DEPARTMENT OF PATHOLOGY AND
LABORATORY MEDICINE
PROFESSIONALISM POLICY

PURPOSE

The purposes of this Policy are to:

a) define and promote appropriate professional values, attributes and behaviours which together set the Faculty’s standards of professionalism;

b) serve as a statement for all Learners and Faculty Members of their professional and ethical obligations which extend to their relations among each other, with patients, with affiliated hospitals or instructional sites, in respect of their University and professional responsibilities for education, research, clinical care and administration; and

c) set out the mechanisms available to identify, address and correct recurring professionalism concerns.

SECTION 1: APPLICATION

1.1 This Policy applies to Learners, to Faculty Members, staff of the Faculty and their interactions whether these occur at the University or in the clinical or research or other instructional setting, in person, in writing or by electronic means (for example, email, social media, internet).

1.2 For the purposes of this Policy,

a) “Faculty Member” means all unionized and non-unionized academic staff of the Faculty of Medicine and visiting professors, clinicians with academic appointments and including academic staff whose salary or stipend may be paid, in whole or in part, by another organization.

b) “Faculty Staff” of “Staff Member” means administrative or support staff employed by the Faculty that are not Faculty Members.

c) “Learner” means an individual registered at the University, whether on a full-time or part-time basis or as a special student and whether at the undergraduate, graduate or postdoctoral level, including medical students, residents, and fellows and individuals attending the Faculty on a temporary basis as part of an elective or other program.

d) “Learning environment” encompasses the classroom, the lab or other research settings, the affiliated clinical care setting at affiliated hospitals or other medical care instructional sites and includes both formal learning activities and informal interactions with Learners.
e) “Professionalism concern” a situation whereby a Learner, Faculty Member or Faculty Staff are engaging in behaviour that does not meet the Faculty’s core values or the Faculty’s professionalism standard as described in sections 3.3 and 3.4 of this Policy. Some examples of a professionalism concern are provided in section 4.1 of this Policy.

f) The glossary of terms contained in the University of Ottawa Policy 67a, Prevention of Harassment and Discrimination, applies to this Policy and will be used when considering whether a professionalism concern consists of “harassment”, “discrimination”, “sexual harassment”, “poisoned environment”, “systemic discrimination”, “workplace harassment”.

1.3 This Policy is not meant to,

a) replace legal or ethical standards defined by medical licensing or regulatory organizations or bodies, for example, the College of Physicians and Surgeons of Ontario, the Canadian Medical Association, the Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada; or

b) derogate from responsibilities, requirements or procedures under:
   (i) applicable health care legislation and regulation;
   (ii) the University’s academic regulations, other applicable University policies or procedures. For example, University Policy 67a and its accompanying procedures regarding the Prevention of Discrimination and Harassment, policies and procedures adopted to address Responsible Conduct of Research as per the Tri-Council requirements;
   (iii) collective agreements. For further clarity:
      a. For members of the Association of Professors of the University of Ottawa (APUO), a professionalism concern will be considered under Article 10 in the APUO collective agreement entitled "Professional Ethics" and the procedures set out in Article 39.2 "Discipline for Violation of Article 10" shall be used to investigate and address a professionalism concern, unless otherwise agreed to between the APUO and the University or required by a research sponsors’ policies and/or requirements.
      b. For members of the Canadian Union of Public Employees Local 2626 ("CUPE"), a professionalism concern will be deemed to fall within the meaning of “very serious actions” as contained in Article 15.6.2 and 15.10 of the CUPE collective agreement and the procedures set out in Articles 15.4 and 15.6 of the CUPE collective agreement shall be used to investigate and address an allegation of a professionalism concern, unless otherwise agreed to between CUPE and the University or required by a research sponsors’ policies and/or requirements.
      c. For members of the Support Staff University of Ottawa (SSUO), a professionalism concern will be considered in accordance with the
provisions as set out in the SSUO collective, unless otherwise agreed to between the SSUO and the University.

d. For other Faculty Staff, a professionalism concern will be dealt with in accordance with this Policy unless otherwise agreed to between the union representing staff of the Faculty.

SECTION 2: FACULTY OF MEDICINE COMMITMENT

2.1 The Faculty reaffirms its continuing commitment to providing, promoting and maintaining a professional and respectful work and Learning environment. The Faculty is committed to monitoring the Learning environment by communicating regularly with the hospitals and other instructional sites to identify positive and negative influences on the maintenance of professional standards and to develop appropriate strategies to enhance the Learning environment.

2.2 The Faculty has long since recognized the importance of professionalism in medicine and that it is both taught and modelled. Therefore the Faculty reaffirms its commitment to recognize and promote positive role models in professionalism as well as to instilling,

a) in Learners, as an academic requirement of their academic training, the values and attributes of professionalism and to facilitating the development of their professional identity in preparing them for their future role as professors, researchers, or physicians;

b) in Faculty Members, as a condition of obtaining, maintaining an academic appointment and promotion through academic ranks, the importance of teaching and demonstrating to Learners the values and attributes of professionalism that the public and the profession expect of a professor or a physician; and

c) in Faculty Staff, the importance of demonstrating to Learners and to Faculty Members, a professionalism in carrying out their employment duties.

