



Internal Medicine Program Resident Safety Policy

The Internal Medicine program, within the Department of Medicine at the University of Toronto, recognizes that residents have a right to a safe environment during their training. Safety relates to promotion and protection of residents' physical, psychological and professional well-being. This policy applies to all residents within the Internal Medicine Program who are based at and rotating through core training sites within the University of Toronto, as well as to elective training sites.

This policy adheres to the University of Toronto Faculty of Medicine Postgraduate Medical Education's Postgraduate Trainee Health and Safety Guidelines, December 2017 <http://pg.postmd.utoronto.ca/wp-content/uploads/2018/01/PG-Trainee-Health-Safety-Guidelines-final-December-2017.pdf>

Responsibilities

It is the responsibility of the Resident to:

- a) comply with this safety policy and with safety policies at each individual training site
- b) communicate without delay any concerns regarding resident safety to the attending physician, rotation coordinator, site director, hospital administrator and/or the Residency Program Director
- c) provide input on safety issues through rotation evaluations, to the Site Director of the base hospital or the hospital in which the rotation has occurred, and directly with the Program Director
- d) exercise judgment and be aware of alternative options when exposing oneself to workplace risks or during travel to and from the workplace (i.e., driving a personal vehicle when fatigued).
- e) Trainees who feel their personal safety or security is threatened should remove themselves immediately from the situation in a professional manner and seek urgent assistance from their immediate supervisor or from the institution's security services.

It is the responsibility of the Residency Training Program to:

- a) encourage and facilitate an atmosphere that is safe for resident training
- b) anticipate and provide full disclosure of foreseeable potential risks to residents' personal safety
- c) address promptly all safety issues expressed by residents
- d) continually monitor adherence to this policy and update the policy as issues arise
- e) provide each trainee with a copy of this policy

- f) provide all faculty with a copy of this policy and ensure that they understand its implications

Safety Domains

1. Personal Health and Physical Safety:

The Internal Medicine program will encourage site orientations to include review of local safety procedures.

- a) Residents are required to keep all immunizations up to date in keeping with the policies of the university and the clinical site
- b) Residents must follow the Infection Prevention and Control practices in place at clinical sites, at all times
- c) Residents should familiarize themselves with the location of the Occupational Health Office at the beginning of each rotation. Specifically, the resident must be aware of protocols to deal with exposure to blood-borne pathogens, isolation procedures, needle stick injuries and other infectious diseases and hazardous material (including radiation safety, chemical spills, indoor air quality, see below for details)
- d) Trainees must be made aware of alternate options when exposing oneself to workplace risks or during travel to and from the workplace (i.e., driving a personal vehicle when fatigued).
- e) 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.
- f) If residents need to convert home call to “in-house” call, (due to patient related factors, weather conditions etc.) appropriate on-call facilities must be made available to them.
- g) Residents are not expected to walk outside at night while on call to parking lots or other hospital properties without security services.
- h) Residents are not expected to call patients without the ability to block their phone number.
- i) Residents are not expected to work alone in isolated areas of the hospital or clinical settings.
- j) Residents are not expected to make unaccompanied home visits.
- k) Residents should not be expected to deal with violent or aggressive patients without appropriate security services.

Relevant to the above:

“Where safety risks exist or are uncertain, programs may not expect postgraduate trainees to see a patient in hospital, clinic or at home, during regular or after hours, without the presence of a supervisor or security personnel.”

from PGMEHealth and Safety Guidelines, 2017

- l) Residents must be provided with safeguarding of their personal information by the program and by the hospitals
- m) Residents are expected to follow Ontario laws with respect to use of electronic devices when driving.

2. Psychological safety

- a) Residents are entitled to a training environment that is free of abuse, intimidation, harassment and discrimination.
- b) Residents should report any instances of abuse, intimidation, harassment or discrimination to the Program Director and/or Site Director (to be communicated to the Program Director) In turn, this information will be handled confidentially by the program. Alternatively, concerns of this nature could be reported to the Office of Resident Wellness.
- c) Residents should be aware of and have easy access to help with health and psychological issues, substance abuse problems, and intimidation and harassment issues. Sources of support may include the Program Director and/or Site Director, the Office of Resident Wellness, Postgraduate Medical Education, the resources available to the University of Toronto community.
- d) When a resident's work performance is affected by health or psychological conditions, appropriate supports should be provided at a Program, Department and University-level and a leave of absence may be provided. The resident would only be allowed to return to work after approval from an appropriate physician.

3. Professional work environment:

- a) The resident is entitled to a program that promotes a culture of safety in which residents are able to report and discuss adverse events, critical incidents, near misses, or patient safety concerns without fear of retribution, punishment or ridicule.
- b) Residents should have adequate support from the Program after adverse events or critical incidents.
- c) All discussion about residents at the Residency Program Committee or its subcommittees must be confidential. Committee members must not divulge information about individual residents.
- d) The Program Director will only disclose information about residents outside of the Residency Program Committee when there is reasonable cause; the resident file is otherwise confidential. Access to the resident file is permitted only when written consent is provided by the resident.
- e) The Program must handle complaints and feedback from residents in a confidential fashion. Occasionally a complaint may arise that is severe or may suggest a threat to others. In these situations, the Program Director may be obligated to deal with the threat against the wishes of the complainant. The Program Director will contact the Postgraduate Medical Education Office immediately for advice.
- f) Residents will be members of the Canadian Medical Protective Association and follow recommendations in the case of any real, anticipated or threatened legal action.
- g) Residents must use caution with respect to confidential personal and patient information, and exercise good judgment and professional behaviour when using social media. This includes following institutional policies with respect to encryption of electronic devices containing patient information.

- h) Residents may experience conflicts between their religious and ethical beliefs and training requirements or their professional obligations as a physician. Residents should be aware of resources to help deal with these conflicts including hospital ethicists, the Postgraduate Medical Education Office, University of Toronto and the College of Physicians and Surgeons of Ontario;

“Trainees cannot be negatively impacted for refusing to engage in clinical or educational experiences if they truly feel at risk in doing so and have communicated this to their Program Directors and respective site supervisors. It is recognized however that there are times (for example, in outbreaks of infectious disease such as SARS), when a residual risk will remain after all known precautions are taken. Professional responsibility to patients may require engaging in care despite these risks See University of Toronto Health Sciences Faculties Guidelines for Clinical Sites”

University of Toronto Faculty of Medicine Postgraduate Medical Education’s Postgraduate Trainee Health and Safety Guidelines 2017

Other Relevant Documents

- Hospital Specific Safety Policies (refer to site directly)
- PGME Safety Policy - <http://pg.postmd.utoronto.ca/wp-content/uploads/2018/01/PG-Trainee-Health-Safety-Guidelines-final-December-2017.pdf>