

XVI. RESIDENT WELLNESS AND RESIDENTS' ASSISTANCE PROGRAM

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I. Resident Wellness Position Statement and Purpose

Tulane University School of Medicine is committed to fostering an educational environment that ensures that residents remain physically, psychologically, and emotionally healthy while advancing their competence in their respective fields of training. The School of Medicine, in partnership with each residency program, works to ensure that the structure and design of residency programs, including individual rotations, are conducive to developing competent, caring and resilient physicians and that the School of Medicine, its affiliated hospitals and its residency programs have an educational environment that supports a culture of mutual support and respect.

Residency programs are responsible for complying with resident and faculty well-being requirements set forth in ACGME Common Program and Specialty/Subspecialty Requirements and for complying with this Policy. The School of Medicine is committed to providing resources to programs and supporting the physical and mental health of residents and faculty. This Policy also outlines the confidential counseling and behavioral health services that the School of Medicine provides and the processes for reporting incidents of resident impairment.

II. Resident Wellness

A. School of Medicine and Program Responsibilities

Each residency program, in partnership with the School of Medicine, is responsible for:

1. Enhancing the meaning that each resident finds in the experience of being a physician by protecting time with patients, reducing non-physician obligations, providing adequate administrative support, promoting progressive autonomy and flexibility and enhancing professional relationships.
2. Giving the necessary attention to scheduling, work intensity and work compression by designing rotations that optimize patient safety, resident education and resident well-being.
3. Assessing workplace safety data and addressing the safety of residents and faculty members.
4. Creating and complying with policies and programs (consistent with this Policy and the ACGME requirements) that encourage resident and faculty well-being.
5. With the support of the School of Medicine, educating faculty and residents on identifying the symptoms of burnout, depression and substance use disorders in themselves and others, including means to assist those who experience these conditions and how to seek appropriate care.

6. Providing residents with the necessary time to attend medical, mental health and dental care appointments, including those appointments that are scheduled during the resident's duty hours. Programs should encourage residents to review the Wellness Days section of the School of Medicine's Graduate Medical Education *Policy on Vacation and Leave* for more information.
7. Educating residents and faculty on fatigue mitigation as further detailed in the School of Medicine's Graduate Medical Education *Policy on Clinical and Educational Work Hours*. Residency programs must maintain systems of care and learning and working environments that facilitate fatigue mitigation.
8. Providing access to food during clinical and educational assignments; appropriate sleep/rest facilities that are safe, quiet, clean, private and accessible to residents with proximity appropriate to safe patient care.
9. Providing safe transportation options for residents who are too fatigued to return home in accordance with the *Policy on Clinical and Educational Work Hours*.
10. Encouraging residents and faculty to alert their Program Director, DIO or other designated personnel when they are concerned that another resident or faculty member may be displaying signs of burnout, depression, substance abuse, suicidal ideation or a potential for violence.

B. Resident Wellness Initiatives

The Tulane University School of Medicine Wellness Committee is tasked with establishing a voice for faculty and resident wellness, building resilience in residents and recognizing faculty and resident wellness. Resources available through the Wellness Committee are available at: <https://medicine.tulane.edu/home/wellness-get-help>. Tulane University and the School of Medicine provide resident wellness initiatives to augment resident wellness:

1. Through the Tulane School of Medicine Companion App, assessments of well-being and mental health by utilizing available self-screening tools.
2. Outlets and support for discussions on difficult patient encounters (resident to resident and resident to faculty).
3. Resources for managing mental wellness, as detailed below.
4. Private lactation facilities and clean and safe refrigeration resources for the storage of breast milk, and safety and security measures at all clinical learning environment sites.
5. In addition, the School of Medicine and programs understand that there are circumstances in which residents cannot attend work, including, but not limited to: fatigue, illness, family emergencies and parental leave. Each residency program is required to have a policy that ensures appropriate coverage of patient care in the event that a resident is unable to perform his/her patient care responsibilities. In the event that a resident is unable to perform his/her clinical responsibilities, the resident may utilize

the procedures in the School of Medicine Graduate Medical Education *Policy on Vacation and Leave*. These policies and procedures may be implemented without fear of negative consequences for the resident who is unable to attend work.

C. Mental and Behavioral Health Resources

It is the policy of the University and the School of Medicine to support resident and faculty mental health to ensure that the highest quality physicians are practicing medicine.

The following confidential mental health assessments, counseling and treatment options may be used by residents and faculty:

1. Free, same-day doctors' and psychiatric visits;
2. Health coaching;
3. The Tulane University Optum support services - available 24-hours a day, seven days a week for on-line or telephone confidential counseling;
4. The Resident Assistance Program and the University Employee Assistance Program are available for emergent or urgent care 24-hours a day, seven days a week for Tulane residents/employees and their eligible dependents:
https://medicine.tulane.edu/sites/default/files/images/Hartford%20EAP_Services_July_2023.pdf and <https://hr.tulane.edu/wellness/employee-assistance-program>; and
5. The Residents' Assistance Program provides residents with access to confidential counseling and behavioral health services, as further detailed below.

III. Resident Impairment and Assistance

A. Definitions

1. Administrative Personnel: Program Directors, Program Coordinators, Department Chairs, Clinical Site Directors, and Chief Academic Officers, as applicable.
2. Impaired: a resident who is unable to perform his or her duties with reasonable skill and safety because of a medically recognized physical, mental or other condition, including but not limited to, a mental health issue, physical illness, and/or excessive use or abuse of drugs or alcohol.

B. Self-Referral Pathway

1. The School of Medicine is committed to fostering an environment in which residents feel safe in identifying and correcting conditions that may impair their personal and professional performance without fear of reprisal or implications to their career.

