residents/Fellows must opt in when signing up for benefits in order to have STD coverage. Effective date and premiums begin day 91 from hire date (day 1 of orientation).

Short Term Disability leave entitles eligible residents/fellows to a medical leave of absence, including short term disability benefits when unable to work due to maternity leave, or a non-work-related illness or injury. Residents/Fellows will use available vacation days during the first four weeks (20 weekdays) of Short Term Disability leave. In October 2022 residents/fellows will be able to select a 2-week or 4-week waiting period for STD to be effective January 2023. Once a resident's/fellow's vacation days are exhausted, the resident/fellow may receive no pay during the remaining four-week waiting period. *Exception: First approved medical/maternity leave of absence taken.*

Compliance with Board Requirements for Absence from Training – It is the responsibility of the Program Director to verify the effect of any absence from training will have on the

resident's ability to complete program and ACGME-RC requirements to meet board eligibility without extension of training. The Program Director will also be responsible for discussing consequences of extension on compensation, and will provide written documentation to the DIO using the attached form.

Board certification eligibility information is available to residents/fellows by each program and can be accessed at www.abms.org or <https://certification.osteopathic.org>.

Reference SRHS Policy: IM1000.508 Leaves of Absence

Reference Institutional Requirements (IRs): IV.H. 7/1/22

Medical, Parental, Caregiver Leave Approval

<input type="checkbox"/> First Approved Leave - No Short Term Disability Coverage
6 weeks of continuous leave of absence.
Salary paid equivalent of 100% for first 6 weeks.
Utilize three weeks of paid vacation (15 days).
Reserve one week (5 days) of paid time off for use at later date.
Past 6 weeks – No pay during the remaining days on leave.
Health and disability insurance benefits will continue.

<input type="checkbox"/> Second Approved Leave – No Short Term Disability Coverage
6 weeks of continuous leave of absence.
Utilize four weeks of paid vacation (20 days).
Once vacations days are exhausted, no pay during the remaining days on leave.
Health and disability insurance benefits will continue.

<input type="checkbox"/> First Approved Leave – Short Term Disability Coverage (4-week waiting period)
6 weeks of continuous leave of absence.
Salary paid equivalent of 100% for first 6 weeks.
Utilize three weeks of paid vacation (15 days).
Reserve one week (5 days) of paid time off for use at later date.
Week 5 – Short Term Disability starts paying 60% and hospital 40% of salary.
Past 6 weeks (approved Short Term Disability) Short Term Disability will pay 60% of salary. No additional percentage of pay from hospital.
Past 6 weeks (If Short Term Disability exhausted) No pay.
Health and disability insurance benefits will continue.

<input type="checkbox"/> Second Approved Leave – Short Term Disability Coverage (4-week waiting period)
6 weeks of continuous leave of absence.
Utilize four weeks of paid vacation (20 days).
Once vacation days are exhausted, no pay for the remaining four-week waiting period.
Week 5 – Short Term Disability starts paying 60% of salary. No additional percentage of pay from hospital.
Past 6 weeks (approved Short Term Disability) Short Term Disability will pay 60% of salary. No additional percentage of pay from hospital.
Past 6 weeks (If Short Term Disability exhausted) No pay.
Health and disability insurance benefits will continue.

<input type="checkbox"/> First Approved Leave – Short Term Disability Coverage (2-week waiting period option; effective 1/2023)
6 weeks of continuous leave of absence.
Salary paid equivalent of 100% for first 6 weeks.
Utilize two weeks of paid vacation (10 days).

Reserve one week (5 days) of paid time off for use at later date.
Week 3 – Short Term Disability starts paying 60% and hospital 40% of salary
Past 6 weeks (approved Short Term Disability) Short Term Disability will pay 60% of salary. No additional percentage of pay from hospital.
Past 6 weeks (If Short Term Disability exhausted) No pay or may utilize remaining 5 vacation days if available.
Health and disability insurance benefits will continue.

<input type="checkbox"/> Second Approved Leave – Short Term Disability Coverage (2-week waiting period option; effective 1/2023)
6 weeks of continuous leave of absence.
Utilize two weeks of paid vacation (10 days).
Once vacation days are exhausted, no pay for the remaining two-week waiting period.
Week 3 – Short Term Disability starts paying 60% of salary. No additional percentage of pay from hospital.
Past 6 weeks (approved Short Term Disability) Short Term Disability will pay 60% of salary. No additional percentage of pay from hospital.
Past 6 weeks (If Short Term Disability exhausted) No pay or may utilize remaining 5-10 vacation days if available.
Health and disability insurance benefits will continue.

*FMLA approval is job protection only. Must have worked for Spartanburg Medical Center for 12 months or longer.

Personal Leave Dates: _____

Plan documented and approved: _____
Program Director

Agrees: _____
Resident-Fellow (signature)

Agrees: _____
Resident-Fellow (Please print)

Date: _____