



## ***Learner Mistreatment Guideline in the Temerty Faculty of Medicine***

---

### **Approved by:**

- MD Program: MD Executive (May 30, 2023)
- Medical Radiation Sciences Program: MRS Strategic Executive (July 5, 2023)
- Occupational Science and Occupational Therapy: Department Affairs Committee (July 12, 2023)
- Physician Assistant Program: BScPA Management Committee (June 5, 2023)
- Physiotherapy Program: PT Departmental Committee (June 26, 2023)
- Postgraduate Medical Education: PGME Advisory Council (October 27, 2023)
- Speech Language Pathology Department (June 27, 2023)

**Date of next scheduled review:** Fall 2026

---

This Learner Mistreatment Guideline is a revision to preceding program or departmental level guidelines on mistreatment, unprofessional behaviours, discrimination, harassment, or other concerning behaviours towards learners. This revision replaces the MD Program Student Mistreatment Protocol (approved in March 2020), and the PGME Guidelines for Managing Disclosures of Learner Mistreatment (approved January 2021), and any pre-existing guidelines within the Physician Assistant, Medical Radiation, or clinical Rehabilitation Sciences Programs. These Guidelines have been written with consideration of other foundational policies and procedures within Temerty Medicine, University of Toronto, Ontario Human Rights Code, as well as accreditation requirements of affected programs as of Fall 2023.

The Learner Experience Unit consulted with many stakeholders during the development of these Guidelines, including with learners, EDIIA experts, faculty, and staff, using tools like the [Racial Equity Impact Assessment](#). This Guideline represents changes that harmonize the definitions of what constitutes mistreatment, guiding principles, and intake processes.

Resolution mechanisms have also been clarified to reflect existing policy documents at the University of Toronto, including Temerty Medicine's Standards of Professional Behaviour for Clinical (MD) Faculty.

***Important: This Guideline is NOT for emergency use.***

***Learners with reasonable concern about imminent harm to themselves or others should call 911 or seek immediate assistance from on site security or other authorities.***



**Table of Contents**

**A. Preamble: Purpose and Scope ..... 3**

**B. Guiding Principles ..... 4**

**C. Definitions of Mistreatment ..... 5**

**D. When Learners Raise Concerns..... 6**

    1. Collegial resolution .....6

    2. Early resolution at the program or department level, or at the Placement Site .....6

    3. Discussing, disclosing, reporting to the Learner Experience Unit .....7

**E. Assessment of Jurisdiction for Reports ..... 8**

**F. Processes for Addressing Reports ..... 9**

    1. Temerty Medicine supports early resolution at a department or program level .....9

    2. Temerty Medicine leads an investigation.....9

    3. The learner is referred to another office or process at the University.....11

    4. The Placement Site leads an investigation .....11

    5. Temerty Medicine collaborates with a Placement site on a joint investigation .....12

**G. Mechanisms for Providing Feedback ..... 12**

**H. Relationship Between the University and Placement Sites ..... 12**

**I. Institutional Responsibility: Tracking, Analyzing, and Addressing Trends..... 12**

**Appendix A: Relevant Statements, Policies, Guidelines, Codes and Standards ..... 14**

**Appendix B: Resolution Mechanisms ..... 16**

**Appendix C: Overview of Process..... 17**



## A. Preamble: Purpose and Scope

The Temerty Faculty of Medicine at the University of Toronto (Temerty Medicine) places the utmost importance on the safety and well-being of learners, including their ability to learn in an environment of professionalism, collegiality, civility, and respect. All members of the Temerty Medicine community, including learners, have a joint responsibility to protect the integrity of the learning environment, and are encouraged, to practice allyship.

The purpose of this Guideline is to clarify processes available for Temerty Medicine clinical learners to discuss, disclose, or report incidents of learner mistreatment. It also outlines how reported incidents may be managed. The Learner Experience Unit (LEU) is responsible for oversight and implementation of this Guideline, as detailed in the sections that follow.

Learners from Temerty Medicine are educated and trained in a wide variety of locations, including, but not limited to, hospitals, clinics, schools and school boards, other post-secondary institutions, and community settings. For ease of reference, these will be collectively described herein as “Placement Sites.”

This Guideline does not replace or limit the legal and ethical standards established by professional or regulatory bodies; the policies and procedures at Placement Sites, or by other applicable Temerty Medicine or University standards, policies, and procedures that are outlined in **Appendix A**.

This Guideline applies to **clinical** learners (including elective learners visiting from other schools) registered in the following Temerty Medicine programs:

- MD (all years)
- MD/PhD
- Medical Radiation Sciences
- Occupational Science and Occupational Therapy
- Physical Therapy
- Physician Assistant
- Postgraduate Medical Education including:
  - International Medical Graduates (IMGs), once fully registered following PEAP\*
  - Externally sponsored trainees, once fully registered following AVP\*
  - Medical Physics Residents
- Speech-Language Pathology

Non-clinical graduate students (e.g., learners in research programs) may wish to contact the Centre for Graduate Supervision and Mentorship at the School of Graduate Studies should they have concerns regarding learner mistreatment.

\*Learners who are still within their Assessment Verification Period (AVP) or Pre-Entry Assessment Period (PEAP) and who have concerns about potential mistreatment should contact the Learner Experience Unit (LEU) directly to discuss their options, given that registrants in AVPs or PEAPs, as pre-



entry learners, may not necessarily have access to the full breadth of University or Temerty Medicine resources or other policies outlined in this Guideline; they will nonetheless be provided with support and assistance in navigating their options by the LEU.

For the purposes of this document:

- The “**complainant**” is the person who makes a complaint about learner mistreatment.
- The “**respondent**” is the person responding to the complaint (i.e., the person who allegedly mistreated a learner(s)).

## B. Guiding Principles

- **Learner safety, trauma-informed approaches, well-being and support:** Any experience of mistreatment may be stressful. Throughout the process, Temerty Medicine will strive to support learners in a trauma-informed manner, taking utmost care taken to minimize further harm or stress to the learner, to limit – to the extent possible – the number of times a learner has to re-share their story, and, to attempt to protect the learner from retaliation. Temerty Medicine will offer physical, emotional, and psychological supports as appropriate.
- **Equity, Diversity, Inclusion, Indigeneity, and Accessibility (EDIIA):** Temerty Medicine recognizes that there is a power differential between individuals that can influence the learning environment and enable learner mistreatment. This power differential can be particularly pronounced for certain groups and their intersections, owing to systemic and structural factors, including but not limited to learners identifying as Black and Indigenous, under-represented racialized minorities, women, sexual or gender minorities, minoritized faith groups, and individuals living with a disability. Temerty Medicine aims to support learners to achieve resolution of their individual concerns in ways that are EDIIA-informed. This Guideline is founded on anti-racist, anti-oppressive, and inclusive principles in all aspects of its development and implementation.
- **Fairness:** Temerty Medicine is committed to fairness for all involved in a complaint review process, including ensuring that both complainants and respondents have an opportunity to be heard without bias to the matter.
- **Confidentiality and privacy:** The privacy of the complainant and respondent must be respected, with all parties maintaining confidentiality to the extent possible. Only those who need to be involved to review the matter, to respond, to provide information about an incident they witnessed, or those who are requested to provide personal support to an involved party, should be informed about a discussion, disclosure, or report.

There are circumstances where Temerty Medicine or the University may need to take action urgently on a disclosure or report without obtaining consent at the time. This includes if there is an imminent risk to learners or others, a risk of harm to someone aged less than 18 years,



sexual violence by a regulated healthcare professional, occupational health and safety considerations, or another legal, regulatory, or university obligation to act. We would discuss this in detail with learners coming forward, including ways that the LEU will continue to support them.

- **Anonymous and de-identified reports:** Learners may feel it is unsafe to report in an identified manner and they may only wish to come forward in an **anonymous** or **deidentified** manner.
  - **Anonymous** reports are those in which the learner’s identity is not known to anyone at Temerty Medicine. Anonymous reports are generally submitted online through the LEU’s reporting tools.
  - **De-identified** reports are those in which the learner’s identity is known to the Learner Experience Unit, but is withheld at the time the LEU escalates the report as described in Section F, below.

