Department of Medicine

Working With Respect
Guidance Document
EXECUTIVE SUMMARY

The Department of Medicine is committed to creating a healthy workplace where mutual respect, dignity and the ability of staff, physicians, learners, patients and clients to work together is supported. Respect includes: respect for the work environment, respect for other people’s privacy, their physical space and belongings; and respect for personal differences, e.g. race, colour, ancestry, place of origin, religious beliefs, gender (including pregnancy and gender identity), physical disability, mental disability, marital status, family status, source of income, sexual orientation, age, political beliefs; or any other groups as amended from time to time.

Creating a respectful workplace is everyone’s responsibility. Each of us has a part to play in helping foster and create a positive workplace by:

- **R** – Recognizing that every person is different
- **E** – Eliminating gossip
- **S** – Speaking as you would like to be spoken to
- **P** – Pride in who you are and what you do
- **E** – Expecting others have good intentions
- **C** – Common courtesy – say please and thank you!
- **T** – Taking Responsibility for your actions

We should neither overlook nor tolerate disrespectful behaviour that undermines the dignity or self-esteem of any individual or creates an intimidating, hostile or offensive work environment. This can take the form of bullying, rudeness, harassment, abuse or discrimination.

If you feel you have been treated in a disrespectful manner, there are a number of things you can do. In order, these are:

i) Ask the person to stop.
ii) In preparation for a discussion with the individual, make notes about the disrespectful behaviour including: the behaviour, date, how you felt, what you did about it and who else was present
iii) Keep it confidential so you retain control of the situation.
iv) Attempt to work out the difference with the individual directly and on an informal basis if circumstances permit. If you are uncomfortable dealing with the individual directly, seek out the help of someone you both trust.
v) Discuss the issue with your direct supervisor.
vi) If the informal mechanism doesn’t work, you may decide to take formal action against the person through the appropriate procedures of the applicable collective agreements or University Policies. If the process is undertaken, it is advised that you contact the DoM HR Unit to discuss the options available.

If someone complains about your behaviour, make sure you understand the exact behaviour that is making the person uncomfortable. Apologize, and stop the behaviour immediately. If you think there has been a misunderstanding about the behaviour between you and the person, discuss it with them on an informal basis.

**NOTE:** Even if you did not intend to be disrespectful, it is the results of the behaviour rather than the intention behind them that matter. If your behaviour is unwelcome by the person, and causes the person to feel uncomfortable, embarrassed or degraded, then it is disrespectful.
INTRODUCTION

The Department of Medicine is committed to creating a healthy workplace where mutual respect, dignity and the ability of staff, physicians, learners, patients and clients to work together is supported. Respect includes: respect for the work environment; respect for the privacy of others, their physical space and belongings; and respect for personal differences e.g., race, colour, ancestry, place of origin, religious beliefs, gender (including pregnancy and gender identity), physical disability, mental disability, marital status, family status, source of income, sexual orientation, age, political beliefs; or any other groups as amended from time to time.

The Department of Medicine believes that a healthy workplace:

- Promotes respect
- Values the contribution and personal differences of others
- Fosters a sense of inclusion
- Builds a high functioning work environment that fully supports the four pillars of administration, teaching, research and clinical care

This document is intended to provide guidance towards building a workplace where mutual respect, dignity and the ability of staff, physicians, learners, patients and clients to work together is supported. The Department of Medicine values scholarship, respect, compassion and caring, integrity, excellence, partnership and stewardship and is committed to creating an environment that is conducive to optimal administration, education, research and clinical care.

Creating a respectful workplace is everyone’s responsibility. As members of the Department of Medicine, we all have the right to be treated fairly and respectfully in the workplace. When we treat each other with respect and dignity the workplace will be positive for all.

We should neither overlook nor tolerate disrespectful behaviour that undermines the dignity or self-esteem of any individual, or creates an intimidating, hostile or offensive work environment. This can take the form of bullying, rudeness, abuse or discrimination. These behaviours may be unintentional. Regardless, the key factor is the impact of the behaviour and if the impact creates a perception of improper conduct, then improper conduct has occurred.

