

 <b>DALHOUSIE UNIVERSITY</b> <hr/> <b>Postgraduate Medical Education</b>  <b>Supervision of Residents Policy</b>	<i>Policy Sponsor:</i>  Faculty of Medicine	<i>Approval Date:</i> September 11, 2025
	<i>Responsible Unit:</i>  Postgraduate Medical Education	<i>Amendments:</i> June 4, 2026

### A. Background & Purpose

This policy outlines guiding principles of the supervision to be provided to all post-graduate medical education trainees (residents and fellows, hereafter “Trainees”) during their training. It also explains the shared responsibility of Trainees, Supervising Faculty Members, Program Directors, Residency Program Committees, and the Postgraduate Medical Education Office in ensuring appropriate supervision is provided.

This policy does not outline obligations of Trainees with regards to the delivery of health care, and does not outline how Trainees will be assessed, which 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

- Trainees require hands-on experience to acquire the necessary knowledge and skills to independently deliver health care when they have completed their training. The learning environment must enable Trainees to meet the learning objectives of training experiences 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 should be delegated where appropriate; however, Supervising Faculty Members are responsible for ensuring that Trainees are only delegated tasks that fall within their competency spectrum.
- Recognizing the limitations of Trainees is a shared responsibility between Trainees themselves and Supervising Faculty Members.
- Supervising Faculty Members should facilitate Trainee self-recognition of limitations as 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 limitations.
- Open and supportive communication and readiness to help Trainees is necessary to enable Trainees to voice concerns about a delegated task.

## **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 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 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.
- 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.
- 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 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 or procedure and must reasonably ensure that a Trainee is competent before delegating that task or procedure.
- 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 necessary by the Supervising Faculty Member, including being available to return to the hospital in an emergency.
- The Supervising Faculty Member must be immediately available when urgent judgment by highly experienced physicians is typically required. Such scenarios will be determined by the Program Director and Residency Program Committee. Supervision may be provided from an off-site location in circumstances where the quality of supervision can be safely maintained this way.
- When not available to supervise 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 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 must provide Trainees with support and direction in addressing conflict.
- 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. In the interest of patient safety, trainees must specifically state any concerns they have to their Supervising Faculty Member if they are asked to perform tasks or procedures they believe to be outside of their abilities.
- Trainees must immediately inform their Supervising Faculty Member if they are not able to care for all 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 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 immediately inform their Supervising Faculty Member if actions taken have the potential to harm the patient or have resulted in patient harm.
- It is strongly recommended that Trainees inform the Supervising Faculty Member when admitting or discharging a patient to/from hospital care or the emergency room. Exceptions to this approach can occur under the direction of the Program Director and Residency Program Committee.
- Trainees must provide appropriate timely supervision to 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 all Trainee.
- 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 of Teaching Privileges.
- 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.

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\*Policy Adapted from the University of Alberta resident supervision policy