Policy Name: CPGME Resident Safety Policy

Application/Scope: Residents, College, and Staff in the Max Rady College of Medicine

Approved (Date): PGME Exec Committee, May 14, 2013 Dean’s Council – 4 June 2013, Policy Development Committee (PDC) March 1, 2016 CPGME Exec Committee: June 14, 2016, Dean’s Council: September 13, 2016

Review Date: June 2015, November 17, 2015 Policy Development Committee(PDC),

Revised (Date): February 8, 2017

Approved By: College Executive Council 18 June 2013, February 7, 2017

BACKGROUND

The University of Manitoba is committed to promoting and supporting the safety and well-being of its learners in all areas of their working and learning environment. The College of Medicine Postgraduate Medical Education (CPGME) Office at the University of Manitoba recognizes that residents have the right to a safe workplace and a safe learning environment. The responsibility for resident safety jointly rests with the Max Rady College of Medicine at the University of Manitoba, the Winnipeg Regional Health Authority (WRHA), Rural Health Authority, other Regional Health Authorities, clinical teaching sites, individual clinical departments, their residency programs, and the residents.

The concept of resident safety includes physical, emotional and professional security. These will be outlined in detail in this document.

All residency programs will adhere to this College PGME Resident Safety Policy. The WRHA, Rural Health Authority, other Regional Health Authorities, clinical teaching sites, clinical departments and all residency programs have their own resident and workplace safety policy which will complement this PGME Resident Safety Policy (sample template for programs is provided in Appendix III). The Program Safety Policy will take precedent if more restrictive than this policy.

DEFINITIONS

CPGME – College of Medicine Postgraduate Medical Education
WRHA – Winnipeg Regional Health Authority
VENTIS – Postgraduate Medical Education Curriculum Management System
CPSM – College of Physicians and Surgeons of Manitoba
CMPA – The Canadian Medical Protective Association

1. PURPOSE
1.1. Minimize the risk of injury and promote a safe and healthy environment for trainees on Max Rady College of Medicine teaching sites

1.2 Provide a procedure to report hazardous or unsafe training conditions and a mechanism to take corrective action

2. POLICY STATEMENTS

2.1 Residents have a right to a safe and equitable workplace and learning environment. As such, residents have a professional duty to comply with the safety policies of the institution in which they are working, as outlined by the University of Manitoba College PGME Office. Furthermore, residents have a professional duty to communicate safety concerns and incidents to the residency programs or to the University of Manitoba College PGME Office promptly.

2.2 The University of Manitoba College PGME Office and all PGME Residency Programs have a duty to ensure a safe and equitable environment for residents to work and to learn. This includes but is not limited to the following:

2.2.1 Ensuring that the workplace is free of harassment or intimidation on the basis of the religion, gender, sexual orientation, race, colour, age, health condition and level of training (not limited to the list)

2.2.2 Ensuring that residents are educated and informed with respect to the safety policies which govern the workplace and the learning environment

2.2.3 To record in writing and to act promptly on any safety concerns and incidents reported to its office by residents

2.2.4 Ensuring that every reasonable effort is made to record resident concerns in confidence and in good faith and that residents' rights to privacy and anonymity be ensured at all times

2.2.5 All trainees are encouraged to utilize the Mistreatment in the Learning Environment Surveillance Tool available in VENTIS

2.2.6 Strive to prevent workplace-related and learning environment-related personal retribution against residents in order to foster an open environment where genuine concerns can be raised freely and without fear of reprisal

3. PROCEDURES

3.1 Specific Safety Concerns with Respect to Resident Travel
3.2  

3.1.1 Residents must be compliant with all provincial laws pertaining to the safe operation and maintenance of motor vehicles.

3.1.2 In the event of severe weather or poor road conditions, residents are expected to exercise common sense and to use caution for short-distance travel. If residents do not feel safe traveling to or from the workplace or learning environment, they should communicate their concerns to their residency program and/or the University of Manitoba College PGME Office and the site where they are working.

3.1.3 Where reasonable concerns for personal safety have been communicated to the above parties, residents are not expected to undertake short-distance travel in adverse conditions. In these situations, residents are advised to contact their Program Directors/coordinators for guidance with respect to adjustments of schedules and itineraries. Residents who have conveyed reasonable concerns for their personal safety to the above parties are ensured the full support of the University of Manitoba College PGME Office.