Working Together with Respect is meant to be both aspirational and inspirational in purpose and encourages voluntary corrective action to address misjudgement or improper conduct. The components of this document may be amended from time to time.
PRINCIPLES OF A RESPECTFUL WORKPLACE

DEFINITION OF RESPECT
Respect means to show consideration for others; to avoid behaviour that is perceived as harmful, degrading, insulting, or injurious to others.

RESPECT INCLUDES
Respect for the work environment; respect for other people’s privacy, their physical space and belongings; and respect for different viewpoints, philosophies, religion, gender, lifestyle, ethnic origin, physical ability, and beliefs.

RESPECTFUL BEHAVIOUR
We make the difference. Each of us has a part to play in helping foster and create a positive workplace. It is the responsibility of each person to:

- R - Recognize that every person is different
- E - Eliminate gossip
- S - Speak as you would like to be spoken to
- P - Take pride in who you are and what you do
- E - Expect that others have good intentions
- C - Display common courtesy – please and thank you!
- T - Take responsibility for your actions

BENEFITS OF A RESPECTFUL WORKPLACE

In recent years the workplace health focus has broadened from primarily physical health to include mental health as a result of an emerging duty of care in the legal system. The duty to provide a psychologically safe/healthy workplace requires a culture of ‘zero tolerance for mentally injurious conduct and strong support for respectfulness and fairness’.

A respectful workplace is beneficial to both the individual and the organization. For a staff member, the benefits can include:

- Reduced stress or anxiety;
- Increased engagement; and
- Greater work satisfaction.

These benefits build individual confidence which in turn underpins an environment that fosters creativity, innovation and ingenuity. Such an environment reinforces the individual benefits and a continuous, positive feedback loop is formed.

A respectful workplace based on such feedback loops develops significant beneficial consequences for the organization. A few of these are:

- Increased productivity;
- Improved organizational sustainability;
- Increased success in retention and recruitment of quality staff;
- Reduced absenteeism, WCB claims and disability rates; and
- Reduced benefits and operational costs.
The magnitude of the benefits of a healthy workplace are exemplified by the Conference Board of Canada which reports that mental illness alone costs the Canadian economy in excess of $14 billion annually through health care expenses and loss of productivity, with newer estimates reaching $35 billion. Two thirds of mental health costs are borne by employers. It has been demonstrated that a corporate strategy for a psychologically healthy workplace can significantly buffer the potentially negative effects of mental illness in the workplace. So, understanding the benefits and the magnitude of the risks, how can each of us work to ensure a respectful workplace?

### OUR ROLE IN CREATING A RESPECTFUL WORKPLACE

**RESPECT OTHERS**

We are all responsible for treating co-workers, patients, learners and clients with courtesy, and in a way that respects individual differences. Everyone needs to support the difference we recognize in ourselves and others, such as: race, colour, ancestry, place of origin, religious beliefs, gender (including pregnancy and gender identity), physical disability, mental disability, marital status, family status, source of income, sexual orientation, age, political beliefs; or any other groups as amended from time to time.

**THINK ABOUT OUR BEHAVIOUR**

Ensure behaviours reflect the principles and behaviour of a respectful workplace.

**TOGETHER, WE CAN CREATE RESPECTFUL WORKPLACES!**

*To create a Respectful Workplace, members of the Department of Medicine are expected to:*

- Encourage language, appearance, and demeanour appropriate to the professional healthcare setting.
- Be responsible and accountable for personal actions and decisions in the workplace.
- Respect the personal boundaries of others including, but not limited to, refraining from making unwanted romantic or sexual overtures or physical contacts, protecting personal information, and respecting individual workspace.
- Provide teaching, supervision, and training in a manner that is respectful of personal boundaries.
- Allow the appropriate and respectful expression of disagreement without the fear of punishment, reprisals, or retribution.
- Provide objective, timely, courteous, and constructive evaluations of learners, faculty, and support staff.