2.3 The Faculty recognizes that unprofessional behaviour is disruptive and can affect or interfere with the quality of medical education and research and patient care as well as the proper functioning of the Learning environment.

a) The Faculty continues its commitment to provide regular training for Learners, Faculty Members and Faculty Staff on professionalism, how to address a professionalism concern and mechanisms and resources available to correct recurring professionalism concerns.

b) The Faculty will maintain a database to collect information on professionalism concerns when they are reported at a Level 2 or 3 type intervention as described later in this Policy.
(i) The database will collect the following information: name; status; status of professionalism concern; academic year of occurrence; nature of professionalism concern; outcome. Examples of nature of concerns are: harassment (non-sexual); harassment (sexual), discrimination, breach of confidentiality, disruptive behaviour, disrespect (to patients, cadaver). Examples of outcomes are: resolved and no further escalation, informal (level 2), formal (level 3), legal proceeding, or satisfactory resolution (as per person who brought the professionalism concern);

(ii) The information in the database will be used for the purposes of tracking the number of professionalism concerns, the nature of the professionalism concern, the outcome so that the Faculty may identify positive and negative influences and develop appropriate strategies for proper functioning of the Learning environment and work environment. The personal information contained in the database is confidential and treated in accordance with Ontario Freedom of Information and Protection of Privacy Act. The information may also be used by a restricted number of individuals to provide “guided” intervention by authority (see Section 19). Information related to a professionalism concern will be limited to only those within the Faculty with a need to know to be able to carry out their duties, and, as per Section 7, to those within the hospital, research institute, or clinic setting, delegated by the Chief of Staff, CEO of research institutes, or clinic medical director, involved in addressing the professionalism concern. A clearly identified support staff in a portfolio identified above may have access to the information as a need to know to be able to carry out the mandate of the portfolio;

(iii) An entry into the confidential database based on a Level 2 or 3 complaint against a Faculty Member, Learner, or Faculty Staff (herein known as “respondent”) will also result in a notification by email to the respondent;

(iv) A respondent, as per the Ontario Freedom of Information and Protection of Privacy Act, is permitted to review the entries in the database regarding the respondent, with the exception of any confidential information on the complainant as may have been requested by the complainant.

SECTION 3: CORE VALUES AND PROFESSIONALISM STANDARD

3.1 The Faculty expects all Faculty Members and Faculty Staff to demonstrate throughout their academic appointments or employment, the values, attributes, and behaviours that are essential for physicians, researchers, professors, or members of the Faculty.
3.2 The Faculty expects all Learners to demonstrate throughout their academic programs or residencies, the values, attributes and behaviours that are essential for future physicians, researchers or professors.

3.3 The Faculty’s professionalism standard is set by the fundamental core values set out in section 3.4 of this Policy and by the various attributes and behaviours described in section 3.5.

3.4 All Faculty Members, Faculty Staff and Learners are expected to adhere to, demonstrate and promote the Faculty’s core values which consist of:

a) Respect
b) Collaboration
c) Excellence
d) Compassion and empathy
e) Integrity and honesty
f) Altruism
g) Wellness
h) Equity
i) Confidentiality
j) Responsibility and Accountability
k) Dedication and Self-improvement

3.5 Below are attributes and behaviours to further define and explain the Faculty’s core values that Faculty Members, Faculty Staff and Learners are expected to adhere to. These attributes and behaviours listed with each core value are not meant to be exhaustive and some may overlap with another core value.

Respect:
• Show consideration for others and their rights and choices;
• Avoid behaviour that is deliberately harmful, degrading, insulting, or unjustly discredits the reputation of others;
• Recognize human diversity, sexual orientation, different viewpoints, beliefs, religion, gender, lifestyle, ethnic origin, and physical ability;
• Show respect for other people’s privacy, physical space and belongings;
• Retain professional boundaries;
• Allow the expression of disagreement without fear of punishment, reprisals or retribution;
• Work effectively and respectfully with others in a collegial, safe and supportive atmosphere free from discrimination and harassment and conducive to learning and dispute resolution rather than confrontation;
• Be present and punctual for activities of the learning experience and patient care;
• Adhere to faculty regulations, policies/procedures, respecting deadlines and requests for information as it pertains to the efficient administration of student files;
• Assume responsibility to notify others, in advance whenever possible, when unavoidable absence or tardiness occurs;
• Treat patients and their families with respect and dignity both in their presence and in discussions with others members of the allied health care team;
• Place the rights, needs and interests of the patient foremost, while respecting the professional obligations to society to participate in matters related to health care planning and resource allocation;
• Respect patient autonomy at all times by discussing treatment options with the patient or surrogate.

Collaboration:
• View oneself as a member of a team;
• Contribute to a common goal;
• Offer one’s expertise;
• Share in the responsibility for outcomes;
• Acknowledge contribution of other members of the group;
• Identify common interests, define common problems and seek solutions;
• Be reasonable and fair in expectations of others and attempting to resolve conflicts in an appropriate manner;
• Provide fair, respectful, objective, timely, frequent and constructive evaluations of others;
• Demonstrate willingness and ability to identify and discuss both one’s own problematic behaviours and those involving colleagues.