3.1.4 Where travel to and from the workplace and the learning environment is deemed essential by the residency programs and where residents have communicated reasonable concerns for their personal safety, then residents should be able to access safer modes of transportation such as, but not limited to, public transportation or taxi cabs or should access an available call room to avoid such travel.

3.1.4.1 Post call, if a resident is too tired to safely operate a motor vehicle or other preferred transportation mode, he/she is advised to refrain from travel, by utilizing a call room until rested or take a taxi home.

3.1.5 If the travel to and from the workplace and the learning environment involves distances which exceed the city limits, then the following should apply:

a. The residents’ itineraries must be communicated to their residency programs.

b. Residents must keep informed with respect to severe adverse road or weather conditions and are expected to exercise common sense and to avoid travel under those conditions which may pose reasonable concerns for personal safety. In these situations, the residents should communicate with the residency Program Directors and/or the University of Manitoba College PGME Office for guidance. Furthermore, the residents should communicate any anticipated delays to their attending physicians in order to allow for adjustments of schedules.

c. Residents should ensure that they are well-rested before driving for longer than one hour at a time for clinical or academic activities. The residents are not expected to travel long-distance following overnight call shifts. Residents are entitled to reasonable accommodation of their call requests should travel be...
deemed necessary. If unavoidable, a travel day may be considered at the start of a rotation outside of the city limits in order to provide residents with sufficient time to rest before embarking on long-distance travel.

d. Where there exists reasonable concerns for personal safety and these concerns have been communicated to the residency Program Directors and/or the University of Manitoba College PGME Office, residents are not expected to undertake long-distance travel. Residents who have conveyed reasonable concerns for personal safety to the above parties are ensured the full support of the University of Manitoba College PGME Office.

e. For residents involved in neonatal transport, please see Appendix I: Neonatal Transport Safety.

f. For residents who travel to northern remote locations, please see Appendix II: Northern and Rural Rotations and/or Northern Medical Trips.

3.2 Personal Security

3.2.1 Residents are entitled to the support of Security Services when working alone after-hours. Residents have a duty to inform Security Services of their situations should they require support and assistance. Every reasonable effort should be made by the residency programs to ensure that residents are not exposed to undue personal risk when working alone. If risks cannot be mitigated with the help of Security Services, then residents are entitled to request changes in scheduling or staffing to ensure that a safe workplace and a safe learning environment are provided.

3.2.2 Residents should not make home visits unaccompanied.

3.2.3 Residents should be mindful and wary to not disclose their personal and/or private information in the course of their daily professional and/or academic duties, including but not limited to telephone numbers, banking information, credit card information, personal passwords, email addresses, social media sites and home addresses.

3.2.3.1 Residents have a duty to make every effort to avoid inadvertent disclosure of their personal information through the use of telephones, computers or other electronic devices in the workplace or learning environment. To this end, residents are encouraged to password-protect all sensitive information and to use data encryption and data protection services (e.g. Caller ID Blocking) when using such devices.

3.2.4 Residents are entitled to a safe and secure environment when using health care facilities, including parking lots and parkades. Residents are strongly encouraged to notify and utilize Security Services when walking outdoors in the areas of health care facilities and parking lots at night. Residents are reminded to contact Security Services immediately should they witness any activities that might compromise the safety of the health care.
facilities. Furthermore, it is recommended that residents ask the Security Service the locations of panic alarms at their health care facilities and adjacent parking buildings

3.2.5 Residents who are anticipating interactions with potentially violent or aggressive patients or their family members should make certain that members of Security Services are present during these interactions

3.2.6 Residents are entitled to education and training in identifying and managing potentially violent, aggressive and/or threatening situations involving staff, patients and/or family members in the clinical and academic environment

3.2.7 Residents will be provided safe and clean on-call facilities (call rooms and lounges) as per the PARIM-WRHA Collective Agreement. Access to these areas will be with coded door systems. Any deficiencies with respect to fire alarms, smoke detectors, adequate lighting, coded access and telephone services should be brought to the attention of the residency Program Directors and the University of Manitoba College PGME Office

