



**UNIVERSITY
OF ALBERTA**

FACULTY OF MEDICINE & DENTISTRY

Office of Professionalism

Annual Report

The Professionalism Online Reporting System

<https://www.ualberta.ca/medicine/resources/faculty-and-staff/professionalism/professionalism-submission.html>

2021-2022

Professionalism ACCOLADES 2021-22		Total Number of Accolades = 10. Role of person named: Faculty (2), Resident (7), Student (1). Setting: Clinical (10). Status: Closed (10).					
Report Type		Person's Role	Status	Setting	Anonymized Description	Professionalism Values	Outcomes/Actions
1	Accolade Report	Faculty Member	Closed	Clinical	Professionalism in aiding the team in patient care setting.	Perceived excellence in: Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour).	Accolade forwarded to Individual & Individual's supervisor.
2	Accolade Report	Faculty Member	Closed	Clinical	Perceived professionalism in and going over and above in patient care delivery to patient and family.	Perceived excellence in: Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour).	Accolade forwarded to Individual & Individual's supervisor.
3	Accolade Report	Resident	Closed	Clinical	Perceived over and above professionalism in terms of communication and collaboration with colleagues in the clinical setting.	Perceived excellence in: Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour); Excellence & Inquiry (foster professionally collaborative models of care)	Accolade forwarded to Individual & Individual's supervisor.
4	Accolade Report	Student	Closed	Clinical	Perceived over and above professionalism in terms of communication and care for patient, demonstrated to junior learners in a clinical teaching situation.	Perceived excellence in: Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour); Excellence & Inquiry (foster professionally collaborative models of care).	Accolade forwarded to Individual & Individual's supervisor.
5	Accolade Report	Resident	Closed	Clinical	Perceived over and above professionalism in advocating for a junior learner and contributing towards an environment of psychological safety. Exceptional teaching and care for a junior colleague.	Perceived excellence in: Respect & Civility (maintain respectful interactions); Responsible behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust); Excellence & Inquiry (nurture professional growth).	Accolade forwarded to Individual & Individual's supervisor.
6	Accolade Report	Resident	Closed	Clinical	Perceived excellence in patient care, understanding complex patient issues, and communication to clinical colleagues. Perceived excellence in supporting junior learners.	Perceived excellence in: Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour); Excellence & Inquiry (foster professionally collaborative models of care).	Accolade forwarded to Individual & Individual's supervisor.

7	Accolade Report	Resident	Closed	Clinical	Perceived excellence in patient care, understanding complex patient issues, and communication to clinical colleagues.	Perceived excellence in: Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour); Excellence & Inquiry (foster professionally collaborative models of care).	Accolade forwarded to Individual & Individual's supervisor.
8	Accolade Report	Resident	Closed	Clinical	Perceived excellence in patient care, understanding complex patient issues, and communication to clinical colleagues. Perceived excellence in supporting junior learners.	Perceived excellence in: Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour); Excellence & Inquiry (foster professionally collaborative models of care).	Accolade forwarded to Individual & Individual's supervisor.
9	Accolade Report	Resident	Closed	Clinical	Perceived excellence in patient care, understanding complex patient issues, and communication to clinical colleagues. Perceived excellence in supporting junior learners.	Perceived excellence in: Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour); Excellence & Inquiry (foster professionally collaborative models of care).	Accolade forwarded to Individual & Individual's supervisor.
10	Accolade Report	Resident	Closed	Clinical	Perceived excellence in patient care, understanding complex patient issues, and communication to clinical colleagues. Perceived excellence in supporting junior learners.	Perceived excellence in: Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour); Excellence & Inquiry (foster professionally collaborative models of care).	Accolade forwarded to Individual & Individual's supervisor.

MISTREATMENT Concerns 2021-22		Total number of Mistreatment Reports = 51 Role of person named: Faculty Member (36), Resident (0), Student (5), Health Professional (5), Administrative Staff (3), Clinical Assistant (1), AHS Employee (1). Status: Closed (50), In-progress (1). Setting: Non-Clinical (26), Clinical (25).					
Report Type		Person's Role	Status	Setting	Anonymized Description	Professionalism Values	Outcomes/Actions
1	Mistreatment Report	Faculty Member	Closed	Clinical	Perceived public humiliation of learner in a clinical setting, disrespect and put-down.	Perceived lack of: Respect & Civility (maintain respectful interactions with all FoMD members); Responsible Behaviour (create environments conducive to learning; support an environment of safety and trust); Excellence & Inquiry (nurture professional growth and intellectual independence).	Anonymous concern. Discussion at triage committee - decision not to move forward with concern due to lack of constructive feedback/messaging to be gained from concern.
2	Mistreatment Report	Student	Closed	Non-Clinical	Anonymous concern. Perceived racism - Indigenous derogatory term used in nickname	Perceived lack of Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour; support an environment of safety and trust); Perceived Racism (UAlberta Harassment, Discrimination & Duty to Accommodate Policy); FoMD Anti-Racism Policy.	Anonymous concern. Discussion at triage committee. Forwarded concern to Education Leads. Decision to monitor for future actions/behaviours.
3	Mistreatment Report	Student	Closed	Non-Clinical	Anonymous concern. Public social media posting of views linked to UAlberta related to perceived misinformation about Covid 19 and masking.	Perceived lack of: Honesty, Integrity & Confidentiality (communicate truthfully); Responsible Behaviour (model professional behaviour).	Anonymous concern. Concern forwarded to Education Leads. Education Leads met with Subject of concern around social media postings, professional identity and responsibilities.
4	Mistreatment Report	Student	Closed	Non-Clinical	Anonymous concern. Perceived lack of respect expressed on social media account regarding a group of professionals.	Perceived lack of: Respect & Civility (maintain respectful interactions with all FoMD members); Responsible Behaviour (model professional behaviour).	Anonymous concern. Discussion at triage committee. Because of non-specificity of concern, decided not to move forward with concern due to lack of constructive feedback/messaging opportunities within concern.

