

Resident Safety Policy

July, 2012

1. BACKGROUND

The Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada have collaborated in developing national standards for Residency programs. These include that:

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.

The document, “Western University, Schulich School of Medicine & Dentistry, Postgraduate Medical Education Resident Health and Safety Policy” available at: https://www.schulich.uwo.ca/medicine/postgraduate/academic_resources/2018-Resident-Health-and-Safety-Policy.pdf provides background to the relationship between the University and all clinical teaching sites with respect to resident safety. Procedures for reporting and responding to specific circumstances are contained in that document. The Otolaryngology-Head and Neck Surgery residency program formally acknowledges, endorses and agrees to adhere to these guidelines.

2. PURPOSES OF THIS POLICY

- To augment the above PGME guidelines by identifying program-specific safety risks
- To describe the mechanism in place at the program level for addressing, reporting, and/or reducing unsafe events and conditions
- To establish that residents have the right to use their judgment when deciding if, when, where, and how to engage in clinical and/or educational experiences that they perceive to involve safety risks

3. SCOPE AND RESPONSIBILITY

- The University and all (fully and partially) affiliated teaching sites as well as ambulatory, outpatient and private practice locales are accountable for the environmental, occupational, and personal health and safety of their employees.
- Residents must adhere to the relevant health and safety policies and procedures of their current teaching site.
- All teaching sites must meet the requirements of the PARO-CAHO collective agreement.
- The Otolaryngology-Head and Neck Surgery residency program is responsible for identifying and communicating foreseeable safety risks related to education carried out within the program, educating residents about risk minimization strategies, and for making decisions about educational experiences that take into account, among other things, the educational benefit relative to any safety risk.

This policy outlines the provisions to address safety concerns related to educational activities undertaken as part of the Otolaryngology-Head and Neck Surgery residency program.

4. POLICY STATEMENT

- a) Reporting of, and response to, all manner of incidents related to Environmental Health, Occupational Health, and Personal Health and Safety will be addressed as outlined in the document, "Western University, Schulich School of Medicine & Dentistry, Postgraduate Medical Education Resident Health and Safety Policy."
- b) The Otolaryngology-Head and Neck residency program requires residents to engage in the following specific situations that may pose a safety risk:
 - exposure to potentially dangerous environments
 - exposure to potentially harmful bodily fluids
 - exposure to environmental hazards
 - encounters with potentially violent or aggressive patients
 - exposures to potentially dangerous equipment and/or high risk transportation
- c) The program commits to providing residents with a full disclosure of foreseeable potential risks associated with these activities. The program will ensure that residents receive education and preparation for these activities using best available evidence and practices AND assess residents for appropriate understanding PRIOR TO involvement in these activities.
- d) Residents must immediately notify their supervisor, clinical administrator, or more senior resident of perceived safety concerns
- e) It is recognized that, at times, a resident may be called upon to respond to an acute situation involving a patient which poses a risk to the resident's personal safety and wellbeing. Residents are expected to consider the effect on themselves and the patient when deciding on a course of action. Every effort should be made to consult more experienced health care providers or staff and seek assistance, support or alternative courses of action. Ultimately, residents should use their best judgment when deciding if, when, where, and how to engage in clinical and/or educational experiences. Should a resident fail to engage in such an experience (or engage in a manner other than what has been requested or previously expected of them) due to perceived safety concerns, the resident will report this to their site supervisor immediately AND to the residency program director at the earliest reasonable time.
- f) Residents involved in safety-related events or who have safety concerns are encouraged to contact the Learner Equity and Wellness office at the Schulich School of Medicine and Dentistry, PGME.

- g) A resident should not encounter negative repercussions for decisions they made in good faith related to personal safety concerns.
- h) The residency program committee will review all concerns brought forth and take steps to minimize future risk.
- i) Should there be a situation in which a resident repeatedly fails to engage in an activity that can be reasonably considered part of their specialty practice, that is a mandated component of the residency training, and for which all means of risk reduction and education have been instituted by the program, the residency program committee will review the circumstances in the context of the specialty-specific and general CanMEDS physician competency frameworks. Disputes or appeals of decisions made by the residency program committee will be referred to the Associate Dean, PGME.

Current Revision Number: ___1___

Drafted By: _ Dr. Brian Rotenberg, Residency Program Director ___

Approved By: _PGE Committee___

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