3.3 Infection Control

3.3.1 Residents are entitled to education on the location and the services offered by the Occupational Health and Safety Offices at their assigned facilities. This includes familiarity with the policies and procedures for infection control and protocols for exposure to contaminated fluids, needle stick injuries and reportable infectious diseases. Residents have the duty to ensure that they attend educational sessions provided and that they are compliant with the above-mentioned policies

3.3.2 Residents must comply with all isolation and infection control precautions and procedures when indicated. All entry-level residents must undergo training in infection control precautions provided by the University of Manitoba College PGME Office at the start of their residency programs

3.3.3 Residents are entitled access to appropriate immunization services. Residents have a duty to ensure that they maintain appropriate immunization status as stated in the institutional policy documents. Overseas travel immunization and advice should be sought well in advance when travelling abroad for electives or meetings

3.3.4 Residents are professionally and ethically obligated to inform the Associate Dean, PGME of any blood borne infection. Accommodation or modification of their program will be determined on a case by case basis

3.4 Radiation Safety

3.4.1 Residents are not expected to work in areas of high and long-term exposure to radiation without receiving prior appropriate education on radiation safety. 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

3.4.2 Residents are entitled to access to appropriate radiation protection garments. Residents must wear proper-fitting radiation protection garments (aprons, gloves and neck shields) when performing fluoroscopic techniques.

3.5 Safety during Pregnancy

3.5.1 Residents who are pregnant are entitled to a safe and equitable work and learning environment. Where such an environment cannot realistically be provided (e.g. unacceptable radiation hazard or risk of infection), residents who are pregnant are entitled to appropriate education and warning.

3.5.2 Residents who are pregnant have a duty to inform their residency program that they will be unable to work in such environments. Residents are never expected to compromise their personal safety or the safety of their unborn children in the course of their clinical or academic duties.

3.5.3 The University of Manitoba College PGME Office will make every effort to ensure the workplace and learning environments are free from discrimination against residents who become pregnant during their training.

3.5.4 Residents who are pregnant should make every reasonable effort to be informed of the specific risks to themselves and their fetus in the work and learning environment and should request accommodation where indicated. Further consultation with Occupational Health and Safety may be advised wherever concerns about safety arise.

3.5.5 A resident shall not be scheduled or required to participate in overnight on-call shifts after 31 (thirty one) weeks gestation.

3.6 Safety of the Teacher – Learner / Work Environment

3.6.1 All learning and work environments must be free from intimidation, harassment and discrimination (see: University of Manitoba Max Rady College of Medicine: Guidelines for Conduct in Teacher-Learner Relationships).

3.6.1.1 Any act of discrimination or personal harassment based on religion, gender, sexual orientation, race, colour, age or health condition (not limited to this list) should be reported to the Residency Program Director who will inform the Associate Dean, Postgraduate Medical Education, if not resolved. Residents are encouraged to be familiar with this policy and they can expect prompt attention to any reported concern. All resident concerns will be documented in writing and kept on record in the strictest confidentiality by the residency program and by the University of Manitoba College PGME Office.

3.7 Personal Health
3.7.1 Residents are entitled to freedom from discrimination on the basis of their physical or psychological health. Residents have a duty to seek professional advice whenever they are concerned that physical or psychological health issues may affect their clinical or academic performance. Residents are entitled to confidential and non-discriminatory advice and counseling from one or more of the following:
   a. Residency Program Director
   b. Associate Dean, PGME
   c. Associate Dean, Student Affairs PGME
   d. Faculty Student Mental Health Service
   e. Doctors Manitoba Physician at Risk Help Line
   f. College of Physicians and Surgeons of Manitoba

3.7.2 Residents are entitled to leaves of absence (see: University of Manitoba Max Rady College of Medicine PGME Leave of Absence and Waiver of Training Policy).

3.7.3 Residents are entitled to notification in writing from any of the individuals listed in 3.7.1 if their physical or psychological health issues are deemed sufficiently concerning as to require interruptions of their clinical and/or academic duties. Residents have a duty to abide by the professional code of conduct that governs all medical professionals as stipulated by the College of Physicians and Surgeons of Manitoba (CPSM) with respect to physical and/or psychological health.

