UCF/HCA GME Consortium Work Environment Policy: Safety, Quality, Well-Being and Vendor Relations

Purpose/intent: Sponsoring institutions must establish an implement policies and procedures regarding educational and work environment. Services must be provided and the health care delivery system developed to minimize trainees' work that is extraneous to their GME programs educational goals and objectives. The institution must ensure a healthy and safe work environment and have policies related to vendor interactions (Institutional requirements II.F, IV.K)

Policy Summary: Several policies related to work environment are discussed in detail in other policy documents as indicated. The following are discussed here:

1. A trainee forum meets regularly to communicate and exchange information on their educational and work environment, their specific programs, and any issues identified by trainees. This forum is allowed to meet without faculty, DIO, or administrators.
2. Each participating site will provide appropriate services to minimize work that is not educational in nature and does not meet the goals of each residency/fellowship program. Clinical care and learning objectives are to be accomplished without excessive reliance on trainees to fulfill non-physician work. These services include:
   A. Patient support services including phlebotomy, peripheral intravenous access placement, laboratory and patient transport services. Such services must meet quality patient care standards.
   B. Laboratory and radiology services will be available to support timely and quality patient care.
   C. Medical records will be available at all times to support patient care, education and scholarly activity, and quality improvement activities.
3. Each participating site will provide for a professional, healthy and safe work environment. These include:
   A. Food services that are available 24 hours a day while trainees are on duty, through a cafeteria, appropriate vending machines, or other mechanism.
   B. Call/sleep rooms that are safe, secure, quiet and private.
   C. Appropriate security and safety measures in all clinical and educational locations. Security assistance will be provided as needed and security escorts will be available for parking lots and ramps.
   D. Mistreatment, abuse, and/or coercion of trainees, learners, faculty and staff is not permitted. Such behavior should be reported through either the program or by confidential means (through hospital reporting or learning management system).
   E. All team members are responsible for reporting unsafe conditions and adverse events. This includes the ability to transition a patient's care to another qualified and rested provider.

4. If trainees are too fatigued to return safely home following clinical care responsibilities, the following options are available:
    A. Hospitals: Call rooms are available for trainees to take naps prior to returning home, money for taxi is back-up option
    B. Other sites: not applicable due to limited clinical/educational work hours
5. Well-being
    A. Trainees are given opportunities to schedule and attend medical, mental health, and dental appointments. Each programs may provide specific guidance for scheduling elective appointments.
    B. Trainees and faculty are educated regarding fatigue, sleep deprivation, burnout, depression, and substance abuse, including identification and recognition of symptoms. Trainees and faculty are provided information on how to alert the program director or other GME leaders of any concerns, including suicidal ideation or potential for violence.
    C. Trainees are provided access to tools for self-screening.
    D. Trainees are provided access 24/7 to UCF employee assistance program regarding mental health assessment and treatment.
    E. The GME leave policy provides circumstances where trainees may take leave for family emergencies, illness, or significant burnout/fatigue. However, trainee training be be extended as appropriate.
6. Faculty, residents, and other trainees in all programs must actively participate in patient safety systems.
    A. All programs have formal education regarding patient safety goals and techniques.
    B. All trainees and fellows are educated regarding their responsibilities in reporting patient safety events including mechanism to report.
    C. Trainees are provided summaries of clinical sites patient safety reports.
    D. Trainees participate as team members in either real or simulated interprofessional patient safety activities such as root cause analysis.
    E. Adverse event disclosure: Trainees are trained in how to disclose adverse events. Trainees are provided the opportunity to participate in real or simulated disclosures.
7. Quality Improvement education and engagement:
    A. Each program provides training, education and experience in quality improvement processes, including health disparities. Access to IHI Open School Modules is provided by the Consortium through UCF COM.
    B. Each program provides data to trainees and faculty regarding quality metrics.
    C. Trainees have opportunities to participate in interprofessional quality improvement activities.
8. Refer to Consortium Supervision and Clinical/Education work hour policies for issues of fitness for duty, fatigue, transitions in care, and safety.
9. Refer to separate Consortium Policy Regarding Trainee Forum, Complaints, Concerns, Harassment.

10. Refer to Consortium policy for Impaired Physicians.
11. Industry vendors (IV.K.): Trainees and faculty will comply with the UCF College of Medicine Industry Relations Policy and Guidelines which is reviewed and updated regularly. This policy is posted on the UCF website http://med.ucf.edu/administrative-offices/faculty-and-academic-affairs/faculty-policies-forms-guidelines/. All trainees and the residency leadership are required to complete and document mandatory training on industry relations. Topics discussed in the policy include: provisions related to not accepting gifts or meals from industry sources, prohibitions related to use of pharmaceutical samples, financial and consulting relationships and disclosures, educational and research support, and site access to industry representatives. If any participating hospital has a more stringent policy regarding vendors, this will also apply when trainees are assigned to that location.