

# Department of Psychiatry and Behavioural Neurosciences: Guidelines on Professionalism

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## 1. PREAMBLE

McMaster University's Department of Psychiatry and Behavioural Neurosciences (DPBN) is committed to providing a learning and working environment that respects the health, well-being and safety of all of its members. Critical to maintaining health and safety at work are the principles of professionalism; that is, an essential set of policies, practices, attitudes and behaviours that guide the day-to-day interactions of all Department members. The domains of professionalism for Department members can be found in Section 3 of this Policy and have been adopted from McMaster University's School of Medicine Professionalism in Practice Policy.<sup>1</sup> The required attitudes and behaviours for each of the professionalism domains are noted in Appendix 1. It is important to note that while the Department expects that all of its members adhere in spirit and in principle to the present Guidelines on Professionalism, it reminds its members that they are also subject to those behavioural and practice requirements of their respective and applicable regulatory and accreditation bodies. The "tenets" outlined in these Guidelines do not replace nor limit the legal or ethical standards established by the professional and regulatory bodies, or by any other applicable University standard, policy or procedure. These may include, but are not limited to, the expectations provided by McMaster University's Code of Conduct, the Post-Graduate Medical Education Program Policy on Professionalism, the Royal College of Physicians and Surgeons of Canada, the College of Physicians and Surgeons of Ontario, the College of Nurses of Ontario, the College of Psychologists of Ontario, the Ontario College of Social Workers and Social Service Workers, as well as the policies of institutions such as Hamilton Health Sciences and St. Joseph's Healthcare Hamilton, among others.

The Faculty of Health Sciences is currently developing Professionalism Guidelines at the request of the Dean and there is an Advisor of Professionalism who is available to assist Faculty members. The purpose of these Department Guidelines is to promote professionalism and address problems at the level of the Department.

## 2. SCOPE AND APPLICATION

The DPBN Policy on Professionalism applies to all members of the Department; including employees, employee designates, learners and residents. This also includes, but is not limited to, learners undertaking study in any one of the undergraduate, graduate, postgraduate or residency programs supported by the Department. This policy also applies to full- and part-time faculty members, fellows and scholars appointed to the DPBN, and full-time, part-time and contract research, teaching, administrative and support staff as well as volunteers. All of the aforementioned Department roles will hereinafter be referred to as “Department members”.

With respect to application, these guidelines apply to all practices and behaviours that are connected to any DPBN activity, including off-site meetings, trainings and business trips.

## 3. DOMAINS OF PROFESSIONALISM<sup>1</sup>

### Domain 1: Professional Responsibility, Integrity and Accountability

Professional responsibility, integrity and accountability will be demonstrated by Department members who:

- fulfill their responsibilities reliably and promptly;
- engage in ethical practice and work including education, research and administrative activities (hereafter referred to as professional activities);
- represent information accurately and accept responsibility for their actions;
- recognize the limits of their own skill sets and/or training; and
- respect confidentiality within and outside of the work environment.

### Domain 2: Respectful Professional Relationships and Communication

Respectful professional relationships and communication will be demonstrated by Department members who:

- use respectful language;
- recognize appropriate professional boundaries;
- are sensitive to the values, attitudes and assumptions of other cultures and how these may affect professional activities;
- remain open to exploring the personal impact of self on others within the work environment;
- listen attentively to the concerns of others and demonstrate empathy, compassion, understanding; and
- demonstrate a drive to engage in, and maintain, healthy working relationships.

### Domain 3: Self-Improvement and Pursuit of Excellence

Self-improvement and the pursuit of excellence will be demonstrated by Department members who:

- recognize and acknowledge one’s own limitations or difficulties;
- respond reasonably and responsibly to feedback;
- are motivated for self-improvement;
- seek the means to correct limitations or weaknesses in professional conduct; and
- adapt to changing circumstances.

#### 4. BREACH IN PROFESSIONALISM

A breach in workplace professionalism can take many forms; it can occur through face-to-face contact, via e-mail, over the telephone and through social media, among others. Irrespective of its form, a breach in professionalism can have detrimental effects on people and their job performance. A breach has the potential to create an unsafe and unhealthy working environment, result in loss of trained and talented workers and cause a breakdown of team and individual relationships and reduce efficiency. The Department is committed to ensuring a safe and healthy workplace that is characterized by a high level of professionalism amongst all of its members. Detailed below are descriptions of various types of breaches of professionalism. While this is not an exhaustive list, it does outline some of the more common types of behaviours that can be considered a breach in professionalism.

##### I. Types of Breach

- A.) **Disrespectful and/or Unethical Behaviour:** The Department believes in the worth and dignity of all persons, respects individual unique differences and firmly believes in maintaining the confidentiality of all personal health information, medical records and student/learner records. Behaviour that breaches confidentiality or behaviour that is perceived to be dishonest, insincere, deceitful, disrespectful or unethical can create feelings of shame, embarrassment and of being stigmatized, among others. Each of the aforementioned behaviours would be considered engagement in disrespectful behaviour and constitute a breach in professionalism. It is important to note that where applicable, Department members are also held to their own regulatory codes of ethics which must also be followed in conjunction with expectations of professionalism contained herein (for example, hospital regulations).
- B.) **Harassment:** Ontario's Occupational Health and Safety Act<sup>2</sup> identifies the roles and responsibilities for employers to prevent and address workplace health and safety, including workplace harassment. A person is subjected to 'workplace harassment' if the person undergoes behaviour by a person, including by the person's employer or a co-worker or a group of co-workers of the person, that 1) is unwelcome and unsolicited; and 2) a reasonable person would consider to be offensive, humiliating, intimidating or threatening. Harassment includes words, gestures and actions which tend to annoy, harm, abuse, torment, pester, persecute, bother and embarrass another person, as well as subject someone to vexatious attacks, questions, demands and other unpleasantness. Notably, the chronic imposition of excessive work demands, demands outside of working hours, or during times where one would reasonably assume that work demands are not appropriate (e.g. during vacation time, sick days, during workplace or statutory holidays), can amount to harassment if a reasonable person in the manager/supervisor position should have foreseen that their actions would result in distress or mental harm. In addition, malicious, frivolous or vexatious complaints including complaints that are deliberately harmful, spiteful, trivial or unworthy of serious attention or resources may be treated as harassment in themselves.
- C.) **Impairment and Disorderly Conduct:** Impairment refers to a weakened or diminished physiological or psychological state of an individual that may or may not result from a lack of sleep, the consumption of drugs or alcohol or an acute or chronic medical or psychological condition. This impairment precludes the individual from performing his

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or her work as required in their position in a competent, careful and productive manner that is in compliance with the acceptable standards of the individual's profession, role or job description. On the contrary, disorderly conduct consists of behaviour that causes ridicule, contempt or humiliation of an individual or a group of people and any behaviour that may be interpreted as overly loud, abusive, threatening, intimidating or profane. Individuals who are believed to be impaired or engaging in disorderly conduct would be considered in breach of the Department's Professionalism Guidelines.

### II. Levels of Breach in Professionalism

- A.) **Minor Breach:** a minor breach can be considered any one behaviour or incident within any of the three domains of the Guidelines on Professionalism for which feedback/remediation can almost immediately be applied due to its low level of severity. Depending on the frequency, minor breaches could collectively be considered as a major breach.
- B.) **Major Breach:** a major breach can be considered to have occurred when an individual engages in a series of incidents of behaviour within any of the three domains of the Guidelines on Professionalism and where feedback/remediation has been provided for earlier incidents OR a major breach can be considered a single event of behaviour within any of the three domains of the Guidelines on Professionalism and which is considered by the individual's supervisor/manager as major in severity.

## 5. REPORTING OF BREACHES IN PROFESSIONAL BEHAVIOUR

All Department members are responsible for reporting breaches in professionalism. It is important to note that breaches may occur within or outside Department-affiliated locations and standard work hours (as indicated in Section 2: Scope) and that breaches may occur in clinical or non-clinical settings. Feedback should be given as close in time to the occurrence as the situation allows, following commonly accepted principles of providing feedback.

When there is a breach of professional behaviour, the individual(s) who observed or experienced this breach of behaviour should feel safe to initiate the resolution process so that the behaviour can be addressed in a direct and respectful manner. Options for how an individual may initiate a resolution process are provided below. Departmental members should note that the resolution process can be initiated by those who are subjected to a breach in professionalism, but also those who witness such incidents. The need to initiate a resolution process is particularly relevant to those in positions of relative power or influence who may be less disadvantaged in reporting breaches in professionalism or who may be more comfortable with bringing this information forward. Inaction in these circumstances may be grounds for a professional breach on the witness' part.

Information about breaches should be documented, both by those experiencing the breach as well as by any witnesses. A summary of any discussion about breaches as well as the plan for resolution with subsequent follow-up should also be documented.

## 6. BREACH RESOLUTION PROCESS

There are **five stages to the breach resolution process**. The individual(s) who observed or experienced the breach *may begin the process at Stage 1, 2 or 3* – depending on the circumstances of the individual, his/her comfort level and the relationship between the individual and the Department member who is believed to have breached the Guidelines on Professionalism.

### Stage 1: Direct Communication

When a Department member has experienced or observed a breach in professionalism, she/he is encouraged to speak directly, respectfully and privately—if it is perceived as comfortable and safe to do so—to the person or people in breach of professionalism.