### DISRESPECTFUL BEHAVIOUR

These common terms are examples of those associated with disrespectful behaviour:

- Rudeness
- Bullying
- Harassment
- Abuse
- Discrimination

**RUDENESS**

Rude behaviour shows a lack of respect for others and may be intended to harm another person. Rudeness includes but is not limited to the use of offensive language and tone of voice; gossiping or talking behind someone’s back, interrupting others while they are speaking or working; giving others the silent treatment; staring and dirty looks; belittling someone’s opinion to others; spreading rumours; and other similar behaviour.
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**BULLYING**

Workplace bullying is described as the hurtful and repeated mistreatment of people by their co-workers, managers, or subordinates. Bullying includes but is not limited to *yelling* at or *ridiculing* a co-worker publicly; undermining an individual or group with vindictive or *humiliating* words or acts; *stalking* or other forms of *intimidation*, or other similar behaviour.

**HARASSMENT**

Harassment may include, but is not limited to the following:

- Inappropriate physical contact including striking, pinching, touching, kicking, bumping, as well as threats or attempted acts of this nature.
- Sexual harassment is unwelcome and inappropriate behaviour that is sexual in nature.
- Verbal or mental abuse such as inappropriate comments and the use of obscene language, gestures or threats.
- Use, display or distribution of material that is inappropriate under Alberta Human Rights and Multiculturalism legislation.
- Intimidating, condescending or negative comments.
- Non-verbal behaviour which is disruptive to the workplace.

**HARASSMENT IS NOT** ...

- Supervisors/Managers providing appropriate performance management, counselling, direction, constructive criticism, or discipline in a manner that does not undermine the dignity or self-esteem of an employee.
- Welcomed compliments or appreciated friendly interaction that is appropriate for the workplace.
- Choosing to have an appropriate work relationship instead of a friendship.

**ABUSE**

Abuse is any behaviour that causes physical or psychological harm; that creates fear or mistrust; or that compromises or devalues the individual. The Protection of Persons in Care Act recognizes physical, verbal, emotional and financial abuse.

**DISCRIMINATION**

 Discrimination is any act or omission based on race, colour, ancestry, place of origin, religious beliefs, gender (including pregnancy and gender identity), physical disability, mental disability, marital status, family status, source of income, sexual orientation, age, political beliefs; or any other groups as amended from time to time, when that act or omission results in loss of or limit on opportunities to work or to fully participate in campus life and/or the AHS community, or which offends the dignity of the person.

Discrimination is refusing to provide an opportunity or benefit with respect to employment or any term or condition of employment based on the race, colour, ancestry, place of origin, religious beliefs, gender (including pregnancy and gender identity), physical disability, mental disability, marital status, family status, source of income, sexual orientation, age, political beliefs; or any other groups as amended from time to time, except where there is a bona fide occupational requirement. Respect supports diversity and the differences we recognize in others and ourselves.

**NOTE:** Any of the above disrespectful behaviours will be reviewed in the context of appropriate social and cultural norms and what most people would perceive as detrimental to working relationships.

**HOW TO ADDRESS DISRESPECTFUL BEHAVIOUR**

**SPEAK UP**

If you experience a disrespectful, unwelcome, or uncomfortable situation, tell the person who is bothering you that you do not like what they are doing. Ask them to stop the behaviour and ask them to treat you with respect in the future.
If you observe disrespectful behaviour, speak up in a respectful manner. Do it privately and in a timely manner.

**TAKING ACTION**

Come forward if it happens to you. If you know it is happening to your co-worker, take action. Support and encourage them to come forward. Dealing effectively and sensitively with disrespectful behaviour issues is an integral part of creating a positive, productive environment.