5	Mistreatment Report	Faculty Member	Closed	Clinical	Anonymous concern. Perceived lack of respect towards a learner and mistreatment.	Perceived lack of Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour; support an environment of safety and trust); Perceived Racism (UAlberta Harassment, Discrimination & Duty to Accommodate Policy); FoMD Anti-Racism Policy.	Anonymous concern. Discussion at triage committee. Because of nonspecificity of concern, decided not to move forward with concern due to lack of constructive feedback/messaging opportunities within concern.
6	Mistreatment Report	Faculty Member	Closed	Clinical	Anonymous concern. Power differential - informing learner to come to work when ill.	Anonymous concern. Perceived lack of: Responsible Behaviour (create environments conducive to learning; support an environment of safety and trust).	Anonymous concern. Discussion at triage committee. Because of nonspecificity of concern, decided not to move forward with concern due to lack of constructive feedback/messaging opportunities within concern.
7	Mistreatment Report	Health Professional	Closed	Non-Clinical	Anonymous concern. Perceived public comments in University forum (UAlberta & UCalgary) for learners. Multiple comments that were perceived to be microaggressions - racial, socioeconomic status, Indigenous, gender.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour; support an environment of safety and trust); UAlberta Harassment, Discrimination & Duty to Accommodate Policy, FoMD Anti-Racism Policy.	Anonymous concern. Forwarded to Education Leads. Education Leads met with organizers of event & facilitators regarding the concern. Decision to remove facilitators from event going forward.
8	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Third Party Concern - Education Lead submitting concern on behalf of a group of learners. Perceived belittlement, disrespect, and discrimination of learner and learner advocate within group and environment.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour; support an environment of safety and trust; assure that assessments and evaluations are conducted in a fair and equitable manner).	Third Party concern. Some events occurred greater than 6 months prior to report. Subject had undergone professionalism remediation and mentoring in the interim. After discussion, Reporter met with Subject & Professionalism Dean regarding how to work with learners successfully going forward.
9	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Third Party Concern - Education Lead submitting concern on behalf of a group of learners. Perceived lack of confidentiality in discussing learner performance in a public setting.	Perceived lack of: Honesty, Integrity & Confidentiality (maintain confidentiality); Responsible Behaviour (model professional behaviour).	Third Party concern. Events occurred greater than 6 months prior to report. Subject had undergone professionalism remediation and mentoring in the interim. After discussion, Reporter met with Subject & Professionalism Dean regarding how to work with learners successfully going forward.

10	Mistreatment Report	Student	Closed	Non-Clinical	Perceived disrespect & comments - gender bias, misogynistic, racist and aggressive statements in public learning settings.	Perceived lack of Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour; support an environment of safety and trust); Perceived Racism (UAlberta Harassment, Discrimination & Duty to Accommodate Policy); FoMD Anti-Racism Policy.	Concern forwarded to Education Leads. Education Lead checked with group facilitator - one concern noted by facilitator for which Subject apologized. Decision to monitor.
11	Mistreatment Report	Administrator	Closed	Non-Clinical	Anonymous concern, zoom setting. Disrespectful comments made on zoom about class. Perceived lack of preparation for class.	Perceived lack of Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour; support an environment of safety and trust); Perceived Racism (UAlberta Harassment, Discrimination & Duty to Accommodate Policy); FoMD Anti-Racism Policy.	Anonymous group concern. Forwarded to Education Lead. Education Lead met with learner representatives and administrators. Decision to extend probational period for observation and monitoring for a new administrator.
12	Mistreatment Report	Faculty Member	Closed	Clinical	Third Party concern. Education Lead submission of a concern on behalf of a group of learners. Perceived neglect of learners, lack of adequate supervision on clinical service, contributing to an unsafe and poor learning environment.	Perceived lack of: Respect & Civility (maintain respectful interactions); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust); Excellence & Inquiry (nurture professional growth).	Concern forwarded to Faculty Lead. Faculty Lead delegate met with Individual. Individual insightful, linked in to education workshops to build skills. Concern closed.
13	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Perceived negative influence over a learner who engaged in disrespect of Education Lead in a public setting.	Perceived lack of: Respect & Civility (maintain respectful interactions); Responsible Behaviour (model professional behaviour).	Met with Reporter. On exploring concern, it appeared that there was suspicion and inference of influence upon learner, with no demonstrated observable comments or behaviours. After discussion, Reporter agreed to close concern.
14	Mistreatment Report	Faculty Member	Closed	Clinical	Perceived disrespect of clinical roles regarding learner & consulting services in the care of a patient. Threat of retaliatory actions when boundary communicated.	Perceived lack of Respect & Civility (maintain respectful interactions; respect boundaries of others); Responsible Behaviour (model professional behaviour; assure that patient care assumes the highest priority in the clinical setting; support an environment of safety and trust; take personal responsibility for actions and decisions); Excellence & Inquiry (foster professionally collaborative models of care).	Concern occurred in Clinical setting. Met with Reporter. After discussion, forwarded concern to AHS to be dealt with.

15	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Concern regarding faculty's behaviours/actions after self-disclosure of receiving Covid vaccine. Perceived public shaming and negative consequence, intimidation.	Perceived lack of: Respect & Civility (avoid discrimination); Responsible Behaviour (support an environment of safety and trust).	Met with Reporter. Reporter wished to proceed with concern. Chair met with Subject. Subject was insightful and remorseful as to interactions, decisions. Facilitated and supported meeting set up between Subject, Reporter and Triage officer. Apology from Subject.
16	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Named concern - repeated events of destructive feedback and perceived excessive criticism. Public humiliation, disrespect and mistreatment.	Perceived lack of: Respect & Civility (maintain respectful interactions); Responsible Behaviour (model professional behaviour; support an environment of safety and trust); Excellence & Inquiry (nurture professional growth).	Met with Reporter. Reporter wished to proceed with concern. Chair met with Subject. Subject was insightful and remorseful as to interactions, decisions. Facilitated and supported meeting set up between Subject, Reporter and Triage officer. Apology from Subject.
17	Mistreatment Report	Faculty Member	Closed	Clinical	Perceived public humiliation and disrespect of a fellow healthcare professional. Perceived lack of respect around professional boundaries.	Perceived lack of Respect & Civility; (maintain respectful interactions; respect personal boundaries of others); Responsible Behaviour (model professional behaviour; support an environment of safety and trust) Excellence & Inquiry (foster professionally collaborative models of care.	Met with Reporters. Wished to proceed with concern. Concern forwarded to Chair. Chair met with Subject. Discussion around respect for health professionals in a patient care setting. May be limited insight by Subject regarding concern. Communicated to Reporters. Closed concern.
18	Mistreatment Report	Faculty Member	Closed	Clinical	Third Party Concern. Education Lead submission of a concern on behalf of a learner. Apparent disrespect exhibited towards a learner while on call at night that came across as intimidation and bullying.	Perceived lack of Respect & Civility (maintain respectful interactions); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust); Excellence & Inquiry (nurture professional growth).	Met with Reporters. Wished to proceed with concern. Met with Chair & Subject on multiple occasions. Subject unwell with personal stressors. Reviewed wellness resources, connected Subject with mentor.
19	Mistreatment Report	Faculty Member	Closed	Clinical	Learner witnessed misgendering of patient, and perceived derogatory statements about patient in regards to gender.	Perceived lack of: Respect & Civility (maintain professional interactions); Responsible Behaviour (create environments conducive to learning; model professional behaviour).	Met with Reporter. Reporter wished to log concern without moving forward with letter to Chair. Discussion at triage committee. Closed concern.
20	Mistreatment Report	Administrative Staff	Closed	Non-Clinical	Apparent deliberate making fun of gender labelling on a zoom meeting. Perceived lack of insight and remorse when called out in meeting.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour).	Lead met with Subject and reviewed concern. Subject demonstrated insight and remorse for misuse of pronouns and removed from their profile. Subject given education on pronouns and proper use of pronouns. Concern closed.

21	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Apparent display of anger and mistreatment of learner when paged about a consult with yelling and belittling statements to learner.	Perceived lack of: Respect & Civility (maintain respectful interactions); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust); Excellence & Inquiry (nurture professional growth).	Reporter asked to remain anonymous. Anonymous concern shared with Chair. Chair took concern as feedback for teacher. Discussed at triage committee. Concern closed.
22	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Perceived pattern of intimidation, discrimination, targeted discriminatory behaviours towards faculty member by Lead over time. Apparent "ganging up" in meetings, with lack of psychological safety for faculty member.	Perceived lack of: Psychological safety; Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (support and environment of safety and trust); Excellence & Inquiry (foster professionally collaborative models of care).	Met with Reporter and advocate. Proceed with concern. Met with Subject of concern. Limited insight. Connected Lead with Faculty Relations. Alternate supervising structure created.
23	Mistreatment Report	Faculty Member	Closed	Clinical	Third Party concern. Education lead concern on behalf of learner. Perceived intimidation, bullying, and targeting of learner.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust).	Third Party Concern. Wished to log concern without further action taken. Discussed at triage committee. Closed concern.
24	Mistreatment Report	Student	Closed	Clinical	Perceived disrespect for call duty hours of a learner on a clinical rotation.	Perceived lack of: Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour).	Concern involving a learner. Concern forwarded to Education Lead. Education Lead met with Subject of concern. Apparent misunderstanding of call duties and hours. Education of Subject. Discussed at triage committee. Closed.
25	Mistreatment Report	Health Professional	Closed	Clinical	Perceived disrespect around gender and racism towards Indigenous peoples, religion. Perceived shame-based teaching methods.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (create environments conducive to learning; support an environment of safety and trust); Excellence & Inquiry (nurture professional growth); FoMD Anti-Racism Policy; UAlberta Harassment, Discrimination, and Duty to Accommodate Policy.	Due to seriousness of concern, concern shared with Faculty Lead and Education Lead. Subject removed from learners. Subject asked to under professionalism /teaching remediation plan. Remediation plan initiated and completed. Faculty to re-integrate back with learners as of July 2023. Increased monitoring x 1 year after integration.

