

SECTION TWO – HOUSE STAFF

POLICY NO: 2.6

SUBJECT: WORKING ENVIRONMENT

I. PURPOSE

To establish guidelines for the provision of an adequate working environment for house staff, that is consistent with proper patient care and the house staff's educational needs.

II. RESPONSIBILITIES/REQUIREMENTS

A. Supervision of House Staff.

House staff shall be supervised by those attending physicians who are members of the Teaching Staff, in accordance with the requirements of their respective Postgraduate Program and the ACGME (see also Policy No. 2.5 regarding the "Supervision of House Staff").

B. House Staff Work Environment.

1. Work Schedules/ Duty Hours.

Each Postgraduate Program shall establish policies governing duty hours and working environment, that are optimal for house staff education and the care of patients (see also Policy No. 5.1 regarding "Duty Hours"). Such policies shall meet the applicable Program Requirements that relate to duty hours and on-call schedules based on education rationale, patient need, and continuity of care; and shall be reviewed as part of the internal review of each Postgraduate Program. Copies of each Postgraduate Program's policies shall be maintained on file in the GME Office.

2. Other Working Conditions.

More specifically, the policies and procedures of each Postgraduate Program must specify and ensure the following:

- (a) The goals and objectives of the Postgraduate Program are not compromised by excessive reliance on house staff to fulfill SPUH service obligations;
- (b) Each Postgraduate Program has a mechanism to provide support when patient care responsibilities are especially difficult or prolonged;
- (c) Duty hours are consistent with SPUH's Policies and Procedures Manual, as well as the Program Requirements applicable to each Postgraduate Program;
- (d) House staff on duty are provided adequate sleeping quarters and food services when they are on-call;
- (e) All training sites provide effective, efficient, high quality laboratory, pathology and radiologic services; Residents are not required routinely to carry out IV & blood drawing functions.
- (f) A medical records system that documents the course of each patient's illness and care and is reasonably available at all times. The medical records system shall support the education of house staff, and quality assurance activities, and provide a resource for scholarly activities; and

- (g) Security is provided in all locations where house staff are assigned, including, but not limited to, parking facilities and on-call quarters.

C. Applicability of Sexual and Other Types of Harassment Policy.

House staff are expected to participate in a working environment, which is free of objectionable and disrespectful conduct and communication of a sexual nature. SPUH shall not tolerate conduct of a sexual nature that interferes with an individual's work performance or creates an intimidating, hostile, or offensive working or learning environment (see Policy No.3. 4. regarding "Sexual and Other Types of Harassment").

D. Forum for House Staff Feedback

To assure a positive educational environment in which house staff can communicate and exchange information on their working environments and their educational programs at SPUH, the Graduate Medical Education Committee has established forums whereby house staff may to raise and resolve issues without fear of intimidation or retaliation.

- ✓ The DIO's regularly scheduled meeting with residents to listen to their issues. These meetings occur without the Program Directors or members of the teaching faculty present.
- ✓ The Residents Council provides an independent forum in which residents meet among themselves to communicate and exchange information on their work environment and their ACGME-accredited programs. The purpose of this Council is:
 - 1. To serve as a voice for residents – addressing, facilitating, and prioritizing concerns and desires of the residents.
 - 2. To provide a forum for open communication between the administration and residents.
 - 3. To ensure resident involvement in the continued strengthening and development of the residency programs at SPUH.
 - 4. To ensure resident involvement in the continued strengthening of patient care and quality of medical practice at SPUH.
 - 5. To foster in all aspects of the growth and development of individual physicians in training at SPUH.
- ✓ An anonymous and confidential resident "Hot Line", available 24 hours/7 days a week, to bring up any issues of concern.
- ✓ GMEC sub-committee meeting with residents during internal program reviews where program directors and attending physicians are not allowed.
- ✓ The evaluation forms that the residents complete for each of their rotations and the exit evaluation forms that residents complete upon leaving the program are anonymous and provide opportunities for them to assess programmatic goals and objectives against formal criteria and also provide an opportunity to comment on the attending, the rotation, or the institution in a narrative form.

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