Excellence:
• Conscientiously trying to exceed ordinary expectations;
• Display commitment to continuously improve one’s knowledge and skills through life-long learning (for example, participate in continuing medical education activities as approved by the department);
• Recognize and accept limitations in one’s knowledge and skills;
• Be aware of one’s responsibilities;
• Demonstrate initiative and a commitment to ensure the job gets done well;
• Handle challenges, conflicts, and ambiguities inherent in professional health care at appropriate training levels.

Compassion and Empathy:
• Demonstrate deep awareness of the suffering of another and the desire to relieve it;
• Recognize or understand another’s state of mind or emotion;
• Experience the outlook or emotions of another being by “putting one’s self in another’s shoes”.

Integrity and Honesty:
• Demonstrate consistent regard for the highest standards of behavior and the refusal to violate one’s professional codes;
• Be fair, be truthful, keep one’s word, meet commitments, and be straightforward;
• Avoid misrepresentation or falsification;
• Avoid real, potential or perceived conflicts of interest and disclose conflicts of interest as they arise, whether such conflict of interest is financial or any other circumstance that might influence an individual’s judgment or commitment;
• Conduct research responsibility;
• Credit ideas developed and work done by others;
• Record accurately history and physical findings, test results, and other information pertinent to the care of the patient;
• Communicate with honesty and compassion;
• Recognize one’s own limitations in terms of level of training, experience, skills, competence.

Altruism:
• Display compassion and selflessness in dealings with others;
• Put the interests of others above one’s own;
• Promote the common good of teams and work groups above self;
• Demonstrate a willingness to give up some personal needs to meet the needs of patients and appropriately displace clinical responsibility when personal needs demand it.

Wellness:
• Adopt a multidimensional state of being, describing the existence of positive health in an individual as exemplified by quality of life and a sense of well-being.

Equity:
• Recognize fair opportunity to attain full potential in health, as well as in work and career;
• Reject discrimination based on age, physical characteristics, disease or disability, creed, ethnic origin, gender, nationality, political affiliation, race sexual orientation, or social standing;
• Advocate for those who cannot advocate for themselves.

Confidentiality:
• Protect the confidentiality of personal information of others and of personal health information of patients;
• Limit discussions of patient health issues to appropriate settings for clinical or educational purposes and avoid disclosure of patient details in conversation, other settings and in social media or on the Internet;
- Respect the patient and their family and to observe the need for consent and confidentiality in all dealings with patients and their family;
- Respect the confidentiality of information related to research participants.

Responsibility and Accountability
- Ensure that patient well-being is one’s main focus and primary obligation;
- Develop an awareness and respect for the ethical and medico-legal standards in accordance with the guidelines of the relevant professional bodies;
- Demonstrate an ability to work independently while accepting direction from those charged with supervision;
- Acknowledge and recognize one’s strengths and limitations and will seek assistance as necessary;
- Demonstrate accessibility, attendance, punctuality and trustworthiness;
- Use with discernment alcohol and mood-altering medications in a way that will not interfere with my educational or professional responsibilities;
- Abstain from use of, or handling of illegal drugs;
- Assist other colleagues in need of help in meeting their professional and ethical obligations;
- Present and conduct oneself in a dignified, respectful and professional manner while functioning in an official capacity;
- Promote the dignity of the medical profession in all settings.

Dedication and Self-improvement:
- Strive continuously to develop knowledge, skills and competence;
- Promote and uphold the educational standards of the Faculty of Medicine;
- Assess one’s own educational progress and determine one’s own learning needs;
- Pursue self-education through the use of appropriate resources and prepare myself for all learning sessions;
- Seek further instruction in areas of both strength and weakness;
- Demonstrate a willingness to teach and share in the learning process with my peers, staff and faculty and as such promote the student-teacher relationship and not abuse this trust for personal gain;
- Seek help from colleagues and appropriately qualified professionals for personal problems that adversely affect my education, or service to patients, society or the profession.

SECTION 4: EXAMPLES OF A PROFESSIONALISM CONCERN

4.1 Below is a list of behaviours that the Faculty considers to illustrate a professionalism concern. This is not meant to be an exhaustive list of examples of situations or behaviours that do not meet the Faculty’s core values or the Faculty’s professionalism standard and may create a negative Learning environment or work environment.
a) **Harassment or discrimination.** See the glossary of terms contained in University Policy 67a, Prevention of Harassment and Discrimination, for definitions. The University’s Office for the Prevention of Discrimination and Harassment may be consulted as a resource for determining whether the professionalism concern consists of or is a form of harassment and/or discrimination. Some examples include:

