

MacPeds

RESIDENT SAFETY POLICY

PREAMBLE

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. Standard B1 3.9 states that:

3.9 The residency program committee must have a written policy governing resident safety related to travel, patient encounters, including house calls, after-hours consultations in isolated departments and patient transfers (i.e. Medevac). The policy should allow resident discretion and judgment regarding their personal safety and ensure residents are appropriately supervised during all clinical encounters.

3.9.1 The policy must specifically include educational activities (e.g. identifying risk factors).

3.9.2 The program must have effective mechanisms in place to manage issues of perceived lack of resident safety.

3.9.3 Residents and faculty must be aware of the mechanisms to manage issues of perceived lack of resident safety.

The document, Postgraduate Medical Education Health and Safety Policy available at:

<http://www.fhs.mcmaster.ca/postgrad/documents/HPSP.pdf> provides procedures for reporting and responding to specific circumstances are contained in that document. The Pediatric residency program formally acknowledges, endorses and agrees to adhere to these guidelines.

The training committee recognizes 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, district health authorities, clinical departments, residency training programs 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.

PHYSICAL SAFETY

These guidelines 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. Provincial laws prohibit 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 Security 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 are not expected to walk alone for any major or unsafe distances at night. This includes walking on the hospital premises and parking lots. The residents are expected to request security escort if such circumstances occur. 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. When interacting with patients with potential for violence, residents should ascertain that there is backup from security staff and that the patients are seen in an area, which allows for safe and easy exit
- The physical space requirements for management of violent patients must be provided where appropriate.
- Site orientations should include a review of local safety procedures.
- Residents should familiarize themselves with the location and services offered by the Occupational Health 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.
- 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 Office for information.

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, (physical or mental) 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.
- The program has an Ombudsman for consultation if residents are in difficulty.
- 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.

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 Ontario.
- Programs are bound by PARO 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.
- Resident feedback and complaints must be handled in a manner that ensures resident anonymity, unless the resident explicitly consents otherwise.
- Residents must be members of the CMPA and follow CMPA recommendations in the case of real, threatened, or anticipated legal action.

Sources of assistance for residents

Mohawk Shared Services, powered by Lifeworks: Employee Assistance Program

<http://www.mohawkssi.com/en/services/employeeassistanceprograms.asp>

Human Solutions provides counseling, substance abuse and addictions, behavioral health care, bereavement and crisis management.

All services are fully covered for all residents within Hamilton Health Sciences Corporation.

PARO Helpline: 1 866 HELP-DOC

The PARO 24 Hour Helpline is available to residents, their partners and family members, as well as medical students. In order to provide this service, PARO has partnered with Distress Centres of Toronto and counselors provide counseling or referrals support related to:

- Stress management
- Eating disorders
- Sexual, emotional or physical abuse
- Anxiety
- Anger management
- Depression
- Gender issues
- Intimidation or harassment
- Substance abuse
- Relationship counseling
- Career or work-related crisis
- Sexual issues

Postgraduate Medical Education Office
McMaster University - MDCL 3101
(905) 525-9140 ext. 22118

Resident Support Systems Handbook can be found on the Postgrad Website:

http://fhs.mcmaster.ca/postgrad/trainee_well_being.html

Chaplaincy Centre at McMaster University

<http://www.mcmaster.ca/chaplain>

(905) 525-9140 Ext 24207

E-Mail: chaplain@mcmaster.ca

Childcare

Learn more about day care in the Hamilton area at Co-ordinated Access for Child Care

(<http://www.cafcc.on.ca/index.php>).

Need more information?

Contact your chief residents, PARO representatives, program director or the Postgraduate medical education office.

Harassment/discrimination/professionalism concerns:

fhsprof@mcmaster.ca

Access to complaints procedure and mediation supports

HRES Harassment, Discrimination, and Bullying

<http://www.mcmaster.ca/hres/documents/Quick%20Facts.pdf>

<http://www.mcmaster.ca/mufa/handbook/antidisc.htm> Anti-Discrimination Policy

<http://www.mcmaster.ca/mufa/handbook/sxharass.htm> - Sexual Harassment Policy

Postgrad Wellness Page:

http://fhs.mcmaster.ca/postgrad/trainee_well_being.html