

Supervision of Residents Policy

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 – 4 Mar 2021 Faculty Council – 4 May 2021

A. Background & Purpose

In compliance with the program standards by the Royal College of Physicians and Surgeons of Canada (Royal College), the College of Family Physicians of Canada (CFPC) and the Collège des Médecins du Québec (CCMQ), and the relevant provincial regulatory authorities, the PGME office is responsible for establishing policies and guidelines pertaining to postgraduate medical education. The responsibilities of each program are outlined in the accreditation standards.

This guideline sets out the guiding principles underlying the supervision to be provided to all post-graduate medical education trainees (residents and fellows, hereafter "Trainees") in the course of their training. It also explains the shared responsibility of Trainees, Supervising Faculty Members, Program Directors and Resident Program Committees, and the Postgraduate Medical Education Office in ensuring appropriate supervision is provided.

This guideline does not, however, set out the obligations of Trainees with regards to the delivery of health care generally. It also does not cover how Trainees will be assessed as that is set out in the Assessment of Training and Promotion Regulations.

B. Scope

This policy applies to all Trainees overseen by the Postgraduate Medical Education Office (PGME office) in the Faculty of Medicine at Dalhousie University.

C. Guiding Principles

• Both the Trainee and Supervising Faculty Member owe a duty of care to the patient which includes the obligation to act in the patient's best interests.

• Trainees require hands-on experience to acquire the necessary knowledge and skills to be able to independently deliver health care when they have completed their training. Their learning environment must enable Trainees to meet the learning objectives of the rotation through delegation of patient care in a safe and practical manner.

• It is impracticable and inappropriate for a Supervising Faculty Member to oversee every decision or action made by a Trainee so tasks may be delegated where appropriate; however, Supervising Faculty Members are responsible for ensuring that Trainees are only delegated tasks that fall within their competency spectrum.

• Open and supportive communication and readiness to help the Trainee are necessary to enable Trainees to voice concerns about a delegated task.

• Recognizing the limitation of Trainees is a shared responsibility between Trainees themselves and Supervising Faculty Members.

• Supervising Faculty Members should facilitate Trainee self-recognition of limitations because Trainees may fail to recognize their limitations and take on more responsibility than is appropriate. Moreover, Trainees may have difficulty identifying and/or reporting their own limitation.

D. Responsibilities

1. Responsibilities of the Supervising Faculty Member

• The Supervising Faculty Member must be aware of the learning objectives of the Trainee.

• The Supervising Faculty Member must ensure that patients are informed of a Trainee's status as a trainee.

• The Supervising Faculty Member must take into consideration a Trainee's skill and level of training when delegating a clinical task. The Supervising Faculty Member must reasonably ensure that a Trainee is competent in a given procedure or task, before delegating that procedure or task. When a Trainee has acquired sufficient skill and knowledge to independently perform a given procedure or task, the supervising faculty member must be readily available to intervene should it be necessary.

• The Supervising Faculty Member must be immediately available under circumstances in which urgent judgment by highly experienced physicians is typically required. Such scenarios will be determined by the Program Director assisted by the Residency Program Committee. Supervision may be provided from an off-site location in circumstances where the quality of supervision can be maintained and when required the Supervising Faculty Member's physical presence can be assured within a reasonable amount of time.

• The Supervising Faculty Member must respond in an appropriate and timely manner to a Trainee's reasonable request for assistance in the care of their patients. Such a response could be through phone or electronic communication but should include in-person support if this is requested by the Trainee and/or deemed by the Supervising Faculty Member to be the most appropriate assistance to meet the patient needs.

• The Supervising Faculty Member must respond in a timely fashion when contacted by the Trainee and if necessary, the Supervising Faculty Member must be available to return to the hospital in an emergency. When not immediately available to assist the Trainee, the Supervising Faculty Member must inform the Trainee and identify another Faculty Member who will be available in their absence.

• The Supervising Faculty Member must ensure that a Trainee is aware of all the patients whose care is delegated to them. The Supervising Faculty Member must also determine that the Trainee is capable of caring for all of these delegated patients.