- Making derogatory comments related to an individual’s protected grounds;
- telling or posting of discriminatory jokes, slurs, posters, cartoons, etc.;
- drawing attention an individual’s protected grounds to undermine his / her role in a professional or business environment; innuendo, taunting, or ostracizing a learner or Faculty member on the protected grounds.
- Sexual harassment such as unwanted comments or behaviours related to one’s sexual orientation; or display of degrading or stereotypical images of a sexual nature.
- Inappropriate forms of communications – whether on social media/ internet, in person or other means - include the use of unacceptable words, images, or actions such as profane or disrespectful language; inappropriate labels or name-calling; patronizing and insulting remarks; shaming others publicly; yelling or screaming; using intimidation tactics to gain compliance from others; verbal insidious intimidation with gossiping, spreading rumours, constant criticism; intimidating gestures by slamming doors or throwing things; or non-verbal gestures such as rolling eyes, exaggerated sighing, making faces, turning away.

b) **Confidentiality breach,** of a patient’s health information or other breach of personal information.

c) **Retaliation,** including making threats or taking action against someone who reports disruptive behaviour or acts as witness regarding disruptive behaviour; making threats or taking action against those who express a difference of opinion, including involvement in appropriate advocacy or performance management activities.

d) **Uncooperative behaviours,** including: intentional, subtle, and/or uncooperative behaviour, showing disrespect for others, showing up late for meetings, rounds.

e) **Other unethical practices,** including: attempts to exploit others such as patients, their family members, or staff for personal gains; taking credit for someone else’s ideas; or inappropriately accessing or using a co-worker’s personal information. For example, placing a patient or family in the middle of a conflict between healthcare workers or using care issues to meet one’s own agenda would be considered unethical practices.

f) **Academic Fraud.**

4.2 A professionalism concern would not be raised in the following situations, for example to:

- provide constructive, objective, respectful feedback to Learners or Faculty Members or Faculty Staff in general or in the context of performance management;
- provide an opinion, to express a concern on patient safety or quality of care;
• advocate for individuals, communities, populations, or even to challenge the status quo when such advocacy is undertaken with respect, within the parameters of this policy, within principles of fairness, and without directing at a disproportionate share of personal gains.

SECTION 5: PROFESSIONALISM AS AN ACADEMIC REQUIREMENT FOR LEARNERS

5.1 As an academic requirement of their academic program, the Faculty requires Learners to demonstrate the Faculty’s core values and to uphold the Faculty’s professionalism standard throughout their academic program – whether it be the undergraduate medical education program, the postgraduate medical education program, a graduate program or postdoctoral fellowship program.

5.2 A Learner risks obtaining a failure of a unit, course, rotation, elective or of their program, despite adequate demonstration of knowledge and clinical skills, if the Learner fails to adhere to the Faculty’s core values and the Faculty’s professionalism standard by failing to demonstrate professional behaviour within the Learning environment, coursework and clinical work, as well as outside of the classroom and clinical setting when the Learner is clearly identifiable as a Faculty Learner.

5.3 Consequences resulting from a professionalism concern will depend on circumstances, on the seriousness of the behaviour, on any mitigating factors and on applicable University policy or academic regulation. The following list provides examples of consequences/remedial measures and is not meant to be exhaustive nor necessarily represents a progression of sanctions or measures:

a) A letter of apology;
b) Attendance at educational sessions on professionalism;
c) Attendance at coaching sessions to improve communication or conflict resolution skills;
d) Prohibited or restricted access to the Learning environment;
e) Academic consequences such remediation, probation, recording on the performance record, failure of a unit, course, rotation, elective or program, dismissal/expulsion from the Faculty;
f) Prohibited or restricted privileges in supervising graduate students.

SECTION 6: PROFESSIONALISM AS A CONDITION FOR ACADEMIC APPOINTMENTS

6.1 As a condition to obtain and maintain an academic appointment and for promotion, the Faculty requires Faculty Members to demonstrate the Faculty’s core values and to uphold the Faculty’s professionalism standard at all times throughout the duration of their academic appointment. A Faculty Member risks losing his/her academic appointment, losing privileges (e.g. full graduate student supervisory privileges), or being denied promotion if the Faculty Member fails to adhere to the Faculty’s core values and the Faculty’s professionalism
standard or has lost his/her medical privileges at the hospital or has otherwise no longer permitted to practice medicine within the clinical setting or no longer permitted to conduct research by reason of a professionalism concern.

6.2 Consequences resulting from a professionalism concern of a Faculty Member will depend on circumstances, on the seriousness of the behaviour, on any mitigating factors. The following list provides examples of consequences/remedial measures and is not meant to be exhaustive nor necessarily represents a progression of sanctions or measures:

a) A letter of apology;
b) Attendance at educational sessions on professionalism;
c) Attendance at coaching sessions to improve communication or conflict resolution skills;
d) Prohibited or restricted access to the Learning environment;
e) Other consequences such remediation, probation, recording on the performance record, failure to attain promotion, termination of the academic appointment.