The LEU will take steps to redact potentially identifiable information in submissions where a learner is **anonymous**. In cases where a learner is **de-identified**, the LEU will consult with the learner about this redaction process. However, learners must be aware that despite these efforts, it is possible that they may still be identified based on their description of the underlying incident(s).

Temerty Medicine’s ability to act upon anonymous and deidentified reports may be limited, owing to its obligations to provide the respondent with a full and fair opportunity to respond to allegations made against them.

Nonetheless, to the extent possible, these types of reports will be escalated out of the LEU (in accordance with Section F) in order to collect information about systemic or cultural issues in the learning environment, which may inform systems-level interventions.

### C. Definitions of Mistreatment

Mistreatment may be intentional or unintentional behaviour that shows disrespect for the dignity of others. Mistreatment can involve a single incident or a pattern of behaviour and can range from subtle gestures/comments to egregious actions. Mistreatment may include making remarks of an intimidating or discriminatory nature. Any behaviour involving mistreatment of another person compromises the learning environment.

Temerty Medicine recognizes as harmful all of the behaviours and actions that are deemed unacceptable under one or more of the policies listed in **Appendix A**. Temerty Medicine will review all complaints that learners raise about conduct that negatively impacts the learning environment and learners are encouraged to have a confidential conversation with someone in the Learner Experience Unit as a starting point to understand how their experiences may be addressed through this Guideline.



For the purpose of tracking incidents of learner mistreatment within the LEU, and in keeping with foundational policies and procedures on which this Guideline is based, some mistreatment is categorized as follows:

- Unprofessional behaviour
- Discrimination and discriminatory harassment
- Sexual violence and sexual harassment

Mistreatment includes ‘microaggressions’, which are often unintentional, but experienced as a pattern of, snubs, slights, put-downs, and gestures that demean or humiliate individuals based on their belonging to a group, particularly those identified by gender, race/ethnicity, sexual orientation, immigration status, and/or socioeconomic class.

Behaviours that fall under the discrimination and discriminatory harassment and sexual violence and sexual harassment categories are considered unprofessional. However, they are presented as discrete mistreatment categories in alignment with the University of Toronto [Statement on Prohibited Discrimination and Discriminatory Harassment](#) and University of Toronto Policy on [Sexual Violence and Sexual Harassment](#).

## D. When Learners Raise Concerns

### 1. Collegial resolution

If a learner feels comfortable, is willing, and judges that it is safe to do so, they may choose to approach an individual responsible for concerning behaviour and communicate their concerns with the goal of ending the behaviour. This approach recognizes the important role of collegial conversation in the Temerty Medicine community and emphasizes the principle of addressing problems locally wherever possible. However, if a learner does not feel comfortable addressing the behaviour directly (e.g., it has previously been ineffective, or if more support is required due to a significant power imbalance), the learner may explore other options.

### 2. Early resolution at the program or department level, or at the Placement Site

Although learners are free to discuss their concerns with their colleagues and supervisors, Temerty Medicine encourages learners to raise their concerns about mistreatment in the learning environment directly to the Learner Experience Unit (LEU), to ensure central oversight and a consistent approach.

Temerty Medicine anticipates that faculty members, senior learners, and / or Placement Sites who become aware of a mistreatment incident will make the affected individuals aware of this Guideline and refer them directly to the LEU. If appropriate, they may wish to assist any affected individuals by connecting them to resources in the Office of Learner Affairs.

Despite the foregoing, if faculty or staff in leadership roles in a program or department judge that it is best to manage learner mistreatment complaints at the program or department level, it is anticipated that they will manage the matter in alignment with **Section F**, in consultation with LEU.



If faculty or staff in leadership roles at a Placement Site judge that it is best to manage learner mistreatment complaints within the Placement Site, it is anticipated that they will engage in early consultation and notification to the LEU.