If you feel you have been treated in a disrespectful manner, there are a number of things you should do. These are listed below in more detail:

**INFORMAL MECHANISMS:**

*First, attempt to resolve the differences through informal mechanisms.* This allows you to maintain control of the situation at a personal level. Here are the informal routes you might take:

- Let the individual know that his/her conduct and/or comments are unwelcome and not acceptable.
- In preparing for a discussion with the individual, make notes about the disrespectful behaviour as follows:
  - The behaviour
  - The date it happened
  - How you felt
  - What you did to try to resolve the problem
  - Who else was present
- Keep this information confidential
- Approach the individual’s direct supervisor or a trusted third party to help mediate
- Speak with your own supervisor

**SEMI-FORMAL MECHANISMS:**

If the informal mechanisms do not result in a change in behaviour or if your supervisor is the person at issue, seek facilitation/mediation assistance from the Department of Medicine HR Unit who will provide information on appropriate organizations such as Central HR, appropriate staff association, HPAWS, Office of Safe Disclosure and Human Right, and other available resources that may be of assistance.

**FORMAL MECHANISMS:**

If the informal mechanisms do not work, then formal mechanisms can be initiated. Contact the Department of Medicine HR Unit who will assist by identifying the appropriate, formal processes to be undertaken.

All incidents of disrespectful behaviour that are reported must be kept confidential. Do not discuss anything you have done or heard with co-workers. If a formal investigation occurs, only those directly involved in the issue or the investigation will have access to any information you provide.

**WHAT SHOULD I DO IF SOMEONE COMPLAINS ABOUT MY BEHAVIOUR?**

Make sure you understand the exact behaviour that is making the person uncomfortable. **Apologize, and stop the behaviour immediately.** If you think there has been a misunderstanding about the behaviour between you and the person, ask your supervisor, or seek assistance from Human Resources, to help you resolve the situation on an informal basis.
WHAT IF I DIDN’T INTENTIONALLY DISRESPECT THE PERSON?

The results of the behaviour, rather than the intentions behind them, are what matter. If your behaviour is unwelcome and causes the person to feel uncomfortable, embarrassed or degraded, then it is disrespectful. Stop the behaviour immediately.

This document has been created to support the University of Alberta “Ethical Conduct and Safe Disclosure Policy” and the “Discrimination, Harassment and Duty to Accommodate Policy”.
Appendix A: SAMPLES OF BEHAVIOUR

SAMPLE 1
A serious and heated disagreement occurs prior to a meeting between two colleagues. During the meeting, the one colleague does not respond to the others comments, rolls his eyes when the other is speaking, sits with his arms crossed and whispers comments under his breath. After the meeting is complete, the one colleague goes for coffee with individuals from another Division and tells them how ignorant his other colleague is and suggests that the other colleague needs to go back to grade school. The comments circulate across the department and eventually the other colleague finds out what is being said.

RESPECTFUL BEHAVIOUR would have entailed leaving the argument “at the door” of the meeting, listening attentively to the colleague and providing input and feedback as needed. Once the meeting ended, rather than going off for coffee and complaining and gossiping about the other colleague, the one colleague should have taken some time to calm down and perhaps have gone for coffee with his other colleague to see if they could work out their differences.

SAMPLE 2
A resident has been struggling with finding a vein in a patient’s arm to obtain a blood sample. A Registered Nurse gets frustrated with the resident and begins yelling and berating her in front of the patient and his family telling her that she is blind, all thumbs and should never have bothered with medicine. The next week, the RN sees the same resident and starts following her. As the resident is assisting patients, the RN makes similar comments about the resident. This behaviour continues each time the RN interacts with the resident.

RESPECTFUL BEHAVIOUR would have been assisting the resident in finding a vein on the patient and using the situation as a teaching opportunity. The subsequent behaviour is simply inappropriate and unless the RN was using these as additional teaching opportunities, would be considered as stalking and ongoing bullying.

