

# **Departmental Policy**

# POSTGRADUATE MEDICAL EDUCATION Resident Safety Policy

Classification Residency Training	Table of Contents	
Implementation Authority Associate Dean, PGME Effective Date	<ol> <li>Purpose</li> <li>Scope</li> <li>Definitions</li> <li>Policy Statement Preamble</li> </ol>	1 2 2 3
June 2008	<ol><li>Physical Safety</li><li>a. Travel</li></ol>	3 3
Latest Revision June 2013 September 21, 2020	b. Working Alone c. Aggressive or Violent Patients d. Infection Control e. Physical Plant f. Ionizing Radiation g. Global Travel/Immunization h. Pregnancy i. Fatigue Risk Management j. Hazardous Materials 6. Psychological Safety 7. Professional Safety 8. Patient Safety	5 5 5 6 6 7 7 8 8 8 9

## Purpose

**1** Background: the Royal College General Standards of Accreditation for Institutions with Residency Programs includes the following:

Requirement 4.1.3: Residency education occurs in a safe learning environment.

- Indicator 4.1.3.1: Safety is actively promoted throughout the learning environment for all those involved in residency education.
- Indicator 4.1.3.2: Effective central policies and processes are in place addressing residents' physical, psychological, and professional safety, including but not limited to:
  - o After-hours consultation
  - o Complaints and allegations of malpractice

- o Fatigue risk management
- o Hazardous materials
- Infectious agents
- Ionizing radiation
- Patient encounters (including house calls)
- Patient transfers (e.g., Medevac)
- o Safe disclosure of patient safety incidents
- Travel
- Violence, including sexual, gender-based or racially motivated violence.

The purpose of this policy is to ensure a safe environment during residency training by clarifying the concepts of safety and outlining the roles and responsibilities of the University, Residency Training Programs and Residents.

Each Residency Program is required to develop a discipline-specific policy in accordance with the General Standards for Accreditation of Residency Programs. This policy must be made available to Residents.

#### Scope

This policy applies to all Residents in all Residency Training Programs in the Cumming School of Medicine at the University of Calgary.

#### **Definitions**

- 3 In this policy,
  - a) "AHS" means Alberta Health Services.
  - Associate Dean" means Associate Dean of Postgraduate Medical Education in the Cumming School of Medicine at the University of Calgary.
  - c) "CMPA" means Canadian Medical Protective Association.
  - d) "CPSA" means College of Physicians and Surgeons of Alberta.
  - e) "Department" means a Department in the Cumming School of Medicine at the University of Calgary.
  - f) "Division" means a Division in the Cumming School of Medicine at the University of Calgary.
  - g) "FOIP" means Freedom of Information and Privacy Act.
  - h) "PARA" means Professional Association of Resident Physicians of Alberta,
  - i) "PGME" means Postgraduate Medical Education at the Cumming School of Medicine

- j) "PFSP" means Physician and Family Support Program.
- k) "Program" means Residency Training Program in the Cumming School of Medicine at the University of Calgary.
- "Program Director" means the person responsible for the overall conduct of the Residency Training Program in a discipline, and is the person responsible to the Associate Dean of Postgraduate Medical Education in the Cumming School of Medicine at the University of Calgary.
- m) "Director of Resident Support" means a CSM faculty member who is formally appointed as the "point of contact" to whom learners address complaints or concerns related to harassment within the learning environment.
- n) "University" means the University of Calgary.

## Policy Statement 4 Preamble

- 4.1 Residents have the right to a safe environment during residency training.
- 4.2 Promoting a culture and environment of safety for Residents is the responsibility of the Faculty, Departments/Divisions, Residency Training Programs, AHS and the Residents themselves.
- 4.3 Safety includes physical, psychological, and professional well-being.
- 4.4 Residents must comply with safety policies and be responsible for providing information and communicating concerns to their Program.
- 4.5 Residency Training Programs and Faculty must act promptly to address identified safety concerns and incidents and be proactive by providing a safe learning environment.

## 5 Physical Safety

## Travelling for clinical or other academic activities:

5.1 When Residents are travelling for clinical or other academic assignments by private vehicle, they are expected to maintain their vehicle adequately, and travel with appropriate supplies and contact information.

5.2 Distracted Driving Legislation (Bill 16) in the Province of Alberta applies to all vehicles as defined by the *Traffic Safety Act*, including bicycles, and restricts drivers from:

using hand-held cell phones,

texting or e-mailing,

using electronic devices such as laptop computers, video games, cameras, video entertainment displays and programming portable audio players (e.g., MP3 players), entering information on GPS units,

reading printed materials in the vehicle, writing, printing or sketching in the vehicle, personal grooming.

