

Requirement 4.1.3 (IS & RS): Residency education occurs in a safe learning environment

Indicator 4.1.3.2 (IS & RS): There is an (are) effective centralized policy(ies) addressing residents' physical, psychological, and professional safety, including but not limited to: travel, patient encounters (including house calls), after-hours consultations, patient transfers (e.g. Medevac), fatigue risk management, and complaint management.

4.1.3.3 (IS): Centralized policies and guidelines regarding resident safety consider discipline- and program-specific contexts and allow for program-specific additions and/or variations, as appropriate.

5.1.2.3 (RS): The policy regarding resident safety effectively addresses both situations and perceptions of lack of resident safety, and provides multiple avenues of access for effective report and management.

Requirement 4.1.4 (IS & RS): Residency education occurs in a positive learning environment that promotes resident wellness.

Indicator 4.1.4.2 (IS & RS): There is an (are) effective centralized policy (ies) addressing residents' wellness, including but not limited to absences and educational accommodation.

Indicator 5.1.3.4 (RS): Residents have access to and are aware of confidential support services to manage stress (e.g., financial, psychological, etc) and illness.

POSTGRADUATE MEDICAL EDUCATION

RESIDENT HEALTH AND SAFETY POLICY

1. BACKGROUND

The PGME Office recognizes that residents have the right to a safe environment during their residency training. The responsibility for promoting a culture and environment of safety for residents rests with the Schulich School of Medicine & Dentistry, hospitals and other training sites, residency training programs and residents themselves.

The Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada have collaborated in developing national standards for evaluation of the University Postgraduate Medical Education function and the sites used for residency education. Standard 5.1.2.1 states that:

Safety is actively promoted throughout the learning environment for all involved in the residency program.

Under the 2016-2020 PARO-CAHO collective agreement between the Professional Association of Residents of Ontario (PARO) and the Council of Academic Hospitals of Ontario (CAHO), residents have dual status of being both postgraduate medical trainees registered in University programs and physicians employed by the hospitals. Trainees are entitled to secure and provide call rooms and secure

access between call room facilities and service areas. Residents have access to and coverage for Occupational Health services (including TB tests, immunizations and follow-up, and post-exposure prophylaxis and management), on the same terms as applicable to other hospital employee groups.

- Accreditation Canada standards indicate that member hospitals must have an operational safety and security program for staff and patients.
- The Province of Ontario's Occupational Health and Safety Act, 1990, (OHSA) outlines minimum standards for health and safety and establishes procedures for dealing with workplace hazards and protection against risks of workplace violence.

The Western University Health and Safety Policy states that the University has an ethical and legal responsibility to provide a safe environment in which to study and work and that the University strives to foster the development of a safety consciousness in all members of the University community for the purpose of minimizing the risk of injury to persons or the damage to property or facilities. The policy further provides that Deans, department heads, supervisors and any persons responsible for directing the work of others are responsible for ensuring that safe and healthy work conditions are maintained in their assigned areas, and that Faculty, staff and learners are responsible for complying with all applicable safety requirements, including legislated requirements and all University policies and procedures related to health and safety.

2. PURPOSE

The purpose of this document is to:

- 2.1 minimize the risk of injury and promote a safe and healthy environment on the University campus and teaching sites
- 2.2 confirm the Schulich School of Medicine & Dentistry's commitment to the health, safety, and protection of its residents
- 2.3 provide a procedure to report hazardous or unsafe training conditions and a mechanism to take corrective action.

3. SCOPE AND RESPONSIBILITY

- 3.1 The University, hospitals, and affiliated teaching sites are accountable for the environmental, occupational, and personal health and safety of their employees.
- 3.2 The University, hospitals, and affiliated teaching sites have the right to make implementation decisions and allocate resources within their respective policies.
- 3.3 All teaching sites must adhere to the requirements of the PARO-CAHO collective agreement, unless specifically exempted in the Agreement.

3.4 Individual residency programs are required to develop and disseminate safety policies to deal with issues specific to their training (e.g. Medivac/Ambulance Transport). In addition, site specific policies may be required.