26	Mistreatment Report	Faculty Member	Closed	Clinical	Perceived interrupting of learner with intent of intimidation, harassment and excessive criticism of learner performance.	Perceived lack of: Respect & Civility (maintain respectful interactions); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust); Excellence & Inquiry (nurture professional growth).	Multiple concerns about same Individual. Met with Chair and Subject on multiple occasions. Some limitations in insight and wellness challenges. Connected to mentor.
27	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Perceived misogynistic comments about gender and reproduction at a public event.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour).	Multiple concerns submitted about same event. Met with Reporter. Concern forwarded to Lead. Lead already aware of multiple concerns submitted via other avenues. Subject insightful and remorseful. Subject submitted written apology to all present at public forum. Discussed at triage committee. Concern closed.
28	Mistreatment Report	AHS Employee	Closed	Clinical	Perceived belittling, intimidation and disrespect towards a learner in a clinical setting.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (create environments conducive to learning; model professional behaviour).	Met with Reporter. Subject not a FoMD member, employee of Covenant Health. Concern forwarded to Covenant Supervisor to meet with Subject. Discussed at Triage Committee. Concern closed.
29	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Perceived public humiliation/discrimination towards Subject in educational position. Disrespectful of role and accomplishments.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour); Excellence & Inquiry (foster professionally collaborative models of care).	Met with Reporter. Events occurred outside timeline of FoMD reporting (> 2 years previous). Therefore, unable to move forward with concern due to remote timeline. Explored options with Reporter. Reporter was considering submission of concern to AHS.
30	Mistreatment Report	Clinical Assistant	Closed	Clinical	Perceived public disrespect and harmful comments about learners, condescending, back-biting, lack of psychological safety for learners.	Perceived lack of: Respect & Civility (maintain professional interactions); Responsible Behaviour (create environments conducive to learning; support an environment of safety and trust); Excellence & Inquiry (nurture professional growth).	Anonymous concern. Concern submitted to Education Leads. Concern was addressed with all teachers in group in an anonymous fashion, to foster a positive and respectful learning environment for all learners. Concern discussed at triage committee. Concern closed.

31	Mistreatment Report	Health Professional	Closed	Clinical	Perceived disrespect towards a learner, rudeness, inhibited student learning opportunities in clinical setting.	Perceived lack of: Respect & Civility (maintain professional interactions); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust).	Anonymous concern. Subject is not a member of FoMD. Multiple concerns placed about same Individual. Discussion at triage committee. After discussion, decision to group concerns and share with Covenant Health, with the Subject's Supervisor. Concern closed.
32	Mistreatment Report	Health Professional	Closed	Clinical	Perceived disrespect towards a learner, rudeness, humiliation and belittling of learner, inhibited student learning opportunities in clinical setting.	Perceived lack of: Respect & Civility (maintain professional interactions); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust).	Anonymous concern. One of multiple concerns submitted about same Individual. Individual not a member of FoMD. Forwarded concern to AHS and Covenant Health to deal with concern.
33	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Preceptor made comments during small group session that were perceived to be discriminatory and negative and ableist about those with learning disabilities.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (maintain professional behaviour; support an environment of safety and trust); UAlberta Harassment, Discrimination & Duty to Accommodate Policy.	Professionalism Dean met with Reporter. Went forward with concern. Professionalism Dean met with Subject of Concern. Subject insightful and remorseful. Verbal apology to learner. Concern closed.
34	Mistreatment Report	Faculty Member	Closed	Clinical	Perceived inappropriate lack of expectations for learner, perceived lack of constructive feedback around learner performance. Dismissive of learner. Did not follow through on completing learner evaluation despite multiple attempts to contact.	Perceived lack of: Responsible Behaviour (create environments conducive to learning; model professional behaviour).	Unable to contact Reporter despite multiple attempts. Closed concern.
35	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Perceived inappropriate anger, rudeness and disrespect as well as expectations for course facilitator to the point of creating an environment of lack of psychological safety. Apparent lack of insight and remorse when met with in regards to behaviour.	Perceived lack of psychological safety; Respect & Civility (maintain professional interactions); Responsible Behaviour (create environments conducive to learning; support an environment of safety and trust; model professional behaviour).	Met with Reporter. Forwarded concern to Faculty Lead. Faculty Lead delegated concern. Delegate met with Subject. Subject referred to wellness issues, displayed insight and remorse. Concern closed.

