



Postgraduate Medical Education

RESIDENT SAFETY POLICY

PREAMBLE

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 Faculty of Medicine, regional health authorities, clinical departments, and residents themselves. The concept of resident safety includes physical, emotional, and professional security.

KEY RESPONSIBILITIES:

For Residents

- To provide information and communicate safety concerns to the program and to comply with safety policies.

For Residency Training Programs

- To act promptly to address identified safety concerns and incidents and to be proactive in providing a safe learning environment.

I. PHYSICAL SAFETY

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

- When residents are traveling for clinical or other academic assignments by private vehicle, it is expected that they maintain their vehicle adequately and travel with appropriate supplies and contact information. The regional health authority prohibits cell phone use and text messaging in the performance of residency duties while driving.
- For long distance travel for clinical or other academic assignments, residents should ensure that a colleague or the home residency office is aware of their itinerary.
- Residents should not be on call the day before long distance travel for clinical or other academic assignments by car. When long distance travel is required in order to begin a new rotation, the resident should request that they not be on call on the last day of the preceding rotation. If this cannot be arranged then there should be a designated travel day on the first day of the new rotation before the start of any clinical activities.
- Residents are not to be expected to travel long distances during inclement weather for clinical or other academic assignments. If such weather prevents travel, the resident is expected to contact the program office promptly. Assignment of an alternate activity is at the discretion of the Program Director.
- Residents should not work alone after hours in health care or academic facilities without adequate support from Protection 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 using caller blocking.
- Residents should not be expected to walk alone for any major or unsafe distances at night.

- Residents should not drive home after call if they have not had adequate rest.
- Residents should not assess violent or psychotic 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.
- Special training should be provided to residents who are expected to encounter aggressive patients.
- Site orientations should include a review of local safety procedures.
- Residents should familiarize themselves with the location and services offered by the 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 traveling abroad for electives or meetings.
- 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.
- 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 where indicated. Residents should consult the Occupational Health and Safety Office for information.

II. PSYCHOLOGICAL SAFETY

- Learning environments must be free from intimidation, harassment, and discrimination.
- When a resident's performance is affected or threatened by poor health or psychological conditions, the resident should be granted a leave of absence and receive appropriate support. Such residents should not return to work until an appropriate assessor has declared them ready.
- Residents should be aware of and have easy access to the available sources of immediate and long-term help for psychological problems, substance abuse problems, harassment, and inequity issues. Resources include the AMA Physician and Family Support Program, University of Calgary Counseling Services and Sexual Harassment Office, the Faculty of Medicine Office of Equity and Teacher Learner Relations, and PARA.

III. PROFESSIONAL SAFETY

- Some physicians may experience conflicts between their ethical or religious beliefs and the training requirements and professional obligations of physicians. Resources should be made available to residents to deal with such conflicts. Examples include the College of Physicians and Surgeons of Alberta, University of Calgary Faculty of Medicine, and the regional health authority.
- Programs are bound by PARA contract allowances for religious holidays.

- Residents should have adequate support from the program following an adverse event or critical incident.
- Programs should promote a culture of safety in which residents are able to report and discuss adverse events, critical incidents, 'near misses', and patient safety concerns without fear of punishment.
- Residency program committee members must not divulge information regarding residents. It is the responsibility of the residency Program Directors to make the decision and to disclose information regarding residents (e.g. personal information and evaluations) outside of the residency program committee and to do so only when there is reasonable cause. The resident file is confidential.
- With regard to resident files, programs must be aware of and comply with the Freedom of Information and Privacy (FOIP) Act. Programs can obtain guidance about FOIP issues from the UCalgary Access and Privacy Coordinator. Contact information is found on the UofC Secretariat's webpage.
- Resident feedback and complaints must be handled in a manner that ensures resident anonymity, unless the resident explicitly consents otherwise. However, in the case of a complaint that must be dealt with due to its severity or threat to other residents, a Program Director may be obliged to proceed, against the complainant's wishes. In that case the Faculty of Medicine's Office of Equity and Teacher Learner Relations or the main campus Harassment Office should be consulted immediately. Depending on the nature of the complaint, the regional health authority and/or the College of Physicians and Surgeons of Alberta may need to be informed and involved. In general, the Program Director should serve as a resource and advocate for the resident in the complaints process.
- Residents must be members of the CMPA and follow CMPA recommendations in the case of real, threatened, or anticipated legal action.
- In addition to CMPA coverage for patient actions, residents are indemnified for actions or lawsuits arising from the actions or decisions made by committees (e.g. tenure, appeals, residency training) they may serve on, under the university insurance for lawsuits related to academic issues.

PGME Committee approval December 12, 2008

CROSS REFERENCES TO RELATED POLICIES:

PARA Collective Agreement <http://www.para-ab.ca/residents/collective-agreement>

Regional health authority policies <http://iweb9.calgaryhealthregion.ca/policydb>

1303 Cellular and Cordless Telephone and Two Way Radio Use

1450 Safe & Supportive Environments for CHR People, Partners, Patients, and Clients

1491 Workplace Hazardous Material Information System WHMIS

1478 Communicable Disease Prevention and Management

1336 Workplace Harassment

1464 Prevention and Management of Abuse Against Staff

CONTACT INFORMATION:

PARA 403-236-4841

Protection Services

ACH 403 955 7600
FMC 403 944 1152
PLC 403 943 4502
RGH 403 943 3430

Occupational Health and Safety Office

<http://www.calgaryhealthregion.ca/supp/ohs>

AMA Physician and Family Support Program PFSP Hotline 1 877 767 4637 (toll free 24 hours/day)

<http://www.albertadoctors.org/bcm/ama/ama-website.nsf/AllDoc/FB63EBAA53FB0B6987256DE3005F370B?OpenDocument>

University of Calgary Counseling Services

<http://www.ucalgary.ca/counselling/personalcounselling>

Sexual Harassment Office

Shirley Voyna Wilson 402 220 4086 wsvoyna@ucalgary.ca

Faculty of Medicine Office of Equity and Teacher Learner Relations

403 210 6424 email: etlr@ucalgary.ca

http://medicine.ucalgary.ca/equity_teacher-learner

CMPA

<https://www.cmpa-acpm.ca/cmpapd04/docs/highlights-e.cfm>

UCalgary Access and Privacy Coordinator

<http://www.ucalgary.ca/secretariat/privacy>