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Section A: Introduction

A1: Background

Physician well-being refers to the optimization of all factors affecting biological, psychological, and social health and preventing or treating acute or chronic diseases experienced by physicians, including mental illness, disabilities, and injuries resulting from work hazards, occupational stress and burnout. ([WMA statement 2017](#))

Wellness goes beyond the absence of distress and includes being "challenged, thriving, and achieving"

success in various aspects of personal and professional life." (Shanafelt, 2003)

PGME at McMaster University is committed to creating, promoting, and sustaining a safe, inclusive, and positive learning environment for all postgraduate trainees that emphasizes the promotion of well-being as essential in postgraduate training and a career in medicine.

Ensuring a positive learning environment is a shared responsibility of McMaster University, the PGME office, residency programs, residents, teaching faculty and affiliated sites. Beyond the local institution, the importance of physician well-being is increasingly recognized by professional organizations as a key element to the delivery of optimal patient care.

The Canadian Medical Association (2018) describes the importance of considering the wellness of physicians, stating:

Being a physician can be deeply gratifying, but it also comes with stresses and challenges that can take a toll on...health and wellness. Heavy workloads, demanding standards of training and practice, and complex practice environments are just some of the factors that can put any physician at higher risk of personal and professional dissatisfaction, burnout, and depression. The impacts of this – on (the individual)...on patient care and on the performance of the overall health system – make supporting physician health an imperative.

...Recognizing the range of challenges physicians face, we advocate for a shared responsibility approach – targeting both individual and systemic factors that negatively affect physician health – as the pathway to meaningful, sustained improvements.

The **CanERA** Standards of Accreditation for Institutions with Residency Programs and the **CanERA** Standards of Accreditation for Residency Programs require PGME policies and/or guidelines that promote and address a positive and safe learning environment for all postgraduate trainees and for those involved in postgraduate residency education.

A2: Definitions

A comprehensive list of definitions relevant to postgraduate medical training at McMaster University can be found in the [PGME Glossary of Definitions and Terms](#).

A3: Purpose

These guidelines serve to:

- Outline the responsibilities of key stakeholders in PGME in creating a learning environment that supports and fosters resident wellness.
- Provide overarching approaches to resident wellness in residency programs.
- Identify the policies, services and support provided by residency programs, PGME and McMaster University to support resident wellness and a safe, inclusive, and positive learning environment.

A4: Scope

These guidelines apply to all residency programs at McMaster University. This document supplements and does not supersede any relevant workplace, University, PGME, and program-specific policies.

Section B: Roles and Responsibilities

B1: Residents

1. Residents are responsible for recognizing the importance of wellness and self-care and accessing appropriate resources to maintain wellness.
2. Residents must have a primary health care provider and should contact the Resident Affairs office if assistance is required to obtain a primary health care provider.
3. Residents are responsible for reporting (if aware) any personal/professional impediment to performing their clinical duties in a safe, appropriate, and effective manner.
4. Residents are responsible for managing their personal time to maximize rest between clinical duties to prevent excessive fatigue at work.
5. Residents are responsible for assessing and recognizing signs of impairment, including that which is due to illness and/or fatigue in themselves. Residents experiencing such impairment are to seek appropriate help and/or access the available program and PGME supports.
6. Residents experiencing any disability-related barriers, including but not limited to physical or mental conditions that could impair their ability to perform their duties, should seek assistance and/or accommodations from their program, PGME and/or Resident Affairs.
7. If a resident recognizes physical, mental, or emotional problems affecting the performance of another trainee, including impairment due to excessive fatigue, the resident should encourage their fellow trainee to notify a program director or delegate and/or, if there is a risk to patient safety, consider notifying the program director, delegate or applicable clinical site lead.
8. Residents are strongly encouraged to report safety, supervision, and mistreatment concerns to the appropriate individuals and/or offices, as outlined below under resources.
9. Residents must review the [PARO-OTH Collective Agreement](#) and be familiar with the content, particularly regarding the rights of the resident. Any perceived violations of the Collective Agreement must be reported to PARO and/or program and/or PGME.