SECTION 7: PROCEDURES TO ADDRESS PROFESSIONALISM CONCERN

7.1 General Principles on Approach

7.1.1 The Faculty adopts what is known as the “Vanderbilt Model”\(^{(1)}\) (see Appendix B) which is premised on the notion that the vast majority of Learners and Faculty Members will have no issues with professionalism, but in those instances where a professionalism concern arises and where the circumstances permit, the Faculty will use a staged approach with the objective of correcting the behaviour and preventing reoccurrence. The stages or levels as referred to in the Vanderbilt Model are described as follows:

a) **Level 1**: Interventions are warranted for first time and a single incident of low severity. The perceived unprofessional or disruptive behaviour is brought to the attention of the individual concerned, it is explained why the observed behaviour is considered unprofessional or disruptive and the format of a response and methods of redress to stop the behaviour.

b) **Level 2**: Interventions are warranted for behaviour that is of moderate severity or where stage one intervention has been ineffective, i.e. repetitive or when a pattern of behaviour has emerged. The methods of redress established at Level 1 are formalized, there may be more monitoring, a timeframe within which change or progress must be demonstrable and notification to the individual that another incident could result in more severe consequences.

c) **Level 3**: Interventions are required for behaviour that has continued despite previous interventions or where there is concern about the quality of care and of Clinical Services. At this level, discipline or sanctions are considered where appropriate.
Crisis intervention is required where there is the sudden appearance of behaviour that is too egregious for a staged approach or where previous responses have failed to correct or stop the unprofessional behaviour. This may be escalated to responses reserved for Level 3 if deemed appropriate by the authority responsible for the respondent or by the professionalism committee in the respective pillars: Undergraduate Medical Education, Postgraduate Medical Education, Graduate and Postdoctoral Studies, Support Staff, or the Professionalism Investigation Committee for Faculty Members.

Interim measures may be made at any level during the handling of a professionalism concern and where appropriate in the circumstances so that the professionalism concern ceases or the reoccurrence of it is reduced or in order to stabilize the situation pending the outcome of the disposition by the governing authorities.

As noted in 1.3(b), the Model does not derogate the responsibility to report to the CPSO when incidents as stipulated under the Regulated Health Professions Act, 1991 are reported. As noted in 1.3(b), the Model does not derogate the requirements or procedures under any collective agreements. For members of the Association of Professors of the University of Ottawa (APUO), a professionalism concern will be considered under Article 10 in the APUO collective agreement entitled "Professional Ethics" and the procedures set out in Article 39.2 "Discipline for Violation of Article 10" shall be used to investigate and address a professionalism concern, unless otherwise agreed to between the APUO and the University or required by a research sponsors' policies and/or requirements. For Learners, the Model does not derogate the stipulations set out under the University of Ottawa Academic Regulations and Policy on Academic Fraud. For Faculty Support Staff, the rules of the appropriate collective agreement will apply if the employee is a union member, including having a representative of their union present in discussions of disciplinary measures.

7.1.2 At each level of intervention, the following steps to each intervention are recommended (2):

- Confirm the lapse;
- Understand the context;
- Communicate and discuss in a mutually respectful manner;
- Encourage self-reflection;
- Agree on a plan for remediation;
- Document the interventions;
- Construct a plan for follow-up;
- Respect the confidentiality of personal information of those involved. Sharing of personal information related to a professionalism concern should be limited to only those within the Faculty with a need to know to be able to carry out their duties, and to those within the hospital or clinic setting, delegated by the Chief of Staff or clinic medical director, involved in addressing the professionalism concern or in compelling
circumstances affecting the health or safety of patients, staff of the hospital or clinic setting.

7.2 Procedures for Learners

7.2.1 Level 1: If a Learner is engaging in a manner that does not meet the Faculty’s core values or the Faculty’s professionalism standard, the professionalism concern is reported to the Faculty member responsible for the evaluation of the academic performance of the Learner who will,

a) bring the professionalism concern to the Learner’s attention;
b) give the Learner an opportunity to provide any additional information or clarification;
c) explain to the Learner why the observed behaviour is considered unprofessional or disruptive; and
d) establish and convey to the Learner, the format of a response and methods of redress to stop of the behaviour.

7.2.2 Level 2: If the Learner continues to engage in a manner that does not meet the Faculty’s core values or the faculty’s professionalism standard after a Level one type of intervention, then the following steps apply:

a) For Learners in the Undergraduate Medical Education (UGME) Program:

The Vice Dean, Undergraduate Medical Education is the person responsible for oversight of the procedures to address a professionalism concern involving Learners in UGME.

The Faculty Member responsible for the Learner’s academic evaluation informs the Faculty’s Vice Dean, UGME in writing of the professionalism concern, the steps already taken to bring the professionalism concern to the attention of the Learner and the method of redress and any other relevant circumstances and documentation.

The Vice Dean, UGME will communicate with the Learner and with the Faculty Member, seek clarification or additional information if required and then will decide on such issues as:

- whether the circumstances permit another opportunity for the Learner to correct the behaviour with additional monitoring;
- timeframes within which to change or progress;
- whether the matter should be referred to the Student Promotion Executive Committee for recommendation to UGME as per Faculty of Medicine procedures on consequences to the Learner’s progress in UGME.
b) For Learners in Postgraduate Medical Education (PGME):

The Vice Dean, Postgraduate Medical Education is the person responsible for oversight of the procedures to address a professionalism concern involving Learners in PGME.

The Residency Program Director responsible for the Learner’s academic evaluation informs the Faculty’s Vice Dean, PGME in writing of the professionalism concern, the steps already taken to bring the professionalism concern to the attention of the Learner and the method of redress and any other relevant circumstances and documentation.