3.5 Residents must comply with applicable health and safety codes and policies and communicate safety concerns to both the training site and the program. Residents are expected to participate in required safety sessions at training sites.

3.6 Residency training programs are required to act promptly to address identified safety concerns.

3.7 This Policy provides a procedure for residents to use when faced with a health and safety issue during the course of their training which cannot be resolved at the local training site level.

4. PROCEDURE

Procedure

- The PGME office will provide programs with best practices for orienting learners to individual safety risks. Programs must ensure trainees are adequately oriented to policies prior to initiating clinical services.
- Programs must train residents to identify safety risks specific to each location/service. Programs and trainees will work together to assess safety risks specific to each rotation.

Environmental Health

4.1 Accidents, incidents and environmental illnesses occurring during a resident's training will be reported and administered according to the reporting policies and procedures of the University, hospital or clinical teaching location.

Occupational Health

4.2 Residents will receive instruction on body substance precautions, infection control, and occupational health procedures in the hospitals and teaching sites. This instruction is a joint responsibility of the hospital or teaching site and the residency program.

4.3 Resident Immunization Data is collected by the London Health Sciences Centre and St. Joseph's Health Care, London. Other hospitals and training sites may request this data from residents prior to completing a rotation at their site.

4.3.1 Residents not meeting hospital immunization and other occupational health requirements are not permitted to complete their registration with the PGME Office and will not be credentialed by the hospital. Information on current immunization and other occupational health requirements may be obtained from the hospitals.

4.4 Residents are professionally and ethically obligated to inform the Associate Dean PGME of any blood borne infection. Accommodation or modification of their program will be determined on a case by case basis.

Personal Safety

4.5 All teaching sites, hospitals, and long-term care institutions are responsible for ensuring the safety and security of residents training in their facilities in compliance with their existing employee safety and security policies/procedures as well as the requirements outlined in the PARO-CAHO agreement. Health and safety policies or procedures at locations are subject to the standards and rights set out in the Occupational Health and Safety Act and the PARO-CAHO Collective Agreement and any other applicable law.

4.6 The following policies apply only during residents' activities that are related to the execution of residency duties:

a) Travel

- Residents are responsible for making appropriate arrangements for travel to clinical or other academic assignments. If circumstances give rise to travel safety concerns (e.g. weather conditions, rotation scheduling or on call scheduling), it is the Residents' responsibility to notify their Program Director promptly.

b) After Hours and On-Call Work

- As part of their orientation to a new site, residents should be made aware of site-specific security services and educated on when it is appropriate to utilize their services.
- Residents are not expected to work alone at after-hours clinics.
- Residents are not expected to make unaccompanied home visits.
- Residents should only telephone patients from a clinic or hospital telephone line. If calls must be made with a personal or mobile phone, this should be done using call blocking.
- No postgraduate trainee is expected or required to walk alone at night where the trainee reasonably perceives doing so to be unsafe. If a trainee has a concern, the trainee must raise the concern with the supervisor/program director who will take appropriate action, which may include arranging for an alternative means for the resident to travel, at no expense to the resident.

c) Violent or Threatening Patients

- Programs should provide special training to residents who are expected to encounter aggressive patients.
- If a resident feels that his or her personal safety is threatened, he or she should remove him or herself from the situation in a professional manner and seek immediate assistance.
- In the event of a safety emergency at any time, the resident should call security and/or the police.
- Residents should not assess violent or aggressive patients without the backup of security and an awareness of accessible exits.
- The physical space requirements for management of violent patients must be provided where appropriate.

d) Occupational Health and Safety

- Residents should familiarize themselves with the location and services offered by the relevant Occupational Health and Safety Office. This includes familiarity with policies and procedures for infection control and protocols following exposure to contaminated fluids, needle stick injuries, and reportable infectious diseases.
- Residents must observe universal precautions and isolation procedures when indicated.
- Residents should keep their immunizations up to date. Overseas travel immunizations and advice should be sought well in advance when travelling abroad for electives or meetings.
- Residents working in areas of high and long term exposure to radiation must follow radiation safety policies and minimize their exposure according to current guidelines.

