

University of Toronto  
Faculty of Medicine, Postgraduate Medical Education

**Postgraduate Trainee Health and Safety Guidelines  
April 2012**

Approved By:

Date of Adoption:

Date of Next Review: 2017

## **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 evaluation of the University Postgraduate Medical Education function and the sites used for residency education. Standard A.2.5 states that:

“All participating sites **must** take reasonable measures to ensure resident safety at all times, particularly considering hazards such as environmental toxins, exposure to infectious agents transmitted through blood and fluid, radiation, and potential exposure to violence from patients or others.”

The collective agreement between the Professional Association of Interns and Residents of Ontario (PAIRO) and the Council of Academic Hospitals of Ontario (CAHO) states that residents are postgraduate medical trainees registered in University programs as well as physicians employed by the hospitals. The agreement states that the trainees/employees must have secure and private rooms and secure access between call room facilities and the service area and access to and coverage for Occupational Health services.

Accreditation Canada standards indicate that member hospitals must have an operational safety and security program for staff and patients. The Ontario Ministry of Labour's Occupational Health and Safety Act (OHSA) outlines minimum standards for health and safety and establishes procedures for dealing with workplace hazards and protection against risks of workplace violence.

The University of Toronto Health and Safety Policy (Governing Council March 29, 2004) states that the University is committed to the promotion of the health, safety and wellbeing of all members of the University community, to the provision of a safe and healthy work and study environment, and to the prevention of occupational injuries and illnesses.

## 2. PURPOSE OF THIS GUIDELINE

- 1) To minimize the risk of injury and promote a safe and healthy environment at all University of Toronto affiliated teaching sites.
- 2) To demonstrate the University of Toronto Faculty of Medicine's commitment to the health, safety, and protection of its postgraduate trainees.
- 3) To provide a procedure to report hazardous or unsafe training conditions and a mechanism to take corrective action.

## 3. SCOPE

The University, hospitals, and affiliated teaching sites are accountable for the environmental, occupational, and personal health and safety of their employees and have the right to make implementation decisions within their respective policies and resource allocations. Postgraduate trainees must adhere to the relevant health and safety policies and procedures of their rotation's training site. In addition, all teaching sites must meet the requirements of the PAIRO-CAHO collective agreement.

These guidelines encompass:

- All postgraduate trainees, including residents and fellows;
- **Personal Health and Safety** including risk of violence or harm from patients or staff, access to secure lockers and facilities including call rooms, safe travel from call room to service floor, to private vehicle, and transportation home, working in isolated or remote situations, and safeguarding of personal information;
- **Workplace and Environmental Health and Safety** including hazardous materials as named in the Occupational Health and Safety Act, radiation safety, chemical spills, indoor air quality; and
- **Occupational Health and Safety** including blood borne pathogens, immunization policies and respiratory protection.

## 4. PROCEDURE: PERSONAL SAFETY

The University of Toronto Faculty of Medicine strives for a safe and secure environment for postgraduate trainees in all training venues. All teaching sites, hospitals, and long-term care institutions are responsible for ensuring the safety and security of residents and fellows training in their facilities in compliance with their existing employee safety and security policies/procedures as well as the requirements outlined in the PAIRO-CAHO collective agreement. The PGME Office will work with the Medical Education and Occupational Health Offices at these affiliated training sites to ensure adherence to these requirements. Locations without a formal health and safety policy or joint committee will be guided by the standards outlined in the Occupational Health and Safety Act. Trainees participating in medivac transports are governed by PGE:COFM principles re: The Role of Residents during Medivac/Ambulance transports, 1999. Safety and security issues related to Intimidation and Harassment are outlined in the PGME *Guidelines for the*

*Reporting of Intimidation, Harassment and other kinds of Unprofessional or Disruptive Behaviour in Postgraduate Medical Education*

**a) Responsibility of the Program and or Training Site:**

- Accreditation standard B 1.3.9 states that all training programs must establish their own program specific safety guidelines to address their particular risk situations.
- Programs must ensure trainees are adequately oriented to these guidelines prior to initiating clinical services.
- Programs should train residents and fellows in their ability to assess safety risks specific to each rotation.
- Where safety risks exists or are uncertain, programs may not expect postgraduate trainees to see a patient in hospital, clinic or at home, without the presence of a supervisor or security personnel.
- Training sites must endeavour to safeguard trainee's personal information when communicating with patients, staff and families.

**b) Responsibility of the Trainee:**

- Trainees 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.
- Trainees are expected to call patients from a hospital or clinic telephone line. If personal mobile phones are used, trainees should engage the call blocking feature.
- Trainees must exercise judgment when driving a personal vehicle or exposing oneself to workplace injuries (e.g., needle sticks) when fatigued.
- The Trainee must report any situation where personal safety is threatened.
- Trainees must use caution when offering personal information to patients, families of staff.

**c) Reporting protocol for breaches of personal safety:**

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.

Trainees in hospital/institutional settings identifying a personal safety or security breach must report it to their immediate supervisor at the training site and program director to allow a resolution of the issue at a local level, and comply with the site reporting requirements, such as completion of an Incident Report Form.