3.7.4 Residents are entitled to accommodations as per Accommodation for Postgraduate Medical Residents with Disabilities Policy

3.8 Professional Safety

3.8.1 Critical Incidents

3.8.1.1 Residents are entitled to participate in the investigation and the review of critical incidents which occur without fear of negative consequences. Residents have a professional duty to report all critical incidents

3.8.1.2 Residents will be guaranteed confidentiality for any critical incidents in which they are involved, unless the incidents were sufficiently severe as to compromise their own safety, in which case these critical incidents must be reported to the Associate Dean, PGME or the College of Physicians of Manitoba (CPSM)

3.8.2 Confidentiality of Resident Information

3.8.2.1 Residents will be guaranteed confidentiality for any critical incidents in which they are involved (see above)
3.8.2.2 Residents are entitled to protection of their personal and/or private information in their resident files and elsewhere, especially where it does not concern their professional duties and responsibilities

3.8.2.2.1 CPGME Office staff and members of the PGME Executive Committee must not divulge information regarding residents

3.8.2.2.2 Staff of all residency programs and members of the Residency Program Committee (RPC) and RPC Subcommittees must not divulge information regarding residents. It is the responsibility of the Residency Program Director in consultation with the Associate Dean, PGME, to make the decision to disclose information regarding residents (e.g. personal information and evaluations) outside of Residency Program Committees and to do so only when there is reasonable cause. The resident file is confidential

3.8.2.3 Residents are not required to disclose personal information to any staff without prior written request. Residency programs must obtain verbal and written consent from the residents for disclosure or use of any personal and/or private information to third parties

3.8.2.4 Residents are not expected to disclose their personal and/or private information including but not limited to telephone numbers, residential addresses, email addresses and social media profile to any clinical and/or academic Faculty members, where the information does not directly relate to the performance of their professional duties and responsibilities

3.8.2.5 Residents should not be directly contacted by clinical and/or academic Faculty members outside of working hours without prior notice. Exceptions to this policy include emergencies which personally affect the residents

3.8.2.6 Residents are reminded that the use of social media in the professional environment may expose them to unwanted or unintended personal scrutiny. The University of Manitoba College PGME Office cannot guarantee the protection of personal and/or private information when social media access is granted by residents

3.8.2.7 Residents who use their personal telephones, computers and/or other electronic devices in the performance of their clinical duties are advised to use precautions to protect their identity such as blocking their phone number or e-mail address

3.8.2.8 Residents will be guaranteed that any feedback regarding their teachers, rotations and clinical experiences will be kept anonymous as per the standards of the accreditation bodies
3.8.2.9 Residents will be guaranteed protection from discrimination and retribution regarding feedback provided in confidence with respect to the performance of clinical and academic Faculty members, including Program Directors and Heads of Sections. Residents should not be pressured or coerced in any way to share information regarding personal evaluations of clinical and/or academic Faculty members.

3.8.3 Professional Responsibilities

3.8.3.1 Residents, including visa sponsored residents, must be members of the Canadian Medical Protective Association (CMPA) or equivalent as appropriate.

3.8.3.2 Residents must possess current educational licenses from the College of Physicians and Surgeons of Manitoba (CPSM) or equivalent as appropriate.

3.8.3.3 Residents must procure mandatory life, accidental death, and disability insurance from Doctors Manitoba or equivalent as appropriate. This insurance coverage is valid throughout Canada.

3.8.3.4 Sponsored Residents may choose to become a member of Doctors Manitoba and opt to apply for insurance through Doctors Manitoba. Successful acquisition of coverage would be at the discretion of the insurer and the specific circumstances of each applicant.

3.8.3.5 Residents must report any changes to their licensure status immediately to their Residency Program Director and to the University of Manitoba Associate Dean, PGME.

