## **RCPS Emergency Medicine Residency Program**

# Occupational Health and Safety Policy

#### 1. Introduction

This policy supplements the Occupational Health and Safety Policy of the Office of Postgraduate Medical Education (http://www.med.ualberta.ca/programs/residency/resources/health-andsafety). It applies to all residents in the RCPS Emergency Medicine Program at the University of Alberta. It comes into effect on 1<sup>st</sup> July 2015 and will be reviewed annually or sooner as required.

The Emergency Medicine Program at the University of Alberta will ensure compliance with all required legal standards for occupational health and safety for residents at all times. In addition, the Program will look to achieve standards of best practice in occupational health and safety.

## 2. Background

Residents are postgraduate medical trainees registered with the University of Alberta and are employees of Alberta Health Services (AHS). During the course of their employment they may be under the supervision of non-University or AHS employees, and on non-University or AHS premises. It is therefore important that issues of health and safety are effectively coordinated between these agencies. This policy is intended to supplement policies developed by the above organisations with specific regard to:

- Physical safety
- Psychological safety
- Professional safety

## 3. Purpose

- To minimize the risk of injury and promote a safe and healthy environment.
- To provide a procedure to report hazardous or unsafe training conditions and a mechanism to take corrective action.
- to demonstrate the commitment of the Program to the health, safety and protection of its trainees

### 4. Relevant processes

Where a Resident, member of the Faculty, or other individual is concerned that there may be a Health and Safety concern related to one of the above issues they will discuss this first with the Residency Program Director or

Assistant Program Director. A recommendation will then be made to the Residency Program Committee regarding any necessary action. The Residency Program Director or designate will be responsible for ensuring all required actions are put in place. The University and/or AHS will be involved as appropriate to resolve the issue.

## 5. General Requirements

Residents will be properly supervised at all times during training. Residents will exercise their own judgement and discretion in ensuring their own personal safety. Residents should discuss concerns with the preceptor and/or Residency Program Director if they feel any anticipated task they are asked to undertake involves an undue level of risk.

## 6. Specific requirements

## Physical safety

#### i. Travel

Residents are generally not expected to travel as part of their training other than going to and from work, with the exception of the EMS rotations. When traveling to and from work, residents should ensure they travel by means considered to be safe and should contact the preceptor and/or Residency Program Director if they feel any travel involving undue risk.

Residents have access to the PARA Taxi Reimbursement Program (<a href="https://para-ab.ca/benefits/taxi-reimbursement-program/">https://para-ab.ca/benefits/taxi-reimbursement-program/</a>) if they feel they are unsafe to drive home after a night of in house call.

While on EMS rotations (ground or air ambulance), residents are expected to abide by the rules and regulations regarding safety of the EMS provider.

If driving conditions deteriorate while residents are traveling to any mandatory event (e.g., Kananaskis Retreat), residents are expected to judge on the side of safety and contact the event leaders if they will be late or unable to attend.

#### ii. Patient encounters.

The emergency department is a unique environment that poses specific risks and the potential for safety issues from patients and visitors. If a resident is concerned that such a situation has arisen they should suspend the encounter and ask that additional person(s) (such as nurses or security guards) accompany them during the rest of the encounter. In some circumstances it will still not be safe to continue the patient encounter. As the resident

becomes more senior, they will be expected to contemplate and implement ways to deliver patient care while maintaining staff safety and department control. Residents/Fellows should discuss the encounter with the preceptor and/or the Residency Program Director.

### iii. Body substance exposure.

Residents are expected to follow universal body substance precautions. In the event of an exposure, the resident is expected to follow the AHS Body Fluid Exposure guidelines.

### Psychological safety

Residents are encouraged to use the FOMD Professionalism Button (<a href="https://www.med.ualberta.ca/programs/pair">https://www.med.ualberta.ca/programs/pair</a>) in the event of intimidation or harassment.

Residents should report any episodes of intimidation and harassment to the preceptor and Program Director. The Program Director or designate will investigate the incident and protect the resident from further episodes. This may require altering the rotation site or reporting the incident to site administration if the circumstances warrant.

Critical Incident Debriefing is available through AHS for difficult patient care episodes and should be accessed after difficult cases or events.

### Professional safety

Residents are required to join the CMPA.

Residents who are asked to perform duties that are in conflict with their ethical or religious beliefs are expected to notify the preceptor and/or Program Director. Residents are not expected to carry out or perform functions that conflict with their ethical or religious beliefs.

Appendices

PGME Occupational Health and Safety Policy

Latest update: October 19, 2015