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|  <b>DALHOUSIE</b><br>UNIVERSITY<br><br>Postgraduate<br>Medical Education<br><br><br><br><br><br><br><br><br><br><b>Wellness Guidelines for<br/>Postgraduate Medicine</b> | <i>Policy Sponsor:</i><br><br>Faculty of Medicine                 | <i>Approval Date:</i><br>January 8, 2026 |
|   | <i>Responsible Unit:</i><br><br>Postgraduate Medical<br>Education | <i>Amendments:</i>                       |

Promotion of wellness for postgraduate trainees is an active process involving the Postgraduate Medical Education Office (PGME), residency training programs, Dalhousie University, Maritime Resident Doctors, and affiliated institutions, all of which are committed to creating a safe, positive, and healthy learning environment. Wellness in medical education has been defined as “a general sense of personal well-being – the opportunity to be and to do what is perceived by the learner as most needed and most valued” with five domains including social, mental, physical, intellectual, and occupation wellness. Literature has shown that postgraduate trainees are at increased risk of burnout, which can affect quality of care and patient safety. Mistreatment of postgraduate trainees has been linked to poor mental health outcomes such as substance abuse, decreased self-esteem, empathy and self-confidence, and increased risk of depression. As such, it is imperative that all stakeholders work towards ensuring a safe and healthy learning environment to minimize these risks.

Managing wellness is also an important skill that must be role modelled, taught, and supported through residency, as it is intrinsically tied to professionalism, directly impacting the physician and patient care.

### 1. Training Program Responsibilities:

- a) Residency Program Committees and Program Directors must be aware of factors within the learning environment which influence postgraduate trainee health and wellness.
- b) Residency programs should be proactive and creative with wellness initiatives and supportive of wellness committees within their program.
- c) Residency Programs must be aware of key barriers to wellness, including intimidation, harassment, mistreatment, and EDIRA concerns and address these issues as they arise.
- d) Faculty members involved in the education of postgraduate trainees (including the Program Director) should proactively identify situations where physical, mental, or emotional problems may be affecting performance, including excessive fatigue. Any faculty member who recognizes problems must take steps to ensure the safety of the postgraduate trainee and patients.
- e) Faculty must respond to postgraduate trainee concerns about physical, mental, emotional, and personal concerns that could impact their fitness to perform necessary clinical duties.

- f) Programs must make postgraduate trainees aware of and help them access resources in times of difficulty, including:
  - i. The Program Director and Program Administrator.
  - ii. The Office of Resident affairs, including the Assistant Dean of Resident. Affairs, or Assistant Dean of Student and Resident Affairs per their training location.
  - iii. The Dalhousie Faculty of Medicine Office of Professional Affairs.
  - iv. Dalhousie Human Rights and Equity Services.
  - v. Professional Support Programs available through provincial medical societies.
  - vi. Employee and Family Assistance Program (EFAP) via Health Authorities and Maritime Resident Doctors.
- g) Postgraduate trainees should be encouraged to obtain the services of a primary health care provider.
- h) Program Directors (or designates) are encouraged to address burnout and wellness issues with postgraduate trainees during semi-annual reviews and provide appropriate advice and resources.
- i) Programs must provide reasonable accommodations to enable postgraduate trainees to participate in required medical appointments or counseling as required.
- j) Programs are required to adhere to the Accommodations Policy of the PGME Office.
- k) Programs are required to adhere to PGME Fatigue Risk Management Guidelines.
- l) Programs are required to uphold the Maritime Resident Doctor's contract.
- m) Programs must refer all postgraduate trainees undergoing Formal Enhanced Learning Plans to the Office of Resident Affairs (see below), and are encouraged to refer all postgraduate trainees undergoing an Informal Enhanced Learning Plan to the Office of Resident Affairs.
- n) Programs must make allowances for time away for emergency dental or medical issues (physical or mental) during working hours as required, which may include issues with the postgraduate trainee's family. Appointments that can be scheduled in advance will not be considered emergencies (see postgraduate trainee responsibilities below).
- o) Faculty members must model wellness behaviour including demonstration of all responsibilities listed below under "Postgraduate Trainee Responsibilities".

## **2. Postgraduate Trainee Responsibilities:**

- a) Postgraduate trainees are responsible for reporting fit for duty so that they can perform necessary clinical duties in a safe, appropriate, and effective manner. This includes giving attention to physical, mental, emotional, and personal concerns that may impact one's fitness.
- b) Postgraduate trainees have a professional responsibility to appear for duty appropriately rested and must manage their time before, during and after clinical assignments to manage fatigue.