2. The Residents' Assistance Program is intended to provide residents with access to confidential counseling and behavioral health services, and/or for the identification and treatment of resident physicians with psychiatric, substance abuse or other impairment.
3. The School of Medicine encourages residents who feel that they may have an impairment, require counseling or require other mental health support to seek assistance with the Residents' Assistance Program. Residents may access the Residents' Assistance Program by calling (504-322-3837) or emailing dr.morson@ibhnola.com.
4. Residents who self-refer to the Residents' Assistance Program will only be reported to the DIO and applicable Administrative Personnel if: he/she poses an imminent threat to self or others, **or** if the Director of the Residents' Assistance Program determines that the resident is not fit for duty and refers the resident to the Physicians' Health Foundation of Louisiana for further evaluation and treatment.
 - a. If the resident is considered an imminent threat to self or others, the resident will be placed on Interim Leave as further detailed the School of Medicine's Graduate Medical Education *Policy on Remediation, Suspension, Dismissal and Grievances*. As detailed in the Policy on Remediation, Suspension, Dismissal and Grievances, an Interim Leave is not disciplinary in nature, but is designed to provide the DIO and responsible parties with sufficient time to investigate the referral/matter.
 - b. If the resident is referred by the Director of the Residents' Assistance Program to the Physicians' Health Foundation of Louisiana for evaluation and treatment, the resident may be suspended with pay and benefits as necessary for treatment, and the referral will be transferred to and handled in accordance with the Institutional Referral Pathway described in Section C, below.
5. Administrative Personnel informed of a self-referral shall not communicate with the Residents' Assistance Program nor the Physicians Health Foundation of Louisiana regarding the resident's care. All communications regarding a resident who has self-referred to the Residents' Assistance Program or referred to the Physicians Health Foundation of Louisiana should be directed to the DIO, as described in Section C. Protected health information may be shared with the DIO (and further by the DIO) only in accordance with applicable laws, including through a resident's written authorization.

C. Institutional Referral Pathway

Administrative Personnel, faculty and other institutional leaders shall make an immediate referral of a resident by notification to the DIO if a resident appears to be practicing while Impaired.

1. Upon notification, the DIO will conduct a preliminary investigation, and if the DIO reasonably suspects that the resident is Impaired, the DIO will report such information

- to the Residents' Assistance Program. The resident will be placed on Interim Leave, pending the resolution of the resident's possible impairment by the Residents' Assistance Program.
2. After the resident has been referred to the Residents' Assistance Program, Administrative Personnel should not communicate with the resident or the Residents' Assistance Program regarding the resident or his/her impairment. All communications regarding a resident who has been referred to the Residents' Assistance Program should be directed to the DIO, who will in turn, notify the resident's Program Director. Protected health information may be shared with the DIO by the Assistance Program providers only in accordance with applicable laws, including through a resident's written authorization.
 3. If the resident is referred by the Director of the Residents' Assistance Program to the Physicians' Health Foundation of Louisiana for evaluation and treatment, the resident may be suspended with pay and benefits as necessary for treatment. A resident Suspended due to psychological, chemical and/or alcohol impairment will be required to complete a rehabilitation program approved by the Physicians' Health Foundation of Louisiana.
 4. If the resident refuses to be evaluated by the Residents' Assistance Program for fitness for duty or further referral, or declines a referral to Physician's Health Foundation of Louisiana may be dismissed. Residents suspended or dismissed have a right to appeal and may seek due process in accordance with the School of Medicine's Graduate Medical Education *Policy on Remediation, Suspension, Dismissal and Grievance*.
 5. Upon completion of the rehabilitation program, the resident may be required by the DIO, the treating physician or The Physicians' Health Foundation of Louisiana to enter into an aftercare treatment program. The aftercare treatment programs must be approved by the DIO, the treating physician and the Physicians' Health Foundation of Louisiana.
 6. If the resident is participating in the aftercare treatment program while returning to training, the resident's Program Director is required to make time available in the resident's schedule to participate fully in the program. The DIO, in consultation with the resident's treating physician, is required to document the resident's compliance with the program's requirements. The DIO, in consultation with the resident's treating physician, will also discuss whether modifications or accommodations consistent with Tulane University policies, need to be made for the resident to return to his or her training (e.g., monitoring).
 7. If a resident fails to comply with the rehabilitation program or the aftercare treatment program, the resident will be dismissed from his/her residency program. A written notice regarding the dismissal will be provided to the resident. See the School of Medicine's Graduate Medical Education *Policy on Remediation, Suspension,*

Dismissal and Grievance for information pertaining to resident due process rights for a dismissal. Appropriate state and national bodies will be notified of the dismissal.

8. If a resident is involved in inpatient or aftercare treatment when the resident completes his/her residency training, the Physicians' Health Foundation of the state to which the resident is moving will be notified by the DIO.
9. If a resident subsequently becomes Impaired following treatment in an aftercare treatment program, dismissal from residency will be recommended unless there are extenuating circumstances. The DIO is ultimately responsible for deciding whether the resident should be dismissed.

III. References/Associated Policies

- Tulane University School of Medicine, Graduate Medical Education *XI. Policy on Vacation and Leave*
- Tulane University School of Medicine, Graduate Medical Education *VIII. Policy on Clinical and Educational Work Hours*
- Tulane University School of Medicine, Graduate Medical Education *II. Policy on Equal Opportunity, Affirmative Action, and Disability Accommodations*
- Tulane University School of Medicine, Graduate Medical Education *XV. Policy on Remediation, Suspension, Dismissal and Grievance*