Trainees in community-based practices or other non-institutional settings should discuss issues or concerns with the staff physician or community-based coordinator, or bring any safety concerns to the attention of their Program Director.

Trainees may also report their concerns to the Director, Resident Wellness at the PGME Office. Efforts will be made to maintain the confidentiality of the complainant though this may limit the ability to investigate and act upon complaints.

Pending investigation and resolution of the identified concerns:

- The Program Director and/or Director of Resident Wellness have the authority to remove trainees from clinical placements if the risk is seen to be unacceptable. If a decision is taken to remove a trainee, this must be communicated promptly to the Chair, Vice Present Education or designate at the training site, Residency Program Committee, as well as the Vice Dean, PGME.
- If the safety issue raised is not resolved at the local level, it must be reported to the Director, Resident Wellness who will investigate and may re-direct the issue to the relevant hospital medical education office or University office for resolution. The resident/faculty member bringing the incident forward will receive a response within 10 days outlining how the complaint was handled or if it will require further review.
- The Director, Resident Wellness will generally bring the issue to the hospital office responsible for safety and security, and may involve the University Community Safety Office, Faculty of Medicine Health and Safety Office for resolution or further consultation, and will report annually to the Postgraduate Medical Education Advisory Committee (PGMEAC) and the Hospital University Education Committee (HUEC) through the Vice-Dean, PGME.

Urgent resident safety issues will be brought to the attention of the Vice-Dean, PGME as well as to the relevant hospital VP Education as appropriate.

Health and safety systems issues may also be brought to the attention of the Director, Resident Wellness at any time by various methods, including internal reviews, resident/faculty/staff reporting, or police/security intervention.

## **5. PROCEDURE: WORKPLACE AND ENVIRONMENTAL HEALTH AND SAFETY AND OCCUPATIONAL HEALTH AND SAFETY**

In the course of their training, postgraduate trainees may be exposed to hazardous agents and communicable pathogens. Trainees, the University and teaching sites including hospitals, laboratories and community clinical settings are jointly responsible for supporting a culture promoting health and safety and preventing injury and incidents. Accidents, incidents and environmental exposures occurring during training will be reported and administered according to the reporting policies and procedures of the University, hospital or clinical teaching location.

a) **Responsibilities of the Program, PGME Office and Training Site:**

- Programs and training sites must ensure residents and fellows are appropriately oriented to current best practices workplace safety guidelines including Workplace Hazardous Materials Information and Safety (WHMIS)
- Programs must have guidelines to address exposures specific to each training site (e.g., radiation safety, hazardous materials, infection control), communicate these to trainees at site-specific orientation sessions, and assess trainees for appropriate understanding prior to involvement in these activities
- Programs should train residents and fellows in their ability to assess site specific safety risks The Postgraduate Medical Education Office will ensure trainees have the required immunizations (as per the Faculty's Communicable Disease Policy) prior to initiating clinical duties . This information is available to appropriate individuals at the training sites as required via the Postgraduate Web Evaluation and Registration (POWER) system. Trainees not meeting the immunization requirements of the faculty are not permitted to complete their registration with the PGME Office and are not registered at the hospital.
- The PGME Office will ensure all communicable disease issues are reviewed by the Expert Panel on Infection Control and dealt with on a case-by-case basis prior to finalizing a trainee's registration.

b) **Responsibilities of the Trainee:**

- Residents and fellows must participate in required safety sessions as determined by their Program or training site.
- Trainees must agree to abide by the safety codes of the training site.
- Trainees must agree to report unsafe training conditions as per the protocol outlined.

**Reporting Protocol for Workplace Accident/Injury or Incident (See appendix 1):**

- A) During daytime hours while working at an affiliated hospital or site associated with an affiliated hospital:
- 1) The trainee must go immediately to the Employee/Occupational Health Office of the institution.
  - 2) The trainee must complete the incident report form as required by the institution's protocol.
  - 3) The trainee is encouraged to submit a copy of the report form to their Program office which will then forward a copy to the PGME Office.

- B) During evenings or weekends or at a training site with no Occupational Health Office:
- 1) The trainee must go immediately to the nearest emergency room and identify him/herself as a resident or fellow at the University of Toronto and request to be seen on an urgent basis.
  - 2) The trainee must comply with the institution's protocol for completion of appropriate incident report forms and keep a copy of this form to be forwarded to their program office.

