



UNIVERSITY POLICY

Policy Name: Wellbeing

Section: 6.2

Section Title: Employee Services

Approval Authority: GMEC

Approved: 7/17/2026

Responsible Executive: DIO

Responsible Office: Graduate Medical Education, Rutgers Health

Contact: Institutional Coordinator

1. Reason for Policy

Rutgers Health recognizes that physician wellbeing is fundamental to professionalism, patient safety, high quality clinical care, and excellence in graduate medical education. This policy establishes institutional expectations for fostering healthy learning environments, supporting resident and fellow wellbeing, and ensuring access to appropriate resources while promoting a culture of professionalism and shared responsibility.

2. Applicable ACGME Institutional Requirements

3.2 The Learning and Working Environment

3. Resources

- i. Accreditation Council for Graduate Medical Education Institutional Requirements
- ii. Accreditation Council for Graduate Medical Education Common Program Requirements
- iii. Rutgers University Policies
- iv. Physician Wellbeing Academic Consortium (PWAC) resources and validated wellbeing assessment tools
- v. Rutgers Health and RWJBarnabas Health Employee Assistance Programs (EAP) and institutional wellbeing resources

4. Scope

This policy applies to all Rutgers Health-sponsored residency and fellowship programs, residents, fellows, faculty members, program leadership, and participating clinical learning environments.

5. Definitions

Wellbeing is the ability of physicians to thrive personally and professionally while providing safe, compassionate, high quality patient care. Fatigue is a state of physical or mental exhaustion that may impair judgment, performance, learning, or patient safety.

6. The Policy

Rutgers Health is committed to creating clinical learning environments that promote physician wellbeing as a shared responsibility of the Sponsoring Institution, participating sites, program leadership, faculty members, residents, and fellows. Wellbeing extends beyond individual resilience and includes organizational practices, workplace culture, and systems that enable physicians to provide exceptional patient care while maintaining their own health and professional fulfillment.

All policies are subject to amendment. Please refer to the Rutgers Health Graduate Medical Education department for the official, most recent version.

7. Learning Environment and Culture

Rutgers Health expects each clinical learning environment to foster professionalism, civility, mutual respect, inclusion, teamwork, and psychological safety. Residents and fellows should feel comfortable raising concerns regarding wellbeing, patient safety, fatigue, mistreatment, or the learning environment without fear of retaliation. Faculty members and program leaders are expected to model behaviors that promote wellbeing, collegiality, professionalism, and respectful communication.

8. Sponsoring Institution Expectations

Rutgers Health, in partnership with its ACGME-accredited programs, shall:

- i. Provide education for residents, fellows, and faculty members regarding physician wellbeing, including the recognition of fatigue, burnout, depression, substance use disorders, suicidal ideation, and other conditions that may affect wellbeing. Education shall include recognition of these conditions in oneself and colleagues, available institutional resources, and appropriate pathways for seeking confidential assistance.
- ii. Encourage residents, fellows, and faculty members to report concerns regarding colleagues who may be demonstrating signs of burnout, depression, substance use disorder, suicidal ideation, or other conditions that may place themselves, patients, or others at risk, consistent with applicable institutional policies.
- iii. Maintain confidential access to mental health assessment, counseling, treatment, self-screening resources, and urgent behavioral health services.
- iv. Support residents, fellows, faculty, and care teams following adverse patient events and other potentially traumatic workplace experiences.
- v. Ensure that participating clinical learning environments provide access to food, rest facilities, and other basic resources consistent with applicable ACGME Institutional Requirements.
- vi. Periodically evaluate institutional wellbeing initiatives through the GMEC Wellbeing Subcommittee and other institutional oversight processes.

9. Program Expectations

- i. Promote and maintain a respectful and psychologically safe learning environment.
- ii. Program leadership shall model behaviors that promote wellbeing and foster a culture that is respectful, supportive, and free from stigma.
- iii. Engage residents, fellows, and faculty in developing local wellbeing initiatives.
- iv. Identify and address systems, workflows, and administrative processes that unnecessarily contribute to burnout.
- v. Promote meaningful patient care experiences by minimizing unnecessary non-physician administrative responsibilities whenever feasible and supporting appropriate progressive autonomy.
- vi. Monitor workload, work intensity, scheduling practices, and workplace safety as components of resident wellbeing.
- vii. Provide residents and fellows the opportunity to attend medical, mental health, and dental appointments, including those occurring during working hours when appropriate.
- viii. Maintain policies ensuring appropriate patient care coverage when a resident or fellow cannot safely work because of illness, fatigue, or family emergency without punitive consequences.
- ix. Programs shall periodically evaluate the effectiveness of local wellbeing initiatives and identify opportunities for improvement in collaboration with residents, fellows, faculty, and the Sponsoring Institution.

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10. Resident and Fellow Responsibilities

- i. Practice self-care and recognize the effects of fatigue, burnout, illness, or impairment.
- ii. Promptly seek assistance when personal wellbeing or patient safety may be compromised.
- iii. Participate in required wellbeing education.
- iv. Support colleagues by encouraging timely use of available institutional resources.

11. Fatigue Mitigation

- i. Rutgers Health recognizes that fatigue is both a patient safety and physician wellbeing issue. Residents and fellows are expected to recognize the signs and symptoms of fatigue in themselves and others and utilize appropriate fatigue mitigation strategies when necessary.
- ii. Residents and fellows who believe fatigue or illness may impair their ability to safely provide patient care shall promptly notify the supervising physician, chief resident, or other designated supervisor so that appropriate patient care coverage can be arranged without fear of punitive consequences. Residents and fellows are encouraged to recognize fatigue early and utilize fatigue mitigation strategies before fatigue compromises patient care or personal safety.
- iii. Recognized fatigue mitigation strategies may include:
- iv. strategic napping when clinically appropriate;
- v. transfer of patient care responsibilities using safe transitions of care;
- vi. use of designated sleep or rest facilities;
- vii. adjustment of clinical responsibilities when necessary to protect patient and resident safety.
- viii. Residents and fellows utilizing recognized fatigue mitigation strategies in accordance with this policy shall not be penalized, provided appropriate patient care coverage and safe transitions of care are maintained.

12. Safe Transportation

- i. Rutgers Health is committed to facilitating safe transportation options for residents and fellows who may be too fatigued to safely return home following clinical duties.
- ii. Residents and fellows who believe they are too fatigued to safely operate a motor vehicle should not drive. They should notify the supervising physician, chief resident, or other designated supervisor and utilize available fatigue mitigation resources.
- iii. Each participating site shall provide safe, clean, quiet, and readily accessible sleep/rest facilities in proximity appropriate for safe patient care that are available for use by residents and fellows who require additional rest before returning home. Programs shall ensure that trainees are aware of these resources and how to access them.
- iv. Additional transportation resources may be made available by participating sites consistent with local policies and available resources.

13. Oversight

- i. The Rutgers Health GMEC exercises oversight of institutional wellbeing initiatives via the GMEC Wellbeing Subcommittee. The Subcommittee advises GMEC by evaluating the effectiveness of the Sponsoring Institution's efforts to promote resident, fellow, and faculty wellbeing; identifying opportunities for improvement; and making recommendations to the GMEC regarding institutional priorities, resources, and initiatives.
- ii. The GMEC Wellbeing Subcommittee shall monitor institutional and program compliance with this policy and applicable ACGME wellbeing requirements through periodic review of institutional metrics, program evaluations, accreditation findings, resident survey data, and other available information, and shall recommend corrective actions when opportunities for improvement are identified.

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- iii. To inform continuous improvement, the Sponsoring Institution will periodically review multiple sources of information, which may include ACGME Resident/Fellow Survey Results, Physician Well-Being Academic Consortium (PWAC) wellbeing survey results, institutional quality and safety data, resident and faculty feedback, program evaluations, and other validated assessment tools. Rutgers Health participates in the Physician Well-Being Academic Consortium (PWAC) and may utilize PWAC wellbeing surveys and benchmarking data to assess organizational wellbeing and guide institutional improvement efforts.
- iv. The GMEC shall receive regular reports from the Wellbeing Subcommittee and oversee implementation of institutional initiatives designed to promote physician wellbeing and continuously improve the clinical learning environment.