

UNIVERSITY OF OTTAWA, FACULTY OF MEDICINE
POSTGRADUATE TRAINEE SAFETY POLICY

INTRODUCTION

The Postgraduate Medical Education (PGME) Office recognizes its role in providing postgraduate trainees with a safe environment during their training. The responsibility for promoting a culture and environment of safety for postgraduate trainees rests with the University, the Faculty of Medicine, program leadership, affiliated training sites, clinical departments, and trainees themselves. The concept of postgraduate trainee safety includes physical, psychological, and professional security. This central policy is augmented at the level of the Residency Program Committee (RPC) to respond to the program specific context.

Trainees who feel that their personal safety is threatened during the performance of their training duties should remove themselves from the situation as quickly as possible, seek immediate assistance and report the incident to their supervisor.

Safety policies and procedures should be available from the program, program director or clinical leader as appropriate. Standard program orientation includes informing the trainee of these policies and having the information readily available for review at any time.

REPORTING

Trainees who identify a threat to personal safety must report it to their immediate supervisor or program director. Alternate avenues of reporting may include Division/Department leadership, ombudspersons and directly to the postgraduate office, as appropriate.

Reporting issues related to the learning environment with disruptive or unprofessional conduct can also be done using the uOttawa Professionalism Reporting Tool (<https://app.med.uottawa.ca/professionalism/>). Reporting can be submitted anonymously if needed but anonymity may limit the ability for follow-up and/or corrective action.

Accidents, incidents, and environmental illnesses occurring during postgraduate training should be reported and administered according to the reporting policies and procedures of the University, Hospital or clinical teaching location. Policies and procedures should be available from the program or clinical leader as appropriate.

KEY RESPONSIBILITIES

1. For postgraduate trainees:
 - to provide information and communicate safety concerns to the program.
 - to comply with safety policies.

2. For postgraduate training programs:
 - to act promptly to address identified safety concerns and incidents.
 - to be proactive in providing a safe learning environment.

PHYSICAL SAFETY

1. Relating to travel
 - a. When postgraduate trainees 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.

 - b. For long distance travel for clinical or other academic assignments, it is expected that postgraduate trainees will ensure that a colleague or the home program office is aware of their itinerary.

 - c. Postgraduate trainees are not to 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 trainee must request that they not be on-call on the last day of the preceding rotation. If this cannot be arranged, then the trainee is to be provided with a designated travel day on the first day of the new rotation before the start of any clinical activities.

 - d. Postgraduate trainees are not to be expected to travel long distances during inclement weather for clinical or other academic assignments. If such weather prevents travel, the trainee is expected to contact the program office promptly. Assignment of an alternate activity is at the discretion of the Program Director.

 - e. Postgraduate trainees, when going to or from work or as part of their clinical duties, should assess the environment if walking alone, especially at night. Trainees are not expected to walk alone through areas they

assess to be unsafe. If required, the trainee should request to be accompanied by the appropriate security service.

- f. It is expected that postgraduate trainees will arrange safe transportation home if they feel unduly fatigued after their duty hours.
- g. Training programs where land or air transport (fixed wing or rotor) forms part of the clinical training must be addressed by that training program's own safety policy.

2. Relating to patient care

- h. Postgraduate trainees are not to work alone after hours in health care or academic facilities without accessible support from security services.
- i. Postgraduate trainees are not expected to make unaccompanied home visits unless they have had training relevant to the context.
- j. Postgraduate trainees should only telephone patients from a clinic or hospital telephone line. If a call must be made on a personal or mobile device, it should be done using call blocking or some other tool to prevent disclosure of the caller's information.
- k. Postgraduate trainees are not to assess potentially violent or psychotic patients without the backup of security, and an awareness of accessible exits.
- l. Special training must be provided to postgraduate trainees who are expected to encounter aggressive/violent patients
- m. The physical space requirements, including access to unimpeded exit door, for management of potentially violent patients must be available where appropriate

3. Relating to Facilities

- a. Call rooms and lounges must be clean, smoke-free, located in safe locations, and be equipped with adequate lighting, a functional bed, chair, desk and telephone. Fire alarms and smoke detectors must be in good working order and maintained appropriately. General facilities should also include washrooms and showers. Appliances supplied are to be in good working order. Daily linen services and housekeeping for bed-changing and room cleaning should be provided where appropriate. There must be adequate locks on doors to ensure security and privacy.

- b. Site orientations must include a review of local safety procedures. As with any employee of the institution, postgraduate trainees must be aware of and follow the institution's policies and procedures, which must be readily available to all trainees. This includes appropriate Workplace Hazardous Materials Information System (WHMIS) training to understand protocols when in contact with various types of hazardous waste including substances which are
 - i. Ignitable
 - ii. Corrosive
 - iii. Radioactive
 - iv. Toxic
 - v. Reactive
 - vi. infectious

- c. Postgraduate trainees are expected to familiarize themselves with the location and services offered by the institution's Occupational Health and Safety Office. This includes familiarity with policies and procedures for infection control and other protocols following exposure to:
 - i. contaminated or other fluids
 - ii. needle stick injuries
 - iii. reportable infectious diseases

As well as protocols relating to but limited to the following:

- iv. Fire alarms and emergencies
- v. Hospital / Facility Evacuation
- vi. Disaster (External AND Internal)
- vii. Violent / Behavioural Situation
- viii. Bomb Threat or suspicious package
- ix. Hazardous Material Spill
- x. Hostage / Active shooter situation

4. Relating to personal care

- a. Postgraduate trainees must observe universal precautions and isolation procedures.
- b. Postgraduate trainees must keep their required immunizations up to date, and report these to the Clinical Placement Risk Management Office

without delay. The result in not keeping immunizations current is suspension from training and stoppage of pay.