36	Mistreatment Report	Health Professional	Closed	Non-Clinical	Third Party concern on behalf of a learner. Lack of confidentiality in regard to accessing private patient information to obtain name and contact for FoMD learner. Apparent racism and discriminatory backbiting and untruths shared with Learner's Education Lead.	Perceived lack of: Honesty, Integrity & Confidentiality (communicate truthfully; respect privacy of patients, learners and colleagues; maintain confidentiality); Respect & Civility (maintain respectful interactions; avoid discrimination; respect personal boundaries of others); FoMD Anti-Racism Policy; UAlberta Harassment, Discrimination & Duty to Accommodate Policy.	Concern submitted to AHS. According to Reporter, AHS investigated concern, and concluded that the concern was unfounded.
37	Mistreatment Report	Faculty Member	In Progress	Clinical	Third Party concern. Submitted on behalf of a group of learners. Also submitted to AHS & CPSA. Concerns around behaviour and treatment of learners. Intimidation, harassment, professional boundary crossing, contributing to a drinking culture in regards to female learners.	Perceived lack of: Respect & Civility (maintain respectful interactions; respect autonomy and personal boundaries of others); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust); Excellence & Inquiry (foster professionally collaborative models of care); UAlberta Sexual Violence Policy; UAlberta Harassment, Discrimination, and Duty to Accommodate Policy.	Third Party Concern. Concern also submitted to AHS and CPSA. Leader decision to suspend faculty appointment and to remove from working with learners. Decision to gather more information. Investigation assigned and carried out. Recommendations submitted to Dean.
38	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Self-disclosed crossing of professional boundaries with a learner when in a position of power.	Perceived lack of: Respect & Civility (respect autonomy and personal boundaries of others); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support and environment of safety and trust); UAlberta Harassment, Discrimination & Duty to Accommodate Policy. CPSA Code of Conduct.	Self-disclosure. Also, self-disclosed to CPSA. Follow through by CPSA. Decision to undergo professional boundaries course.
39	Mistreatment Report	Faculty Member	Closed	Clinical	Third Party Concern: Perceived disrespect, intimidation, harassment and shame-based teaching methods to learner while on call.	Perceived lack of: Respect & Civility (maintain respectful interactions, avoid discrimination); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust).	Third Party Concern. Senior learner submitted on behalf of a junior learner. One of multiple similar concerns submitted on same Faculty Person. Letter of expectations provided to Individual and now receiving professional coaching.

40	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Perceived bias of candidate prior to interview. Perceived discrimination because not Canadian for job position. Perceived invasive questioning during interview. Faculty Lead met with Individual and reviewed concern. Conclusion of misunderstanding and miscommunication. Concern closed. Reporter not satisfied with outcome. Concern closed.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour).	Concern forwarded to Faculty Lead. Faculty Lead met with Individual, reviewed concern and process around hiring personnel. Conclusion of misunderstanding/miscommunication. Reporter not satisfied with outcome
41	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Anonymous concern. Perceived incorrect physical exam techniques demonstrated by preceptor during teaching session, interrupting learners during teaching session and critical of learners' language.	Perceived lack of: Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust).	Anonymous concern. Discussed at triage committee. Did not move forward with concern because of lack of constructive feedback to be obtained from concern.
42	Mistreatment Report	Faculty Member	Closed	Clinical	Perceived repetitive intimidation, bullying of learners in public settings, shame-based teaching methods. Blaming learners for issues out of their control.	Perceived lack of: Respect & Civility (maintain professional interactions); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust).	Learner wished to remain anonymous. This is one of multiple concerns about same Individual with concerns appearing to be similar. On reviewing possible actions and outcomes, learner wished to simply let Faculty Lead know that there were additional anonymous concerns that were similar to previously submitted concerns. Multiple meetings with Faculty Lead and Individual. Faculty Lead provided a letter of expectations for Individual. Individual connected with professional coaching.

43	Mistreatment Report	Faculty Member	Closed	Clinical	Perceived disrespect of clinical expertise in an urgent clinical situation. Abrupt and dismissive, did not engage during emergent procedure. Lack of communication around clinical care outcomes. Perceived racial discrimination.	Perceived lack of: Respect & Civility (maintain professional interactions; avoid discrimination); Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour; support an environment of safety and trust); Excellence & Inquiry (foster professionally collaborative models of care); FoMD Anti-Racism Policy; UAlberta Harassment, discrimination and duty to accommodate policy.	Concern forwarded to Faculty Lead. Faculty Lead met with Individual. Individual apologized - some apparent continued lack of insight. Professionalism Dean met with Individual re: apparent racism. Individual appeared to display limited insight. Concern closed.
44	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Group FoMD social event. Perceived crossing of professional and physical boundaries - hugging, kissing hand.	Perceived lack of: Respect & Civility (maintain professional interactions, respect autonomy and personal boundaries of others); Responsible Behaviour (model professional behaviour; support and environment of safety and trust).	Met with Reporter. Logged concern. Reporter decided to approach Individual. Coached re: direct conversation between Reporter and Individual. Concern closed.
45	Mistreatment Report	Faculty Member	Closed	Non-Clinical	Perceived racial microaggression towards a fellow faculty member in the setting of carrying out education activities.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour; support an environment of safety and trust); Excellence & Inquiry (foster professionally collaborative models of care); FoMD Anti-Racism Policy; UAlberta Harassment, Discrimination & Duty to Accommodate Policy.	
46	Mistreatment Report	Faculty Member	Closed	Clinical	Anonymous concern. Perceived disrespect displayed towards patients in presence of learner. Apparent discrimination/racism targeting Indigenous patient, with perceived swearing in front of patient. Interrupting patient with raised voice.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour; support an environment of safety and trust); Excellence & Inquiry (foster professionally collaborative models of care); FoMD Anti-Racism Policy; UAlberta Harassment, Discrimination & Duty to Accommodate Policy.	Anonymous concern. Discussion at triage committee. Decision to forward concern to Faculty Lead. Faculty Lead met with Individual. Individual insightful and remorseful. Concern closed.
47	Mistreatment Report	Faculty Member	Closed	clinical	Perceived discrimination against Reporter to thwart career opportunities.	Perceived lack of: Honesty, Integrity & Confidentiality (communicate truthfully; identify, understand and appropriate manage potential conflicts of interest); Respect & Civility (avoid discrimination).	Event was too remote to move forward with, and hard to establish truth of actual event. Reporter no longer within FoMD. After discussion with Vice Dean, concern closed.