The Vice Dean, PGME, or delegate, will communicate with the Learner and with the Residency Program Director, seek clarification or additional information if required and then will decide on the following:

- whether the circumstances permit another opportunity for the Learner to correct the behaviour with additional monitoring;
- timeframes within which to change or progress;
- or whether the circumstances are such that the matter be referred to the Postgraduate Professionalism Committee for recommendation to the Postgraduate Education Committee on consequences to the Learner’s progress in PGME.

c) For Learners in graduate program or postdoctoral studies (GPS):

The Vice Dean, Graduate and Postdoctoral Studies is responsible for oversight procedures to address professionalism concerns involving Learners in a faculty graduate program or postdoctoral studies.

The Faculty Member and the Graduate Program Director responsible for the Learner’s academic evaluation inform the Faculty’s Vice Dean, GPS in writing of the professionalism concern, the steps already taken to bring the professionalism concern to the attention of the Learner and the method of redress and any other relevant circumstances and documentation.

The Vice Dean, GPS will communicate with the Learner, with the Faculty Member and with the Graduate Program Director, seek clarification or additional information if required and then will decide whether the circumstances permit another opportunity for the Learner to correct the behaviour with additional monitoring, timeframes within which to change or progress or whether the circumstances are such that the matter be referred to
the Faculty of Graduate and Postdoctoral Studies for recommendation on consequences to the Learner’s progress in the GPS.

7.2.3 Level 3: If the Learner had been given an opportunity to rectify the professionalism concern and in spite of earlier interventions, the Learner continues to engage in a manner that does not meet the Faculty’s core values or the Faculty’s professionalism standard, then the professionalism concern may result in disciplinary actions or sanctions.

a) For Learners in the Undergraduate Medical Education (UGME) Program:

The professionalism issue is reported to the Vice Dean, UGME who will refer it to the Student Promotion Executive Committee for investigation and if required, recommendation to UGME as per Faculty procedures on consequences to the Learner’s progress in the UGME.

b) For Learners in Postgraduate Medical Education (PGME):

The Vice Dean, PGME is responsible for oversight of professionalism concerns involving Learners in PGME; and is an ex-officio member of the Postgraduate Professionalism Subcommittee. The Postgraduate Professionalism Subcommittee reviews and adjudicates on professionalism issues as they arise amongst the residents and fellows of the Faculty of Medicine.

At the request of the Vice Dean, PGME, the Program Director or the Hospital appointed representative, the Subcommittee will review the cases of trainees with professionalism concerns, and to determine the appropriate course(s) of action, which may include but are not limited to, remediation, probation, suspension or dismissal. Any decisions of the committee can be appealed by the trainee according to policies and procedures already in place at the Faculty of Medicine.

The assessments of a trainee’s performance will focus on the academic, behavioral, ethical and professional performance in the Program, or the evaluation/recommendation from an independent process as circumstances warrant, such as a conflict of interest, considerations from legal or collective agreement, etc.

The committee will be apprised of the academic standing of the training and whether any factors related to this impact on the professionalism concern.

c) For Learners in graduate program or postdoctoral studies (GPS):

The Vice Dean, GPS is responsible for oversight procedures to address professionalism concerns involving Learners in a Faculty graduate program or postdoctoral studies and for referring professionalism concerns to the Faculty of Graduate and Postdoctoral
Studies for investigation and if needed, for recommendation on consequences to the Learner’s progress in the GPS.

7.3 Procedures for Faculty Members

7.3.1 The Chair of the Professionalism Investigation Committee is responsible for oversight of the process to address professionalism concerns of a Faculty Member.

7.3.2 Level 1: If a Faculty Member is engaging in a manner that does not meet the Faculty’s core values or the Faculty’s professionalism standard, the professionalism concern is reported to the Chair of the Department within which the Faculty Member holds an academic appointment. If the Faculty Member is cross-appointed, both Department Chairs will be notified. The Chair(s) or Division Head(s), as applicable, will:

   a) bring the professionalism concern to the Faculty Member’s attention;
   b) give the Faculty Member an opportunity to provide any additional information or clarification;
   c) explain to the Faculty Member why the observed behaviour is considered unprofessional or disruptive; and
   d) establish and convey to the Faculty Member, the format of a response and methods of redress to stop of the behaviour.

7.3.3 Level 2: If the Faculty Member continues to engage in a manner that does not meet the Faculty’s core values or the faculty’s professionalism standard after a Level 1 type of intervention, the Chair(s) will inform the Chair of the Professionalism Investigation Committee in writing of the professionalism concern, the steps already taken to bring the professionalism concern to the attention of the Faculty Member and the method of redress and any other relevant circumstances. If the Faculty Member is a member of the Graduate and Postdoctoral studies, the Faculty’s Vice Dean of Graduate and Postdoctoral will be notified.

