PURPOSE:
To ensure that residents within SFMC sponsored residency programs are physically, mentally and morally competent to meet their designated responsibilities to patients, medical staff, residents and the community-at-large.

DEFINITIONS:
- **Burnout**: Long-term exhaustion and diminished interest in work. Dimensions of burnout include emotional exhaustion, depersonalization, and feelings of lack of competence or success in one’s work. Burnout can lead to depression, anxiety and substance abuse disorders.
- **Resident**: Any physician in an ACMGE-accredited graduate medical education program including residents and fellows.
- **Well-being**: Refers to the state of being healthy, happy and successful. Well-being may be positively increased by interacting with patients and colleagues at work, being intellectually stimulated and by feeling that one is making a difference/helping. In addition, self-care activities, including exercise, getting plenty of rest and connecting with others, is beneficial.
- **Impairment**: The inability of a resident to meet his/her responsibilities as caused by a dependency on alcohol and/or controlled pharmaceuticals.
- **Fatigue mitigation**: Methods and strategies for learning to recognize and manage fatigue to support physician/caregiver well-being and safe patient care.
POLICY:

Institutional Responsibilities
1. St. Francis Medical Center (SFMC) is committed to providing a learning and working environment in which residents and faculty have the opportunity to raise concerns and provide feedback without intimidation or retaliation, and in a confidential manner, as appropriate.
2. SFMC offers an Employee Assistance Program (EAP) that provides the following resources to team members, including residents and faculty:
   a. Counseling
      i. These counseling services are readily available 24/7 to residents and faculty.
      ii. In-person
      iii. Telephone
      iv. Text messaging
      v. In-the-moment
      vi. Video
   b. Consultation
      i. Finances
      ii. Legal needs
      iii. Managing employees
      iv. Life
      v. Crisis support
      vi. Coaching
   c. Adult and childcare resources
   d. Personal and professional training
   e. Digital behavioral health tools

Program & Departmental Responsibilities
1. The Program Director(s) will ensure that faculty at all participating institutions and clinical sites provide appropriate supervision of residents that is consistent with proper patient care and the educational needs of the residents. This supervision will include recognizing the signs of fatigue and sleep deprivation and employing procedures to prevent and counteract its potential negative effects on patient care and learning. Fatigue management and mitigation policies will be provided to the resident/fellows as part of the orientation process. Residents will also be oriented on how to access the program’s current fatigue mitigation measures. Faculty will be assessed annually by the program director to ensure their understanding of the fatigue mitigation policy and signs of fatigue/sleep deprivation.
2. Program-lead processes to manage the potential negative effects of fatigue will include the following:
3. Adequate, safe, quiet, and private sleep facilities for resident use only
4. Safe transportation options for residents/fellows who may be too fatigued to return safely home
5. Process to ensure continuity of patient care if a resident/fellow may be unable to perform in their duties
6. It is the responsibility of the program and Office of Graduate Medical Education (OGME) to promote practices and behaviors among all educational participants that create a positive learning and working environment.

7. Semi-annual assessments of residents will include screening tools for burnout and or depression.

8. The OGME will host social events in which residents, attendings and family members are encouraged to attend to allow for adjustments to the program and allow participants to become better acquainted in a stress-free atmosphere.

9. Residents and faculty are not to be compromised by excessive reliance on them to fulfill non-physician service obligations.

10. Group meetings will be held within the first 6 months of training for PGY-1 residents. These meetings will be a resident-only forum that is lead by 1 or 2 PGY-2 residents and an EAP counselor to facilitate discussion. These discussions are conducted to discuss topics such as dealing with the transition from student to physician, imposter syndrome, and personal wellness. This meeting being held by the program also intends to destigmatize and familiarize residents with the EAP process for any future needs.

**Resident and Faculty Responsibility**

1. Physicians will be held responsible for recognizing the signs of fatigue and appear for duty appropriately rested and fit to provide the services required by their patients.

2. Resident and faculty are expected to manage their time outside of clinical assignments to present to work appropriately rested and in a way that prevents excessive fatigue.

3. Residents and faculty are expected to observe and report any behaviors affecting the performance of a peer, including impairment due to fatigue. These reports can be made directly to the Program Director, the OGME, or the appropriate supervisor.

4. Residents and faculty are encouraged to voluntarily seek assistance if experiencing problems effecting their professional performance. They will be provided the resources to identify these signs via the program, and program and institutional pathways to seek assistance.

5. Residents and faculty will be provided appropriate time to maintain routine wellness and health care appointments. These are expected, when possibly, to be scheduled in advance in accordance with GME policies.

**Other resources committed to providing residents and faculty with work-life balance**

1. Employee Assistance Program (EAP)
   a. Information provided on the back of each sleep room door, via HealthStream, or by reaching out to OGME for information.

2. 24/7 access to food during clinical and educational assignments

3. Sleep/rest facilities made available for therapeutic naps or sleeping space

4. Healthy Lives Program
   a. Free health screenings and health questionnaire
   b. Go Healthy! Program
   c. Collaborative Care Weight Management
   d. Tobacco Cessation
   e. Health Coaching
   f. Kinesics
5. 4 weeks of paid time off
6. Free parking
7. Resident lounges and physical space for studying or leisurely time
8. Onsite pharmacy
9. Gift shop with convenience items available
10. Coffee shop
11. EMR training for efficient use of time
12. 24/7 Medical Library
13. Medical Publishing Services
14. Onsite Spiritual Care Team
15. Downtown amenities
   a. Coffee shop
   b. Post office
   c. Salon
   d. Pharmacy
   e. Free parking
   f. Immediate interstate access

ACGME STANDARD: IV.H.

STATUTORY/REGULATORY AUTHORITY: GMEC