

## Office of Professionalism

## **Annual Report**

The Professionalism Button

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2016-2017

	COLADES	Total Number of A				
	16-17	Role: Resident - 9	ī			
1	Resident	Report Type Accolade Report			Summary of Accolade  (1) Excellence (provided clear guidelines to learners regarding	Summary of Action Taken Commendation letter sent.
					assignments, examinations; ensured that the teaching clinical environment was appropriate for needs of learner; nurtured the professional growth, intellectual independence, and critical appraisement abilities of those under supervision).	
2	Resident	Accolade Report	Closed	Clinical	(1) Responsible Behavior (created environments conducive to learning and professional work, modeled professional behavior for learners); (2) Excellence (nurtured the professional growth of those under supervision) background. Approachable and incredibly helpful. Good feedback as well.	Commendation letter sent.
3	Faculty	Accolade Report	Closed	Non-Clinical	(1) Responsible Behavior (created environments conducive to learning and performance of academic work); (2) Excellence (nurtured professional growth, intellectual independence and critical appraisement abilities of those under supervision).	Commendation letter sent.
4	Student	Accolade Report	Closed	Non-Clinical	(1) Responsible Behavior (created environments conducive to learning and performance of academic work.	Anonymous accolade; no action taken.
5	Student	Accolade Report	Closed	Non-Clinical	(1) Responsible Behavior (created environments conducive to learning and the performance of academic work).	Commendation letter sent.
6	Faculty	Accolade Report	Closed	Non-Clinical	<ul><li>(1) Responsible Behavior (modeled professional behavior for learners);</li><li>(2) Excellence (ensured that the research and teaching environments are appropriate for the needs of the learner, nurtured the professional growth of those under supervision.</li></ul>	Commendation letter sent.
7	Student	Accolade Report	Closed	Clinical	(1) Responsible Behavior (modeled professional behavior for learners); (2) Excellence (ensured that the research and teaching environments are appropriate for the needs of the learner, nurtured the professional growth of those under supervision.	Commendation letter sent.
8	Student	Accolade Report	Closed	Clinical	(1) Respect for others (assured that interactions are always respectful); (2) confidentiality (regarded confidentiality of patients as a central obligation).	Commendation letter sent.

Pei	son Role	Report Type	Status	Setting	Summary of Accolade	Summary of Action Taken
9	Student	Accolade Report	Closed	Clinical	(1) Responsible Behavior (created environments conducive to learning and the performance of academic work).	Commendation letter sent.
10	Resident	Accolade Report	Closed	Clinical	(1) Excellence (provided clear guidelines to learners regarding assignments, examinations; ensured that the teaching clinical environment	Commendation letter sent.
11	Student	Accolade Report	Closed	Non-Clinical	(1) Responsible Behavior (created environments conducive to learning and the performance of academic work).	Commendation letter sent.
12	Student	Accolade Report	Closed	Clinical	(1) Responsible Behavior (modeled professional behavior for learners); (2) Excellence (ensured that the research and teaching environments are appropriate for the needs of learners).	Commendation letter sent.
13	Student	Accolade Report	Closed	Non-Clinical	1) Responsible Behavior (created environments conducive to learning and the performance of academic work).	Commendation letter sent.
14	Student	Accolade Report	Closed	Non-Clinical	(1) Responsible Behavior (assured that patient care assumes the highest priority in the clinical setting).	Commendation letter sent.
15	Student	Accolade Report	Closed	Clinical	(1) Excellence (nurtured the professional growth of others).	Commendation letter sent.
16	Student	Accolade Report	Closed	Non-Clinical	(1) Excellence (nurtured the professional growth of others).	Commendation letter sent; also notification of diversion to UME office.
17	Student	Accolade Report	Closed	Non-Clinical	(1) Excellence (nurtured the professional growth of others).	Commendation letter sent.
18	Resident	Accolade Report	Closed	Clinical	(1) Excellence (nurtured the professional growth, intellectual independence, and critical appraisement abilities of those under supervision).	Commendation letter sent.
19	Resident	Accolade Report	Closed	Clinical	(1) Respect for others (assured that interactions are always respectful); (2) Responsible Behavior (created environments conducive to learning); (3) Excellence (allowed the expression of disagreement without the fear of punishment, reprisals or retribution).	Commendation letter sent.

