

Clinical Sciences Division Professionalism and Code of Conduct

Approval Authority: Academic Council

Established: 2012-06-07

Amendments: 2012-06, 2020-10, 2020-12

Category: Academic

Parent Policy: [POLICY Clinical Sciences Division Professionalism and Code of Conduct](#)

1.0 PROCEDURES

The Clinical Sciences Division Professionalism and Code of Conduct Procedures aims to provide a transparent process for responding to concerns of lapses or breaches in professional behaviour or code of conduct by Clinical “Faculty Members.” The Procedures are intended to be consistent with the College of Physicians and Surgeons of Ontario and the Canadian Medical Association Code of Ethics for Clinical Faculty and ensure compliance with accreditation requirements.

These procedures apply to instances where Clinical Faculty Members at NOSM University (NOSM U), irrespective of the geographically distributed site to which they are currently assigned or currently working, engage in behaviour generally recognized as being unprofessional or a code of conduct-related concern.

1. Approach to Concerns and Complaints

1.1 Principles on Approach

NOSM adopts what is known as the "Vanderbilt Model" (see Appendix A in the Professionalism and Code of Conduct Policy), which is premised on the notion that the vast majority of Faculty Members will have no issues with professionalism. Still, in those instances where a professionalism concern arises and where the circumstances permit, the Section Chairs 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 lapse 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 methods of redress to stop the behaviour.

- b. Level 2: Interventions are warranted for behaviour that is of moderate severity, 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 (if applicable) are formalized. There may be more monitoring of behaviours or teaching evaluations; a timeframe in which change or progress must be demonstrable will be identified; and notification to the Faculty Member will occur indicating that another incident could result in additional consequences.
- c. Level 3 or egregious or mandated: Interventions are required for behaviour that has continued despite previous interventions or where there is a significant concern about the quality of teaching, leadership, or conducting scholarly activity. 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 if deemed appropriate by the Section Chair or Division Head.

This Model does not derogate the responsibility to report to the CPSO when incidents, as stipulated under the Regulated Health Professions Act, 1991, are reported.

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

1.2 Principles Around Process

At each level of intervention, the following steps are recommended:

- 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/code of conduct concern should be limited to those within the Office of Faculty Affairs with a need to know to be able to carry out their duties, and to those within the hospital or clinic setting. This can be delegated to the Chief of Staff or equivalent responsible for addressing the professionalism concern.

The Associate Dean Faculty Affairs or designate should decide if the matter should additionally be referred to the appropriate Program Associate Dean, Vice-Dean Academic, or Dean as per the appropriate procedures related to learners, staff or faculty.

1.3 What is Not Considered a Lapse or Breach of Professionalism?

Examples that are not considered lapses or breaches of professionalism may include:

- providing constructive, objective, respectful feedback to learners or Faculty Members in general, or in the context of performance management;

- providing an opinion to express a concern regarding patient safety or quality of care;
- advocating for individuals, communities, populations, including challenging the status quo when such advocacy is undertaken with respect, within the parameters of this policy, within principles of fairness, and without any conflict of interest;
- professionalism as a condition for academic appointments.

1.4 Possible Consequences/Remedial Actions

Consequences resulting from a professionalism concern of a Faculty Member will depend on circumstances, on the seriousness of the behaviour, and on any mitigating factors. Disciplinary action if indicated, shall be fair, reasonable, commensurate with the seriousness of the violations, and based on the principle of progressive discipline. Disciplinary action shall be initiated only after completion of a fair and complete preliminary investigation, and shall not be based on anonymous information.

The following list provides examples of consequences/remedial measures and is not meant to be exhaustive, nor does it necessarily represent a progression of sanctions or measures:

- a letter of apology;
- attendance at educational sessions on professionalism*;
- attendance at coaching sessions to improve communication or conflict resolution skills*;
- prohibited or restricted access to the learning environment;
- other measures such remediation, probation, recording on the performance record;
- failure to attain promotion;
- termination of the academic appointment.

*Any associated costs are the faculty member's responsibility.