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## **APPENDIX 1:**

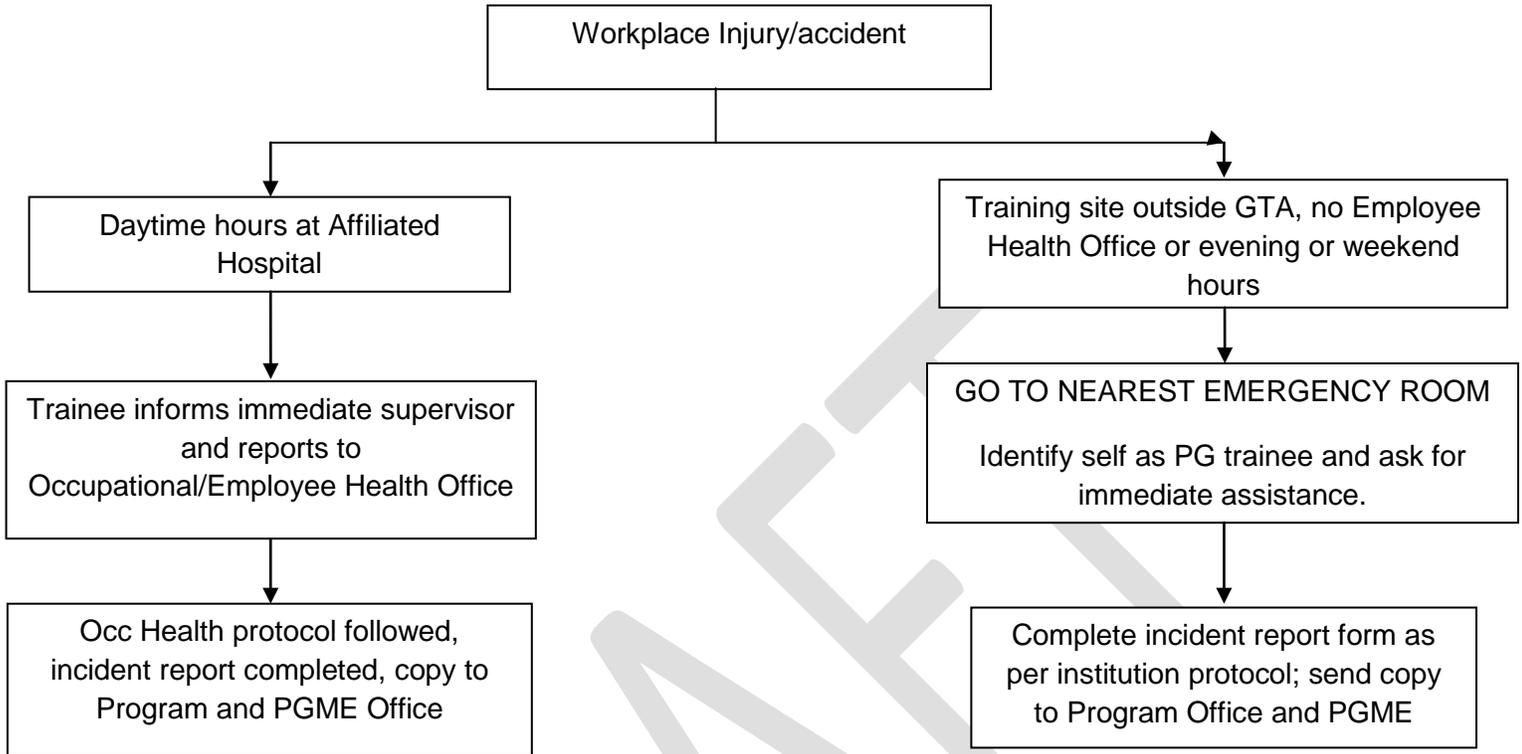
### **Related Documents**

- 1) Occupational Health and Safety Act, Ontario Ministry of Labour, 2007:  
Guidelines and FAQs:  
[www.labour.gov.on.ca/english/hs/faq/faq\\_2.html](http://www.labour.gov.on.ca/english/hs/faq/faq_2.html)  
legislation:  
[www.e-laws.gov.on.ca/html/statutes/english/elaws\\_statutes\\_90o01\\_e.htm](http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_90o01_e.htm)
- 2) PAIRO-CAHO agreement: [www.pairo.org](http://www.pairo.org)
- 3) The Role of Residents During Medivac/Ambulance Transfers.  
PGE:COFM, Dec 9, 1999
- 4) University of Toronto, Health and Safety Policy (Governing Council, March 29, 2004)  
<http://www.utoronto.ca/safety.abroad/progmanual/healthsa.pdf>
- 5) Blood and Body Fluid Exposure Policy for University of Toronto Postgraduate Medical Trainees:  
<http://www.pgme.utoronto.ca/Assets/PGME+Digital+Assets/immunization/Blood+and+Body+Fluid+Exposure+Policy.pdf>
- 6) COFM Immunization Policy  
<http://www.pgme.utoronto.ca/Assets/PGME+Digital+Assets/immunization/COFM+Imm+Pol.+Nov.+2010.pdf>
- 7) PGME Immunization Requirements  
<http://www.pgme.utoronto.ca/quickinfo/requirements.htm>
- 8) PGME Intimidation and Harassment Guidelines (in review, 2012)

### **Resources:**

- 1) Occupational/Employee Health Offices at all University affiliated teaching hospitals
- 2) PGME Office
  - a. Office of Resident Wellness
  - b. Immunization Officer

**Appendix 2: Protocol for Workplace Exposure/Injury**



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