

**TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER AT EL PASO**  
**Paul L. Foster School of Medicine**  
**GRADUATE MEDICAL EDUCATION**  
**Standard Policy and/or Procedure**

**TITLE:** Well-Being Policy

**APPROVED:** 9/13/19

**REVISED:**

**EFFECTIVE DATE:** 9/13/19

**PURPOSE:** To establish a policy as required by ACGME regarding Resident/Fellow well-being. The Sponsoring Institution must oversee its ACGME-accredited program's(s') fulfillment of responsibility to address well-being of residents/fellows and faculty members, consistent with the Common and specialty-/subspecialty-specific Program Requirements, and for addressing areas of non-compliance in a timely manner.

**POLICY STATEMENT:** The Sponsoring Institution (SI), through the Graduate Medical Education Committee (GMEC), in partnership with its ACGME accredited program(s), must educate faculty members and residents/fellows in identification of the symptoms of burnout, depression, and substance abuse, including means to assist those who experience these conditions. This responsibility includes educating residents/fellows and faculty members in how to recognize those symptoms in themselves, and how to seek appropriate care.

**Institutional**

The Sponsoring Institution, in partnership with its ACGME accredited program(s), must encourage residents/fellows and faculty members to alert their program director, DIO, or other designated personnel or programs when they are concerned that another resident/fellow or faculty member may be displaying signs of burnout, depression, substance abuse, suicidal ideation, or potential for violence; provide access to appropriate tools for self-screening; and provide access to confidential, affordable mental health assessment, counseling, and treatment, including access to urgent and emergent care 24 hours a day, seven days a week.

The Sponsoring Institution must ensure a healthy and safe clinical and educational environment that provides for access to food during clinical and educational assignments; and safety and security measures for residents/fellows appropriate to the participating site.

## Program

### Well-Being

Psychological, emotional, and physical well-being are critical in the development of the competent, caring, and resilient physician and require proactive attention to life inside and outside of medicine. Well-being requires that physicians retain the joy in medicine while managing their own real-life stresses. Self-care and responsibility to support other members of the health care team are important components of professionalism; they are also skills that must be modeled, learned, and nurtured in the context of other aspects of residency training.

Residents and faculty members are at risk for burnout and depression. Programs, in partnership with their Sponsoring Institutions, have the same responsibility to address well-being as other aspects of resident competence. Physicians and all members of the health care team share responsibility for the well-being of each other. For example, a culture which encourages covering for colleagues after an illness without the expectation of reciprocity reflects the ideal of professionalism. A positive culture in a clinical learning environment models constructive behaviors, and prepares residents with the skills and attitudes needed to thrive throughout their careers.

The responsibility of the program, in partnership with the Sponsoring Institution, to address well-being must include:

1. efforts to enhance the meaning that each resident finds in the experience of being a physician, including protecting time with patients, minimizing non-physician obligations, providing administrative support, promoting progressive autonomy and flexibility, and enhancing professional relationships;
2. attention to scheduling, work intensity, and work compression that impacts resident well-being;
3. evaluating workplace safety data and addressing the safety of residents and faculty members;
4. policies and programs that encourage optimal resident and faculty member well-being; and residents must be given the opportunity to attend medical, mental health, and dental care appointments, including those scheduled during their working hours.
5. attention to resident and faculty member burnout, depression, and substance abuse. The program, in partnership with its Sponsoring Institution, must educate faculty members and residents in identification of the symptoms of burnout, depression, and substance abuse, including means to assist those who experience these conditions. Residents and faculty members must also be educated to recognize those symptoms in themselves and how to seek appropriate care. The program, in partnership with its Sponsoring Institution, must:
  - a. encourage residents and faculty members to alert the program director or other designated personnel or programs when they are concerned that another resident, fellow, or faculty member may be displaying signs of burnout, depression, substance abuse, suicidal ideation, or potential for violence;

- b. provide access to appropriate tools for self-screening; and,
- c. provide access to confidential, affordable mental health assessment, counseling, and treatment, including access to urgent and emergent care 24 hours a day, seven days a week.

There are circumstances in which residents may be unable to attend work, including but not limited to fatigue, illness, family emergencies, and parental leave. Each program must allow an appropriate length of absence for residents unable to perform their patient care responsibilities. The program must have policies and procedures in place to ensure coverage of patient care. These policies must be implemented without fear of negative consequences for the resident who is or was unable to provide the clinical work.

### *Fatigue Mitigation*

Programs must:

1. educate all faculty members and residents to recognize the signs of fatigue and sleep deprivation;
2. educate all faculty members and residents in alertness management and fatigue mitigation processes; and,
3. encourage residents to use fatigue mitigation processes to manage the potential negative effects of fatigue on patient care and learning.

Each program must ensure continuity of patient care, consistent with the program's policies and procedures, in the event that a resident may be unable to perform their patient care responsibilities due to excessive fatigue.

The program, in partnership with its Sponsoring Institution, must ensure adequate sleep facilities and safe transportation options for residents who may be too fatigued to safely return home.