4. IMPORTANT RESIDENT SAFETY CONTACTS

4.1 University of Manitoba College PGME Office
pgme@umanitoba.ca
Bannatyne Campus, Dean’s Office, 260 Brodie Centre
204-789-3290

4.2 University of Manitoba, Max Rady College of Medicine, Student Affairs Office
S204 Medical Services Building
bcstudentservices@umanitoba.ca
http://umanitoba.ca/student/bannatyne/media/BC_Student_Serv.pdf
204-272-3190

4.3 Doctors Manitoba Physicians at Risk
204-237-8320
(24 hour hotline - checked daily)

4.4 Max Rady College of Medicine Counseling Services
A120 Chown Building
http://umanitoba.ca/faculties/medicine/student_affairs/oncampuscrisis.html
204-789-3328
(Call for initial appointment)
Free confidential consultation and treatment for students experiencing emotional stress from the Department of Psychiatry. Service is available to students of the Max Rady College of Medicine, their spouses and immediate family.

4.5 The College of Physicians & Surgeons of Manitoba (CPSM) 204-774-4344
cpsm@cpsm.mb.ca Toll Free (In Manitoba): (877) 774-4344
1000 – 1661 Portage Ave, Winnipeg MB R3J 3T7
Fax: (204) 774-0750

4.6 Campus Emergency Contacts
• Dial 555 from any UM phone
• Dial #555 (MTS or Rogers wireless device)
• Dial 204-474-9341 from all other phones
• Email: emergency_response@umanitoba.ca

4.7 Campus Security Safewalk Program 24/7 204-474-9312
http://umanitoba.ca/campus/security/programs/safewalk.html
Security Services, Bannatyne Campus (204) 789-3330
Security, Health Sciences Centre (204) 787-4567

4.8 Occupational Health and Safety Contact Info

<table>
<thead>
<tr>
<th>Bannatyne Campus or Health Sciences Centre</th>
<th>Occupational Health Nurse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Call OESH (204-787-3312) stating circumstances of the exposure</td>
<td>Occupational and Environmental Safety and Health (OESH)</td>
</tr>
<tr>
<td></td>
<td>NA618-700 McDermot Ave,</td>
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<td></td>
<td>Monday-Friday at 8:30 Am - 4:30 Pm</td>
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</table>

If exposure occurs outside the above stated hours:
• Report to HSC Emergency Department within 2 (two) hours of exposure
• Call OESH (204-787-3312) Leave a message stating name, contact phone number and exposure circumstance.

<table>
<thead>
<tr>
<th>St. Boniface General Hospital/St. Boniface Research Centre</th>
<th>Occupational Health Nurse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Call St. Boniface Occupational Health and Safety Office (204-237-2439) stating circumstances of the exposure</td>
<td>St. Boniface General Hospital</td>
</tr>
<tr>
<td></td>
<td>Occupational Health and Safety</td>
</tr>
<tr>
<td></td>
<td>Monday-Friday at 7:30 Am - 4:00 Pm</td>
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If exposure occurs outside the above stated hours:
• Report to St. Boniface General Hospital Emergency Department within 2 (two) hours of exposure
• Contact the St. Boniface General Hospital Occupational Health and Safety the next business day.
POLICY CONTACT:  Associate Dean, PGME

REFERENCES

A. University of Manitoba Max Rady College of Medicine:

University of Manitoba - Max Rady College of Medicine - Policies & Procedures

- Guidelines for Conduct in Teacher-Learner Relationships
- Policy for Prevention of Learner Mistreatment
- PGME Leave of Absence and Waiver of Training Policy
- Conscience-Based Exemption Policy
- Professionalism and Diversity Website
- Medical Learners with Blood Borne Pathogens
  
  a. University of Manitoba - Max Rady College of Medicine - PGME - Policies

- Appropriate Disclosure of Learner Needs

B. WRHA Policies and Procedures:

- WRHA> For Health Care Professionals > Index
- WRHA > For Health Care Professionals > Students
- Health Sciences Centre (HSC) Policies and Procedures: Can be accessed through the HSC Intranet once you are set up for access
- St. Boniface General Hospital (SBGH) Policies and Procedures Can be accessed through the SBGH Intranet once you are set up for access
- Winnipeg Regional Health Authority (WRHA) Respectful Workplace Policy

References to Template:
Annotated General Standards of Accreditation – B Standards, January 2011, Editorial Revision July 2011
APPENDICES

Appendix I: University of Manitoba Max Rady College of Medicine Neonatal Transport Safety Guideline
Appendix II: Northern and Rural Rotations and/or Northern Medical Trips Guideline
Appendix III: Sample Resident Safety Policy
Appendix IV: Mistreatment in the Learning Environment Surveillance Tool
Appendix I

Neonatal Transport Safety

General Guidelines:

Air, water and ground transportation are components of Neonatal transportation of patients. When functioning as part of the Transport Team, the paediatric resident must follow the safety measures as appropriate for the vehicle. In the ambulance and aircraft, seatbelts must be used when the vehicles are in motion. In some communities, water craft may be needed for patient transport. In this case, water floatation devices must be used.

