Purpose

The purpose of this policy is to promote 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.

Scope

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

Definitions

In this policy,

a) “AHS” means Alberta Health Services.

b) Associate Dean” means Associate Dean of Postgraduate Medical Education in the Faculty 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 Faculty of Medicine at the University of Calgary.

f) “Division” means a Division in the Faculty 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.


k) “Program” means Residency Training Program in the Faculty of Medicine at the University of Calgary.

l) “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 Faculty of Medicine at the University of Calgary.

m) “University” means 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 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 should ensure that a colleague or home residency office is aware of their 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 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.

**Working Alone:**

5.8 Residents should not work alone after hours in health care or academic facilities without adequate support from AHS Protection Services or from University Campus Security.

5.9 Residents are not expected to work alone at after-hours’ clinics.

5.10 Residents are not expected to make unaccompanied home visits.

5.11 Residents should only telephone patients using caller blocking.

5.12 Residents should not walk alone for any major or unsafe distances at night.

**Aggressive or Violent Patients:**

5.13 Residents should not assess violent or psychotic patients without the backup of security and an awareness of accessible exits.
5.14 The physical space requirements for management of violent patients must be provided where appropriate.

5.15 Special training should be provided to Residents who are expected to encounter aggressive patients.

**On Site:**

5.16 Orientations should include a review of local on-site safety procedures.

5.17 Residents should familiarize themselves with the location and services offered by the AHS Occupational Health and Safety Office.

5.18 Residents should be familiar with policies and procedures for infection control and protocols following exposure to contaminated fluids, needle stick injuries, and reportable infectious diseases.

5.19 Residents must observe universal precautions and isolation procedures when indicated.

5.20 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.

5.20.1 Any appliances supplied must be in good working order.
5.20.2 There must be adequate locks on doors.

5.21 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.

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

**Immunizations:**

5.22 Residents should keep their immunizations up to date.

5.22.1 Overseas travel immunizations and advice should be sought well in advance when travelling abroad for electives or meetings.

**Pregnancy:**

5.23 Pregnant Residents should be aware of specific risks to themselves and their fetus in the training environment and request accommodations where indicated.

5.23.1 Residents should contact the AHS Occupational Health
6 **Psychological Safety**

6.1 Learning environments must be free from intimidation, harassment and discrimination.

6.2 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.

6.2.1 Such Residents should not return to work until an appropriate assessor has declared them ready.

6.3 Residents should be aware of and have access to resources that address psychological problems, substance abuse problems, harassment, inequity and unprofessionalism. Organizational resources include:
- PFSP
- PARA
- Faculty of Medicine Office of Equity and Professionalism
- University Counselling Services
- University Sexual Harassment Office

7 **Professional Safety**

7.1 Some Residents may experience conflict between personal ethical/religious beliefs and their professional responsibilities as physicians. Organizational resources, which are equipped to deal with such conflicts, should be made available in such instances and include:
- AHS
- CPSA
- Faculty of Medicine Office of Equity and Professionalism

7.2 Programs are bound by the PARA Collective Agreement, Article 13 (Named Holidays).

7.3 Residents should have adequate support from their Program following an adverse event or critical incident.

7.4 Programs should promote a culture of safety in which Residents are able to report and discuss events, critical incidents, ‘near misses’, and patient safety concerns without fear of punishment.

7.5 RPC members must not divulge information regarding Residents.

7.5.1 It is the responsibility of the Residency Program Directors to make the decision and to disclose information regarding Residents (i.e., personal information and evaluations) outside of the RPC and to do so only when there is reasonable cause.

7.5.2 The Resident file is confidential.
7.5.3 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.

7.7.1 In that case, the Faculty’s Office of Equity and Professionalism or the University Sexual Harassment Office should be consulted immediately.

7.7.2 Depending on the nature of the complaint, the AHS and/or CPSA may need to be informed and involved.

7.7.3 In general, the Program Director should serve as a resource and advocate for the Resident in the complaints’ process.

7.8 Residents must be members of the CMPA and follow CMPA recommendations in the case of real, threatened or anticipated legal action.

7.9 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.

**Responsibilities**

8 Approval Authority: PGME Committee

- ensures appropriate rigour and due diligence in the development or revision of this policy.

Implementation Authority: Associate Dean, PGME

- ensures that University staff is aware of and understands the implications of this policy and related procedures;
- monitors compliance with the policy and related procedures;
- regularly reviews the policy and related procedures to ensure consistency in practice; and
- sponsors the revision of this policy and related procedures when necessary.

**Related Information**

9 AHS, PARA, PFSP, CMPA, Faculty, University

9.1 AHS Policies:
1303 Cellular and Cordless Telephone & Two-Way Radio Use
1336 Workplace Harassment
1450 Safe and Supportive Environments for AHS People, Partners, Patients and Clients
1464 Prevention and Management of Abuse Against Staff
1491 Workplace Hazardous Material Information System
1464 Prevention and Management of Abuse Against Staff
9.2 AHS Protection Services:
E: protection.services@albertahealthservices.ca
T: 403-943-4407
   ACH  403-955-7600
   FMC  403-944-1152
   PLC  403-943-4502
   RGH  403-943-3430

9.3 AHS Occupational Health and Safety Office
To Report an Injury or Exposure: T: 403-234-7779
To book an Occupational Health Assessment: T: 403-955-2900
E: whs.calgary@albertahealthservices.ca

9.4 CPSA
T: 1-800-969-4940
http://www.cpsa.ab.ca/

9.4 PARA
T: 403-236-4841 (Calgary)
T: 780-432-1749 (Edmonton)
E: para-ab@shawbiz.ca

9.5 PFSP
https://www.albertadoctors.org/services/physicians/pfsp
Hotline: 1-877-767-4637 (toll free 24/7)

9.6 CMPA
http://www.cmpa-acpm.ca/cmpapd04/docs/tools/com_contact_use_cfm
T: 1-800-267-6522

9.10 Faculty of Medicine Office of Equity and Professionalism
http://medicine.ucalgary.ca/equity/
T: 403-210-6424
E: respect@ucalgary.ca

9.10 University of Calgary:
   • Campus Security – Working Alone (computer-based check-in/
     check-out system)
     http://www.ucalgary.ca/security/
   • University Safewalk (24/7)
     http://www.ucalgary.ca/security/safewalk/
     T: 403-220-5333 (24/7)
   • University Sexual Harassment Office
     https://www.ucalgary.ca/sexualharassment/
     T: 403-220-4086
   • University Legal Services – Access & Privacy Office (FOIP)
     http://www.ucalgary.ca/legalservices/foip

History

10 Approved: December 12, 2008
Effective: