Dean's Task Force on Respectful Environments Recommendations Report

Recommending ways for the Faculty of Medicine to actively create and maintain respectful learning and working environments for learners, staff, and faculty

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Accepted and endorsed by:

- Dean of the UBC Faculty of Medicine, Dr. Dermot Kelleher, at the Dean's Executive Advisory Council meeting on February 12, 2020.
- UBC Faculty of Medicine's Faculty Executive Committee at its meeting on March 17, 2020, following review and discussion at the Faculty of Medicine's Department Heads and School Directors Committee meeting on March 11, 2020.

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Executive Summary

The Faculty of Medicine's (FoM) strategic plan, *Building the Future*, affirms that learners, staff, and faculty are the platform for success as an organization. In order to achieve the vision to transform health for everyone, the FoM must create and sustain respectful environments that enable the people of the organization to fulfil their potential.

Respectful working and learning environments are those in which people feel duly valued and considered in their interactions with other community members and with the organization as a whole, and when they do not, they feel they can express their experience and it will be addressed appropriately.

Our role as the Dean's Task Force on Respectful Environments was to recommend specific ways to improve respectfulness in FoM working and learning environments to the Dean and Faculty Executive Committee. FoM working and learning environments include administrative offices, classrooms and other teaching spaces, research laboratories, and clinical settings.

While the majority of interactions in FoM working and learning environments are respectful, there is room for improvement. We are aware of varying degrees of unacceptable and disrespectful behaviour in some FoM environments and the FoM is no longer willing to tolerate it. We appreciate the ongoing work of those responsible for receiving and responding to reports of such behaviour, including the FoM Office of Professionalism, offices of student affairs, health and safety, program leadership, and wellness officers; our purpose was not to duplicate their work. Our focus was on identifying organization-level opportunities for prevention to increase overall respectfulness, not to assess the environment or catalogue complaints.

Following a planning and launch phase, we gathered information about potential strategies to improve respectfulness from FoM community members, other medical schools, partner organizations, and published literature. We analyzed findings, organized them into major themes, and developed targeted recommendations that have a high probability of positive impact in our context.

We as Task Force members submit this report, and in particular the recommendations in Section 3, as our deliverable.

For accepted recommendations, FoM leadership will need to assign responsibility for each to an appropriate lead and organizational unit, identify progress metrics, and allocate the human and financial resources necessary to act.



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1 Context

1.1 Strategy

The UBC Faculty of Medicine's (FoM) strategic plan, *Building the Future*, articulates the organization's contract with society. In it, the FoM commits to considering its learners, staff, and faculty as the platform for success:

People are at the heart of our organization, and we need to prioritize the creation of an environment that enables both learners and colleagues through our entire enterprise to fulfill their potential.¹

Respect is a foundational characteristic of such an environment, and individuals achieving their potential creates the collective capacity necessary for the FoM to fulfil its vision to *transform health for everyone*.

1.2 Definition

Respect is, "due regard for the feelings, wishes, rights, or traditions of others." The UBC Statement on Respectful Environment describes a respectful environment as, "a climate in which the human dignity of each individual is valued, and the diverse perspectives, ideas and experiences of all members of the community are able to flourish."

We also understand respect to be subjective. Therefore, a respectful environment is one in which individuals *feel* respected, and when they do not, they feel they can express their experience and it will be addressed appropriately. Individuals feel respected when they perceive that those with whom they interact duly consider and value them, including their feelings, wishes, rights, or traditions. The source of this perceived consideration extends beyond individuals to include the organization, as expressed by its policies, practices, hierarchies, and structures.

A lack of respect can be demonstrated in many ways, ranging from lower intensity or ambiguous incivility to more severe bullying, harassment, and sexual violence.

1.3 Current State

We acknowledge and appreciate that most interactions are respectful in FoM learning and working environments, including administrative offices, classrooms and other teaching spaces, research laboratories, and clinical settings. However, we also acknowledge that not all interactions are respectful and there is room to improve the ways in which we create and maintain respectful environments.

In health care and health education, there has been some long-standing existence of inappropriate behaviour, including hierarchical humiliation, bullying, or more ambiguous



incivility. For example, there have been reports of educators humiliating learners in front of their peers, faculty undervaluing or ignoring staff input, and research supervisors abusing their power over graduate students or junior faculty. Some of this behaviour reflects discriminatory attitudes and so falls more heavily on some members of our community. Further, this behaviour is more likely to occur where unchecked power imbalances exist.

While this is not new and appears to have improved in recent decades, we – and the FoM more broadly – are no longer willing to accept an environment in which people are disrespected. While some formal power structures are inevitable in working and learning environments (educator-learner; supervisor-employee), abuse of that power is not.

We currently have a variety of survey data about learner, staff, and faculty perceptions of our environments. Some of these data sources are listed in the table below. In addition, we have aggregated information regarding the types of concerns raised to the Office of Professionalism.

Audience and Environment	Data Source
Staff working environment	UBC Workplace Engagement Survey
Academic faculty working environment	UBC Workplace Engagement Survey
Clinical faculty working environment	Doctors of BC Clinical Faculty Survey
Health Professions learning environment	Program-specific learner exit surveys
MD student learning environment	UGME Exit Survey; Health Education Learning
	Environment Survey of MD Students
PGME resident learning environment	Resident Doctors of Canada Survey
Graduate student learning environment	Health Education Learning Environment
	Survey of Graduate Students

Please see Appendix A for a selection of relevant survey results.

1.4 Task Force

Our purpose as the Dean's Task Force on Respectful Environments (Task Force), as defined by the terms of reference, was to recommend to the Dean and to the Faculty Executive Committee specific activities and initiatives that the FoM can undertake to actively create and maintain respectful learning and working environments for students, trainees, staff, and faculty⁴. This report, and in particular the recommendations in it, is our deliverable.

The Task Force was chaired by Deborah Money, Executive Vice-Dean. It included ex officio members from Professionalism, Faculty Affairs, Communications, Education, and Indigenous Student Initiatives; appointed members from all learner groups, clinical faculty, faculty, staff, Regional Associate Deans, Department Heads and School Directors; and one Provost's Appointee. The FoM Special Projects Management Team managed and supported our work and conducted data gathering and analysis. Please see Appendix B for a list of members.



2 Approach

We completed our Task Force work in three phases:



2.1 Plan and Launch Task Force

The initial phase involved developing the terms of reference, appointing members, gathering existing survey data about learning and working environments, and developing a work plan.

2.2 Gather and Study Information

The second phase involved collecting information from internal, external, and literature sources; organizing findings into major and minor themes; and analyzing findings to identify potential recommendations.

In gathering information, we focused on identifying potential activities and initiatives that were found to be effective (or ineffective) in order to inform our recommendations. There are roles and units in the FoM that have the responsibility to respond to inappropriate conduct; therefore, we deliberately did not focus information gathering on perceptions of the environments or reports of inappropriate conduct.

2.2.1 Internal

Through broad emails and a web portal, we invited all members of the FoM community to share their perspective on creating and sustaining respectful environments. Specifically, we asked for:

- Ideas about how the FoM could improve respectfulness in working and learning environments;
- Lessons learned from experiences with initiatives here or elsewhere that have been successful (or unsuccessful) in creating/sustaining respectful working and learning environments;
- Information from other institutions/organizations that are leaders in this area, and from the literature; and/or
- Any other input into our work.

We received over 150 detailed submissions from FoM learners, staff, and faculty across departments, programs, and locations. This information formed the basis of our findings, and information from external and literature sources aligned with and reinforced the input from internal FoM community members.



2.2.2 External

We interviewed senior representatives from seven Faculties of Medicine in Canada and one in the US. After a brief introduction to our purpose, we invited open-ended input on lessons learned from initiatives or programs that they have found to be successful (or unsuccessful) at creating and sustaining respectful working and learning environments.

In addition, we consulted senior Doctors of BC representatives, and we discussed the initiative and opportunities for collaboration with the Health Authorities at Joint Advisory Council meetings and through one-on-one discussions with some Health Authority and hospital leaders.

2.2.3 Literature

We conducted a high-level literature review focused on identifying strategies that have been shown to improve (or not improve) working and learning environments within higher education and/or health care organizations. See Appendix C for a list of literature that influenced our findings.

2.2.4 Data Analysis

We compiled findings from all sources, grouped them by themes, and analyzed findings to identify potential recommendations. During data analysis, we reached a saturation point after which findings continued to reinforce previous findings.

Due to the volume of findings, we have not attached them in an appendix, but can provide them upon request.

2.3 Develop and Deliver Recommendations

To develop recommendations, we systematically reviewed findings in each theme to select recommendations that were found to be helpful elsewhere and/or that we thought would be applicable to the UBC FoM. Due to the high number of potential recommendations, our challenge in this phase was to select those that were most likely to have tangible positive impacts in our context.

We compiled the recommendations in this report for delivery to the Dean and to the Faculty Executive Committee for review and acceptance.



3 Recommendations

3.1 Organizing Framework

Through information gathering and analysis, major themes emerged from across information sources. We arranged them into the following framework. The top of the framework speaks to what we are aiming to achieve. The three themes in the middle are core themes of activities and initiatives. The two at the bottom are foundational themes. The two on the sides are crosscutting themes that relate to all aspects of the framework.



3.2 Overarching Purpose

The top of the framework speaks to the overarching purpose, which is to maximize **civility**, **professionalism**, **and respect (CPR)** in FoM working and learning environments. While there is substantial overlap in these three concepts, each has unique elements relevant to this work.

Initially, we referred to **respect** as the foundational concept, as described in the UBC Statement on Respectful Environments for Students, Faculty, and Staff⁵, and as we describe further in section 1.2.

In addition, the concept of **professionalism** generally refers to "the conduct, aims, or qualities that characterise or mark a profession or a professional person." This broad concept applies across many fields, and is also central to clinical disciplines – including family medicine, medical and surgical specialities, physical therapy, occupational therapy¹⁰, speech-language pathology and audiology¹¹, and midwifery¹² – and is described in the FoM Professional Standards for Learners and Faculty Members¹³.

Finally, the concept of **civility** is commonly used in the literature. Two example definitions are, "civility in the workplace involves expressing respect for others while honoring differences and treating one another with dignity and respect"¹⁴, and "those actions and behaviors that support the dignity of another"¹⁵. Its opposite, incivility, can rise to the level of bullying or harassment,



but also encompasses less overt dismissive or disparaging remarks or behaviour that can still have significant negative impacts in an environment.

3.3 Core Themes

3.3.1 Policies, Procedures, and Tools

The core of the framework includes three major themes, the first of which is policies, procedures, and tools. This refers to the body of formal policies that define expectations, requirements, and consequences; as well as procedures and tools that facilitate reporting, investigation, and response to inappropriate behaviour.

We reviewed current UBC and FoM policies and determined that they sufficiently cover the organization's needs. However, we found that it can be difficult for people to find, navigate, and interpret applicable policies. Furthermore, the FoM's current procedures and tools for dealing with concerns and formal or informal reports of inappropriate behaviour can be difficult to find and are sometimes inconsistently applied.

Therefore, we recommend that the FoM:

Recommendation 1: Simplify and improve online presence to ensure that pathways to policies, procedures, and tools are clear and easy to find for all FoM people (including connection to UBC resources).

Recommendation 2: Harmonize and clarify reporting mechanisms across all areas of the FoM, and clearly state reporting options and processes for receiving, reviewing, investigating, and responding to each type of report. As part of this, clarify the role of the Office of Professionalism for all FoM community members.

Recommendation 3: Build into the response process methods for uncovering potential underlying causes, and include efforts to address these in the response and/or consequences.

3.3.2 Expectations and Commitment

The second major theme in the core of the framework is expectations and commitment. This refers to the ways in which the organization expresses behavioural expectations and asks (or requires) the people of the organization to make a commitment to meeting behavioural expectations. This also refers to the ways in which behaviour is considered in hiring, performance reviews, promotion, and recognition.

We reviewed the current UBC Statement on Respectful Environment and determined that it meets the FoM's needs as an overarching statement, applicable to all FoM learners, faculty, and staff. Conversely, we reviewed the FoM Professional Standards document and found that it



duplicated some elements of the UBC Statement on Respectful Environment and some elements of discipline-specific professional standards documents, resulting in a long, difficult to digest, and overly-general document.

Furthermore, we found that there is an opportunity to improve our approach to communicating these statements and expectations, and that we can embed reference to them in more places. This will elevate behavioural expectations to the forefront of the organization and allow FoM community members to periodically review and confirm commitment to them.

The FoM also has an opportunity to improve the ways in which those individuals who make outsized contributions to improving respectfulness in our environments are celebrated.

Therefore, we recommend that the FoM:

Recommendation 4: Communicate the FoM's commitment to the UBC Statement on

Respectful Environment for Students, Faculty, and Staff¹⁶, and embed the statement and opportunities to commit to it in all appropriate places including, but not limited to, offer letters, onboarding and orientation material, annual review processes, faculty annual activity

report, and agreements between supervisors and graduate students.

Recommendation 5: Revise the Professional Standards for Learners and Faculty Members

in the FoM document¹⁷ to focus on defining what constitutes a breach of professional standards, and reference – but not duplicate – the UBC Statement on Respectful Environment and discipline-specific

professionalism standards.

Recommendation 6: Create online modules and/or infographics that clearly communicate

the expectations contained in the UBC Statement on Respectful Environments and the revised Professional Standards document, and require current and future faculty, staff, and learners to review and

commit to abiding by them.

Recommendation 7: Identify and implement ways of expressing recognition and

appreciation for the positive contributions that community members make towards improving working and learning environments in the FoM. This could include, for example, creating a FoM award to recognize those who make outstanding contributions that enhance the overall civility, professionalism, and respect within FoM

environments. The purpose of this would be to celebrate people who

have a broad impact – including and beyond their own behaviour –

that improves our environments for many people.

In addition to clarifying expectations and increasing opportunities to commit to meeting them, we identified opportunities to strengthen emphasis on respectful and professional behaviour



throughout the human resources lifecycle. Some of these changes are within the FoM's jurisdiction, while others will require collaboration with UBC and negotiation with the Faculty Association.

Therefore, we recommend that the FoM:

Recommendation 8: Include and emphasize respectful behaviour considerations in faculty

and staff hiring decisions and performance review processes, including merit and other university and non-university awards.

Recommendation 9: Advocate for UBC to include respectful behaviour considerations in

promotion processes for academic and clinical faculty, and tenure

criteria/processes for academic faculty.

3.3.3 Education and Training

The third major theme in the core of the framework is education and training, which refers to the ways in which the organization supports its people in developing an understanding of appropriate behaviour and how their actions can affect or be interpreted by others. It also refers to related content in program curricula and other professional development resources.

We have identified opportunities to support the people of the organization in building foundational skills in a few key areas. The focus of education and training recommendations is on building self-awareness and emotional intelligence, awareness of interpersonal dynamics, modelling desired behaviour, expressing appreciation to colleagues for their contributions, engaging in conversations about how people work together, and giving and receiving feedback.

With such a large organization, our initial focus is on academic and administrative leadership. These leaders, distributed throughout the organization, set the tone in their respective units. FoM community members expressed that they expect leaders to recognize when there are problems, model appropriate behaviour, and address problematic events and patterns. Community members also expressed that a lack of respect can come not just from incivility and bullying, but also from a lack of positive reinforcement and appreciation.

Therefore, we recommend that the FoM:

Recommendation 10: Develop and deliver education and training material for academic and administrative leaders on policies, procedures, and resources related to inappropriate behaviour, and on building leadership capacity to actively foster respectful environments.

In addition, all staff, faculty, and learners would benefit from concise, engaging education and training in a few key areas. The material should focus on supporting the feedback process, on helping people respond in the moment if they witness something that feels inappropriate, and on the clear lines delineating the most serious infractions.



Furthermore, due to the legacy of colonialism and persistent discrimination against Indigenous peoples, there is an ongoing need to build cultural safety competencies in all of our environments. We fully support the FoM's work to respond to the Truth and Reconciliation Commission Calls to Action, and UBC's work on its Indigenous strategic plan. We do not wish to duplicate these efforts, but do see particular importance of cultural safety in our environments.

Therefore, we recommend that the FoM:

Recommendation 11: Develop and deliver education and training material for all faculty, staff, and learners on giving and receiving feedback, identifying ways to respond when witnessing inappropriate behaviour, and clarifying what constitutes incivility and microaggressions, bullying, harassment, sexual harassment, and sexual violence.

Recommendation 12: Develop and deliver Indigenous cultural safety training for all FoM faculty, staff, and learners.

Finally, learners indicate that they are saturated with content in their programs and struggle to add additional online, self-driven material that may seem superfluous or less urgent. However, the reality is that health care professionals and researchers will encounter inappropriate behaviour during their careers, so it is important for them to be prepared to handle it in an appropriate and effective way.

The UBC Health Cultivating Resilience Workshop has been integrated into several FoM programs. It is an introductory workshop focused on nurturing resilience within the context of the health professional student experience in preparation for practice. It does not explicitly include strategies for responding to mistreatment.

Therefore, we recommend that the FoM:

Recommendation 13: Engage program committees and leadership to integrate resiliency training into program curricula, including training on how to respond to inappropriate behaviour from patients and colleagues.

3.4 Foundational Themes

3.4.1 Organizational and Individual Wellness

Two foundational themes underpin the framework, the first of which is organizational and individual wellness. Achieving and maintaining individual wellness is foundational to fostering respectful environments. Organizational wellness speaks to the overall alignment between organizational or discipline-specific work culture and individual needs, and whether that alignment supports individual wellness.



We recognize that wellbeing is an important foundational element, and that it is much broader than the scope of this Task Force work. The UBC Wellbeing initiative has a great deal of resources to support learners, staff, and faculty in improving wellness, although many of those resources are only offered at the Point Grey or Okanagan campuses and most require champions from the Faculty or unit to initiate.

A particular challenge for the FoM is the substantial stressors and schedule demands inherent in many health care and research professions, which can make it difficult to sustain wellness. A lack of mental health and wellness does not excuse inappropriate behaviour; however, efforts to support people in maintaining mental health and wellness despite stressors inherent in these professions could help prevent some instances of inappropriate behaviour.

Therefore, we recommend that the FoM:

Recommendation 14: Collaborate with the UBC Wellbeing initiative to support wellness and seek to offer appropriate programs across FoM locations.

Recommendation 15: Acknowledge, and support efforts to resolve, the dissonance that can exist between discipline-specific work culture/values and individual values/need for sustainability. For example, encourage faculty, staff, and learners to balance their own drive for excellence with personal needs, and review existing practices to begin to reorient the incentive and reward systems away from celebrating unhealthy work patterns.

Finally, some learner groups have access to more robust support systems than others, and some services are fragmented across programs or learner types. In addition, there is currently no formalized support system for FoM graduate students and clinical fellows.

Recommendation 16: Ensure learner wellness support services are in place for all programs and available to all types of learners, and that they are offered in a clear and coordinated way.

3.4.2 Equity, Diversity, and Inclusion

Achieving equity, diversity, and inclusion is foundational to creating and sustaining respectful environments. Unfortunately, some inappropriate behaviour is still rooted in bias, racism, sexism, or other forms of discrimination. Such behaviour is more likely to occur where formal roles give some people power over those who belong to groups that have historically been marginalized or treated as inferior. It is further enabled by environments that tolerate or seek to explain away such behaviour as interpersonal or individual rather than systemic, and which do not demonstrate meaningful consequences for such behaviour when it occurs.

Equity, diversity, and inclusion are priorities for the FoM and, as with wellness, are much broader than the scope of this Task Force work. Our purpose here is to avoid duplication of



other work in this area led by the Assistant Dean, Equity, Diversity, and Inclusion, and to focus on issues that are related to the other recommendations in this report.

As we build out the materials related to recommendations in other themes, it is vital that they reflect the diversity of our FoM community and that they be designed and delivered in an inclusive and respectful way.

Finally, we acknowledge that there is a wide range of experiences and perspectives within the FoM community, and it is important for leadership to remain open to hearing about these experiences and perspectives so that we can take appropriate action together.

Therefore, we recommend that the FoM:

- Recommendation 17: Demonstrate our commitment to equity, diversity, and inclusion so that people from all backgrounds see and experience the FoM as an inclusive and respectful place to learn and work. Support this by setting metrics regarding the degree to which the FoM leadership and community as a whole reflects the diversity of BC's population, and regarding the degree of inclusion experienced by FoM community members in particular those who identify with a group that has been underrepresented in our faculty, staff, and learner populations.
- Recommendation 18: Ensure that any respectful environment communication, education, and training material includes and is sensitive to a variety of perspectives and lived experiences of those who identify with a group that is underrepresented in our working and learning environments.
- Recommendation 19: Create opportunities for people to provide feedback and discuss supports that they would find helpful in order to create inclusive and respectful working and learning environments.

3.5 Crosscutting Themes

3.5.1 Data Gathering and Reporting

Two crosscutting themes relate to all other themes in the framework. Data gathering and reporting refers to the FoM's ability to track progress in its working and learning environments in order to determine whether activities and initiatives are creating the desired impact.

We currently have a variety of data about working and learning environments for various groups across the FoM, making it difficult to track changes over time. We acknowledge that we have a challenge with survey fatigue; however, in order for the Faculty to determine whether our environments are becoming more respectful, we must improve the quality and consistency of our data.



Therefore, we recommend that the FoM:

- Recommendation 20: Define concrete, observable indicators of respectful environments and gather high-level, FoM-wide baseline data on them shortly after launching DTFRE recommendations, and gather progress data periodically thereafter to determine whether recommended initiatives are having an impact.
- Recommendation 21: Standardize the FoM's approach to capturing data on various types of learning environment concerns and evaluate the feasibility of using a similar approach to capturing escalated working environment concerns.
- Recommendation 22: Systematically conduct exit interviews/surveys with departing staff, faculty, and students, including questions about respectfulness of the environments.

3.5.2 Collaboration with Partners

Many of the people in the FoM are also part of other organizations, many FoM environments are within the jurisdiction of partner organizations, and many members of the FoM work closely with employees of partner organizations. We acknowledge that the FoM's ability to collaborate with its partners is a key to success.

In addition, survey data, particularly from residents, shows that patients in health care settings are a significant source of intimidation and harassment.

Finally, some research shows a correlation between clinicians with a high number of co-worker reports of unprofessional behaviour and increased risk of medical complications in their patients.¹⁸

Therefore, we recommend that the FoM:

- Recommendation 23: Engage professional associations and Health Authorities, including the First Nations Health Authority, to co-develop approaches to increasing wellness, respectfulness, and professionalism in our shared working and learning environments. Include information on the link between civility and patient safety.
- Recommendation 24: Collaborate with Health Authorities to develop mechanisms, such as information sharing agreements, common definitions, and joint processes for addressing concerns, to effectively respond to disrespectful/unprofessional conduct that manifests in the clinical areas where there is intermingling of HA and UBC personnel and joint jurisdiction and accountability.



Recommendation 25: Collaborate with leadership in clinical environments to ensure tools for dealing with disrespectful or discriminatory patients are available to all learners, staff, and faculty.

Recommendation 26: Explore with Health Authorities ways of ensuring that all faculty members who have UBC and HA affiliations are aware of, and commit to, adhering to respectful environment expectations, potentially through annual re-credentialing requirements.

4 Next Steps

Our task was to gather relevant information from a variety of sources and to recommend evidence-based, concrete actions or initiatives that the FoM could undertake to improve its approach to creating and sustaining respectful working and learning environments for FoM learners, staff, and faculty.

We acknowledge and appreciate that the vast majority of interactions in FoM environments are respectful and that most people behave respectfully most of the time. Nevertheless, there is room for improvement. We believe that the recommendations in this report provide a roadmap to do so.

In order for the recommendations to lead to action, FoM leadership will need to assign responsibility for each accepted recommendation to an appropriate lead and organizational unit, identify metrics to track progress, and assign sufficient project resources and funding to plan and execute each initiative.



Appendix A: Selected Survey Results

This appendix summarizes relevant data from several sources about the FoM's current working and learning environments.

Audience and Environment	Data Source
Staff working environment	UBC Workplace Engagement Survey
Academic faculty working environment	UBC Workplace Engagement Survey
Clinical faculty working environment	Doctors of BC Clinical Faculty Survey
Health Professions learning environment	Program-specific learner exit surveys
MD student learning environment	UGME Exit Survey; Health Education Learning
	Environment Survey of MD Students
PGME resident learning environment	Resident Doctors of Canada Survey
Graduate student learning environment	Health Education Learning Environment
	Survey of Graduate Students

UBC Workplace Engagement Survey: 2017

The Workplace Engagement Survey (WES) collects feedback from UBC staff and academic faculty across 14 dimensions. Questions are rated on a five-point Likert scale from very satisfied/strongly agree to very dissatisfied/strongly disagree. Very satisfied/strongly agree and satisfied/agree were then grouped into favourable and very dissatisfied/strongly disagree and dissatisfied/disagree were grouped into unfavourable.

FoM Staff Working Environment

FoM Staff response rate was 33%. Here is a sample of a few relevant findings:

Inclusion and Respect	Favourable	Neutral	Unfavourable
Overall inclusion and respect	78%	13%	9%
I feel accepted in my workplace	87%	6%	7%
My diversity is valued in my workplace	77%	16%	7%
I understand how I can contribute to a respectful	96%	3%	1%
workplace			
People treat each other with respect and	78%	11%	11%
consideration in my workplace			
In my workplace, differences of opinion are handled	74%	15%	11%
in a respectful manner			
UBC has effective policies and practices for	68%	20%	12%
addressing inappropriate behaviour			



How could inclusion and respect be improved at UBC?

• Colleagues and leaders model inclusive behaviour: 64%

• Improve ways of dealing with inappropriate behaviour: 63%

• Treating others with respect: 54%

• Other: 7%

Health and Wellbeing	Favourable	Neutral	Unfavourable
I feel supported in my workplace to make decisions	72%	13%	15%
that benefit my physical and mental health			
I am committed to contributing to an environment	91%	5%	3%
that supports mental health and wellbeing			
Interpersonal conflict between colleagues is handled	53%	22%	25%
effectively in the workplace			
My workplace effectively deals with situations that	68%	19%	14%
may threaten or harm faculty and staff			

FoM Academic Faculty Working Environment

FoM academic faculty response rate was 12%. Here is a sample of a few relevant findings:

Inclusion and Respect	Favourable	Neutral	Unfavourable
Overall inclusion and respect	74%	16%	10%
I feel accepted in my workplace	82%	12%	6%
My diversity is valued in my workplace	74%	16%	10%
I understand how I can contribute to a respectful	95%	4%	1%
workplace			
People treat each other with respect and	75%	13%	12%
consideration in my workplace			
In my workplace, differences of opinion are handled	68%	21%	11%
in a respectful manner			
UBC has effective policies and practices for	68%	21%	11%
addressing inappropriate behaviour			

How could inclusion and respect be improved at UBC?

• Improve ways of dealing with inappropriate behaviour: 64%

• Colleagues and leaders model inclusive behaviour: 60%

• Treating others with respect: 53%

• Other: 0%



Health and Wellbeing	Favourable	Neutral	Unfavourable
I feel supported in my workplace to make decisions	56%	26%	18%
that benefit my physical and mental health			
I am committed to contributing to an environment	91%	8%	1%
that supports mental health and wellbeing			
Interpersonal conflict between colleagues is handled	37%	28%	34%
effectively in the workplace			
My workplace effectively deals with situations that	59%	22%	19%
may threaten or harm faculty and staff			

MD Program Clinical Faculty Working Environment: 2018

Doctors of BC conducted a survey of clinical faculty who teach in the MD program. 22% of clinical faculty in BC responded.

Questions focus on benefits and challenges of clinical faculty work, impacts of teaching on patient care, and satisfaction with compensation.

Health Education Learning Environment Survey: 2018

The Health Education Learning Environment Survey (HELES) measures three overarching dimensions of the learning environment: relationships, personal development, and school culture. Questions are rated on a five-point Likert scale from strongly agree to strongly disagree.

FoM Graduate Students Learning Environment

FoM graduate student (excluding those from health professions graduate programs) response rate was 26%. Here is a sample of a few relevant findings:

Faculty Relationships	Favourable	Neutral	Unfavourable
I am treated with respect by faculty/staff	80%	7%	13%
Faculty are supportive when I make mistakes	66%	17%	17%
Faculty provide meaningful feedback about my	61%	10%	29%
performance			
Faculty listen to my feedback	58%	22%	20%
I am in a safe environment for learning	82%	5%	13%
I am in a program that supports diversity	67%	17%	16%
Policies are consistently applied across students	55%	24%	21%



FoM MD Students Learning Environment

FoM MD student response rate was 37%. Here is a sample of a few relevant findings:

Faculty Relationships	Favourable	Neutral	Unfavourable
I am treated with respect by faculty/staff	90%	9%	1%
Faculty are supportive when I make mistakes	69%	26%	5%
Faculty provide meaningful feedback about my	65%	18%	17%
performance			
Faculty listen to my feedback	49%	32%	19%
I am in a safe environment for learning	89%	8%	3%
I am in a program that supports diversity	86%	11%	3%
Policies are consistently applied across students	62%	28%	10%

FoM Health Professions Students Learning Environment

Most FoM Health Professions programs gather learning environment data using various surveys. Because each is somewhat unique, we have not compiled the results here.

Association of Faculties of Medicine of Canada UGME Exit Survey

The Association of Faculties of Medicine of Canada (AFMC) conducts an annual exit survey of all MD students in Canada. National data is available on the AFMC website. Each medical school receives data confidentially. Data comparing UBC to Canada was generated by the UBC FoM UGME team and shared with Departments and Regional leadership. A memo leaked to the Vancouver Sun regarding our data compared it to the Canadian average data showing higher rates of reporting mistreatment at sometime in their 4 years of medical school.

Health Professions Program Exit Surveys

Each FoM Health Professions Program conducts an exit survey of graduating learners. These surveys ask graduating learners a range of questions about their experience in the program, including their experiences with educators and peers.

Resident Doctors of Canada Survey: 2018

Resident Doctors of Canada (RDoC) survey measures three comprehensive dimensions: residency training, wellness, and medical practice. Questions answered by yes/no or by selecting options.

BC residents had a response rate of 10%. Here is a sample of a few relevant findings:



Source of intimidation or harassment	% responding	Number
	yes	responding yes
Program director	1.2%	1
Staff physician	51.8%	43
Allied health professional	54.2%	45
Resident in your program	15.7%	13
Resident from another program	27.7%	23
Patient	80.7%	67
Other	16.9%	14

Form of intimidation or harassment	% responding	Number
	yes	responding yes
Inappropriate verbal comments	92.8%	77
Inappropriate or unwanted physical contact	14.5%	12
Sexual harassment	15.7%	13
Work as punishment	21.7%	18
Privileges/opportunities taken away	13.3%	11
Recrimination for reporting	3.6%	3
Other	8.4%	7

How often did the intimidation or harassment occur:

• Once: 25.3% (21)

• More than once: 74.7% (62)

Percent of respondents who responded yes to each policy-related question:

- Does your university have a policy to address intimidation and harassment? 64.3% (72)
- Have you used your university's resources to address intimidation and/or harassment? 10.0% (5)
- Do you feel that your university's resources to address intimidation and harassment are adequate? 40.0% (2)



Appendix B: Task Force Members

Ex Officio members:

- Dr. Deborah Money, Executive Vice-Dean, UBC FoM (chair)
- Mr. James Andrew, Manager, Indigenous Student Initiatives, UBC FoM
- Ms. Shanda Jordan Gaetz, Executive Director, Faculty Affairs, UBC FoM
- Ms. Roslyn Goldner, Interim Senior Advisor to the Dean, Professionalism, UBC FoM
- Ms. Jennifer Golinski, Senior Director, Education Programs and Services, UBC FoM
- Ms. Katie White, Executive Director, Communications, UBC FoM

Appointed members

- Ms. Tamiza Abji, Administrative Manager, Departments of Emergency Medicine and Orthopedics, UBC FoM
- Dr. Janine Benedet, Professor, UBC Peter A. Allard School of Law (Provost's Appointee)
- Mr. Cameron Clayton, MD Student, UBC FoM
- Dr. Bruce Forster, Head, Department of Radiology, UBC FoM
- Dr. Leonard Foster, Head, Department of Biochemistry and Molecular Biology, UBC FoM
- Mr. Ian Ko, MOT Student, Department of Occupational Science and Occupational Therapy, UBC FoM
- Dr. Adrienne Melck, Clinical Associate Professor, Division of General Surgery, Department of Surgery, UBC FoM
- Dr. Craig Mitton, Professor, School of Population and Public Health, UBC FoM
- Dr. Nicholas Monfries, Resident, Emergency Medicine, UBC FoM
- Ms. Jessica Pilsworth, PhD Student, Department of Medical Genetics, UBC FoM
- Dr. Roanne Preston, Head, Department of Anesthesiology, Pharmacology, and Therapeutics, UBC FoM
- Dr. Bruce Wright, Regional Associate Dean, Vancouver Island, UBC FoM

Project Team

- Mr. Daniel Fritz, Project Coordinator, UBC FoM
- Mr. Gabriel Rose, Special Projects Manager, UBC FoM



Appendix C: Reviewed Literature

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Appendix D: List of Recommendations

members.

Policies, Procedures, and Tools

Recommendation 1: Simplify and improve online presence to ensure that pathways to policies, procedures, and tools are clear and easy to find for all FoM people (including connection to UBC resources).

Recommendation 2: Harmonize and clarify reporting mechanisms across all areas of the FoM, and clearly state reporting options and processes for receiving, reviewing, investigating, and responding to each type of report. As part of this, clarify the role of the Office of Professionalism for all FoM community

Recommendation 3: Build into the response process methods for uncovering potential underlying causes, and include efforts to address these in the response and/or consequences.

Expectations and Commitment

Recommendation 4: Communicate the FoM's commitment to the UBC Statement on Respectful Environment for Students, Faculty, and Staff, and embed the statement and opportunities to commit to it in all appropriate places including, but not limited to, offer letters, onboarding and orientation material, annual review processes, faculty annual activity report, and agreements between supervisors and graduate students.

Recommendation 5: Revise the Professional Standards for Learners and Faculty Members in the FoM document to focus on defining what constitutes a breach of professional standards, and reference – but not duplicate – the UBC Statement on Respectful Environment and discipline-specific professionalism standards.

Recommendation 6: Create online modules and/or infographics that clearly communicate the expectations contained in the UBC Statement on Respectful Environments and the revised Professional Standards document, and require current and future faculty, staff, and learners to review and commit to abiding by them.

Recommendation 7: Identify and implement ways of expressing recognition and appreciation for the positive contributions that community members make towards improving working and learning environments in the FoM. This could include, for example, creating a FoM award to recognize those who make



outstanding contributions that enhance the overall civility, professionalism, and respect within FoM environments. The purpose of this would be to celebrate people who have a broad impact – including and beyond their own behaviour – that improves our environments for many people.

- Recommendation 8: Include and emphasize respectful behaviour considerations in faculty and staff hiring decisions and performance review processes, including merit and other university and non-university awards.
- Recommendation 9: Advocate for UBC to include respectful behaviour considerations in promotion processes for academic and clinical faculty, and tenure criteria/processes for academic faculty.