The medical staff and flight crew have been trained in flight safety. Their instructions must be followed as situations arise, to minimize risk to the resident. These risks include direct exposure to various types of aircraft on the tarmac, and in flight emergencies.

On the tarmac/ramp, noise can be excessive. Extra caution should be taken to identify dangers visually. Also, ear protection to prevent hearing damage might be a consideration. Interaction with propellers, in motion or not, should be avoided. When in the vicinity of jet engines, caution should be used to avoid clothing, or loose materials from being drawn in to an engine. Smoking should be avoided near any aircraft or engine fuel. If in doubt, follow the safety instructions of the trained Transport Team or flight crew.

Weather conditions can be severe, in particular in northern destinations. Appropriate outer clothing is important in consideration of the season and destination.

Stressors of flight exist which may affect the resident physically. Their awareness of these stressors will allow them to prevent undue physical discomfort. These stressors and precautions include:

1. Trapped gases- avoid foods and drinks that are gas producing (e.g. carbonated beverages). Avoid flying if suffering from a URTI, ear or sinus infection. Avoid flying following some types of dental procedures.
2. Hypoxia - be aware of lower oxygen as flight altitude increases. Be familiar with oxygen sources for team members in case of sudden need.
3. Temperature- dress appropriately for cabin temperature. Increase fluid intake to offset any effect from low cabin humidity.
4. Vibration- significant aircraft vibration can be part of the flight experience. Ensure well-padded seating is used. Avoid direct contact with the bulkhead of an aircraft.
5. Noise- noise levels in the aircraft may be prolonged and intense. Ear protection should be considered.
6. Gravitational Forces- with takeoff and landing of an aircraft, gravitational forces are significant. Seatbelts and shoulder straps should be used, as per flight instruction.

Appendix II
Northern and Rural Rotations and/or Northern Medical Trips

General guidelines:
Northern and Rural rotations, as well as Northern Medical Trips augment a trainee’s clinical experiences but are not without risks. These opportunities bring residents into unknown locations where unfamiliarity, isolation and travel can cause potential harm. At all times during these experiences residents should exercise caution and abide by the Resident Safety Policy. All Provincial and Highway driving acts and laws should be followed. Residents should always be prepared for unexpected cold weather and dress appropriately. Residents are required to know the safety policies and procedures of the rural sites (details of these will be provided to the resident during the first day of orientation in the rural sites). If safety concerns arise residents should contact the Director of Northern and Rural Medical Education and/or the Program Director.

If travelling by car, residents should ensure that the vehicle is in good driving condition. No resident should drive long distances when extremely fatigued. Driving conditions should be safe before a resident proceeds to travel. Residents should have highway safety gear and/or a cellular phone in case of unexpected occurrences while driving. Vehicles should be parked in assigned parking areas at the rural sites. Should any violation occur to the vehicle while on a rural rotation, police should be notified immediately, as well as the Director of Northern and Rural Medical Education and/or Program Director.

If a resident chooses to travel to rural sites by bus, a certified reputable company (such as Greyhound) should be selected for travel. Residents should abide by all travel regulations set by the company and attempt to travel during daytime hours. Travel to and from the bus depot must be done in a safe matter, either by someone whom the resident knows and trusts or by a taxi driver. When travelling by taxi, residents must assure their own safety. Only taxis with clear driver identification and license should be used.

When travelling by plane, residents need to abide by all Transport Canada air travel regulations. Full details of the regulations can be reviewed at www.tc.gc.ca. Residents are required to listen and follow in-flight crew directions.