Pei	rson Role	Report Type	Status	Setting	Summary of Accolade	Summary of Action Taken
20	Resident	Accolade Report	Closed	Clinical	(1) Responsible Behavior (created environments conducive to learning and the performance of academic work); (2) Excellence (ensured that the environments and experiences are appropriate for the needs of the learner; nurtured the professional growth of those under supervision).	Commendation letter sent.
21	Faculty	Accolade Report	Closed	Clinical	(1) Responsible Behavior (created environments conducive to learning and performance of work); (2) Excellence (nurtured the professional growth, intellectual independence, and critical appraisement abilities of those under supervision).	Commendation letter sent.
22	Faculty	Accolade Report	Closed	Non-Clinical	(1) Responsible Behavior (was accountable for personal actions and decisions in the workplace, created environments conducive to learning and performance of academic work).	Letter never sent. Reporter never responded after multiple attempts to contact.
23	Faculty	Accolade Report	Closed	Non-Clinical	(1) Respect for others (assured that interactions are always respectful); (2) Excellence (nurtured the professional growth, intellectual independence, and critical appraisement abilities of those under supervision).	Commendation letter sent.
24	Faculty	Accolade Report	Closed	Non-Clinical	(1) Respect for others (assured that interactions are always respectful); (2) Excellence (nurtured the professional growth, intellectual independence, and critical appraisement abilities of those under supervision).	Commendation letter sent.
25	Faculty	Accolade Report	Closed	Clinical	(1) Responsible Behavior (assured that patient care assumes the highest priority in the clinical setting).	Commendation letter sent.
26	Faculty	Accolade Report	Closed	Non-Clinical	(1) Excellence (nurtured the professional growth, intellectual independence and critical appraisement abilities of those under supervision).	Commendation letter sent.
27	Faculty	Accolade Report	Closed	Clinical	(1) Responsible Behavior (assured that patient care assumes the highest priority in the clinical setting).	Commendation letter sent.
28	Resident	Accolade Report	Closed	Clinical	(1) Responsible Behavior (assured that patient care assumes the highest priority in the clinical setting).	Commendation letter sent.
29	Resident	Accolade Report	Closed	Clinical	(1) Responsible Behavior (assured that patient care assumes the highest priority in the clinical setting).	Commendation letter sent.
30	Student	Accolade Report	Closed	Clinical	(1) Responsible Behavior (assured that patient care assumes the highest priority in the clinical setting).	Commendation letter sent.



IN	CIDENTS	Total number of incidents = 33								
20	16-17	Role: Faculty - 2	Role: Faculty - 22, UME Student - 3, Resident - 3, Administrative - 3, Health Professional - 2.							
		Setting: Clinical - 18, Non-Clinical - 15. Status: Closed - 32, Decision - 1.								
Pe	rson Role	Report Type	Status	Setting	Summary of Incident	Summary of Action Taken				
1	Faculty	Mistreatment Report	Closed	Clinical	Lack of: (1) Respect for others (assure that interactions are always respectful); (2) Responsible Behaviour (encourage demeanour appropriate to the professional healthcare setting, model professional behavior for learners); (3) Excellence (provide learners with opportunities to learn	Anonymous concern, no action taken, continued monitoring.				
2	Faculty	Mistreatment Report	Closed	Clinical	Lack of: (1) Respect for others (assure that interactions are always respectful); (2) Responsible Behavior (create environments conducive to learning, encourage language and demeanour appropriate to professional healthcare setting, model professional behavior for learners); (3) Excellence (provide learners with opportunities to learn without discrimination, abuse, harassment or humiliation).	Second anonymous concern (initial previous named concern). Site Lead met with Subject. Subject reflected and showed insight. Voluntarily stepped away from supervision of learners indefinitely.				
3	Resident	Mistreatment Report	Closed	Clinical	Lack of: (1) Responsible Behavior (create environments conducive to learning, teach the concepts of professional behavior and practice); (2) Excellence (ensure that the teaching clinical environments and experiences are appropriate for the needs of the learner).	Anonymous concern, no action taken, continued monitoring				
4	Faculty	Mistreatment Report	Closed	Non- Clinical	Lack of: (1) Respect for others (avoid discrimination); (2) Responsible Behavior (report professional misconduct); (3) Excellence (provide learners with opportunities to learn without discrimination).	Dept. Head met with Subject. Investigation into concerns with Associate Dean Graduate Studies. Switched supervisors. Concern closed.				
5	Faculty	Mistreatment Report	Closed	Clinical	Lack of: (1) Respect for others (assure that interactions are always respectful); (2) Responsible Behavior (model professional behavior for learners); (3) Excellence (provide learners with opportunities to learn without abuse, harassment or humiliation).	Divisional Head met with Subject. Investigation into concerns. Classified as a miscommunication and misunderstandings about policies. Communication to program director about education around policies.				