48	Mistreatment Report	Faculty Member	Closed	Clinical	Perceived disrespect, humiliation, and condescension towards learner's clinical decisions in public settings. Belittling learner in front of others.	Perceived lack of: Respect & Civility (maintain respectful interactions); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust; Excellence & Inquiry (nurture professional growth).	Reporter declined a meeting. Reporter wished to log concern without actions. Discussion at triage committee. Concern closed.
49	Mistreatment Report	Faculty Member	Closed	Non-clinical	Anonymous concern. Perceived generation of fake data for academic publications. Perceived harassment & bullying of learners in lab setting.	Perceived lack of: Honesty, Integrity & Confidentiality (conduct and report research and other scholarly activities in an ethical and honest manner); Respect & Civility (maintain respectful interactions); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust; Excellence & Inquiry (nurture professional growth); UAlberta Research &	Anonymous concern. Concern forwarded to Chair. Chair working with Vice Dean Research re: investigation into concern.
50	Mistreatment Report	Faculty Member	Closed	Non-clinical	Perceived disrespect and put-down of allied health professionals in a public setting.	Perceived lack of: Respect & Civility (maintain respectful interactions); Responsible Behaviour (model professional behaviour); Excellence & Inquiry (foster professionally collaborative models of care).	Concern forwarded to Faculty Lead. Faculty Lead delegation - met with Individual. Apology letter provided. Individual insightful and remorseful. Concern closed.
51	Mistreatment Report	Administrative Staff	Closed	Clinical	Perceived disrespect in a patient setting on phone.	Perceived lack of: Respect & Civility (maintain professional interactions); Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting).	Concern outside of FoMD jurisdiction, UAlberta Clinical setting. Reporter contacted and given information about how to submit concern in the right setting. Concern closed.

See more reports on next page

PROFESSIONALISM Concerns 2021-22		Total number of Professionalism Concern reports = 21. Role of person named: Faculty (9), Resident (2), Student (9), Administrative Staff (1). Status: Closed (21). Setting: Clinical (10), Non-Clinical (11).					
Report Type		Person's Role	Status	Setting	Anonymized Description	Professionalism Values	Outcomes/Actions
1	Professionalism Concern Report	Student	Closed	Non-Clinical	Anonymous concern. Social media setting - public account. Linkage to U of A provided on account. Perceived unprofessional and misleading comments about the safety/efficacy of the Covid vaccine, apparent support of unproven treatments for Covid (ivermectin). Perceived comments of racism directed toward Indigenous people and degrees in Indigenous studies.	Perceived lack of: Respect & Civility (maintain professional interactions; avoid discrimination); Responsible Behaviour (model professional behaviour); FoMD Anti-Racism Policy; UAlberta Harassment, Discrimination and Duty to Accommodate Policy	Anonymous concern. Concern forwarded to Education Leads. Education Lead met with Individual, reviewed postings on social media, reviewed messaging that is sent out in regard to Covid pandemic and unproven treatments. Education provided to Individual. Concern closed.
2	Professionalism Concern Report	Faculty Member	Closed	Clinical	Perceived repeated and inappropriate delegation of clinical duties to learners by a faculty person.	Perceived lack of: Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour, take personal responsibility for actions and decisions).	Concern forwarded to Faculty Lead. Faculty Lead delegation - met with Individual. Individual insightful about behaviour and how it came across to learners. Individual agreed to change behaviour going forward. Concern closed.
3	Professionalism Concern Report	Program administrative process	Closed	Non-Clinical	Perceived issues around confidentiality and recording of patient disclosures in a long-case oral examination setting.	Perceived lack of: Honesty, Integrity & Confidentiality (maintain confidentiality of patients as a central obligation; respect privacy of patients and research participants); Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting).	Concern forwarded to Faculty Lead. Concern also shared with University privacy officer. Recording disposed of safely. Discussions occurred between Faculty Leads and Education Leads around oral examination setup and confidentiality going forward.
4	Professionalism Concern Report	Student	Closed	Non-Clinical	Anonymous concern. One of multiple concerns about same Individual and same situation. Perceived social media unprofessional comments around COVID, pandemic, measures taken, and unproven treatments.	Perceived lack of: Responsible Behaviour (model professional behaviour); Excellence & Inquiry (foster a culture of inquiry).	Anonymous concern. Concern shared with Education Leads. Education Leads met with Individual and went through education and reflection. Social media account closed to public afterward.