1.5 Egregious or Mandated Reporting of Gross Misconduct

An incident which appears to constitute gross misconduct is defined as behaviour that has direct harmful consequences, or is an egregious breach of well-recognized standards of professionalism. Examples include but are not limited to:

- work place violence
- sexual harassment, harassment and bullying or assault
- theft
- research misconduct including but not limited to plagiarism, falsification and misuse of research funds
- behaviour which brings the School and/or its faculty in disrepute
- inappropriately accessing or using a co-worker, learner, research participant or patient's personal information
- unwelcome and inappropriate verbal, written, graphic or physical conduct, or coercive behaviour, where the behaviour is known, or reasonably ought to be known, to be unwelcome
- unauthorized release of confidential information including identifiable personal data of a research participant; a patient's health information or other breach of personal information, privacy policy and law Freedom of Information and Protection of Privacy Act (FOIP), the Local Authority Freedom of Information and Protection of Privacy Act (FIPPA), Health Information Privacy Act (HIPA).

If the incident is considered egregious or gross misconduct and has the potential to significantly affect the safety or wellbeing of others, particularly patients or learners, the Associate Dean, Faculty Affairs or designate will be notified and may interrupt the participation of teaching, research, or clinical activities of the faculty member, pending investigation of the allegations. Referral to the appropriate regulatory body may also be required. In such cases, the Professionalism Panel would proceed as quickly as possible. As soon as a safe return to teaching, research, or clinical activities is

established, the panel would communicate a plan for the Faculty Member to resume supervision of learners (if applicable).

In the aforementioned circumstances, the faculty member will be offered a meeting with the Professionalism Panel which will consist of two NOSM faculty members with responsibilities at the level of a Section Chair, Assistant Dean or higher, and the third member will be the affected faculty member's Section Chair. The Chair of the Panel will be the Associate Dean of Faculty Affairs or designate.

The Panel is to receive the evidence, determine the validity of the allegation, and if warranted, determine, implement and monitor appropriate remedial action. The Panel will meet within 20 working days from receipt of the professionalism notification.

The Faculty Member will have the opportunity to present evidence that relates directly to the alleged misconduct. The Faculty Member may bring an academic colleague to the Panel meeting.

The Panel will consider the nature of the information presented and will submit a written report to the Faculty Member detailing the reasons for the finding, and the disciplinary actions to be imposed (if applicable) within 20 business days of the meeting.

Disciplinary actions include, but are not limited to:

- a letter of warning or reprimand;
- attendance at educational sessions on professionalism*;
- attendance at coaching sessions to improve communication or conflict resolution skills*;
- prohibited or restricted access to the learning environment;
- other measures such remediation, probation, recording on the performance record;
- failure to attain promotion;

- suspension of academic appointment for a defined period;
- termination of the academic appointment with cause.

*Any associated costs are the faculty member's responsibility.

2. Procedures for Discipline

The Clinical Sciences Division Head is responsible for oversight of the process to address professionalism and code of conduct concerns involving Clinical Faculty.

a. Level 1: If a Faculty Member is engaging, in a manner that does not meet NOSM's core values or NOSM's professionalism standard and policies, the professionalism concern is reported to the Section Chair. The Section Chair will:

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

b. Level 2: If the Faculty Member continues to engage in a manner that does not meet NOSM's core values, or the faculty's professionalism standard and policies, after a Level 1 type of intervention, the Section Chair will inform the Clinical Sciences Division Head in writing 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.

The Clinical Sciences Division Head will share information related to the professionalism concern with the medical school, hospital, research institute or clinic based on the following criteria:

- potential or actual harm to learner(s) or the learning environment;
- potential or actual threat to NOSM accreditation;
- potential or actual violations to NOSM's policies or procedures;
- potential or actual impact on promotion requirements at NOSM;
- potential or actual impact on any show-casing activities at NOSM or at the respective hospital(s);
- potential or actual reputational risk to NOSM.

The Clinical Sciences Division Head or designate will communicate with the Faculty Member and seek clarification or additional information if required. It will be decided 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. Informal notice will be provided to the Associate Dean Faculty Affairs and to the Dean of the Medical School.

- c. Level 3 or egregious or mandated: If other levels of intervention have not addressed the professionalism or code of conduct concern, the Clinical Sciences Division Head or designate will review the case based on a summary of the professionalism concern and the steps already taken to the attention of the Faculty Member, along with the method of redress, and any other relevant circumstances or documentation.

The Clinical Sciences Division Head or designate will notify the Associate Dean Faculty Affairs and meet to review the case and will determine whether the professionalism concern raises matters that cannot be solely addressed within the appointment and jurisdiction of NOSM, or has an impact on safeguarding the quality of care provided

within the hospital or clinical setting. In such case, the Associate Dean or designate 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.