SAMPLE 3
On a Wednesday a manager comments on his administrative assistant’s cute blouse. The assistant is somewhat annoyed but does not mention anything to the manager. The following Tuesday he tells her that he likes her polka dot skirt. This time the assistant does inform her manager that the comments about her clothing make her feel uncomfortable and she would appreciate if he would stop saying such things. Two weeks later the manager mentions that he enjoys the change in her hair color and style. The manager continues to make these comments to his assistant in passing and is oblivious to the fact that the assistant perceives these as objectifying comments. The assistant has begun a grievance with the union.

RESPECTFUL BEHAVIOUR from the manager would be to simply withhold any such comments and to certainly stop once the assistant has stated that the comments make her feel uncomfortable. From a professional perspective, such comments should be limited to the appropriateness of the attire for the workplace. For the assistant, the assistant could find a colleague or other impartial member of her work team to meet with her and the manager in order to have support during a formal conversation about her concern, prior to initiating the grievance process.

SAMPLE 4
A lab supervisor is away on holidays and has left a senior research assistant in charge during her absence. The senior assistant needs to complete a set of experiments using bio-hazardous materials but is concerned about the safety protocols and specifically the safety equipment to be used. In e-mailing the supervisor for confirmation, the senior assistant is bluntly told to “just use what’s there and get it done, or I’ll find someone else to do it.” With significant reluctance and apprehension, the senior assistant completes the experiments. In this example, the lab supervisor devalues the senior research assistant through a lack of concern for the safety of the individual.

RESPECTFUL BEHAVIOUR would be for the lab supervisor not to indirectly threaten the research assistant’s job but rather to listen to the concerns carefully, consider appropriate options that allow for the safety of the lab staff and discuss with the research assistant how best to move forward with the experiments.

SAMPLE 5
A patient enters a clinic and checks in for an appointment. The male doctor, wearing a bright pink shirt and a couple of earrings, comes out to greet the patient and go into the consult room. In seeing the doctor, the elderly female patient immediately complains and demands that another physician be assigned.
RESPECTFUL BEHAVIOUR would be for the patient and the doctor to meet and mutually determine if there is really an issue of patient comfort. If so, a polite request for another physician and the assignment of another physician may be appropriate.
Appendix B: AVAILABLE RESOURCES

Department of Medicine Human Resources
The Department of Medicine Human Resources Unit is a full service team for support staff members of the Department providing assistance spanning the spectrum from recruitment, performance management, vacation and leaves, payroll, separations and workplace issues. The DoM HR Unit should be the first point of contact for any staffing issues and will initially work with members to find informal resolutions for workplace/learning environment issues. If these informal initiatives are not fully successful or if the situations are broader than first anticipated, the DoM HR Unit will utilize its full network across campus to provide resources and contacts to help individuals and units create sustainable solutions.

https://www.ualberta.ca/departments/medicine/for-faculty-staff/administrative-services/human-resources

Health and Wellness

Health Promotion and WorkLife Services (HPaWS)
Health Promotion and WorkLife Services provides a client focused staff benefit assisting individuals and work groups to achieve personal and professional excellence within a meaningful, creative and effective work and learning environment.

Programs and are aligned to support departments in providing a psychologically healthy and safe workplace. Specifically, HPaWS offers and facilitates access to programs, services and resources to enhance individual and organizational health. Services are designed to assist either individual staff members and work teams achieve their full potential by promoting well-being, health and life balance. Consultation services are also provided to individuals in a leadership role.

http://www.hrs.ualberta.ca/Health

Employee and Family Assistance Program (EFAP)
The Employee and Family Assistance Program provides psychological counseling, along with a wide range of work life and wellness services. In addition to counseling, staff members and their eligible dependents have access to nutritional, legal and financial consultation, services of a personal trainer, e-learning courses, health and wellness resources, and work life services (e.g. Cultural Transition Support, child and eldercare resources, etc).
All University of Alberta staff and their eligible dependents have access to services through the EFAP, regardless of whether you are enrolled in a benefit plan. All services provided through the EFAP program are held in the strictest of confidence.