5	Professionalism Concern Report	Faculty Member	Closed	Clinical	Third Party concern. Perceived lack of psychological safety created by faculty teacher in the clinical teaching environment. Perceived bias towards former learners, faculty applicants for positions, perceived unprofessional tones and behaviours at group meetings, considered to be disruptive.	Perceived lack of: Honesty, Integrity & Confidentiality (identify, understand and appropriately manage conflicts of interest); Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour; support an environment of safety and trust).	Third Party Concern. Event remote in time (greater than 1 year). Therefore, did not move forward with concern to Faculty Lead. Education Lead met with Individual and Professionalism Dean, discussion about possible bias and behaviours. Individual insightful and remorseful.
6	Professionalism Concern Report	Student	Closed	Non-Clinical	Anonymous concern. Perceived misrepresentation on social media accounts in regards to previous leadership experiences and learning opportunities prior to professional career.	Perceived lack of: Responsible Behaviour (model professional behaviour; take personal responsibility for actions and decisions).	Anonymous concern. Concern shared with triage committee. After discussion, group decision to not move forward with concern. Concern closed.
7	Professionalism Concern Report	Faculty Member	Closed	Clinical	Third Party Concern. Perceived backbiting of learner performance to another learner.	Perceived lack of: Respect & Civility (avoid discrimination); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust).	Third Party Concern. Event remote in time (greater than 1 year) and inference around intent of Individual. Therefore, did not move forward with concern to Faculty Lead. Education Lead met with Individual and Professionalism Dean, discussion about possible bias and behaviours. Individual insightful.
8	Professionalism Concern Report	Student	Closed	Non-Clinical	Anonymous concern. Inappropriate and disparaging comments about a classmate while unmuted setting of a zoom small group learning session.	Perceived lack of: Respect & Civility (maintain respectful interactions); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust; Excellence & Inquiry (nurture professional growth).	Anonymous concern. Multiple concerns about same situation and same Individual. Concerns summarized and forwarded to Education Leads. Education Leads explored preceptors' experience of the situation. Different memories of same situation. After discussion, decided to close concern and continue to monitor Individual's behaviour.

9	Professionalism Concern Report	Faculty Member	Closed	Clinical	Perceived lack of physical and psychological safety for learners around strong opinions against Covid vaccination expressed publicly on social media and on news.	Perceived lack of: Psychological Safety; Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust); Excellence & Inquiry (nurture professional growth).	Concern shared with Dean, Chair. Decision amongst Chair, Dean and Education Leads to suspend Faculty Appointment. Faculty appealed decision at a later timepoint. After review by appeal committee, Individual appeared to be reflective and insightful. Social media posts had been removed. Individual integrated back with learners.
10	Professionalism Concern Report	Student	Closed	Clinical	Anonymous concern. Apparent misrepresentation of clinical role through wearing a long coat in clinical settings.	Perceived lack of: Honesty, Integrity & Confidentiality (communicate truthfully); Responsible Behaviour (model professional behaviour; take personal responsibility for actions and decisions).	Anonymous concern. Shared with triage committee. Upon discussion, decision to forward concern to Education Leads. Education Lead met with Individual, explored behaviour and implications. Concern closed.
11	Professionalism Concern Report	Faculty Member	Closed	Clinical	Perceived unprofessional behaviour through copying and pasting of another person's chat messaging into EMR note without asking permission.	Perceived lack of: Respect & Civility (maintain respectful interactions); Responsible Behaviour (model professional behaviour); Excellence & Inquiry (foster professionally collaborative models of care).	Concern forwarded to EMR lead. EMR lead unable to resolve the issue. Triage officer contacted Individual, reviewed concern. Individual insightful, apologetic, and remorseful. Will change charting behaviour going forward.
12	Professionalism Concern Report	Resident	Closed	Clinical	Perceived unprofessional behaviour in not notifying clinical service in a timely fashion of planned absence from education service.	Perceived lack of: Respect & Civility (maintain respectful interactions); Responsible Behaviour (model professional behaviour; take personal responsibility for actions and decisions).	Concern shared with Education Leads. Combined meetings with Individual and Leads. Individual insightful and provided written apology.
13	Professionalism Concern Report	Faculty Member	Closed	Non-Clinical	Perceived unprofessional behaviours in crossing professional boundaries in relationship with a learner with power differential.	Perceived lack of: Respect & Civility (maintain professional interactions; respect autonomy & personal boundaries of others); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust); UAlberta Harassment, Discrimination and Duty to Accommodate Policy; CPSA/CMA Code of Ethics and Professionalism and Standards of Practice.	Concern submitted and then withdrawn by learner. Professionalism Dean met with Faculty. Faculty Insightful & remorseful. Individual self-reported to CPSA. CPSA investigation and conclusion. Concern closed.