- 5.3 For long distance travel for clinical or other academic assignments, Residents must ensure that the home program residency office is aware of the itinerary.
- 5.4 For long distance travel (by vehicle) to attend clinical or other academic assignments, Residents should not be on call the day prior.
- 5.5 When long distance travel is required to begin a new rotation, Residents should request not to be on call the last day of the preceding rotation.
  - 5.5.1 If this is not possible, there should be a designated travel day on the first day of the new rotation before the start of any clinical activities.
- 5.6 Residents are not expected to travel long distances during inclement weather for clinical or other academic assignments.
  - 5.6.1 If such weather prevents travel, the resident is expected to contact the home Program office promptly.
  - 5.6.2 Assignment of an alternate activity is at the discretion of the Program Director.
- 5.7 Residents should not drive home after call if they have not had adequate rest. In this instance Residents are strongly encouraged to access the TAXI Reimbursement Program provided under section 28.04 of the Resident Physician Agreement.
- 5.8 Programs must maintain policies governing Resident participation in patient transfers by ambulance including critical care and infant transport where applicable that reflect the unique risks in each discipline.

5.9 Travel Accident Insurance for Residents is in accordance with AHS provisions articulated in the Resident Physician (Collective) Agreement.

## **Working Alone:**

- 5.10 Residents should not work alone after hours in health care or academic facilities without adequate support from AHS Protection Services or University Campus Security.
- 5.11 Residents are not expected to work alone at after-hours' clinics.
- 5.12 Residents are not expected to make unaccompanied home visits.
- 5.13 Residents should only telephone patients using caller blocking.
- 5.14 Residents should not walk alone for any major or unsafe distances at night. Residents on University of Calgary campus are encouraged to access the following services:

Campus Safewalk Program by calling Campus Security at 403.220.5333 (24 hours a day, 7 days a week, 365 days a year)

Use campus Help Phones, they are not just for emergencies

Approach an on-duty Safewalk volunteer and request a walk

### **Aggressive or Violent Patients:**

- 5.15 Residents should not assess violent or psychotic patients without the backup of security and an awareness of accessible exits.
- 5.16 The physical space requirements for management of violent patients must be provided where appropriate.
- 5.17 Special training should be provided to Residents who are enrolled in Programs where there is a reasonable expectation of an encounter with aggressive patients.

### **Infection Control:**

- 5.18 Orientation provided by PGME and AHS must include a review of local onsite safety procedures.
- 5.19 Residents should familiarize themselves with the location and services offered by the AHS Occupational Health and Safety Office.
- 5.20 Residents must be familiar with policies and procedures for infection control and protocols following exposure to contaminated fluids, needle stick injuries, and reportable infectious diseases.

5.21 Resident must be familiar with PGME policy on Role of Learners
During Large Scale Communicable Disease Outbreak

#### Accessible at:

https://cumming.ucalgary.ca/sites/default/files/teams/6/Operating%20Standards/ROLE%20OF%20LEARNERS%20DURING%20LARGE%20SCALE%20COMMUNICABLE%20DISEASE%20OUTBREAKS.pdf

5.22 Residents must be familiar with AHS guideline documents with specific attention to:

Proper hand washing

Proper use of PPE

Education & Training/Infection Prevention & Control

Accessible at: <a href="https://www.albertahealthservices.ca/info/page6410.aspx">https://www.albertahealthservices.ca/info/page6410.aspx</a>

- 5.23 Residents must maintain up to date N95 respirator fittings
- 5.24 Residents must observe universal precautions and isolation procedures when indicated.
- 5.25 Residents must be familiar with AHS guidelines on Hazardous Medication & PPE

#### Accessible at:

https://www.albertahealthservices.ca/assets/info/hp/pharm/if-hp-pharm-hazardous-medications-ppe-guide.pdf

### **Physical Plant:**

- 5.26 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.
- 5.27 Any appliances supplied must be in good working order.
- 5.28 There must be adequate locks on doors.

## **Ionizing Radiation:**

5.29 Radiation protective garments (aprons, gloves, neck shields) should be used by all Residents using fluoroscopic techniques.

- 5.30 Residents enrolled in Programs with regular exposure to radiation must be supplied with radiation dosimeter. The dosimeter must be worn whenever the Resident is working with
  - a) x-ray equipment
  - b) radioactive patients or
  - c) radioactive materials
- 5.31 Dosimeters must be monitored at regular intervals as recommended by the supervising Program.

#### **Global Travel & Immunizations:**

- 5.32 Residents must keep their immunizations up to date in accordance with the recommendations of the Alberta Office of Public Health.
- 5.33 Overseas travel immunizations and advice must be sought from the Global Health Office at least 3 and preferably 6 months in advance when travelling abroad for electives or meetings.
- 5.34 Residents travelling to developing countries must have a) written support from the home Program Director b) complied with all requirements of Global Health including a Risk Assessment and Pre-Departure Program Training c) written approval from the Associate Dean PGME and d) authorization from Alberta Health Services
- 5.35 Residents must be familiar with licensing requirements, medical liability insurance and workers' compensation (if appropriate) at the receiving institution.