### 3. **Discussing, disclosing, reporting to the Learner Experience Unit**

Learners have the option to **discuss**, **disclose**, or **report** issues:

- **Discussing:** when a learner aims to talk about, debrief, or unpack an incident or experience.
- **Disclosing:** when a learner conveys information about the conduct of an individual to seek information about their options, including for safety, support, or administrative accommodations.
- **Reporting:** when information about an individual's conduct is conveyed with the intent of initiating a formal process under this Guideline or other applicable policy/protocol.

There may be exceptional cases where Temerty Medicine deems it necessary to act upon a discussion or disclosure, independent of the learner's intent. This includes if there is an imminent risk to learners or others, a risk of harm to someone aged less than 18 years, sexual violence by a regulated healthcare professional, occupational health and safety considerations, or another legal, regulatory, or university obligation to act.

When any issue is submitted to the LEU, the LEU will assign a dedicated case manager who will strive to promptly contact the learner to gather further details about the concern, to explore possible next steps, and identify available supports. LEU case managers are generally able to make first contact with learners within 3 business days.

During the intake discussion, the LEU case manager will advise the learner:

- about this Guideline and how to access it, along with any other applicable University or Temerty Medicine policies and procedures;
- about the supports that are available to the learner, ensuring that best efforts are made to prioritize the learner's psychological, social, and physical safety;
- about the distinction between **discussion**, **disclosure**, and **reporting** (and gauge the learner's intent);

- that there could be exceptional circumstances triggering the University's obligation to act on a discussion or disclosure, independent of the learner's intent to discuss, disclose, or report (see section B. Confidentiality and Privacy and Section D iii);
- about the limitations associated with confidentiality and anonymity, per section B;
- that the University will not tolerate retribution or reprisal towards learners who come forward; retaliation is a form of mistreatment and any allegations of retaliation would be reviewed / investigated, and if substantiated, could result in disciplinary consequences;
- that the LEU may need to consult with individuals in relevant leadership positions within Temerty Medicine, the broader University, and /or the the Placement Site(s), on a need-to-know basis, in order to determine the applicable policies, to determine primary jurisdiction, to coordinate efforts, and to provide effective options to the learner. When possible, this will be done in a de-identified manner to preserve the learner's privacy to the greatest extent possible;
- that the LEU will provide information and referrals to the learner if the concerns must be addressed through an alternative process (e.g., academic appeals including remediation decisions, evaluation appeals, sexual harassment/assault, criminal behaviour, research misconduct, referral to CPSO, complaint that would be more appropriately addressed by a Placement Site, etc.).
- that the LEU will provide updates to the learner regarding the anticipated processes and timelines; note that details about individual outcomes generally cannot be shared owing to privacy considerations. Details about outcomes are shared in an aggregated and de-identified manner in a publicly-available annual report.

## E. Assessment of Jurisdiction for Reports

Once a learner has made a **report** to the Learner Experience Unit, Temerty Medicine must first make an assessment of jurisdiction – i.e., which organization or department will review and/or investigate the report, including who will ultimately have decision-making authority.

An assessment of jurisdiction is context-specific and will depend on the individuals involved in the incident(s), the environment in which the incident(s) occurred, and other factors. It may be necessary to consult with legal counsel at both the University and the Placement Site, where applicable.

The next step will be to determine the appropriate process to follow. It is possible that:

1. Temerty Medicine supports early resolution at a department or program level
2. Temerty Medicine will lead an investigation
3. The learner will be referred to another office or process at the University
4. A Placement Site will lead an investigation





5. Temerty Medicine will collaborate with a Placement site on a joint investigation

For certain sexual violence and sexual harassment complaints, jurisdiction will be determined pursuant to the Protocol for [Sexual Violence and Sexual Harassment Complaints Involving Faculty Members and Students of the University of Toronto arising in Independent Research Institutions, Health Care Institutions and Teaching Agencies](#).

In cases where Temerty Medicine is not managing the process, the LEU will continue to assist the complainant by providing information, referrals, and support.

