



Cherokee Nation Health Services Family Medicine Residency Program Fatigue and Stress Policy

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PURPOSE

Symptoms of fatigue and/or stress are normal and expected to occur periodically with the resident population, just as it would in other professional settings. It is expected that residents will on occasion experience some effects of inadequate sleep and/or stress. The purpose of recognizing and appropriately responding to excessive resident fatigue and stress is to improve patient care safety and to improve the well-being of the resident trainee.

POLICY

1. Signs and symptoms of excessive fatigue and stress

- Signs and symptoms of resident excessive fatigue and/or stress may include but are not limited to: inattentiveness to details, forgetfulness, emotional lability, mood swings, increased interpersonal conflicts, lack of attention to proper attire or hygiene, difficulty with novel tasks and multitasking, sleeping on the job, and impaired situational awareness.

2. Response

- The demonstration of resident excessive fatigue and/or stress may occur in patient care settings or in non-patient care settings such as lectures and conferences. In patient care settings, patient safety, as well as the personal safety and well-being of the resident mandates implementation of an immediate and proper response. In non-patient care settings, responses may vary depending on the severity and demeanor of the resident's appearance and perceived condition. The following is intended as a general guideline for those recognizing or observing resident excessive fatigue and /or stress in either setting.

3. Patient Care Settings

Supervising Physician:

- The recognition that a resident is demonstrating evidence of excess fatigue or stress requires the attending or supervising physician to consider immediate release of the resident from any further patient care responsibilities at the time of recognition.
- The supervising physician should privately discuss his/her opinion with the individual, attempt to identify the reason for excess fatigue and estimate the amount of rest that will be required to alleviate the situation.



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- The supervising physician must immediately attempt, in all circumstances and without exception, to notify the Program Director of the decision to release the resident from further patient care responsibilities.
- If excess fatigue is the issue, the supervising physician must advise the individual to rest for a period that is adequate to relieve the fatigue before operating a motorized vehicle. This may mean that the resident should first go to the on-call room for a sleep interval no less than 30 minutes. The individual may also be advised to consider calling someone to provide transportation home.
- If stress is the issue, the attending should counsel the individual in private. If, in the opinion of the attending, the individual's stress level has the potential to negatively affect patient safety, the attending must immediately release the resident from further patient care responsibilities, and notify the Program Director that the resident has been released from patient care activity.
- A resident released from patient care responsibility because of excess fatigue and/or stress cannot appeal the decision and cannot resume patient care duties without permission of the Program Director.

Allied Health Care Professional:

- Allied health care professional in patient service areas will be instructed to report observations of apparent resident excess fatigue and /or stress to the observer's immediate supervisor who will then report the observation to the Program Director.

Residents:

- Residents who perceive that they are experiencing excess fatigue and/or stress have the professional responsibility to immediately notify the attending clinician, the chief resident, and/or the Program Director without fear of reprisal.
- Residents recognizing excess fatigue and/or stress in fellow residents should report their observations and concerns immediately to the attending physician, Chief Resident, and/or the Program Director.

Program Director:

- Following removal of a resident from duty, the Program Director, in association with the Chief Residents (if appropriate) will determine the need for an immediate adjustment in duty assignments for the remaining residents in the program.
- The Program Director will review the resident's call schedules, work hour time reports, extent of patient care responsibilities, any known personal problems and stresses contributing to a particular resident's level of fatigue and/or stress.



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- The Program Director will notify the supervising physician or site director of the rotation in question to discuss methods to reduce resident fatigue.
- In matters of resident stress, the program director will meet with the resident personally. If counseling by the Program Director is insufficient, the Program Director will refer the resident to the Employee Assistance Program (EAP) by direct contact with the DIO (Designated Institutional Official).
- If the problem is recurrent or not resolved in a timely manner, the Program Director will have the authority to release the resident indefinitely from patient care duties pending evaluation from an individual designated by the EAP.
- The Program Director will release the resident to resume patient care duties only after advisement from the EAP and will be responsible for informing the resident as well as the attending physician of the individual's current rotation.
- If the EAP feels the resident should undergo continued counseling, the Program Director will be notified and should receive periodic updates from the EAP representative.
- Extended periods of release from duty assignments that exceed requirements for completion of training must be made up to meet ACGME training guidelines.

4. Employee Assistance Program

- Residents experiencing excessive fatigue and stress may benefit from behavioral health services. Behavioral health services are available to the resident through the following resources.
- The EAP provides confidential counseling, consultation, evaluation and information to OSU employees and family members including residents. The EAP will provide up to three appointments at no cost. The EAP can be accessed through the Human Resources office at OSU Medical Center. Additional resources are available through Oklahoma State University services. Included here is access to 24/7 emergency counseling service through ComPsych.
- Information for these services can be found here:
<http://centernet.okstate.edu/behavioralhealth.php>.

5. Non-Patient Care Setting

- If residents show signs of stress and/or fatigue in non-patient care settings, the Program Director will follow the same procedure outlined above for the patient care setting.