B2: Residency Programs

10. Must be aware of and address factors within training that may influence resident health and wellness, including but not limited to concerns of safety, supervision, discrimination, and other forms of mistreatment.
11. Must be aware of and apply PGME and McMaster University policies and guidelines, including but not limited to safety, supervision, accommodation, and mistreatment. *Relevant policies and guidelines are listed in the [resources section](#) of these guidelines.*
12. Must include fatigue risk management in the curriculum for residency training and consider

methods to address systemic issues leading to excessive fatigue among residents within the program.

13. Must have effective processes to identify and address safety, supervision, and mistreatment concerns in accordance with central policies and with assistance from the Associate Dean, PGME, and/or the Assistant Dean, Resident Affairs, as required.
14. Must have processes that identify and address the hidden curriculum that exists in residency training and how these may affect health and wellness.
15. Must ensure that their residents are aware of the relevant policies and resources available to them within the program, PGME and McMaster University if experiencing wellness-related issues.
16. Must ensure that assistance is provided to residents, if required, to access resources within the program, PGME, McMaster University and within the province (e.g., PARO, Ontario Medical Association, Physician Health Program). Program directors should seek assistance from the Associate Dean, PGME, and/or the Assistant Dean, Resident Affairs, for advice within the limits of confidentiality.
17. Should identify wellness champions within their program and create wellness committees, curricula, and mentorship programming with resident input.
18. Must have an effective process for individuals involved in resident wellness and safety programs/committees and provide input to the residency program committee.
19. Should encourage residents completing a modified educational plan (e.g., remediation) and/or engaged in an appeal process to seek support from the Resident Affairs office.
20. Should address burnout and wellness issues with residents during semi-annual reviews with program leadership and provide appropriate advice and resources.
21. Must provide reasonable accommodations to enable residents to participate in required medical appointments or counselling as required. Residents must be provided with time off during work hours for acute care for illnesses (physical or mental) or dental emergencies.
22. Must adhere to the terms and conditions of the PARO-OTH Collective Agreement.

B3: Teaching Faculty

23. Should provide appropriate role modelling for the promotion and maintenance of wellness in the learning environment.
24. Should recognize in themselves, colleagues, and residents, situations where there may be physical, mental, or emotional problems affecting performance, including excessive fatigue.
25. Must participate in creating a safe environment within which residents are empowered to report concerns about physical, mental, emotional, and personal problems, to seek accommodations related to disability if necessary, and to report mistreatment occurring in training environments that

could impact their fitness to perform necessary clinical duties.

26. Must take steps to ensure the safety of residents and patients, including but not limited to informing the program director if issues with resident wellness and/or the learning environment are recognized.
27. Should actively promote wellness with residents during their clinical activities, as appropriate.

B4: Postgraduate Office

28. Must ensure that confidential, safe reporting systems and resources are provided for residents to access when they experience concerns that affect their wellness, including but not limited to PGME, Resident Affairs and the Office of Learning Environment and Mistreatment (OLEM).
29. Must ensure that central policies and guidelines on resident wellness, appropriate supervision, health and safety, mistreatment, accommodation, and fatigue risk management are reviewed and disseminated to key stakeholders in residency education.
30. Must ensure program directors and residents are aware of appropriate resources within PGME, Faculty of Health Sciences (FHS) and McMaster University, including but not limited to liaison and collaboration with the FHS Office of Professionalism and the McMaster University Equity and Inclusion Office (EIO).
31. Provide leadership and guidance, resources and support for residency programs and teaching faculty to facilitate the development of program-specific curricula.
32. Provide support to programs in identifying and connecting with the appropriate resources for residents in distress.
33. Assists in communicating with programs, residents and teaching faculty regarding supports and resources via email, Medportal, and other communication channels.
34. Assist program directors in facilitating accommodations requests by residents.

Section C: Resources

C1: Resident Affairs Office

35. The [PGME Resident Affairs office](#) provides a safe, inclusive and confidential venue to support postgraduate trainees with any concerns that arise as part of their postgraduate training. Postgraduate trainees have access to support with respect to academic and career counselling, accommodation and any personal difficulties that may affect their clinical work.
36. Resident Affairs also provides wellness support to groups or programs with a focus on improving the quality of life and general well-being of residents, providing support to residents in distress, and

developing and supporting the development of wellness programming and curricula with programs and independently, including:

- Providing individual sessions with wellness counsellors, directors and/or Assistant Dean to discuss, navigate, problem-solve and explore solutions regarding issues impacting resident well-being and health.
- Offering "Treats and Talks" sessions for residents/residency programs which introduce them to the hidden curriculum, normalize help-seeking and describe resources available to support resident well-being, health and mental health.
- Offering educational sessions for Program Directors, Chief Residents, resident group leaders and others regarding residents in distress or difficulty and resources available to residents.
- Consultation and collaboration with hospital and training environment leaders to encourage/ensure the needs of residents are considered and met.
- Development of and collaboration on educational initiatives and programs.
 - Program-related consultation with program directors and facilitation of academic half-days on topics related to resident well-being (e.g., burnout, moral distress, stress and anxiety, mindfulness and self-compassion).
 - PGME-related sessions on topics which intersect with or influence resident well-being (e.g., professionalism, coaching, accessibility and accommodations, EDIA).
 - Trainees with Disabilities – education for all trainees and programs regarding accessibility and the accommodations process, as well as oversight of the accommodations process and facilitation of accommodations for residents with disabilities causing functional impairment, together with the program director.
- Resident Well-being Advisory Group (RWAG) – monthly meetings with resident representatives to discuss issues, plan initiatives, and advocate to address issues influencing resident well-being, health and mental health.

37. The Resident Affairs office partners with residency programs and other key offices and programs, including but not limited to the Office of Professionalism, OLEM, Equity and Inclusion Office, UGME Student Affairs and hospital and clinic offices, and supports initiatives that support resident wellness, leadership, advocacy and other programs, recognizing that resident wellness extends beyond personal/individual wellness initiatives to address systemic factors which impact wellness.

38. The Resident Affairs office is the primary liaison for referrals of residents to the Physician Health Program (PHP) and is responsible, together with PHP, to communicate PHP recommendations to program directors, including but not limited to monitoring program requirements.

39. The PGME Positive Learning Environment and Mistreatment (PLEM) sub-committee develops resources on behalf of residency programs and PGME to support a safe, inclusive learning environment for postgraduate trainees and to prevent and address mistreatment.

40. The [Fatigue Risk Management \(FRM\)](#) program is responsible for developing and disseminating FRM educational material to residency programs and developing FRM resources within PGME.
41. Faculty Interest Group – Resident Affairs brings together faculty for yearly retreats and other educational and networking opportunities to build capacity (i.e., awareness, knowledge, skills and resources), advocate for resident and physician well-being, and create opportunities for scholarship focused on resident wellness.

C2: Office of Learning Environment and Mistreatment (OLEM)

42. The PGME confidential/anonymous [mistreatment reporting platform](#) is housed in OLEM. OLEM will respond to a confidential mistreatment concern within two (2) business days of receiving the report and offer to meet with the trainee to debrief, consider options and next steps. OLEM will liaise with other offices/individuals depending on the nature of the report to decide upon management and resolution. OLEM is located within PGME but outside Resident Affairs to maximize collaboration and preserve equity and confidentiality.
43. The Faculty Navigator and/or Program Coordinator will keep track of concerns and provide an anonymized report to the Associate Dean, PGME, on an annual basis.

C3: [Office of Professionalism](#), Faculty of Health Sciences (FHS)

44. The Office of Professionalism is a resource to discuss, receive guidance and/or report instances of discrimination and harassment within FHS. The Office consists of the Advisor, Professionalism, Faculty Lead, and Project Manager.
45. The Advisor, Professionalism, and Faculty Lead will work together toward the following goals in an objective, impartial, empathetic, and confidential manner:
 - Complaints mediation, resolution
 - Attend to issues of harassment and discrimination according to the university's policies for all Faculty of Health Sciences schools and educational programs
 - Advocacy
46. The Advisor, Professionalism, and Faculty Lead are also available for students, faculty and administration to support awareness and education regarding issues of professionalism:
 - Consultation and advice
 - Training and education initiatives

C4: [Equity and Inclusion Office \(EIO\)](#), McMaster University

47. EIO is a McMaster University central resource for residents to explore issues related to harassment, discrimination, and sexual violence.
48. PGME and program directors can seek advice from the EIO regarding these issues within the learning environment. EIO also offers advice concerning the Human Rights Code and legislation.
49. EIO is a formal intake office for complaints in the areas of harassment, discrimination and sexual

violence and will lead timely and fair investigative and alternative dispute resolution processes.

C5: Professional Association of Residents of Ontario (PARO)

50. PARO is the official representative voice for Ontario's doctors in training. PARO's priority is to advocate on behalf of its members, addressing professional and educational concerns to optimize the training and working experience of Ontario's newest doctors, thus ensuring that patients receive the best possible medical care.
51. The PARO 24-Hour Helpline is available to residents, their partners and family members, and medical students. The toll-free number, 1-866-HELP-DOC (1-866-435-7362), is accessible anywhere in Ontario, 24 hours a day, 7 days a week.

C6: Physician Health Program (PHP), Ontario Medical Association

52. PHP provides confidential support for medical trainees, residents, and physicians (as well as their partners and family members) who may be struggling with substance use, mental health concerns, or other behaviours that have a personal and/or professional impact. Support may include assistance with connecting an individual to a community resource such as an addiction provider, psychiatrist/psychologist, therapist, or coach.
53. The PHP also offers support and education to physician leaders, hospitals, and other worksites, as well as to anyone concerned about a loved one or colleague. Services aim to support a culture of medicine that values prevention, early identification, and intervention of health concerns and supports the health professional, their loved ones, and the workplace.
54. PHP can be reached through their confidential toll-free number, 1-800-851-6606 or via email at php@oma.org.

Section D: Relevant Policies

A complete list of policies is available on the [PGME Policies and Guidelines website](#).

D1: PGME Policies

55. *Health and Safety*: Resident safety is guided by the PGME Health and Safety Policy. This policy ensures the safety of postgraduate trainees and ensures the safety and proper care of patients in educational settings. Residency programs must adhere to the PGME Health and Safety Policy and ensure that addendums to the policy are made for program-specific context, as appropriate.
56. *Fatigue Risk Management Guidelines*: These guidelines are attached as an appendix to the PGME Health and Safety Policy and describe key stakeholders' roles in managing fatigue during residency training.
57. *Clinical Supervision*: This policy clarifies the roles and responsibilities of trainees and clinical supervisors to ensure adequate supervision and the safety and proper care of patients in

educational settings. Residency programs must adhere to the PGME Supervision of Postgraduate Trainees policy and ensure that addendums to the policy are made for program-specific context, as appropriate.

58. *Accommodation*: This policy outlines the processes to be followed at the program, PGME, and FHS levels for residents requiring academic accommodation.
59. *Leaves*: It is recognized that residents may require an interruption of training for personal and/or professional reasons. This policy outlines the processes and procedures of the Postgraduate Medical Education (PGME) office to review and grant requests for leaves.

D2: McMaster University

60. *Discrimination and Harassment*: The purpose of this policy is to:
- Articulate McMaster University's commitment to Discrimination and Harassment prevention and response.
 - Identify services and resources related to Discrimination and Harassment that are available to all members of the McMaster University Community ("University Community").
 - Explain the complaint and reporting options, supports, and accommodations that are available to all members of the University Community who experience Discrimination and/or Harassment.
61. *Sexual Violence*: The purpose of this policy is to:
- Articulate McMaster University's commitment to sexual violence prevention and response.
 - Identify services and resources related to sexual violence that are available to all members of the McMaster University Community ("University Community").
 - Explain the complaint and reporting options, supports, and accommodations that are available to all members of the University Community who experience sexual violence.
62. *Violence in the Workplace*: This policy provides a framework within which established protocols are identified for assessing the risk of violence in the workplace, dealing with violent situations, specific threats of violence, and emergency responses to violent behaviour.