## F. Processes for Addressing Reports

### 1. Temerty Medicine supports early resolution at a department or program level

It is anticipated that faculty in leadership roles will manage some learner complaints at a departmental or program level because:

- A learner directly reports to faculty in leadership roles and declines to contact LEU; or,
- LEU escalates a learner's report to the attention of departmental leadership

In all cases, faculty in leadership roles are encouraged to:

- familiarize themselves with this Guideline including Appendix B which outlines a range of resolution options, some of which require notification to LEU, Clinical and Faculty Affairs, and/or Temerty Medicine;
- contact the Director of the LEU directly for support, e.g., if they have any questions, if they wish to refer a complex matter to the LEU, if they wish to explore a broad cultural review of the learning environment, etc.;
- provide LEU with periodic updates about the numbers and types of concerns that have been managed locally, in order to strengthen oversight of the learning environment

In cases where the LEU has escalated the complaint to the department, faculty in leadership roles are accountable to providing LEU and/or Clinical and Faculty Affairs with information about how the complaint was resolved.

LEU is committed to informing learners when their complaints have been addressed. Although the LEU cannot provide granular details about outcomes due to privacy considerations, outcomes will be shared in an aggregated and de-identified manner in the annual learner experience report.

### 2. Temerty Medicine leads an investigation



When Temerty Medicine determines that an investigation is necessary and appropriate and the matter falls within Temerty Medicine's exclusive jurisdiction, the following steps will be taken:

- Temerty Medicine will form an investigative committee and appoint a committee Chair, in a timely manner; usually the committee is convened by the relevant decanal lead or delegate.
- The membership of the committee will be submitted for information to the Director of LEU.
- In many cases the committee will be comprised of Temerty Medicine faculty members and learners with relevant awareness and experience, as well as no potential or actual conflict of interest. In exceptional cases, the committee may be replaced with an external investigator with relevant expertise.
- Where appropriate, Temerty Medicine may invite a representative from a Placement Site to be on the committee.
- Where possible, the committee must be inclusive of members from equity-deserving groups.
- It is expected that all members of the committee will undertake unconscious bias training prior to the first meeting, and the Chair of the committee is responsible for ensuring all committee members attest to its completion.
- The committee will convene in advance of commencing the investigation to review its Terms of Reference as well as the mandate and scope of their work.

The investigation will include meeting with the complainant, the respondent, and with willing participants who have evidence about the allegations (witnesses). The committee may also consider other evidence such as documents and communications. The respondent will, in most cases, be interviewed after the complainant.

In meeting confidentially with the **complainant**, the committee will:

- Summarize the policies and procedures that will be followed for investigating the complaint, including the mandate and scope of the committee;
- Advise the complainant of available supports, including but not limited to their right to have a support person accompany them, if applicable, to meetings;
- Remind the complainant of steps that Temerty Medicine takes to protect the complainant against retaliation;
- Ensure the complainant is given a full opportunity to state their case and present relevant evidence.

In meeting confidentially with the **respondent**, the committee will:

- Inform them that there has been a complaint and provide a summary of the allegations;
- Summarize the policies and procedures that will be followed for investigating the complaint, including the mandate and scope of the committee;
- Advise the respondent of available supports, including but not limited to their right to have a support person accompany them, if applicable, to meetings;

- Advise them that the University takes seriously any retaliation against, or intimidation of, the complainant or of anyone connected with the report (e.g., witnesses);
- Ensure the respondent is given a full opportunity to state their case and present relevant evidence.

Following the committee's investigation:

- The committee will review all relevant evidence as it relates to the allegations and determine whether the evidence establishes, on a balance of probabilities, that the alleged conduct occurred (i.e. is it more likely than not to have happened). This may include, where appropriate, a determination of whether the alleged conduct constitutes a breach of the applicable Temerty Medicine or University standards, policies, and procedures outlined in **Appendix A**.
- The committee will write a report, outlining the evidence it considered, the individuals it interviewed, and its findings about what occurred. The committee may make recommendations about whether any corrective or follow-up action(s) is necessary.
- The committee will share its findings in accordance with its Terms of Reference.
- The relevant Temerty Medicine leadership, in consultation with the Placement Site as appropriate, will consider whether any further resolution mechanisms are required to resolve the complaint – see Appendix B.

### **3. The learner is referred to another office or process at the University**

In certain circumstances, a complaint may be most appropriately addressed by another University office or under another University policy or process. This may include (but is not limited to) academic appeals (including remediation decisions), evaluation appeals, [allegations of research misconduct](#) or complaints of [sexual violence or sexual harassment](#) that fall within the University's exclusive jurisdiction.

### **4. The Placement Site leads an investigation**

A Placement Site may take the lead on resolving a complaint when the complaint falls under its exclusive jurisdiction (e.g. patient safety, clinical care, complaints against a staff member of the Placement Site). Temerty Medicine will remain engaged in and informed about the management of the concern (within the limits of the Placement Site's procedures).

**Learners registered with Temerty Medicine must be reminded of their right to voluntarily access the Learner Experience Unit, Office of Learner Affairs for support when complaints are brought forward to the Placement Site.** Any questions about applicable policies, guidelines, and processes can be directed to the Director of Learner Experience to ensure alignment. The Director of Learner Experience should be consulted if interim measures need to be considered during the management of the complaint by a Placement Site.



## **5. Temerty Medicine collaborates with a Placement site on a joint investigation**

In circumstances where both Temerty Medicine and a Placement Site have authority over the matter, and the alleged conduct falls into the jurisdiction of both institutions, Temerty Medicine may partner with the Placement Site to jointly investigate the complaint and mutually agree on the terms and scope of the investigation.

In these instances, Temerty Medicine will continue to support the learner in navigating applicable processes. Any questions about applicable policies, guidelines, and processes can be directed to the Director of Learner Experience to ensure alignment. The Director of Learner Experience should be consulted if interim measures need to be considered during the joint management of the complaint (ex. alternative administrative arrangements that enable the learner to work with a different supervisor or at a different Placement Site).

## **G. Mechanisms for Providing Feedback**

Learners who are dissatisfied with their interactions with the Learner Experience Unit:

- Can contact the Director of Learner Experience
- Can complete an online anonymous survey / program evaluation of the LEU, available on the webpages and housed in the Office of Assessment and Evaluation
- Can write a letter of concern to the relevant decanal lead
- Can contact the University of Toronto Ombudsperson's Office.

Members of the University community retain the right to bring an application directly to the Human Rights Tribunal of Ontario in appropriate matters.

## **H. Relationship Between the University and Placement Sites**

The University and Placement Sites are governed by existing affiliation and placement agreements. These will be respected and upheld in the application of this Guideline. In particular, review and management of learner concerns will comport with these existing agreements with respect to information sharing between the University and the Placement Site(s).

## **I. Institutional Responsibility: Tracking, Analyzing, and Addressing Trends**

The Director of Learner Experience is responsible for oversight and implementation of this Guideline and holds primary responsibility for the tracking of allegations of learner mistreatment discussions/disclosures/reports pursuant to this Guideline. The Director, along with the Associate Dean, Learner Affairs, are also jointly responsible for identifying concerning rates or trends in mistreatment within our learning environments, in collaboration with partners such as University departments, Placement Sites, the decanal team, and others.



The tracking and storage of documentation pertaining to discussions/disclosures/reports of learner mistreatment will be in accordance with University policy and the Freedom of Information and Protection of Privacy Act (FIPPA).

The Director of Learner Experience produces an annual report that summarizes the frequency and spectrum of alleged mistreatment discussions/disclosures/reports from learners, including the resolutions that Temerty Medicine has achieved. To inform the production of this annual report, departmental/program-leadership will provide the Director of Learner Experience with de-identified data regarding incidents reviewed locally. Any data included in the annual report will be conveyed in an aggregated and de-identified manner to ensure that the privacy of individuals (complainants and respondents) is respected.