Residents may be placed in shared accommodations during the northern and rural rotations. All efforts are in place to ensure that same sex members are grouped in the same floor of a house or apartment. Caution should be used when in using shared accommodations. It is recommended that residents lock their room doors while sleeping and bathrooms be locked when in use. Valuable goods should not be left unsupervised.

During the rural and northern rotations, residents should use caution when outdoors alone. Residents should always be in visible, well trafficked areas. It is not recommended to be alone outdoors after daylight hours. Taxi vouchers or financial remuneration will be provided to residents who do not have access to vehicles during these rotations. Security escort should be considered if walking outdoors at night in the hospital areas.
Appendix III

Sample Resident Safety Policy

University of Manitoba, Max Rady College of Medicine, Postgraduate Medical Education

Residency Program in: _______________________

1. BACKGROUND

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. Regarding resident safety, Standard B1.3.9 states:

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 College must be aware of the mechanisms to manage issues of perceived lack of resident safety.

The PGME Program has established an overarching CPGME Resident Safety Policy applicable to all residency programs, for reporting and responding to specific safety issues, available on the PGME Program website:

http://umanitoba.ca/faculties/medicine/education/pgme/media/FPGME_Resident_Safety_Policy_-_Approved_at_FEC_12_June_2012_R2.pdf

2. PURPOSES OF THIS POLICY

1. To augment the FPGME safety policy by identifying specific provisions to address safety concerns related to educational activities undertaken as part of the ______________ residency 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 residents 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 accountable for the environmental, occupational, and personal health and safety of their employees.

2. Residents 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 PARIM collective agreement.

4. The ________________ residency program is responsible for identifying and communicating foreseeable safety risks related to education carried out within the program, educating residents 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 ________________ residency program formally acknowledges, endorses and agrees to adhere to the FPGME Resident 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 FPGME Resident Safety Policy.

3. The residency 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 residents with a full disclosure of foreseeable potential risks associated with these activities.

5. The program will ensure that residents receive education and preparation for these activities using best available evidence and practices AND assess residents for appropriate understanding PRIOR TO involvement in these activities.

6. Residents will not be required to see patients alone in any of the above situations if not appropriately supervised.

7. Residents must immediately notify their supervisor, clinical administrator, or more senior resident of perceived safety concerns.
8. Residents involved in safety-related events, or who have safety concerns, are encouraged to contact their Residency Program Director, the Associate Dean, PGME or the Associate Dean, Professionalism.

9. A resident should not encounter negative repercussions for decisions they made in good faith related to personal safety concerns.

10. The Residency Program Committee will review all concerns brought forth and take steps to minimize future risk.

11. At times, a resident may be called upon to respond to an acute situation involving a patient which poses a risk to the resident’s personal safety and wellbeing. Residents 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, residents should use their best judgment when deciding if, when, where, and how to engage in clinical and/or educational experiences.

12. Should a resident 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 resident will report this to their site supervisor immediately AND to the residency program director at the earliest reasonable time.

13. Should a resident repeatedly fail to engage in an activity that can be reasonably considered part of their specialty practice, that is a mandated component of the residency training, and for which all means of risk reduction and education have been instituted by the program, the residency program committee will review the circumstances in the context of the general CanMEDS physician competency frameworks.

14. Disputes of decisions made by the residency program committee will be referred to the Associate Dean, PGME for discussion at the PGME Executive Committee.

15. Appeals of decisions will follow the usual Max Rady College of Medicine appeal process.
Appendix IV

Mistreatment in the Learning Environment Surveillance Tool For Postgraduate Medical Learners

Proposed Mistreatment in the Learning Environment Surveillance Tool For Postgraduate Medical Learners

Your responses to the following questions about behaviours or experiences during this rotation might be sensitive. Because of this they will be released to the University of Manitoba, College of Medicine, (formerly “Faculty of Medicine”) only in an aggregated form to reduce the probability that you could be identified by your responses.

Behaviours Experienced or Witnessed During this Clinical Rotation

Have you ever experienced or witnessed mistreatment, intimidation, harassment or unprofessional or disruptive behaviour during this clinical rotation?

○ Yes  ○ No

For each of the following behaviours, please indicate the frequency you personally experienced that behaviour during this clinical rotation. Include in your response any behaviours performed by faculty, other residents, medical students, other learners, nurses, other institution employees or staff, or patients and patient's family members.

