Program Policy

Subject: Patient Safety and Supervision of Progressive Resident Responsibilities.  
Category: Educational Environment  
Scope: Program/All Teaching Services  

Effective Date: 5/7/1993
Revised: 11/17/1999, 01/13/2006, 9/10

PURPOSE:

To assure patient safety and graded supervised levels of responsibility of trainees, by qualified (Licensed Independent Practitioners LIP) and Medical attendings.

POLICY:

1. Residents work under the supervision of LIP or medical attendings, on all rotations.
2. Hospital Liaison- The local site director will be responsible to communicate to the program director, the Graduate Medical Education Committee and the Designated Institution Official, any site specific information about resident supervision, the quality of resident patient care, treatment and services and about the residents' educational needs including any feedback from the Organized Medical Staff (OMS)."
PROCEDURES:

1. Residents are given progressive responsibility for patient care based on demonstration of competence.
2. The program director defines the level of responsibility for each year of residency training based on the current resident progressive learning and promotion criteria established by the program.
3. The medical attending will delegate care of the patients to residents based on the needs of the patient and the skills of the residents.
4. Every patient will have a medical attending that is appropriately credentialed and privileged and maintains ultimate responsibility for patient care. In choosing to admit a patient to the teaching service, the attending commits to delegate primary management to the resident team under his/her supervision.
5. The attending or staff on record must always be notified for all admissions and discharges, unanticipated deterioration in the patient's condition, transfer to or from a critical care service, when invasive or expensive studies are planned, in cases where there is a question of or actual discharge against medical advice, or in the unanticipated death of a patient.

LEVELS OF SUPERVISION:

1. **Direct Supervision**- the medical attending or PGY 2, 3 or 4 resident is physically present with the resident and patient.
2. **Indirect Supervision with direct supervision immediately available**- The medical attending or PGY 2, 3 or 4 resident is physically within the confines of the site of patient care and is immediately available to provide direct supervision.
3. **Indirect supervision with direct supervision available**- The medical attending or PGY 2, 3 or 4 resident is not physically present within the confines of the site of patient care but is immediately available via phone and is able to provide direct supervision.
4. **Oversight**- The supervising physician is able to provide review of procedures/encounters with feedback provided after care is delivered.
<table>
<thead>
<tr>
<th>RESIDENT LEVEL</th>
<th>DIRECT SUPERVISION</th>
<th>INDIRECT SUPERVISION WITH DIRECT SUPERVISION IMMEDIATELY AVAILABLE</th>
<th>INDIRECT SUPERVISION WITH DIRECT SUPERVISION AVAILABLE</th>
<th>OVERSIGHT</th>
</tr>
</thead>
<tbody>
<tr>
<td>PGY 1</td>
<td>1. Initiate management and stabilize patients with emergent conditions</td>
<td>1. Management of common conditions in the hospital and ambulatory setting.</td>
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<td>Data gathering, physical examination and clinical reasoning</td>
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<td></td>
<td>2. Non-ABIM required procedures - Medical attending supervision only.</td>
<td>2. ABIM - required procedures - a) Draw venous blood b) Draw arterial blood c) Perform pap smear and endocervical culture d) Place a peripheral venous line</td>
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<td>3. Advanced cardiac life support</td>
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<td>PGY 2</td>
<td>Non-ABIM required procedures- Medical attending supervision only</td>
<td>Advanced cardiac life support</td>
<td>Patient management in the hospital and ambulatory setting</td>
<td>ABIM-required procedures (as outlined above)</td>
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<td>PGY 3</td>
<td>Non-ABIM required procedures- Medical attending supervision only</td>
<td>Advanced cardiac life support</td>
<td>ABIM-required procedures (as outlined above)</td>
<td>Patient management in the hospital and ambulatory setting</td>
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</tbody>
</table>

Revised 1.13.06, 9.1.10