### Pregnancy:

5.36 Pregnant Residents must be aware of specific risks to themselves and their fetus in the training environment and request accommodations where indicated or as recommended by the Program Director (see PGME Policy on Resident Accommodations) and in accordance with discipline specific risk and training conditions

#### Accessible at:

https://cumming.ucalgary.ca/sites/default/files/teams/6/policies/pgme-resident-accommodation-policy-final-june20-v1.pdf

- 5.37 Residents should contact the AHS Occupational Health and Safety Office for information or confidentially consult the **Office of Resident Affairs & Physician Wellness** for guidance.
- 5.38 Programs must adhere to the requirements of Article 11 of the Resident Physician Agreement with respect to Maternity and Paternity Leaves of Absence

## **Fatigue Risk Management:**

5.39 Fatigue Risk Management is a shared responsibility between Programs, the Office of Resident Wellness, PGME, and Resident Physicians. Please refer to PGME Operating Standard for FRM

## Accessible at:

https://cumming.ucalgary.ca/sites/default/files/teams/6/Operating%20Standards/pgme-operating-standard-frm-final-june20-v1.pdf

#### **Hazardous Materials:**

5.40 Programs that include exposure to or handing of hazardous materials must ensure that Residents are appropriately trained and familiar with

safety protocols and procedures

5.41 Residents must be familiar with AHS Guide on Hazardous Medication & PPE.

#### Accessible at:

 $\frac{https://www.albertahealthservices.ca/assets/info/hp/pharm/if-hp-pharm-hazardous-medications-ppe-guide.pdf}{}$ 

## 6 Psychological Safety

- 6.1 Learning environments must be free from intimidation, harassment and discrimination.
- 6.2 A Resident who experiences intimidation, harassment or discrimination may formally report concerns to the Director of Resident Support (DRS) or Associate Dean, PGME. This process is articulated in detail in the PGME Operating Standard on the Safe Learning Environment
- 6.4 The DRS or Associate Dean must ensure that the Resident is familiar with and can access the following supports:
  - A personal health care provider or alternative
  - Alberta Medical Association PFSP
  - Office of Resident Affairs & Physician Wellness
  - Office of Professionalism, Equity and Diversity
  - University of Calgary Sexual Violence Support Team Accessible at:

https://www.ucalgary.ca/sexual-violence-support/get-support

 University of Calgary Office of Equity, Diversity & Protected Disclosure

Accessible at:

http://contacts.ucalgary.ca/info/odepd/profiles/1-4205578

6.5 In a circumstance where there is immediate risk to Resident safety and well-being, the DRS or Associate Dean may remove the Resident from a rotation or educational experience. This decision must be made in consultation with the home Program Director and requires approval of the Associate Dean if not already involved.

## 7 Professional Safety

- 7.1 Residents may experience conflict between personal ethical/religious beliefs and professional duties as determined by the Program. In such instances the Resident may consult one or more of the following resources for direction:
  - Office of Professionalism, Equity and Diversity
  - PGME Accommodations
  - o CPSA
- 7.2 Programs must act in accordance with the provisions of the Resident Physician Collective Agreement
- 7.3 Information disclosed during meetings of either a Residency Program
  Committee or Competence Committee meeting may be disclosed to the
  Associate Dean PGME but is otherwise considered confidential
- 7.4 Residents are required to secure medical liability insurance through CMPA
- 7.5 Programs must comply with FOIP.
- 7.6 Resident feedback and complaints must be handled in a manner that ensures Resident anonymity, unless the Resident explicitly consents otherwise
- 7.7 In the case of a complaint that must be dealt with due to its severity or threat to other Residents, a Program Director may need to proceed against the complainant's wishes.
- 7.8 In that case, the Faculty's Office of Equity and Professionalism or the University Sexual Harassment Office should be immediately consulted (as appropriate)
- 7.9 Depending on the nature of the complaint, AHS and/or CPSA may need to be informed and involved.

- 7.10 In general, the Program Director should serve as a resource and advocate for the Resident in the complaints' process.
- 7.11 Residents must be members of the CMPA and follow CMPA recommendations in the case of real, threatened or anticipated legal action.
- 7.12 Under the University insurance for lawsuits related to academic issues,
  Residents are indemnified from actions or lawsuits arising from the actions
  or decisions made by the University committees on which they serve.

## 8 Patient Safety

- 8.1 Programs must ensure that Residents are aware of confidential mechanisms to report patient safety concerns
- 8.2 PGME/AHS Resident orientation must include an introduction to the Reporting & Learning System for Patient Safety
- 8.3 Residents are required to attend a screening of, and debrief session for "Greg's Wings, Falling Through the Cracks" as part of PGME Orientation.
- 8.4 Residents may also disclose concerns regarding patient safety to any of the following:
  - o Faculty member
  - o Program Director, or
  - o PGME Resident Ombudsman.
  - AHS Reporting & Learning System for Patient Safety

## AHS Policies for Reference

Alberta Human Rights Act

University of Calgary Sexual Violence Policy and Links to Support

University of Calgary Policy on Harassment <a href="https://www.ucalgary.ca/policies/files/policies/harassment-policy.pdf">https://www.ucalgary.ca/policies/files/policies/harassment-policy.pdf</a>
PGME Policy on Resident Accommodations

Workplace Hazardous Material Information System

CMA Code of Ethics and Professionalism

AHS Protection Services:

E: <u>protection.services@albertahealthservices.ca</u> T: 403-943-4407 ACH 403-955-7600

Approved by PGME Committee: September 21, 2020