

Principles and Guidelines

- 1. Medical students have the right to work in a system and environment free of harassment and coercion.**
 - This must include protection from harassment at any level (by a fellow student, by a resident by a senior staff, or by a patient).
- 2. Students should have access to a faculty member with the appropriate training and authority to deal with harassment related issues and/or stress management (e.g., Director of Student Affairs).**
 - Being on the wards can be an extremely stressful time for students. They are faced with new levels of responsibility, heightened levels of patient care and significant physical and emotional stress. Therefore, it is crucial that if undesirable events such as harassment or death of a patient occur the student should have access to a properly trained faculty member to help the student cope with the consequences of the event.
- 3. Students must have access to safe, secure sleeping facilities when required to do in-house call.**
 - This could be any number of arrangements, but what we want to avoid is for students to end up sleeping in a hospital bed or chair in the staff room while on call. By safe we mean the sleeping area should not be accessible by the public and should have appropriate security measures (ex. locks on doors).
- 4. Acquiring positive educational experiences is a primary goal of the senior clinical years. As such, non-educational hospital service must be limited such that learning is not compromised.**
 - Non-educational hospital service includes tasks such as fetching coffee/food, or doing secretarial work for their preceptor. This does not include health related service such as starting IV's, suturing, taking blood pressure or other tasks related directly to the care of a patient.
- 5. Each medical school should have policies on parental and compassionate leaves that emphasize flexibility for the student.**
 - Parental leave includes non-paid maternity and paternity leave, as defined by the government of Canada. Compassionate leave includes serious events in the life of the student which would prevent them from carrying out necessary senior medical student duties—i.e. serious illness, death or life-threatening illness of a family member or loved one, or other personal hardships such as divorce. Flexibility for the student could encompass lengthening of the program, part time studies or leave of absences. The terms of the agreement could vary according to the situation, be amenable to all parties involved, and should not impact the student's evaluations nor prevent the student from graduating in the long term.

6. Students should have access to a secure area to store their belongings at the hospital where they are working.

- This could include physician's/nursing staff rooms, private lockers or secure offices. The student should not be required to leave personal belongings in public space.

7. For safety, educational and liability reasons, students who are post in-house call should be relieved from clinical service at noon on the day following call after appropriate transfer of duty to other housestaff.

- This clause is limited to in-house call only. Even if the student is only called once or twice during the night, the quantity of sleep and rest incurred while on call in house is typically of a quantity and quality that make it unsafe for the student to continue working past noon the following day. This endangers both the student and his or her patients. Although the technicalities of this point can be debated, the intent is to prevent overworked and exhausted senior medical students making poor patient care decisions. This is in the best interest of all parties involved including the Faculty of Medicine and the health care facility for liability and safety reasons.

8. Students who are required to complete mandatory rotations in locations away from their primary residence should have all reasonable expenses covered. The province, community or medical program itself could cover these expenses, which include accommodation and mileage.

- Given the high cost of medical education, the student should not be forced to incur additional expenses for mandatory relocations. Reasonable expenses include accommodation, basic utilities, and travel expenses such as mileage, air or bus fares. Funding of these expenses can vary according to location and situation and could use a number of resources in combination to provide for the student.

9. Students should have an orientation session for each service and/or hospital at which they are expected to work.

a. This could be brief but should include responsibilities, a schedule of academic activities, training on occupational health and safety, and a general overview of the working arrangements.

- The orientation session should occur before the student is required to report for service. It is designed to make the student aware of their responsibilities during the rotation and help the student learn about daily operation of the location. This will enable the student to focus on educational opportunities once the rotation has begun rather than on administrative and organizational details.

10. Students should have protected educational time during each rotation to attend seminars/teaching sessions.

- Attending academic rounds and/or teaching sessions is a critical component of student's education. The student should not be scheduled for shifts during these educational opportunities. If a conflict arises with scheduling, every effort should be made to allow the student to attend the educational time.

11. Students should be provided with a personal pager for all mandatory rotations where they are expected to be on call.

- Without a pager the student has one of two options: to remain in-house indefinitely so they don't miss an important opportunity, or to go home and rely on their preceptor/location to contact them in case an educational opportunity presents. Neither of these situations is optimal and therefore students must be provided with pagers for all mandatory rotations.

12. Students should be given a high degree of flexibility in arranging CaRMS interviews. It is recognized that many programs are already highly flexible with regards to CaRMS interviews.

- As this is a regular and predictable event, there should be opportunity for supplementary work available in the rotation/curriculum for students who must miss "excessive" amounts of time. Also, students should not be penalized for their absences due to CaRMS interviews in their final evaluations if they have made efforts to arrange and complete supplementary work.

13. Each medical school should have a policy permitting students to attend conferences or educational meetings during their senior years.

- This policy should articulate conditions by which students are allowed to attend conferences or educational meetings. Attending these is an important part of the medical student's education. Educational conferences include presenting research or papers, meeting with educational organizations such as the CMA or CFMS, or with organizations relating to their future careers such as Royal College or College of Family Physicians.