

UNDERGRADUATE MEDICAL EDUCATION SCHULICH SCHOOL OF MEDICINE & DENTISTRY PROFESSIONALISM PROCEDURE

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INTRODUCTION

Professional behavior is foundational to safe and effective patient care, a respectful learning environment, and progression toward the successful completion of the [Doctor of Medicine Program](#) (MD Program). Medical students are expected to uphold standards consistent with the values, responsibilities, and trust placed in members of the medical profession.

Professional identity develops through the MD Program as students cultivate self-awareness, engage in reflective practice, respond constructively to feedback, and learn from experience. The Program recognizes that students may encounter challenges or demonstrate lapses in professional behavior. When concerns arise, the Program is committed to addressing them fairly, proportionately, in a manner that promotes accountability, supports reflection, facilitates behavior change and achievement of required [professional competencies](#).

The medical school and its clinical affiliates share responsibility for the learning environment and for identifying, preventing, and responding to conduct that undermines professional standards, patient safety, or the well-being of others.

PURPOSE

The Schulich School of Medicine & Dentistry Professionalism Procedure sets out the processes for responding to professionalism concerns in a psychologically safe but socially accountable manner.

AUTHORITY AND RELATIONSHIP TO THE STATEMENT ON PROFESSIONALISM

This Procedure should be read together with the Schulich School of Medicine & Dentistry Statement on Professionalism, which sets out the governing standards, expectations, scope, and professionalism framework for Doctor of Medicine Program (MD Program) students. This Procedure operationalizes the Statement by establishing the processes for reporting, receiving, screening, reviewing, documenting, and responding to professionalism concerns. It is intended to support fair, timely, transparent, and educationally appropriate responses to such concerns. Where there is any inconsistency, the Statement on Professionalism and applicable University policies govern.

RELEVANT ACCREDITATION STANDARDS

3.5 Learning Environment A medical school ensures that the learning environment of its medical education program is conducive to the ongoing development of explicit and appropriate professional behaviors in its medical students, faculty members, and staff at all locations.

7.10 Professional and Leadership Development The curriculum provides educational activities to support the development of each student's professional identity, core professional attributes, knowledge of professional responsibilities and leadership skills.

9.4 Assessment System: A medical school ensures that, throughout its medical education program, there is a centralized system in place that employs a variety of measures (including direct observation) for the assessment of student achievement, including students' acquisition of the knowledge, core clinical skills (e.g., medical history-taking, physical examination), behaviors, and attitudes specified in medical education program objectives, and that ensures that all graduates achieve the same medical education program objectives.

DEFINITIONS

Professionalism

The College of Physicians and Surgeons of Ontario define [professionalism](#) as “the words and actions of physicians that foster trust and respect with patients, colleagues, and the public.”

Discrimination / Harassment / Sexual Misconduct

These terms are defined in accordance with [Western Policy 1.35 Non-Discrimination / Harassment / Sexual Misconduct](#).

Student

Individual enrolled in a degree program leading to the Doctor in Medicine at the Schulich School of Medicine & Dentistry or other accredited medical school and is participating in required or optional clinical learning experiences.

MSPR (Medical Student Performance Record)

An official academic document that summarizes a student's performance throughout the MD Program, including relevant professionalism information where required for residency application and postgraduate training purposes.

Professionalism Concern

A reported behavior, communication, omission, or pattern of conduct that may be inconsistent with the Statement on Professionalism or related program, University, or clinical learning environment expectations.

Informal Educational Response

A supportive, proportionate educational conversation used to address a single low-severity concern before a formal level classification is required.

Remediation

Remediation in the MD Program at Schulich is a formal program designed to assist the Student in correcting identified gaps in academic, clinical and/or professional performance so that the Student can be successful in the Program.

Probation

A formal academic status with conditions or restrictions imposed in accordance with the applicable assessment and appeals framework.

Internal Academic File

The confidential program record in which professionalism concerns, responses, remediation plans, and outcomes are documented in accordance with applicable policy.

Immediate Risk

A circumstance in which a student's conduct may pose an immediate threat to patient, student or staff safety, or the integrity of the learning environment.

MSPR (Medical Student Performance Record)

An official academic document that summarizes a student's performance throughout the MD Program, including relevant professionalism information where required for residency application and postgraduate training purposes.

MSPR Notation

A notation in the Medical Student Performance Record made only where required or permitted by applicable program policy.

PROCEDURE**ROLES AND RESPONSIBILITIES**

Students are expected to comply with the Statement on Professionalism, participate honestly and respectfully in any review process, respond to communications in a timely manner, and engage in reflection, remediation, and follow-up where required.

Faculty members, residents, staff, preceptors, and other individuals involved in the learning environment are responsible for bringing forward professionalism concerns in good faith, providing factual and timely information, and participating in review processes as required.