### Stage 2: Seek Assistance

If the individual who has witnessed or experienced the breach does not feel comfortable to speak to the breaching Department member, OR if the individual feels that the breaching Department member's response to the discussion was inappropriate, the assistance of a third party may be sought. Speaking privately and in a confidential manner with another colleague whom the individual trusts may help to facilitate the use of additional problem solving strategies to speak with the breaching Department member and help her/him to come to a realization and understanding of the problematic behaviour.

### Stage 3: Seek Support from a Supervisor, Manager, Chief of Professional Practice, Practice Lead or Department Chair

If the individual who has experienced the breach, either directly or through observation, is of the opinion that additional action or support is still needed following Stage 1 OR 2 OR if the individual feels that the approach at Stage 1 or 2 is not appropriate for initiating the resolution process given the nature of the breach or the relationship between themselves and the breaching Department member, then the individual who has experienced or witnessed the breach should approach the Supervisor/Manager/Chief of Professional Practice/Practice Leader/Assistant Dean/Department Chair (hereafter referred to as 'Supervisor') to assist in the development of a resolution of the issue. Consideration should also be given to providing the individual who has experienced the breach the opportunity to have an individual present who can function in a supportive role, providing there is no conflict of interest; confidentiality must also be assured. If the person who has committed the breach of professionalism is the individual's supervisor, assistance should be sought from the individual to whom the supervisor reports.

### Stage 4: Supervisor Response

The supervisor should initiate appropriate action within one week of being notified of the breach of professionalism. The supervisor – where possible – should meet with both parties independently of one another and any witnesses to gather additional information that is relevant to the resolution process. The purpose of the conversation with the parties involved should be to clarify what happened; more specifically:

- a. The supervisor asks each individual to provide an account of what was observed or heard and documents these observations (see Appendix 2).

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- b. The supervisor asks each individual to provide information about possible precipitating factors that may have led to the behaviour that may have contributed to the breach of professionalism. The supervisor documents this information.
- c. The supervisor asks each individual to suggest strategies for resolving the breach in professional behaviour and preventing any further breaches. The supervisor documents this information.
- d. The supervisor will determine the appropriate course of action and strategies to be communicated including the expectations of the individuals involved. The supervisor will document their recommended course of action. Note, the development of a course of action and a recommended approach for communicating the course of action for the involved Department members can be found at <https://www.workplacestrategiesformentalhealth.com/job-specific-strategies/Resolving-Conflict>.
- e. The supervisor is responsible to communicate the recommended course of action, including the process of re-evaluation, to all parties involved in the resolution process. The plan for action and response to the action should be documented by the supervisor.
- f. All documentation related to the breach and the breach resolution process shall be retained by the appropriate supervisor. In the case of minor breaches, this information may not necessarily be forwarded to the Chair of the DPBN, but it is expected that information about any major breach would be forwarded to the Chair.

### Stage 5: Progressive Discipline

Before taking any steps towards progressive discipline, it is the responsibility of the supervisor to consult with Human Resources and/or the Chair/Associate Chair of the Department regarding the fulfillment of procedures and processes for progressive discipline. Progressive discipline, according to the Government of Canada, constitutes a strategy to promote professional behaviour using proactive steps that address unprofessional behaviour by applying appropriate and proportional responses and consequences to unprofessional behaviour.<sup>3</sup> Notably, progressive discipline processes shall be in accordance with all of McMaster University's relevant policies developed by the University Secretariat (see <http://www.mcmaster.ca/policy/>) and those policies developed, implemented and monitored by McMaster University's affiliates, such as Hamilton Health Sciences (see <http://www.hamiltonhealthsciences.ca/body.cfm?ID=1108>) and St. Joseph's Healthcare Hamilton (see <http://www.stjoes.ca/about/leadership/our-board/policies>).

## **7. RIGHT OF APPEAL**

Department members who have undergone an investigation related to a breach in professionalism – whether they are the breaching member or a member who witnessed or endured a breach of professionalism – are eligible to appeal discipline decisions. In addition, all parties are eligible to appeal the recommended course of action to address the breach (i.e. those identified in Stage 4). Appeals shall be directed to and handled by the Chair's office; or if the Chair is under investigation for a breach in professionalism, the appeal shall be handled by the Dean of the Faculty of Health Sciences.