- Radiation protective garments (aprons, gloves, neck shields) should be used by all residents using fluoroscopic techniques.
- Pregnant residents should be aware of specific risks to themselves and their fetus in the training environment and request accommodations were indicated. Residents should consult the appropriate Occupational Health and Safety Office for information.

e) General

- Call rooms and lounges provided for residents must be clean, smoke free, located in safe locations, and have adequate lighting, a phone, fire alarms, and smoke detectors. Any appliances supplied are to be in good working order. There must be adequate locks on doors.
- Site orientations should include a review of local safety procedures.

Psychological Safety

4.7 Learning environments must be free from intimidation, harassment, and discrimination. Both the hospitals and the University have policies and procedures in place to address such issues. Residents should familiarize themselves with Schulich's policy on *Faculty/Student/Staff Code of Conduct for Teacher-Learner and Trainee-Clinician Relationships* https://www.schulich.uwo.ca/learner-equity-wellness/equity_professionalism/code_of_conduct.html and the applicable hospital policies.

Other

4.8 Programs should promote a culture of safety in which residents are encouraged to report and discuss adverse events, critical incidents, 'near misses', and patient safety concerns.

5. REPORTING/FOLLOW UP

5.1 Residents identifying a safety or security concern or breach must report it to their immediate supervisor at the training site and comply with the site reporting requirements. When appropriate, the safety or security concern should also be brought to the attention of the Program Director or PGME Office.

5.2 If the safety or security issue is not resolved at the local level, it must be reported to the Associate Dean, PGME who will investigate and may re-direct the issue to the relevant hospital or University office for resolution. The resident/faculty member bringing the incident forward will receive a response within 10 days outlining how the complaint was handled or if it will require further review.

5.3 Pending an investigation and the resolution of an identified personal safety or security concern, the Program Director and/or Associate Dean, PGME has the authority to remove residents from clinical placements if the risk is seen to be unacceptable.

5.4 The Associate Dean, PGME may bring resident safety/security issues to the hospital office responsible for safety and security, the University's Occupational Health and Safety Office, Campus Community Police Service, the Associate Dean, Windsor Program, the Associate Dean, Distributed Education, or the Associate Dean, Equity and Professionalism for resolution or further consultation.

5.5 The Associate Dean, PGME will report as appropriate to the Postgraduate Medical Education Committee on resident safety/security issues.

5.6 Health and safety systems issues may also be brought to the attention of the Associate Dean, PGME at any time by various methods, including internal reviews, resident/faculty/staff reporting, or police/security intervention.

5.7 Trainees cannot be negatively impacted for refusing to engage in clinical or educational experiences if they truly feel at risk in doing so and have communicated this to their Program Directors and respective site supervisors. It is recognized however that there are times (for example, in outbreaks of infectious disease), when a residual risk will remain after all known precautions are taken. Professional responsibility to patients may require engaging in care despite these risks.

5.8 Depending on the situation and where it arises, the trainee is expected to notify the appropriate supervisor.

Urgent Situations:

5.7 Urgent resident safety issues must be brought to the attention of the Program Director and Associate Dean, PGME immediately.

6. University Personal Safety Resources

Residents are responsible for obtaining and familiarizing themselves with hospital policies and resources relating to health, safety and security. Questions about those policies should be directed to relevant hospital personnel.

Residents should also be aware of the following Faculty and University policies and resources:

- Schulich School of Medicine & Dentistry's Policy, *Faculty/Student/Staff Code of Conduct for Teacher-Learner and Trainee-Clinician Relationships*

https://www.schulich.uwo.ca/learner-equitwellness/equity_professionalism/code_of_conduct.html

- The University's *Non-Discrimination/Harassment Policy*

<https://www.uwo.ca/equity/about/policies.html>

- Personal safety information, advice, and resources listed on Campus Community Police's website, including the following:

Work Safe Program: https://www.uwo.ca/police/personal_safety/work_safe_program.html

Western's Safe Campus Community initiatives:

https://www.uwo.ca/police/campus_safety/index.html

Western Foot Patrol: <http://www.uwo.ca/footpatrol/>

Approvals:	PGME Committee	Oct. 10th, 2018	REVISED POLICY
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