In the case of Level 3 incidents or incidents of gross misconduct, the Faculty member will meet with a Professionalism Panel, will consist of two NOSM faculty members with responsibilities at the level of a Section Chair or Assistant Dean or higher, and the third member will be the a clinical faculty member at large appointed by the Clinical Sciences Division Head. The Chair of the Panel will be the Associate Dean of Faculty Affairs or designate.

The Panel is to receive the evidence, determine the validity of the allegation and, if warranted, determine, implement and monitor appropriate remedial action. The Panel will also determine whether there should be further repercussions. Where possible, the Panel will meet within 20 working days from receipt of the Professionalism notification.

The Faculty Member should present evidence that relates directly to the alleged misconduct. The Faculty Member may bring an academic colleague to the meeting.

The Panel will consider the nature of the information presented and will submit a written report to the Faculty Member detailing the reasons for the finding and the penalty to be imposed (if applicable), within ten business days of the meeting.

Disciplinary actions include but are not limited to:

- a letter of warning or reprimand
- suspension from the faculty of NOSM for a defined period
- dismissal from the Faculty of NOSM with cause

3. Appeals

The Faculty Member shall have the right to appeal the decision of the Professionalism Panel related to Level 3 investigations to the Dean.

3.1 Grounds for an Appeal

An appeal will be considered only where a Faculty Member is able to establish:

- a) There is evidence of a factual error or procedural irregularity in the previous level of decision-making; or
- b) That the previous Panel did not adhere to the principles of natural justice.

An appeal must be filed in writing to the Dean within ten working days of receipt of the Professionalism Panel's decision and notice.

The Dean or designate may establish an Appeal Committee within twenty working days of the receipt of the written intention to appeal by the Faculty Member. The Faculty Member (appellant), Committee and Associate Dean Faculty Affairs and all other related individuals shall be notified in writing of the process, location, and date/time of the appeal hearing.

The decision of the Appeal Committee is considered final and may not be further appealed.

2.0 RELATED POLICIES

- [POLICY Clinical Sciences Division Professionalism and Code of Conduct](#)
- [GUIDELINES Professional Attributes](#)
- NOSM [Human Rights, Anti-Discrimination and Harassment Policy and Procedures](#)

References:

Some of the concepts and ideas used in this policy have been derived from the following resources:

- Buchanan AO, Stallworth J, Christy C, Garfunkel LC, Hanson JL. *Professionalism in practice: strategies for assessment, remediation, and promotion*. Pediatrics. 2012 Mar; 129(3):407-9. PubMed PMID: 22371458. Epub 2012/03/01. eng.
- Hickson GB, Pichert JW, Webb LE, Gabbe SG. *A complementary approach to promoting professionalism: identifying, measuring, and addressing unprofessional behaviors*. Acad Med. 2007 Nov; 82(11):1040-8. PubMed PMID: 17971689. Epub 2007/11/01. eng.
- Office of Professional Affairs. 2020. *Policy on Professionalism*. [online] Available at: <https://med.uottawa.ca/professional-affairs/policies/professionalism-policy>[Accessed 1 September 2020].

3.0 ROLES, AND RESPONSIBILITIES

The Procedure shall be reviewed and amended by the appropriate governing body of the Faculty as required. Faculty Members are expected to consult this Procedure and familiarize themselves with any changes; this

4.0 INTERPRETATION

Questions of interpretation or application of this procedure will be referred to The Office of Faculty Affairs at facultyaffairs@nosm.ca

5.0 RELATED DOCUMENTS

- [POLICY Clinical Sciences Division Professionalism and Code of Conduct](#)
- [GUIDELINES Professional Attributes](#)
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AUTHORITIES AND OFFICERS

The following is a list of authorities and officers for this procedure:

- Approving Authority: Senate
- Responsible Officer: Associate Dean, Faculty Affairs
- Procedural Authority: Associate Dean, Faculty Affairs
- Procedural Officer: Director, Faculty Affairs

Review and Revision History

Review Period: As needed

Date for Next Review: 2023 07

Development History – this section will be deleted when the policy is finalized and ready for review/approval

| Date | Action |
|------------|--|
| 2012 06 07 | Original version (Policy for Clinical Faculty and the Discipline Procedures for Clinical Stipendiary Faculty) |
| 2020 10 08 | Procedure expanded upon the original Professionalism Policy for Clinical Faculty and the Discipline Procedures for Clinical Faculty which is repealed in tis entirety. |
| 2020 12 17 | Approved by Academic Council |