**APPENDIX 1: DOMAINS OF PROFESSIONAL PRACTICE\***

DOMAIN 1: Professional Responsibility, Integrity, and Accountability

<b>Subdomains</b>	<b>Inconsistent with Professional Practice</b>	<b>Consistent with Professional Practice</b>	<b>Exemplary Professional Practice</b>
<b>Task completion</b>	Failure to complete required tasks including administrative tasks	Completes required tasks including administrative tasks	Demonstrates leadership for system improvement, anticipates needs and is proactive in ensuring task completion in a timely manner
<b>Honesty</b>	Dishonest or falsifies information	Truthful and honest	Discloses proactively and effectively to improve patient care and educational environment
<b>Responsibility</b>	Fails to accept responsibility/ blames others	Acknowledges and demonstrates ability to take appropriate responsibility	Accurately discerns complex challenges with appropriate engagement of resources
<b>Confidentiality</b>	Fails to respect/neglects confidentiality	Respects confidentiality	Identifies potential risks to confidentiality
<b>Respect of learning environment</b>	Abuses or damages physical learning environment and shared resources	Respects physical learning environment and shared resources	Contributes or improves the physical learning environment
<b>Balance of interest: self and other</b>	Chooses personal interest to the detriment of others	Can balance personal interests with the needs of others	Is a role model for balancing the needs of self and others

\*Adapted from Postgraduate Medical Education: Promoting Professionalism Policy and Procedures January 2014<sup>1</sup>

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### DOMAIN 2: Respectful Professional Relationships and Communication

Subdomains	Inconsistent with Professional Practice	Consistent with Professional Practice	Exemplary Professional Practice
<b>Respect</b>	Disrespectful towards others	Respectful towards others	Exceptional insight and actions that enhance a culture of respect
<b>Different points of view</b>	Lack of awareness of or devaluing different points of view	Aware of and acts with acceptance of different points of view	Develops a shared understanding of different points of view
<b>Impacts on others</b>	Demonstrates a lack of awareness and disinterest in understanding impact of self on others	Demonstrates awareness and willingness to reflect, receive feedback and learn about the impact of self on others	Actively seeks opportunities for enhanced self-awareness to improve practice effectiveness
<b>Needs and feelings of others</b>	Does not engage with needs, feelings of others	Willing to engage with the needs, and feelings of others	Acknowledged by others as committed to excellence in addressing the needs and feelings of others
<b>Effect of stress</b>	Lacks insight into how stress impacts one's interactions with others	Appreciates how one's stress impacts interaction with others	Demonstrates management of own stress and facilitates positive communication during stressful situations
<b>Personal appearance</b>	Appearance is not appropriate for context and lacks insight into how appearance affects relationship with patients and colleagues	Maintains an appearance consistent with a professional role in a setting that inspires trust	Actively builds trust through interpretation of the clinical context and subjective selection of attire

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### DOMAIN 3: Self-Improvement and Pursuit of Excellence

Subdomains	Inconsistent with Professional Practice	Consistent with Professional Practice	Exemplary Professional Practice
<b>Feedback</b>	Resistant or defensive in receiving feedback	Willing to learn from and explore feedback	Actively seeks and integrates feedback
<b>Personal limits and reflective practice</b>	Unaware of or difficulty acknowledging limits of knowledge, skills and attitudes	Aware and able to acknowledge limits of knowledge, skills and attitudes	Continually tests assumptions and conclusions around one's own practice
<b>Personal development</b>	Neglects significant elements in all domains of education and development	Demonstrates commitment to continued growth in all domains of education and development	Recognized as role model in all domains of education
<b>Personal impairment</b>	Impaired. Failing to recognize or take action regarding a personal impairment (i.e. physical, cognitive, emotional)*	No evidence of impairment. Recognizing or taking action in the face of potential impairment	Intervenes to address situational or environmental factors which could lead to impairment in self or others
<b>Initiative and motivation</b>	Does not demonstrate initiative and motivation	Achieves an appropriate level of initiative and motivation for the required task	A role model for balancing responsibilities and achievements; inspires initiative and motivation in others

\*This may include failing to adhere to legislation regarding mandated reporting of impairment

**APPENDIX 2: APPENDIX B DOCUMENTATION BY SUPERVISOR**

The following elements are encouraged for inclusion in the documentation completed by Supervisors when reviewing possible breaches of Professionalism.

- ii. Breaching Departmental Member Information (name, position, dates, etc.)
- iii. Witness Information (name, position, dates, etc.).
- iv. Details of Incident (from Breaching Departmental Member and Witness).
- v. Details of Discussion/Review of Incident
- vi. Responses to the Review
- vii. Plan
- viii. Progress over time

## REFERENCES

1. McMaster University. (January 2014). Postgraduate Medical Education: Promoting Professionalism Policy and Procedures. Accessed from:  
<http://fhs.mcmaster.ca/postgrad/documents/PROFESSIONALISMPOLICYFINAL11272014.pdf>
2. Ontario Ministry of Labour. (2015). *Occupational Health and Safety Act* (R.S.O. 1990, 2015, C.27 Sched. 4, s. 2-7, 11). Accessed from:  
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3. Government of Canada. (2013). *Progressive Discipline*. Human Resources and Skill Development Canada: Ottawa, ONT. Accessed from:  
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