During this clinical rotation, how frequently have you...

<table>
<thead>
<tr>
<th>Behaviour</th>
<th>Never</th>
<th>Once</th>
<th>Occasionally (2-4 times)</th>
<th>Frequently ≥5 times</th>
<th>Check here if you witnessed any other learners subjected to this behavior:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Been publicly embarrassed?</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
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<tr>
<td>Been publicly humiliated?</td>
<td>o</td>
<td>o</td>
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<tr>
<td>Been threatened with physical harm?</td>
<td>o</td>
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<tr>
<td>Been physically harmed (e.g., hit, slapped, kicked)?</td>
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<tr>
<td>Been required to perform personal services (e.g., shopping, babysitting)?</td>
<td>o</td>
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<tr>
<td>Been subjected to unwanted sexual advances?</td>
<td>o</td>
<td>o</td>
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<tr>
<td>Been denied opportunities for training or rewards based on gender?</td>
<td>o</td>
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<tr>
<td>Been subjected to offensive sexist remarks/names?</td>
<td>o</td>
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<tr>
<td>Received lower evaluations or grades solely because of gender rather than performance?</td>
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<tr>
<td>Been denied opportunities for training or rewards based on race or ethnicity?</td>
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</table>
training or rewards based on sexual orientation?

Received lower evaluations or grades solely because of sexual orientation rather than performance?

Unduly influenced to stay beyond your duty hours?

Been subjected to negative or offensive behavior(s) not described above (please provide details below)?

If you were subjected to negative or offensive behaviour(s) not described above, please describe the behaviour(s) here

**Behaviours Directed at You**

You indicated that you personally experienced the following behaviour(s) during this rotation. Indicate below which person(s) engaged in the behaviour that was directed at you. Check all that apply.
| Received lower evaluations or grades solely because of gender rather than performance | ○ | ○ | ○ | ● | ● | ● | ● | ● | ● |
| Denied opportunities for training or rewards based on race or ethnicity | ○ | ○ | ○ | ● | ● | ● | ● | ● | ● |
| Subjected to racially or ethnically offensive remarks/names | ○ | ○ | ○ | ● | ● | ● | ● | ● | ● |
| Received lower evaluations or grades solely because of race or ethnicity rather than performance | ○ | ○ | ○ | ● | ● | ● | ● | ● | ● |
| Denied opportunities for training or rewards based on sexual orientation | ○ | ○ | ○ | ● | ● | ● | ● | ● | ● |
| Subjected to offensive remarks/names related to sexual orientation | ○ | ○ | ○ | ● | ● | ● | ● | ● | ● |
| Received lower evaluations or grades solely because of sexual orientation rather than performance | ○ | ○ | ○ | ● | ● | ● | ● | ● | ● |
| Unduly influenced to stay beyond your duty hours | ○ | ○ | ○ | ● | ● | ● | ● | ● | ● |
| Subjected to negative or offensive behavior(s) not described above | ○ | ○ | ○ | ● | ● | ● | ● | ● | ● |

**Behaviours Directed at Others**
You indicated that you witnessed other residents subjected to the following behaviour(s) during this rotation: Indicate below which person(s) engaged in this behaviour. Check all that apply.

<table>
<thead>
<tr>
<th></th>
<th>Clinical Faculty (classroom)</th>
<th>Clinical Faculty (clinical setting)</th>
<th>Other Resident</th>
<th>Medical Student</th>
<th>Learners other than Residents or Medical Students</th>
<th>Nurse</th>
<th>Administrator</th>
<th>Other institution employee</th>
<th>Patient or Patient’s Family</th>
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<tbody>
<tr>
<td>Publicly embarrassed</td>
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<td>Asked to exchange sexual favors for grades or other rewards</td>
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You may access the University of Manitoba, College of Medicine, (formerly “Faculty of Medicine”) Guidelines for Conduct in Teacher-Learner Relationships at:
http://umanitoba.ca/faculties/medicine/media/guidelinesforconductinteacherlearnerrelationships.pdf

You can report student mistreatment or other major unprofessional behavior using the Incident Report Form.