



Policy	Trainee Health and Safety Policy
Date Approved	
Approved By	
Effective Date	
Review to Commence	
Responsible Portfolio/Unit/Committee	
Responsible Officer(s)	

Trainee Health and Safety Policy

Department of:

1. Background

The College of Family Physicians of Canada, the Royal College of Physicians and Surgeons of Canada and the College des Médecins du Quebec have established the [General Standards of Accreditation for Residency](#) Programs.

Specific to the development and implementation of this policy template is Standard 5: *Safety and Wellness are promoted in the learning environment*. Specifically, the following elements are required:

5.1.2: Residency education occurs in a safe learning environment.

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

5.1.2.2: There is an (are) effective resident safety policy(ies), aligned with the central policy(ies) and modified, as appropriate, to reflect discipline-specific physical, psychological, and professional resident safety concerns. The policy(ies) include(s), but is (are) not limited to:

- Travel
- Patient encounters (including house calls)

- After-hours consultation
- Patient transfers (e.g., Medevac)
- Complaint management
- Fatigue risk management

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

5.1.2.4: Concerns with the safety of the learning environment are appropriately identified and remediated.

5.1.2.5: Residents are supported and encouraged to exercise discretion and judgment regarding their personal safety, including fatigue.

5.1.2.6: Residents and teachers are aware of the process to follow if they perceive safety issues

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The PGME Office has established an overarching [PGME Health and Safety Policy](#) applicable to all training programs, [for reporting](#) and responding to specific safety issues.

The PGME Health and Safety Policy applies to both residents and clinical fellows, collectively referred to as “Trainees”.

2. Purposes of this Policy

- 1) To augment the PGME Health and Safety Policy by identifying specific provisions to address safety concerns related to educational activities undertaken as part of the _____ training program.
- 2) To describe the mechanisms in place at the program level for addressing, reporting, and/or reducing unsafe events and conditions

- 3) To establish that Trainees 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

- 1) The University and all affiliated teaching sites as well as ambulatory, outpatient and private practice locales are collectively accountable for the environmental, occupational, and personal health and safety of their employees.
- 2) Trainees must adhere to the relevant health and safety policies and procedures of their current teaching site.
- 3) All teaching sites must meet the requirements of the PARO-OTH collective agreement.
- 4) The _____ training program is responsible for identifying and communicating foreseeable safety risks related to education carried out within the program, educating Trainees 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.

4. Policy Statement

- 1) The _____ training program formally acknowledges, endorses, and agrees to adhere to the PGME Health and Safety Policy.
- 2) 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 PGME Health and Safety Policy.
- 3) The training program requires residents to engage in the following specific situations that may pose a safety risk: (**select or add as necessary**)
 - house calls
 - work in isolated or poorly protected environments
 - 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
- 4) The program commits to providing Trainees with a full disclosure of foreseeable potential risks associated with these activities.
 - 5) The program will ensure that Trainees receive education and preparation for these activities using best available evidence and practices and assess Trainees for appropriate understanding prior to involvement in these activities.
 - 6) Trainees will not be required to see patients alone in any of the above situations if not appropriately supervised.
 - 7) Trainees must immediately notify their supervisor, clinical administrator, or more senior of perceived safety concerns
 - 8) Trainees involved in safety-related events, or who have safety concerns, are encouraged to contact their Residency Program Director, the Associate Dean, PGME or the Director of Resident Wellness.
 - 9) A Trainee should not encounter negative repercussions for decisions they made in good faith related to personal safety concerns.
 - 10) The Residency Program Committee, or delegated committee, will review all concerns brought forth and take steps to minimize future risk. The Committee shall also ensure that the PGME Office has been notified of all concerns raised as soon as possible after becoming aware of the concern and shall update the PGME Office as to any steps taken in response to the concern as well as the outcome of such steps.
 - 11) At times, a Trainee may be called upon to respond to an acute situation involving a patient which poses a risk to the Trainee's personal safety and wellbeing. Trainees 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, trainees should use their

best judgment when deciding if, when, where, and how to engage in clinical and/or educational experiences.

- 12) Should a Trainee 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 trainee will report this to their site supervisor immediately and to the residency program director, or delegate, at the earliest reasonable time.
- 13) Should a Trainee repeatedly fail to engage in an activity that can be reasonably considered part of their specialty practice, that is a mandated component of the training, and for which all means of risk reduction and education have been instituted by the program, the residency program committee, or delegate, will review the circumstances and determine if a remediation or extension of training is required.
- 14) Appeals of decisions made by the residency program committee, or delegate, will be referred to the Associate Dean, PGME
- 15) Appeals of decisions will follow the PGME Assessment, Promotion and Appeals Policy: <https://meds.queensu.ca/academics/postgraduate/current/policies/apa>