Professionalism concerns may be brought forward by any individual who interacts with Schulich medical students, including faculty members, residents, peers, administrative staff, patients, simulated patients, other health professionals, and members of the public.

Course Chairs, Clerkship Rotation Directors, and delegates (including members of the Academy of Educators) are responsible for receiving or escalating concerns, supporting informal educational intervention where appropriate, documenting lower-level concerns, and forwarding matters for review in accordance with this Procedure.

The Associate Dean UME (AD UME), or delegate (may include Professionalism and Learning Environment Advisor) is responsible for overseeing intake, screening, review, notification to the student, solicitation of the student response, classification of concerns, recommendation of educational, remedial, probationary, or other actions, and reporting cases to the MD Program Competence Committee.

The MD Program Competence Committee is responsible for reviewing level classifications and recommendations, approving professionalism-related actions within its authority (as recommended by AD UME or delegate (Professionalism and Learning Environment Advisor), and maintaining oversight of patterns of concern and compliance with required remediation. Where probation, interim suspension, or dismissal is contemplated, the AD UME exercises final authority as set out in the applicable Assessment and Appeals Procedure.

The Learner Experience Office (LEO) provides student support and guidance where a professionalism concern has been identified.

The Human Rights Office and Medical Affairs are engaged where required by the nature of the concern.

INTAKE PATHWAYS

Professionalism concerns may be brought forward by any individual who interacts with students. The mechanisms may include:

- Written communication to course chairs or UME administrative staff
- Assessment forms, including small-group facilitator evaluations and rotation evaluations
- Administrative tracking reports (Direct reports from patients, simulated patients, peers, faculty, staff, or members of the public, whether received by educational leaders or UME administration
- Institutional Reporting Platforms
 - Learner Experience Office (Mistreatment Pathway)
 - Medical Affairs (e.g. SPEAK)

All professionalism concerns received will be centralized in the learner's internal academic file and tagged for review/triage by AD UME or delegate on a regular basis.

REVIEW AND DECISION PATHWAYS

Professionalism concerns involving UME students will be reviewed through either staged educational intervention or formal/escalated review, depending on severity, degree of harm, recurrence, responsiveness to prior intervention, and risk to patients or the learning environment.

Course Chairs, Clerkship Rotation Directors, or delegates may address lower-level concerns through informal educational intervention where appropriate and must document and escalate concerns in accordance with this Procedure.

The AD UME, or delegate (may include Professionalism and Learning Environment Advisor) will:

- Assess and classify professionalism concerns
- Determine appropriate review pathway, including whether immediate escalation is required
- Notify student in writing once initial assessment is completed.
- Provide student with an opportunity to respond
- Recommend educational, remedial, probationary, or other actions, including monitoring or conditions where appropriate
- Report cases and recommendations to the MD Program Competence Committee in accordance with this Procedure

The MD Program Competence Committee will:

- Review classifications and recommendations
- Approve professionalism-related actions within its authority
- Oversee patterns of concern and compliance with required remediation (if any)
- Address matters involving high-stakes academic consequences in accordance with the applicable [Assessment and Appeals Procedure](#)

Where probation, interim suspension, or dismissal is contemplated, the AD UME exercises final authority as set out in the applicable [Assessment and Appeals Procedure](#).

PROCEDURAL STRUCTURE

This Procedure includes two pathways;

- Staged behavior management for most concerns where reflection, educational intervention, and remediation may be appropriate
- Formal or escalated response for serious, urgent, repeated, or high-risk concerns

Refer to Appendix B for Professionalism Response Levels.

Concerns will be addressed according to severity, degree of harm, recurrence, responsiveness to prior intervention, and risk to patients or the learning environment. The MD Program is not required to begin at the lowest level if a more significant response is warranted.

FORMAL OR ESCALATED RESPONSE

Not all professionalism concerns are appropriate for staged educational intervention. A concern may proceed directly to formal or escalated review where:

- The conduct is too serious to address through staged response
- The conduct presents an immediate threat to patient safety, student safety, staff safety, or learning environment
- There is serious dishonesty, a serious confidentiality or privacy breach, sexual misconduct, serious discriminatory conduct, or possible criminal conduct
- Prior interventions have failed and matter now warrants a high-stakes academic response.

TIMELINES

Professionalism concerns will be addressed as promptly as reasonably possible by the MD Program as follows:

- within 3 weeks: acknowledge reports, complete initial screening, and notify student
 - Recommendations and Competency Committee Review occur AFTER student is offered opportunity to respond
- within 8 weeks: receive a response and communicate outcome from Competency Committee and next steps to student

This timeline may vary in light of urgent, complex, or parallel matters that impact the timeline.