7.3.4 Information will be shared with the hospital, research institute or clinic based on pre-defined criteria. The respective Chief of Staff, CEO of Research Institute as applicable, or Clinic Medical Director, together with the Chair of the Professionalism Investigation Committee, or delegate, will meet and determine if such criteria exist. Additional advice or legal assistance may be sought by the Faculty on a case-by-case basis. For the Faculty, the criteria are:

   (i) Potential or actual harm to learner(s) or the Learning Environment.
   (ii) Potential or actual harm to patient(s) or the patient care environment.
   (iii) Potential or actual threat to accreditation of the Faculty of Medicine.
   (iv) Potential or actual violations to University of Ottawa or Faculty of Medicine policies or procedures.
   (v) Potential or actual impact on promotion requirements at the Faculty of Medicine.
(vi) Potential or actual impact on any show-casing activities at the Faculty of Medicine or at the respective hospital(s).
(vii) Potential or actual reputational risk to the Faculty of Medicine.

For the hospital or clinic, the criteria are:

(i) Potential or actual harm to patient(s) or the patient care environment.
(ii) Potential or actual threat to accreditation of the respective hospital(s).
(iii) Potential or actual violations of hospital by-laws.
(iv) Potential or actual impact on any show-casing activities at the respective hospital(s).
(v) Potential or actual reputational risk to the respective hospital(s).
(vi) Potential or actual harm to a hospital employee or volunteer.

For the research institute, the criteria are:

(i) Potential or actual harm to the research environment.
(ii) Potential or actual threat to accreditation of the respective research institute(s).
(iii) Potential or actual violations of research institute by-laws.
(iv) Potential or actual impact on any show-casing activities at the respective research institute(s).
(v) Potential or actual reputational risk to the respective research institute(s).
(vi) Potential or actual harm to a research institute employee or volunteer.

7.3.5 The Chair of the Professionalism Investigation Committee or delegate will communicate with the Faculty Member and with the Chair(s), seek clarification or additional information if required and then will decide whether the circumstances permit another opportunity for the Faculty Member to correct the behaviour with additional monitoring, timeframes within which to change or progress or whether the circumstances are such that the matter be referred to Level 3.

7.3.6 Level 3: If other levels of intervention have not addressed the professionalism concern, the Faculty Professionalism Investigation Committee will review the case based on a summary of the professionalism concern, the steps already taken to bring the professionalism concern to the attention of the Faculty Member, the method of redress and any other relevant circumstances or documentation.

7.3.7 The Faculty Professionalism Investigation Committee will meet to review the case and will determine whether the professionalism concern raises matters that cannot be solely addressed within the academic appointment and jurisdiction of the Faculty and of the University or has an impact on safeguarding the quality of care provided within the hospital or clinical setting. In such case, the Faculty Professionalism Investigation Committee will contact in writing the Chief of Staff of the hospital or clinical setting with authority over the Faculty
Member’s permission to practice medicine or conduct medical research and invite the hospital, research institute or clinical setting to either:

a) appoint a member to the Faculty Professionalism Investigation Committee, in which case the investigation by the Committee will be considered a joint investigation of the Faculty and of the hospital or clinical or research setting;

b) choose to be informed only of the outcome of the investigation, in which case they will be informed only of whether the professionalism concern was warranted or not and if so, whether a consequence was imposed or not; or

c) conduct the investigation by the hospital, research institute, or clinic setting.

In such case that the investigation will be conducted by the hospital, research institute or clinical setting, the Faculty Professionalism Investigation Committee will consult with the Vice Dean of Professional Affairs as to whether an investigation by the Committee remains necessary. The Vice Dean of Professional Affairs will consult on any legal considerations related to the University’s obligations to conduct its own investigation and decide whether the Committee’s mandate continues, ends or whether it is deferred pending the outcome of the hospital or clinical setting investigation.

7.3.8 The Faculty Member will be copied on the written communication and the Faculty Professionalism Investigation Committee will inform the Faculty Member and the Department Chair of the choice made by the hospital, clinical or research setting. If the Faculty Member is cross-appointed, both Department Chairs will be notified.

7.3.9 If the investigation proceeds with the Faculty Professionalism Investigation Committee, the Faculty Member and the Department Chair(s) will be given an opportunity to meet with the Faculty Professionalism Investigation Committee and provide any additional information or documentation.

7.3.10 The Faculty Professionalism Investigation Committee will provide to the Faculty Member and to the Department Chair(s) a written confidential draft report containing findings of fact and determination whether the professionalism concern is warranted or not. The Faculty Member and the Department Chair(s) may send written comments to the Faculty Professionalism Investigation Committee within ten (10) working days of the date of the report.

7.3.11 The Faculty Professionalism Investigation Committee finalizes its investigation report and sends it to the Dean who will make a determination on consequences to the Faculty Member’s academic appointment. Based on the findings and determinations contained in the final report, the Dean:

a) decides or recommends on the imposition of any measures necessary and appropriate in the circumstances; and
b) follows-up to determine if the measures imposed are effective in preventing the reoccurrence of the professionalism concern.

7.4 Procedures for Faculty Staff

7.4.1 The Chief Administrative Officer of the Faculty is responsible for oversight of the process to address professionalism concerns involving Faculty Staff.