## Appendix A

### Relevant Statements, Policies, Guidelines, Codes and Standards

- [Ontario Human Rights Code](#)
- University of Toronto:
  - [Statement on Human Rights](#)
  - [Statement on Prohibited Discrimination and Discriminatory Harassment](#)
  - [Policy on Sexual Violence and Sexual Harassment](#)
  - [Protocol with Health Care Institutions: Sexual Violence and Sexual Harassment Complaints involving Faculty Members and Students of the University of Toronto arising in Independent Research Institutions, Health Care Institutions and Teaching Agencies](#)
  - [Code of Student Conduct](#)
  - [Standards of Professional Practice Behaviour for all Health Professional Students](#)
  - [Policy with Respect to Workplace Harassment](#)
  - [Policy with Respect to Workplace Violence](#)
  - [Policy on Conflict of Interest and Close Personal Relations](#)
  - [Human Resources Guideline on Workplace Harassment and Civil Conduct \(Civility Guideline\)](#)
  - [Terms of Reference of the Office of the Ombudsperson](#)
- Temerty Faculty of Medicine:
  - [Faculty of Medicine Diversity Statement](#)
  - [Standards of Professional Behaviour for Clinical \(MD\) Faculty](#)
  - [Relationships with Industry and the Educational Environment in Undergraduate and Postgraduate Medical Education](#)
  - [Resolution of Resident Disagreement with Attending Physician or Supervisor – Procedural Memorandum](#)
  - [Postgraduate Trainee Health and Safety Guidelines](#)
  - [Relationships with Industry and the Educational Environment in Undergraduate and Postgraduate Medical Education](#)
- College of Physicians and Surgeons of Ontario (CPSO):
  - [Physician Behaviour in the Professional Environment](#) and [Guidebook for Managing Disruptive Physician Behaviour](#)
  - [Physician Behaviour in the Professional Environment](#)
  - [Professional Responsibilities in Postgraduate Medical Education](#)
  - [Guidelines for Supervision](#)
- Canadian Medical Association (CMA)
  - [CMA Code of Ethics and Professionalism](#)
- College of Medical Radiation and Imaging Technologists of Ontario
  - [Standards of Practice](#)
  - [Code of Ethics](#)
- College of Occupational Therapists of Ontario
  - [Code of Ethics](#)
  - [Sexual Abuse Policy](#)



- College of Physiotherapists of Ontario
  - [Supervision Standards](#)
  - [Code of Ethics](#)
  - [Mandatory Reporting Obligations](#)
  - [Boundaries and Sexual Abuse Standard](#)
  - [Providing or Refusing Care Standard](#)
- College of Audiologists and Speech-Language Pathologists of Ontario (CASLPO)
  - [Code of Ethics](#)
  - [Collaboration and Professionalism Standards](#)
- Speech-Language and Audiology Canada (SAC)
  - [Code of Ethics](#)

## Appendix B

### Resolution Mechanisms

Review and management of a report may include, but is not limited to, one or more of the following actions (at the discretion of leadership who are tasked with acting on a report), some of which require notification to LEU, Clinical Affairs, and/or Temerty Medicine

- Alternative Administrative Arrangements for a learner (notification encouraged);
- Expectation-setting or awareness-building conversation by a University and/or Placement Site leader with the respondent with the aim of encouraging self-awareness and self-reflection (notification encouraged);
- Education intervention for the respondent, including referral for mentoring, coaching, or education (for example, Center for Faculty Development, Canadian Medical Protective Association) (requires notification);
- Written reflection or apology from the respondent (requires notification);
- Confidential, mediated discussion or resolution between the respondent and the complainant. This approach recognizes the role of collegial conversations and restorative justice in the Temerty Medicine community, but this must take into account the power imbalances that exist in our clinical and learning environments. A mediator who is acceptable to both parties may be appointed to work towards a resolution. Learners can ask PARO representatives to accompany them (requires consultation);
- Notification to applicable regulatory body (requires consultation);
- Disciplinary interventions (requires consultation), which may include interim measures / alternative administrative arrangements for learners:
  - Temporary or permanent change to teaching, supervision, research, or leadership duties (requires consultation); note this may be followed by a gradual re-introduction of responsibilities (requires consultation)
  - Termination of Academic Appointment (requires consultation);
- Notification to campus police or law enforcement (requires consultation);
- Referral to another University process or body, as appropriate (requires consultation);
- Systems-level interventions (requires consultation or notification)





## Appendix C Overview of Process / Algorithm