Education and Training

- Recommendation 10: Develop and deliver education and training material for academic and administrative leaders on policies, procedures, and resources related to inappropriate behaviour, and on building leadership capacity to actively foster respectful environments.
- Recommendation 11: Develop and deliver education and training material for all faculty, staff, and learners on giving and receiving feedback, identifying ways to respond when witnessing inappropriate behaviour, and clarifying what constitutes incivility and microaggressions, bullying, harassment, sexual harassment, and sexual violence.
- Recommendation 12: Develop and deliver Indigenous cultural safety training for all FoM faculty, staff, and learners.
- Recommendation 13: Engage program committees and leadership to integrate resiliency training into program curricula, including training on how to respond to inappropriate behaviour from patients and colleagues.

Organizational and Individual Wellness

- Recommendation 14: Collaborate with the UBC Wellbeing initiative to support wellness and seek to offer appropriate programs across FoM locations.
- Recommendation 15: Acknowledge, and support efforts to resolve, the dissonance that can exist between discipline-specific work culture/values and individual values/need for sustainability. For example, encourage faculty, staff, and learners to balance their own drive for excellence with personal needs,



and review existing practices to begin to reorient the incentive and reward systems away from celebrating unhealthy work patterns.

Recommendation 16: Ensure learner wellness support services are in place for all programs and available to all types of learners, and that they are offered in a clear and coordinated way.

Equity, Diversity, and Inclusion

- Recommendation 17: Demonstrate our commitment to equity, diversity, and inclusion so that people from all backgrounds see and experience the FoM as an inclusive and respectful place to learn and work. Support this by setting metrics regarding the degree to which the FoM leadership and community as a whole reflects the diversity of BC's population, and regarding the degree of inclusion experienced by FoM community members in particular those who identify with a group that has been underrepresented in our faculty, staff, and learner populations.
- Recommendation 18: Ensure that any respectful environment communication, education, and training material includes and is sensitive to a variety of perspectives and lived experiences of those who identify with a group that is underrepresented in our working and learning environments.
- Recommendation 19: Create opportunities for people to provide feedback and discuss supports that they would find helpful in order to create inclusive and respectful working and learning environments.

Data Gathering and Reporting

- Recommendation 20: Define concrete, observable indicators of respectful environments and gather high-level, FoM-wide baseline data on them shortly after launching DTFRE recommendations, and gather progress data periodically thereafter to determine whether recommended initiatives are having an impact.
- Recommendation 21: Standardize the FoM's approach to capturing data on various types of learning environment concerns and evaluate the feasibility of using a similar approach to capturing escalated working environment concerns.
- Recommendation 22: Systematically conduct exit interviews/surveys with departing staff, faculty, and students, including questions about respectfulness of the environments.



Collaboration with Partners

- Recommendation 23: Engage professional associations and Health Authorities, including the First Nations Health Authority, to co-develop approaches to increasing wellness, respectfulness, and professionalism in our shared working and learning environments. Include information on the link between civility and patient safety.
- Recommendation 24: Collaborate with Health Authorities to develop mechanisms, such as information sharing agreements, common definitions, and joint processes for addressing concerns, to effectively respond to disrespectful/unprofessional conduct that manifests in the clinical areas where there is intermingling of HA and UBC personnel and joint jurisdiction and accountability.
- Recommendation 25: Collaborate with leadership in clinical environments to ensure tools for dealing with disrespectful or discriminatory patients are available to all learners, staff, and faculty.
- Recommendation 26: Explore with Health Authorities ways of ensuring that all faculty members who have UBC and HA affiliations are aware of, and commit to, adhering to respectful environment expectations, potentially through annual recredentialing requirements.

End Notes

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³ UBC Statement on Respectful Environment for Students, Faculty, and Staff: http://www.hr.ubc.ca/respectful-environment-pdf

⁴ Dean's Task Force on Respectful Environments Terms of Reference: https://mednet.med.ubc.ca/AboutUs/AdminAndGoverningBodies/Committees/Pages/Dean%27s-Task-Force-on-Respectful-Environments.aspx

⁵ UBC Statement on Respectful Environment for Students, Faculty, and Staff: http://www.hr.ubc.ca/respectful-environment-2014.pdf

⁶ Definition of professionalism by Merriam Webster: https://www.merriam-webster.com/dictionary/professionalism

⁷ College of Family Physicians of Canada CanMEDS Family Medicine Competency Framework: https://www.cfpc.ca/uploadedFiles/Resources/Resource Items/Health Professionals/CanMEDS-Family-Medicine-2017-ENG.pdf

⁸ Royal College of Physicians and Surgeons of Canada's CanMEDS Professional Role: http://www.royalcollege.ca/rcsite/canmeds/framework/canmeds-role-professional-e

⁹ Canadian Physiotherapy Association Code of Ethics: https://physiotherapy.ca/cpa-code-ethics

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¹¹ Speech-Language and Audiology Canada Code of Ethics: https://www.sac-oac.ca/sites/default/files/resources/2016 sac Code of Ethics en.pdf

¹² College of Midwives of British Columbia Code of Ethics: https://www.cmbc.bc.ca/wp-content/uploads/2015/12/11.04-Code-of-Ethics.pdf

¹³ Professional Standards for Learners and Faculty Members in the Faculties of Medicine and Dentistry at the University of British Columbia: https://www.med.ubc.ca/files/2012/02/Professional-Standards-for-the-Faculties-of-Medicine-and-Dentistry.pdf

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