- c) Postgraduate trainees are responsible for assessing signs of impairment in themselves, including issues with illness and/or fatigue. Postgraduate trainees experiencing such impairment are to seek appropriate help through the resources listed above. Seeking such assistance shall not jeopardize the status of a postgraduate trainee.
- d) If a postgraduate trainee recognizes physical, mental, or emotional concerns affecting the performance of another trainee, including impairment due to excessive fatigue, that trainee should encourage their fellow trainee to notify the program director or designate and seek appropriate supports in a timely manner.
- e) Postgraduate trainees are bound by the provisions of the professional standard on the duty to report to health professionals should they encounter a colleague who may put patients at risk (e.g. CPSNS Duty to report standards; CPSNB mandatory reporting standard, etc.). As set out in these standards, postgraduate trainees are required to report to the regulator upon forming reasonable grounds to believe that a colleague represents a risk to patients or the profession for reasons of impairment or incompetence. In such circumstances, postgraduate trainees are encouraged to seek out the support and guidance of the Program Director in response to this duty.
- f) Postgraduate trainees should maintain their health through routine dental and medical care, including mental health care if needed. Non-urgent appointments should be scheduled in advance; where possible, appointments should be scheduled during times away from clinical duties or during flex days as per the Maritime Resident Doctors contract. If not possible, negotiation of time away from duties for such routine care should be communicated with services and/or faculty as far in advance as possible, employing the assistance of the chief resident, Program Administrator, and/or Program Director as required.

### **3. Postgraduate Medical Education Office Responsibilities:**

- a) The PGME Office will address issues with programs failing to adhere to their responsibilities as outlined in this policy and other policies, including but not limited to:
  - i. Resident Safety Policy
  - ii. Accommodations Policy
  - iii. Personal Harassment Policy for Postgraduate Medical Education, or any policies on trainee mistreatment
  - iv. Maritime Resident Doctors contract
- b) The PGME Office will assist programs in addressing issues that could impact postgraduate trainee wellness that are identified through internal and external reviews

#### 4. Office of Resident Affairs

The Office of Resident Affairs (RA) provides confidential support, guidance, and advocacy for residents in family medicine and specialty training programs across the Martimes. Resident Affairs is “arms-length” from PGME and all interactions are confidential. \*Legal exceptions include the following: clear and imminent danger to you or someone else, a reasonable concern that a child or elder is being abused or a court order.

- a) Personal Support: Resident Affairs supports residents navigating personal and professional challenges, including stress, burnout, work–life balance, major life changes, and the emotional impact of difficult clinical experiences. Residents may also access confidential coaching in areas such as communication, professionalism, organization, time management, and goal setting. RA can connect residents with primary care providers, counselling, and community resources (including financial resources), and advocates for those who experience learner mistreatment.
- b) Academic Support: Resident Affairs assists residents experiencing academic challenges or those on informal or formal remediation plans (IELPs/FELPs) through individualized advising, coaching, and—when requested—collaboration with program directors to optimize success.
- c) Accommodation: RA facilitates accommodations for residents facing barriers related to medical conditions, neurodiversity, or other protected human rights characteristics. They work closely with programs to ensure accommodations are operationalized in a way that facilitates the trainee’s success.
- d) Learner Mistreatment: Trainees experiencing mistreatment in the workplace are encouraged to contact the Office of Resident Affairs and/or the Office of Professional Affairs (see below) for confidential support, advocacy, and navigation of the reporting process should they wish to proceed with a complaint.
- e) Education: RA provides group-level support, including workshops on a variety of wellness topics and access to a wellness resource library.
- f) Career Planning: Resident Affairs provides individualized career planning support, including guidance on fellowship and job applications, review of letters of intent, CV preparation, and interview coaching. RA also offers advocacy and advice to residents exploring a change in specialty or training site.

#### 5. Office of Professional Affairs

The Office of Professional Affairs (OPA) is dedicated to supporting learners by fostering, promoting, and maintaining a healthy, safe, inclusive, and respectful learning environment within the Faculty of Medicine. The OPA plays a central role in upholding professional standards and ensuring that learners are able to engage fully in their educational and clinical responsibilities without fear of mistreatment, discrimination, or intimidation.

A core mandate of the OPA is to receive, assess, and address reports of learner mistreatment in a timely, fair, and confidential manner. Mistreatment may include, but is not limited to,

behaviors that are abusive, discriminatory, harassing, humiliating, threatening, or retaliatory in nature. These behaviors are inconsistent with the values of professionalism and respect that underpin medical education and patient care.

In addition to responding to concerns, the OPA actively promotes professionalism through education, outreach, and collaboration with learners, faculty, and staff. These activities are designed to raise awareness of professional expectations, prevent mistreatment, and support a culture of accountability, mutual respect, and psychological safety across all learning environments.

The OPA offers Confidence Line, which serves as a safe and accessible reporting mechanism for learners who experience or witness mistreatment. Confidence Line allows for confidential reporting and, where appropriate, anonymous disclosure. Learners may use this resource to seek guidance, explore options, or initiate a formal review without fear of reprisal. Learners may also connect with the OPA through email ([dalmedopa@dal.ca](mailto:dalmedopa@dal.ca)).

The Faculty of Medicine is firmly committed to ensuring that all learners are aware of the available reporting mechanisms and understand how to access them. Reports of mistreatment may involve faculty members, staff, peers, patients, or others participating in the medical education environment. All reports are taken seriously and are managed in accordance with university policies and Faculty-specific procedures, with attention to fairness, confidentiality, and learner well-being.

**References:**

Cherak SJ, Rosgen BK, Geddes A, Makuk K, Sudershan S, Peplinski C, Kassam A. Wellness in medical education: definition and five domains for wellness among medical learners during the COVID-19 pandemic and beyond. *Med Educ Online*. 2021 Dec;26(1):1917488. doi: 10.1080/10872981.2021.1917488. PMID: 33944707; PMCID: PMC8097384.