• The Supervising Faculty Member must recognize the signs of fatigue that could potentially impair judgement in a Trainee and intervene to ensure that the patients receive appropriate care while supporting the well-being of the Trainee.

• The Supervising Faculty Member must provide verbal and written feedback to a Trainee, in a form and manner defined by the Program Director and Residency Program Committee. When possible, feedback should be provided in person followed by the timely submission of the necessary documentation.

• The Supervising Faculty Member is responsible for creating a learning environment which is safe for both resident and for the patients assigned to the supervised care. This environment should be conducive to Trainees acquiring the knowledge and skills set out in the objectives of training.

• At least daily, the Trainee and the Supervising Faculty Member will review the progress of all acutely ill patients, make the necessary modifications to the care plans, highlight aspects of the case affording educational emphasis

and ensure that appropriate documentation is entered into the medical record.

• The Supervising Faculty Member must provide Trainees with support and direction in addressing conflict.

• The Supervising Faculty Member will ensure that Trainees understand their roles and responsibilities during an orientation provided at the beginning of each clinical rotation. The Supervising Faculty Member must inform Trainees of what to do and who to call across the spectrum of clinical situations.

• The Supervising Faculty Member must promote and model professional conduct at all times.

2. Responsibilities of the Resident

• Trainees must inform patients of their status as medical trainees who are acting on behalf of a specific, named Supervising Faculty Member.

• Trainees must strive to be cognizant of the limits of their knowledge and clinical skill and consider their experience when providing clinical care.

• Trainees must notify their Supervising Faculty Member of their perceived knowledge, skill, and experience with delegated tasks. Trainees must specifically state any concerns they have to their Supervising Faculty Member if they are asked to perform tasks, they believe to be outside of their abilities In the interest of patient safety, Trainees must immediately inform their Supervising Faculty Member if they are not able to care for all of the patients who have been delegated to them. An inability by the Trainee to provide adequate care may arise for various reasons, including the number and complexity of the patients assigned or because of stress or fatigue.

• Trainees must provide appropriate timely supervision of more junior trainees rotating on the same service. In this role, a Trainee may assume some of the responsibilities of Supervising Faculty Members as outlined above, but in such cases, the expectation for same must be explicit. Furthermore, the Supervising Faculty Member remains ultimately responsible for the supervision of care delivered by both Trainees.

• Trainees must keep their Supervising Faculty Member informed of their actions if these actions have the potential to harm the patient or have resulted in patient harm.

• Trainees must inform their Supervising Faculty Member when a patient's condition deteriorates, the diagnosis and/or management are in doubt or when a procedure with potential morbidity or mortality is planned.

- Trainees must inform the Supervising Faculty Member before admitting or discharging a patient to/from hospital care or the emergency room.
- Trainees must inform the Program Director or Division/Department Head when they believe that they have insufficient supervision and/or the Supervising Faculty Member is not responsive to their reasonable requests for the assistance in the care of delegated patients.

3. Responsibilities of the Program Director and Resident Program Committee

The Residency Program Director, assisted by the Residency Program Committee, is responsible for the implementation and ongoing evaluation of compliance with this policy. Each Program may develop program specific supervision policies or guidelines to supplement this policy. In any situation in which a program specific supervision policy or guideline conflicts with this policy, this policy shall prevail.

In the event that a Supervising Faculty Member consistently fails to provide adequate supervision to Trainees, the Chairperson of that department or the postgraduate dean, in consultation with the Program Director and the Residency Program Committee may:

- Provide written feedback outlining their concerns and suggested solutions.
- Provide counseling and further training to enable the Supervising Faculty Member to fulfill their supervisory role.
- Remove Trainees from a Supervising Faculty Member's clinical teaching service in accordance with the Faculty of Medicine's Guidelines for Removal and Reinstatement of Residents from/to Faculty Member Clinical Teaching Service.
- All schedules within a Division or Department must be structured to provide Trainees with continuous availability of supervision, twenty-four hours a day and seven days a week.

4. Responsibilities of the Postgraduate Medical Education Office

The Postgraduate Medical Education office will provide support for Programs where there is an identified need regarding the implementation of this policy.