Pei	rson Role	Report Type	Status	Setting	Summary of Incident	Summary of Action Taken
6	Health Professional (nurse)	Mistreatment Report	Closed	Clinical	Lack of: (1) Respect for others (assure that interactions are always respectful); (2) Responsible Behavior (create environments conducive to learning, encourage language and demeanour appropriate to professional healthcare	Met with Reporter. Reporter wished for concern to be anonymous. Therefore, no action taken and continued monitoring.
7	Faculty	Mistreatment Report	Closed	Non- Clinical	Lack of: (1) Honesty (communicate truthfully with patients, learners and colleagues); (2) Respect for others (respect the personal boundaries of others); (3) Responsible Behavior (abstain from exploitation of relationships with others for personal purposes).	Third party submission. Dept. Head met with Subject. Awareness Intervention. Subject showed insight, took responsibility and resolved to change behavior going forward. Subject wrote apology to Reporter. Reporter satisfied with outcome.
8	Student	Mistreatment Report	Closed	Clinical	Lack of: (1) Respect for others (assure that interactions are always respectful); (2) Responsible Behavior (assure that patient care assumes the highest priority in clinical setting, model professional behavior); (3) Excellence (commit to lifelong learning).	Anonymous concern; no action taken. Continued monitoring.
9	Faculty	Mistreatment Report	Closed	Clinical	Lack of: (1) Respect for others (assure that interactions are always respectful); (2) Responsible Behavior (create environments that are conducive to learning and work, model professional behavior for learners); (3) Excellence (provide timely, constructive, and actionable evaluations of learners).	Third party submission, second concern of pattern of behaviour with multiple concerns. Action plan completed previously. FoMD Investigation. Action plan - withdrawal from learners for 3 months with mentoring and assessments, re-integration with learners with continued monitoring and assessments. Reporter satisfied with outcome.
10	Faculty	Mistreatment Report	Closed	Clinical	Lack of: (1) Respect for others (assure that interactions are always respectful); (2) Excellence (encourage language, demeanor appropriate for the healthcare setting); (3) Excellence (provide learners with opportunities to learn without abuse, harassment or humiliation).	Dept. Head met with Subject. Subject demonstrated reflection and remorse; apology forwarded. Reporter satisfied with outcome.
11	Faculty	Mistreatment Report	Closed	Clinical	Lack of: (1) Excellence (provide learners with opportunities to learn without abuse, harassment, or humiliation).	Met with Reporter. Event occurred remotely (> 1 year). As per University guidelines, unless egregious, concern must be submitted within 6 months of event. Reporter notified. Concern closed.

Pe	rson Role	Report Type	Status	Setting	Summary of Incident	Summary of Action Taken
12	Health Professional	Mistreatment Report	Closed	Non- Clinical	Lack of: (1) Respect for others (assure that interactions are always respectful); (2) Responsible Behavior (encourage language, demeanor appropriate to professional healthcare	Anonymous concern; no action taken. Continued monitoring.
13	Faculty	Mistreatment Report	Closed	Clinical	Lack of: (1) Respect for others (assure that interactions with others are always respectful); (2) Responsible Behavior (encourage language and demeanor appropriate to the professional healthcare setting); (3) Excellence (do not treat others with abuse, harassment or humiliation).	Met with Reporter. Reporter decided to meet with Subject. Concern closed at Reporter' request.
14	Faculty	Mistreatment Report	Decision	Non- Clinical	Lack of: (1) Respect for others (respect personal boundaries of others); (2) Responsible Behavior (abstain from the exploitation of relationships with patients, colleagues, learners, staff for personal purposes, refrain from sexual or romantic relations with those being evaluated or supervised); UAlberta Sexual Violence Policy.	3rd party submission. Dept Head met with Subject. Reported to Faculty Relations & CPSA. Interim measures initiated regarding safety of work/learning environment. University investigation ongoing.
15	Faculty	Professionalism Incident Report	Closed	Non- Clinical	Lack of: (1) Respect for others (respect the personal boundaries of others, avoid discrimination); (2) Excellence (provide objective, timely, constructive and actionable evaluations of learners).	Site Lead met with Subject. Clarified circumstances of group evaluations and communications. Investigated by Chair/Site Lead. Concern closed. Reporter not satisfied with outcome.
16	Student	Professionalism Incident Report	Closed	Non- Clinical	Lack of: (1) Responsible Behavior (create environments conducive to learning, encourage language, appearance and demeanor appropriate to the professional healthcare setting).	Unable to contact Reporter. Concern closed after multiple attempts.
17	Faculty	Professionalism Incident Report	Closed	Clinical	Lack of: (1) Excellence (provide learners with opportunities to learn without abuse, harassment, or humiliation); (2) Responsible Behavior (model professional behavior for learners)	Reporter wished to submit concern as anonymous. Therefore, no action taken; continued monitoring.
18	Faculty	Professionalism Incident Report	Closed	Clinical	No specifics given as to concerning behavior.	Anonymous concern; no action taken. Continued monitoring.

