

Public Health Emergencies and Mass Casualty Events Guideline

Office of Accountability:	Faculty of Medicine
Office of Administrative Responsibility:	Postgraduate Medical Education
Scope:	All Postgraduate Trainees; All non-Dalhousie Trainees registered for electives; and University and Postgraduate Training Program Leadership
Approved	PGME Committee - 8 December 2018 Faculty Council – 8 January 2019

1. Introduction

Postgraduate trainees are a critical resource in addressing public health emergencies and mass casualty events, which may include events such as infectious disease outbreaks, natural disasters, accidents and conflict. Public health emergencies also can provide some unique learning opportunities. With dual roles as healthcare providers and as learners, Postgraduate Trainees are uniquely situated to participate in emergency preparedness and the mobilization of the response to public health emergencies and/or mass casualty events.

These guidelines are intended for all Dalhousie postgraduate trainees and non-Dalhousie trainees registered for electives (collectively “Postgraduate Trainees”) as well as University and residency program leadership.

2. Guiding Principles and Best Practices

A. Communications in the Event of a Public Health/Mass Casualty Event

Guiding Principles:

Postgraduate trainees provide cross-coverage at multiple sites and are often members of several professional associations. There is great potential for them to receive conflicting information from numerous stakeholders during a Public Health Emergency. Therefore, reliable lines of communication with Postgraduate Trainees and coordination of the roles of Postgraduate Trainees in such an event should be established under the direction of the Postgraduate Medical Education Office.

Best Practices:

- The PGME office should act as the conduit for information from stakeholders to postgraduate trainees.
- Postgraduate Trainees should familiarize themselves with Public Health Emergency policies and procedures of the College of Physicians and Surgeons of the province where they are working, their health authority, and the Dalhousie PGME Office.
- Postgraduate Trainees should ensure that the Dalhousie PGME Office has current contact information on file.

B. Training, Supervision and Assignment**Guiding Principles:**

- As physicians and front-line healthcare providers, Postgraduate Trainees have an ethical duty to respond to public health emergencies. Disasters and epidemics will require efforts in excess of routine activities. Since Postgraduate Trainees represent a skilled workforce that can be mobilized to address the added strains on the healthcare system, all contingency plans for public health emergencies and mass casualty scenarios should incorporate Postgraduate Trainees.
- Postgraduate Trainees are, however, individuals with a diverse range of skills dependent on specialty and level of training. A final-year emergency medicine Postgraduate Trainee, for instance, could be called upon to staff a temporary emergency department with minimal supervision, while a first-year Postgraduate Trainee may be better suited to provide screening assessments or perform procedures such as casting and suturing.
- Regardless of specialty or level of training, Postgraduate Trainees possess basic medical knowledge and procedural skills and can be efficiently retrained or provided with complementary or additional training (such as training in Chemical Biological Radiological, Nuclear or Explosives) to provide care outside of their scope if necessary.

Best Practices:

- Postgraduate Trainees should practice when care needed is urgent, when a more skilled physician is not available, and when not providing care would lead to worse consequences than providing it during a Public Health Emergency.
- Postgraduate Trainees should perform essential frontline work where it is most needed during a Public Health Emergency. Where they are asked to perform procedures, they may not be qualified to perform, appropriate training and supervision must be provided.
- Postgraduate Trainees should not be expected to continue their routinely scheduled teaching duties during a Public Health Emergency.

- Postgraduate Trainees will be given training for and access to Personal Protection Equipment and have the right to refuse work if appropriate protective devices are not provided.
- Supervision and assignment of Postgraduate Trainees within a service should be the responsibility of the attending physician, the department/division chief, and these assignments must be approved by the Program Director or designate.

C. Vaccinations, Safety, Illness & Treatment

Guiding Principles:

Providing care in emergency circumstances may require placing oneself at risk of harm that is above and beyond routine work. This is not limited to exposure to infectious agents, toxins and conflict, but can also include excessive fatigue, burnout and emotional harm. Postgraduate Trainees must balance their obligation to provide care to patients with those to themselves and their families and should use their professional judgment when balancing these obligations.

Best Practices:

- In their role as Health Authority employees, Postgraduate Trainees should have access to Health Authority Occupational Health Offices.
- Postgraduate Trainees at high risk of morbidity and mortality based on the type of service being provided or underlying medical conditions should have rapid access to vaccines along with the population deemed high risk.
- Postgraduate Trainees who are ill, infected or high-risk -- including those with relevant chronic illness, those who are on immunosuppression treatment, or those who are pregnant -- can refuse work.
- Postgraduate Trainees who contract a pandemic illness will be quarantined according to site infection control protocols and will subsequently be provided with alternate living arrangements in the event that returning home would place their family at great risk.