- c. Overseas travel immunizations and advice should be sought well in advance when traveling abroad for rotations or meeting in accordance with the policies as described by the Faculty of Medicine's International and Global Health Office.
 - i. <https://med.uottawa.ca/international-global-health-office/international-mobility/faculty-medicine-learners/travel-abroad>
 - ii. <https://med.uottawa.ca/international-global-health-office/international-mobility/faculty-medicine-learners/pre-departure-training>
- d. Postgraduate trainees working in areas of high and/or long-term exposure to toxic substances, including but not limited to chemotherapeutic agents, reagent dyes etc., must follow the institutional safety policies.
- e. Postgraduate trainees working in areas of high and/or long-term exposure to radiation must follow radiation safety policies and minimize their exposure according to current guidelines.
- f. Radiation protective garments, such as aprons and neck shields, must be available and used as appropriate to the exposure by all postgraduate trainees during fluoroscopic techniques.
- g. Pregnant trainees are expected to be aware of specific risks to themselves and their fetus in the training environment and request accommodations where appropriate.

PSYCHOLOGICAL SAFETY

5. Learning environments must be free from intimidation, harassment, discrimination and violence.
 - a. University of Ottawa [Policy 67a — Prevention of Harassment and Discrimination](#)
 - b. University of Ottawa [Policy 67b - Prevention of Sexual Violence](#)
 - c. .University of Ottawa [Policy 66 – Violence Prevention](#)
 - d. University of Ottawa [Policy 67 – Sexual Harrassment](#)

6. All postgraduate trainees have the right to work in an environment that is free from mistreatment and/or exclusion on the basis of any protected grounds as defined by the Ontario Human Rights Act (e.g. age, perceived race, ethnoreligious affiliation, gender identity, disability, sexual orientation, marital/family status). Principles of equity, diversity and inclusion must be adhered to in order to respect the rights, dignity and full participation of all postgraduate trainees within the Faculty of Medicine.
7. When a postgraduate trainee's performance is affected or threatened by poor health or psychological conditions, it is expected that the trainee will be granted a leave of absence and receive appropriate support. Such trainees are not to return to work until an appropriate assessor has declared them ready and appropriate [accommodations](#) are in place, if required.
8. Postgraduate trainees 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, but are not limited to, the OMA Physician Health Program, Faculty of Medicine Office of Faculty Wellness, uOttawa Human Rights Office, the Professional Association of Residents of Ontario and the Employee Assistance Program of the trainee's home/base hospital (or the Ottawa Hospital as a default for community-based trainees).

PROFESSIONAL SAFETY

9. As relates to religious accommodations
 - a. Postgraduate trainees may experience conflicts between their ethical or religious beliefs and the training requirements and professional obligations of physicians. Resources are to be made available by the program or clinical service to trainees to deal with such conflicts.
 - b. Programs must make reasonable accommodations for religious holidays.
10. As relates to Fatigue Risk Management
 - a. Postgraduate trainees identified as being excessively fatigued should not be given responsibility of critical tasks or should be asked to relinquish responsibility to someone capable of performing it. The trainee may be asked to take a break in order to reenergize before returning to duties

- b. Postgraduate trainees self-identifying as excessively fatigued, must inform the appropriate supervisor in order to mitigate potential for unsafe patient care

11. As relates to critical incidents

- a. Postgraduate trainees providing after hours care or consultation must have adequate access to an appropriate supervisor. As required, this may include the timely attendance of the MRP to assist the trainee.
- b. Postgraduate trainees must have adequate support from the program following an adverse event or critical incident.
- c. Programs must promote a culture of safety in which postgraduate trainees are able to report and discuss adverse events, critical incidents, 'near misses', and patient safety concerns without fear of recrimination.

12. As relates to confidentiality

- a. Programs and the PGME Office collect and must responsibly and securely hold confidential postgraduate trainees' personal information, including health information. Disclosure is appropriate where required for the purposes of facilitating required personal support of the trainee.
- b. Programs must be aware of and comply with the *Freedom of Information and Protection of Privacy Act (FIPPA)* in relation to postgraduate trainee files.
- c. Postgraduate trainee evaluation information must be handled in a manner that ensures confidentiality unless the trainee explicitly consents otherwise. Disclosure may be required for the purposes of maintaining patient and workplace safety or in the support of the trainee in difficulty but should be limited to individuals providing ongoing educational guidance where possible.
- d. In the case of a complaint against the trainee that must be dealt with due to its severity of threat to others, or in accordance with Bill 18 (Building Workplaces for a Stronger Economy (2014)), a program director may be obliged to disclose information against the trainee's wishes. Depending on the nature of the complaint, the affiliated institution and/or the College of Physicians and Surgeons of Ontario may be involved. The program director should serve as a resource and an advocate for the postgraduate trainee during this process.

13. As relates to medicolegal protection

- a. Postgraduate trainees must be members of the CMPA and follow CMPA recommendations in the case of real, threatened, or anticipated legal action.
- b. In addition to CMPA coverage for patient actions, trainees are covered, either by the University itself or its insurer, for actions arising from their participation (acting reasonably) in University committees (e.g. tenure, appeals, residency training) on which they may serve.

REVIEW

14. This Policy will be reviewed 1 year after adoption and every 3 years subsequently.

Committee

PGEC

Faculty Council

Executive Committee of the Senate

Approval Date

November 30th 2022

January 10, 2023

June 12, 2023