Per	son Role	Report Type	Status	Setting	Summary of Incident	Summary of Action Taken
19	Student	Professionalism Incident Report	Closed	Clinical	(1) Respect for others (assure that interactions are always respectful); (2) Responsible Behavior (create environments that are conducive to learning and the performance of professional academic work, model professional behavior for learners).	Communication with Associate Dean. Involvement of a group of learners. Associate Dean sent out a general message to all students around the importance of professional language in the workplace. Reporter satisfied with outcome.
20	Adminisrat- ive	Professionalism Incident Report	Closed	Clinical	Lack of: (1) Honesty (communicate truthfully); (2) Confidentiality (respect privacy of patients, research participants, learners and colleagues).	FoMD investigated concern. Clarification of administrative processes to avoid future issues. Reporter satisfied with outcome.
21	Faculty Member	Professionalism Incident Report	Closed	Non- Clinical	Lack of: (1) Responsible Behavior (create environments conducive to learning and performance of academic work); (2) Excellence (provide learners with opportunities to learn without discrimination, abuse, harassment or humiliation, clearly outline appropriate levels of responsibility for learners and trainees).	Dept. Head met with Subject. Subject demonstrated insight and reflected upon how to do better moving forward. Reporter satisfied with outcome.
22	Faculty Member	Professionalism Incident Report	Closed	Clinical	Lack of: (1) Respect for others (assure that interactions with others are always respectful); (2) Responsible Behavior (assure that patient care assumes the highest priority in the clinical setting, model professional behavior for learners).	Met with Reporter. Reporter wished for concern to be anonymous. Therefore, no action taken and continued monitoring.
23	Faculty Member	Professionalism Incident Report	Closed	Non- Clinical	Lack of: (1) Respect for others (assure that interactions are always respectful); (2) Responsible Behavior (model professional behavior for others).	Anonymous concern; no action taken. Continued monitoring.
24	Resident	Professionalism Incident Report	Closed	Non- Clinical	Lack of: (1) Responsible Behavior (be accountable for personal actions and decisions in the workplace).	Investigation by Program Director with Reporter and Subject. Continued monitoring. Reporter satisfied with outcome.
25	Adminisrat- ive	Professionalism Incident Report	Closed	Non- Clinical	Lack of (1) Responsible Behavior (create environments that are conducive to learning and performance of academic work).	Met with Reporter. Appeared to be misunderstanding. Connected with FoMD Administration directly. Concern resolved. Reporter satisfied with outcome.

26	Resident	Professionalism Incident Report	Closed	Clinical	Lack of: (1) Respect for others (assure that interactions are always respectful, respect the personal boundaries of others); (2) Excellence (provide learners with opportunities to learn without abuse, harassment or humiliation).	Met with Reporter. Reporter wished for concern to be anonymous. Therefore, no action taken and continued monitoring.
27	Faculty Member	Professionalism Incident Report	Closed	Clinical	Lack of: (1) Responsible Behavior (encourage language and demeanor appropriate to the professional healthcare setting).	Anonymous concern; no action taken. Continued monitoring.
28	Faculty Member	Professionalism Incident Report	Closed	Clinical	Lack of: (1) Responsible Behavior (create environments conducive to learning and performance of academic work).	Several attempts to contact Reporter with no response. Concern closed.
29	Faculty Member	Professionalism Incident Report	Closed	Non- Clinical	Lack of: (1) Respect for others (assure that interactions with others are always respectful); (2) Responsible Behavior (encourage language and demeanor appropriate to the professional healthcare setting); (3) Excellence (do not treat others with abuse, harassment or humiliation).	Spoke to Reporter. Dept. Head met with Subject. Subject agreed to mediation with Reporter. Reporter wished to close concern.
30	Faculty Member	Professionalism Incident Report	Closed	Non- Clinical	Lack of: (1) Respect for others (assure that interactions with others are always respectful).	Two anonymous concerns also submitted about same event. Dept. Head met with Subject. Subject demonstrated reflection and insight. Agreed to change going forward. Reporter satisfied with outcome.
31	Faculty Member	Professionalism Incident Report	Closed	Non- Clinical	Lack of: (1) Respect for others (assure that interactions with others are always respectful).	Anonymous concern - submitted with named concern to Dept. Head who met with Subject as above.
32	Faculty Member	Professionalism Incident Report	Closed	Non- Clinical	Lack of: (1) Respect for others (assure that interactions with others are always respectful).	Anonymous concern - submitted with named concern to Dept. Head who met with Subject as above.
33	Adminisrat- ive	Professionalism Incident Report	Closed	Non- Clinical	Lack of: (1) Responsible Behavior (display ethical interactions with appropriate acknowledgement and management of potential conflict of interest situations).	Administration met with Subject. Demonstration of remorse, and incident resolved.