14	Professionalism Concern Report	Resident	Closed	Clinical	Perceived unprofessional behaviour in completing lab requisition for self, regarding self-illness. Did let treating physician know of lab test completion.	Perceived lack of: Responsible Behaviour (model professional behaviour).	Concern forwarded to Education Lead. Education met with Individual. Individual insightful and remorseful. Concern closed.
15	Professionalism Concern Report	Student	Closed	Non-Clinical	Anonymous concern. Perceived unprofessional behaviour in obtaining negative Covid test while travelling for personal reasons.	Perceived lack of: Honesty, Integrity and Confidentiality (communicate truthfully); Responsible Behaviour (model professional behaviour).	Anonymous concern, first about same Individual and situation. Concern shared with Education Leads. Upon discussion, decision to not move ahead with concern due to such few details provided.
16	Professionalism Concern Report	Student	Closed	Non-Clinical	Anonymous concern. Perceived unprofessional behaviour in obtaining negative Covid test while travelling for personal reasons.	Perceived lack of: Honesty, Integrity and Confidentiality (communicate truthfully); Responsible Behaviour (model professional behaviour).	Anonymous concern, second about same Individual and situation. Concern shared with Education Leads. Upon discussion, decision to not move ahead with concern due to such few details provided.
17	Professionalism Concern Report	Faculty Member	Closed	Clinical	Anonymous concern. Similar to other named concerns about same Individual and situation. Perceived misogyny and unprofessional statements, microaggressions in a public setting at a meeting.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour; support an environment of safety and trust); Excellence & Inquiry (foster professionally collaborative models of care).	Anonymous concern. One of multiple concerns around same Individual and situation. Concern forwarded to Faculty Lead. Faculty Lead met with Individual. Individual insightful. Individual provided written apology to those present at meeting.
18	Professionalism Concern Report	Student	Closed	Non-Clinical	Peer concern. Perceived lack of inclusiveness in group learning task, perceived rudeness to peers, did not contribute to a constructive learning environment for others.	Perceived lack of: Respect & Civility (maintain respectful interactions); Responsible Behaviour (create environments conducive to learning; model professional behaviour; support an environment of safety and trust).	Concern discussed at triage committee. Decision to move forward with sending concern to Education Leads. Education Leads decided to share with peer professionalism representatives to meet with Individual. Concern Closed.
19	Professionalism Concern Report	Student	Closed	Non-Clinical	Peer concern. Met with Reporter - wished to remain anonymous. Posts on social media to peers appearing to express views against use of Covid vaccine, expressing views disbelieving impact of Covid pandemic upon hospitals.	Perceived lack of: Honesty, Integrity & Confidentiality (communicate truthfully); Respect & Civility (maintain respectful interactions); Responsible Behaviour (model professional behaviour).	Anonymous concern. Triage Committee discussion. After discussion, decision to forward concern to Education Leads. Education Leads decided to discuss at Education Professionalism meeting. After discussion, peer professionalism representatives were to meet with Subject for reflection.

20	Professionalism Concern Report	Faculty Member	Closed	Non-Clinical	Anonymous concern. Perceived unprofessional behaviour and comments discriminating against gender transitions in a public lecture setting.	Perceived lack of: Respect & Civility (maintain respectful interactions; avoid discrimination); Responsible Behaviour (model professional behaviour; support an environment of safety and trust).	Anonymous concern. Discussion at triage committee. After discussion, decision to not move forward with concern as assumptions appeared to be made about intent of statements and remoteness of event. Concern closed.
21	Professionalism Concern Report	Faculty Member	Closed	Clinical	Perceived unprofessional behaviour in apparent pattern of behaviour in not providing appropriate clinical support in relation to clinical specialty. Passing work onto allied specialty and residents in caring for patients.	Perceived lack of: Responsible Behaviour (assure that patient care assumes the highest priority in the clinical setting; model professional behaviour, take personal responsibility for actions and decisions); Excellence & Inquiry (foster professionally collaborative models of care).	Individual does not have a faculty appointment within FoMD. Discussion with clinically adjacent Faculty Lead. Faculty Lead reached out to AHS Lead supervisor to deal with and resolve the issue. Concern closed.

RACISM Concern Reports 2021-22	Total number of Racism reports = 1. Role of person (entity) named: Faculty Department (1). Status: In-progress (1). Setting: Non-Clinical (1).						
Report Type	Person's Role	Status	Setting	Anonymized Description	Professionalism Values	Outcomes/Actions	
1. Racism	FoMD Department	In Progress	Non-clinical	Perceived pattern of racism, harassment and discrimination against Reporter for decades within department, involving multiple individuals and levels of leadership.	Perceived lack of: Respect & Civility (maintain respectful interactions, avoid discrimination); Responsible Behaviour (model professional behaviour; support an environment of safety and trust); FoMD Anti-Racism Policy; UAlberta Harassment, Discrimination & Duty to Accommodate Policy.	Concern shared with Faculty Lead. Informed that concern had been submitted to central UAlberta AASUA. After discussion with FoMD Leadership, concern closed, as will be handled by central UAlberta from that point onward.	