7.4.2 Level 1: If a Staff Member is engaging in a manner that does not meet the Faculty’s core values or the Faculty’s professionalism standard as it applies to their employment duties, the professionalism concern is reported to the Staff Member’s supervisor or person responsible for the Staff Member’s performance evaluation who will:

a) bring the professionalism concern to the Staff Member’s attention;

b) give the Staff Member an opportunity to provide any additional information or clarification;

c) explain to the Staff Member why the observed behaviour is considered unprofessional or disruptive; and

d) establish and convey to the Staff Member, the format of a response and methods of redress to stop of the behaviour.

7.4.3 Level 2: If the Staff Member continues to engage in a manner that does not meet the Faculty’s core values or the Faculty’s professionalism standard after a level one type of intervention, then the following steps apply:

a) The supervisor or person responsible for the Staff Member’s performance evaluation informs the Faculty’s Human Resources Manager in writing of the professionalism concern, the steps already taken to bring the professionalism concern to the attention of the Staff Member and the method of redress and any other relevant circumstances and documentation.

b) The Human Resources Manager will communicate with the Staff Member and with the supervisor or person responsible for the Staff Member’s performance evaluation, seek clarification or additional information if required and then will decide whether the circumstances permit another opportunity for the staff member to correct the behaviour with additional monitoring, timeframes within which to change or progress or whether the circumstances are such that the matter be referred to the Chief Administrative Officer.

7.4.4 Level 3: If the Staff Member had been given an opportunity to rectify the professionalism concern and in spite of earlier interventions, another incident of the Staff Member engaging in a manner that does not meet the Faculty’s core values or the Faculty’s professionalism standard occurs, then the professionalism concern is reported to the Chief Administrative Officer who will meet with the Staff Member, the supervisor or person
responsible for the Staff Member’s performance evaluation and the Human Resources Manager and will summarize the situation and make a recommendation to the Dean who will decide on consequences.

SECTION 8: POLICY REVIEW

8.1 This Policy shall be reviewed and amended by the appropriate governing body of the Faculty as required. Faculty Members and Learners and Faculty Staff are expected to consult, from time to time, this policy found to familiarize themselves with any changes; this policy will be made available on the Faculty’s website.

Approval:
Faculty Council:
Executive Committee of the Senate:

Date:
October 19, 2011
February 13, 2012 (11:M05:25)

Faculty Council:
Executive Committee of the Senate:

October 29, 2013
January 14, 2014 (13:M05:20)
APPENDIX A: POLICIES AND REGULATIONS

For further information, the reader is referred to the following University statements and policies:

University of Ottawa Mission Statement
http://destination2020.uottawa.ca/

University of Ottawa Policies
http://web5.uottawa.ca/admingov/policies.html

University of Ottawa Policy on Discrimination and Harassment
http://web5.uottawa.ca/admingov/policy_67a.html

University of Ottawa Policy on Academic Fraud
http://www.uottawa.ca/governance/regulations.html#r72

University of Ottawa Policy on Academic Fraud
http://web5.uottawa.ca/mcs-smc/academicintegrity/regulation.php

Policy for Interactions between the Faculty of Medicine and the Pharmaceutical, Biotechnology, Medical Device, and Hospital and Research Equipment and Supplies Industries
http://www.med.uottawa.ca/Organisation/ProfessionalAffairs/eng/policies_procedures_conflict_interest_faqs.html

University of Ottawa Guidelines for the Ethical Conduct of Research and Procedures for Investigating Misconduct

The reader is also referred to the following regulations of external organizations:

Canadian Medical Association Code of Ethics
http://policybase.cma.ca/dbtw-wpd/PolicyPDF/PD04-06.pdf

Canadian Medical Association Policy on Medical Professionalism
http://policybase.cma.ca/dbtw-wpd/PolicyPDF/PD00-02.pdf

Canadian Medical Association Guidelines for Physicians in Interactions with Industry
College of Physicians and Surgeons of Ontario Practice Guide: Professionalism
http://www.cpso.on.ca/policies/guide/default.aspx?id=1698

College of Physicians and Surgeons of Ontario Guidebook for Managing Disruptive Behavior

College of Physicians and Surgeons of Ontario Policies

College of Physicians and Surgeons Policy: MD Relations with Drug Companies
http://www.cpso.on.ca/policies/policies/default.aspx?ID=1832

College of Physicians and Surgeons of Ontario Policy Statement: Professional Responsibilities in Undergraduate Medical Education
http://www.cpso.on.ca/uploadedFiles/policies/policies/policyitems/profrespUG.pdf

College of Physicians and Surgeons of Ontario Policy Statement: Professional Responsibilities in Postgraduate Medical Education

Tri-Council Policy Statement: Integrity in Research and Scholarship
http://www.cihr-irsc.gc.ca/e/40512.html

References
APPENDIX B: VANDERBILT MODEL

Proposal 1
Vanderbilt Model - Proposed Mapping


- Vast majority of professionals - no issues - provide feedback on progress
- Single "unprofessional" incidents (merit?)
- Apparent pattern
- Pattern persists
- No

- "Informal" Cup of Coffee Intervention
- "Awareness" Intervention
- "Guided" Intervention by Authority
- "Disciplinary" Intervention

- Mandated Reviews

- "Formal"
- "Informal"