

1. Policy Statement

- 1.1. To minimise the risk to registrars by providing information and education on safety issues, including bullying and harassment. To ensure that training facilities have the necessary structures in place to minimise registrar harm.

2. Application and Scope

- 2.1. This procedure applies to all registrars enrolled in the Australian General Practice Training (AGPT) Program with EV GP Training (EV).
- 2.2. This procedure is effective from 1 January 2019.

3. Principles

- 3.1. EV will provide registrars with information and training in areas of safety that relate to general practice training.
- 3.2. While EV does not employ registrars, it has a responsibility to ensure that registrar safety is promoted and risk factors are minimised as far as reasonably practicable. Under no circumstances is bullying or harassment tolerated in training facilities or the EV program. Registrars must refer to procedure [ED-Org-8.23 Critical Incident and Adverse Event Notification](#)
- 3.3. Registrars are strongly advised to disclose and discuss with their supervisor any medical condition or circumstance which might place themselves, or their patients, at risk. This is particularly important in view of the work patterns of registrars in different hospital rotations and general practice attachments.
- 3.4. The impact of shift scheduling, rosters, after-hours and on-call duties are all aspects of the work which registrars need to be aware of and manage effectively. Discussion with supervisors will enable implementation of appropriate strategies for management of the work environment to minimise the potential for harm to the registrar or their patients.
- 3.5. Registrars have a responsibility for their own safety and wellbeing.

4. Procedure

4.1. Registrar wellbeing

- 4.1.1. Registrars are expected to seek assistance if experiencing difficulty in any aspect of training whether this be a problem with the training itself or an issue of personal issues impacting on training.
- 4.1.2. It is recommended that registrars have their own GP to refer to for any issues related to health.
- 4.1.3. Supervisors, medical educators, registrar support and progress coordinators (RSPC) and registrar liaison officers (RLO) are all available to provide advice and support.
- 4.1.4. To support registrar wellbeing and self-care, registrars have access to a psychologist program which provides for up to eight sessions free of charge over the duration of training. The nominated psychologist will send a de-identified invoice direct to EV for these services. Registrars can access this information through the resources section in Pivotal and search 'psychology'.

4.2. Registrar safety training

- 4.2.1. The initial workshops will include an introduction to registrar safety issues.
- 4.2.2. Training in safety matters for registrars includes:
 - 4.2.2.1. Dealing with angry patients;
 - 4.2.2.2. Dealing with drug-seeking patients;
 - 4.2.2.3. Recognising high-risk situations;
 - 4.2.2.4. What to do when feeling unsure or unsafe;
 - 4.2.2.5. Personal self-care; and
 - 4.2.2.6. Safe working practices and actions in the event of an incident.

4.3. Safety promotion and risk minimisation

- 4.3.1. Registrars should not be on-call the night before a workshop or the night of an evening educational meeting (where available and organised by EV).

- 4.3.2. Registrars who are required to travel more than 90 minutes from their practice to a workshop will be offered accommodation on the night preceding a scheduled workshop (rural pathway).
- 4.3.3. Registrars must be provided with adequate travel time by their practice to attend evening educational meetings (where available and organised by EV).
- 4.3.4. EV discourages registrars from long distance commuting in recognition that long distance driving poses a risk to registrar safety.
- 4.3.5. Rural pathway registrars are expected to live in the community in which they work (ideally within 30 minutes' travel time).
- 4.3.6. General practices are required to provide registrars with a copy of the Practice Safety Policy which should cover matters including:
 - 4.3.6.1. Duress alarm system for training consultation rooms and associated procedures/protocols when an incident occurs;
 - 4.3.6.2. Procedures for flagging potentially difficult patients to registrars;
 - 4.3.6.3. Out of hours safety arrangements; and
 - 4.3.6.4. Any other relevant matters.
- 4.3.7. All registrars should have access to a duress alarm and the practice should have a protocol for responding to a duress alarm. Practices should demonstrate the duress protocol as part of the registrar's orientation.
- 4.3.8. Depending on the registrar's level of training and competence, it is recommended that at least one other staff member is on site when the registrar is attending patients.
- 4.3.9. Known drug-seeking or frequently abusive patients should not be allocated to be seen by a registrar in their first terms of general practice.
- 4.3.10. No registrar should be expected to enter unaccompanied a situation where they feel unsafe.
- 4.3.11. All on-call registrars should have reliable phone access to a nominated supervisor.
- 4.3.12. There should be clear processes by which a registrar can request to be accompanied in a call-out situation in which they perceive that there may be a potential threat to their safety.

4.4. Bullying and harassment

- 4.4.1. EV expects all registrars, medical educators, supervisors and practice staff to behave in a professional manner and to treat each other with dignity and respect.
- 4.4.2. Registrars are encouraged to report bullying or harassment promptly, so that appropriate measures can be taken.
- 4.4.3. All registrars have a responsibility to ensure that they do not engage or participate in bullying or harassing behavior in the workplace or training program, and to work to eradicate bullying and harassment.
- 4.4.4. Registrars have a responsibility to:
 - 4.4.4.1. Comply with policies and procedures of EV and the training facility where they are working.
 - 4.4.4.2. Offer support to anyone who is being bullied and/or harassed and advise them where they can obtain help and advice.
 - 4.4.4.3. Maintain complete confidentiality if they provide information during the investigation of a complaint. This does not preclude the registrar seeking assistance from a psychologist or their GP if they wish.
 - 4.4.4.4. Registrars should be aware that spreading gossip or rumors may expose them to a defamation action.
- 4.4.5. If a registrar believes that they have been bullied or harassed, the process to be followed is:
- 4.4.6. If possible, raise the issue directly with the person they believe is responsible for bullying. Often an informal approach can quickly resolve an instance of workplace bullying.
- 4.4.7. If the issue is not resolved in this way, the registrar should raise the matter with their supervisors, medical educator, registrar liaison officer or supervisor liaison officer.
- 4.4.8. The registrar should follow the bullying and harassment policy of their workplace.
- 4.4.9. If the matter is not resolved at the workplace, the registrar should lodge a complaint with EV as outlined in the procedure [ED-Org-8.22 Complaints Grievance and Appeals](#)
- 4.4.10. A registrar should be able to report bullying or harassment without the fear of retribution or fear that it may negatively affect their training and career.

5. Additional Information

- 5.1. ED-SD-8.6 Education and Training Definitions
- 5.2. [ED-Org-8.22 Complaints Grievance and Appeals](#)
- 5.3. [ED-Org-8.23 Critical Incident and Adverse Event Notification](#)

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