Policy for Assessment and Remediation of Professionalism of Undergraduate Medical Education Students

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<th>Office of Administrative Responsibility:</th>
<th>Dean, Faculty of Medicine &amp; Dentistry</th>
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<td>Approver:</td>
<td>MD Program Committee</td>
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<td>Scope:</td>
<td>This process extends to all members of the MD program</td>
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Overview

Professionalism or professional competence is the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served. (Epstein and Hunder: Proc (Bayl Univ Med Cent). Jan 2007; 20(1): 13–16.)

Professionalism is fundamental to the practice of medicine and, therefore, is a core competency required of University of Alberta medical students. Students are expected to demonstrate adequate professional and personal attributes both within and outside the boundaries of a course or clerkship. Students should familiarize themselves with the CPSA’s Code of Conduct and Duty to Report a Colleague, the University of Alberta’s Code of Student Behaviour and Practicum Intervention Policy as well as this document.

Course and clerkship preceptors complete a Professionalism Assessment Form Evaluation (PAF) for every student at the end of the course/clerkship period. An Institutional PAF can also be completed on a student at any time ad hoc by the central educational administration.

It is important to note that student behaviour is governed by a number of policies, including but not limited to the Code of Student Behaviour and the Practicum Intervention Policy. As appropriate, the UME may lay complaints under those policies in addition to assessing professional competencies. Students should also understand that independent of academic performance, multiple and/or repeated lapses in professionalism over time can lead UME referring the student to the Faculty Academic Standing and Promotion Committee. The Faculty Academic Standing and Promotion Committee will form a decision regarding remediation and/or the student being asked to repeat a course/clerkship rotation/year or leave medical school based on failure of professional competency independent of academic performance.

Purpose

The University of Alberta’s undergraduate medical education program has developed this policy to describe the process for reviewing and addressing PAFs and to outline the process of remediation of professionalism lapses.

Examples of linking professionalism values to specific behaviours (but not limited to) that if not demonstrated could result in a minor or major lapse in professionalism (adopted and modified from Jim Wagner, MD, the University of Texas Southwestern Medical School) are listed below:
<table>
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<th>Values</th>
<th>Behaviours</th>
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| **Responsibility** | • Follows through on task  
• Arrives on time  
• Is prepared for and/or participating in group sessions  
• Responds in a reasonable timeframe to communications from UME  
• Meets the requirements that are in place to progress to clinical responsibility, including but not limited to receiving required immunizations, scheduling and completing appropriate paperwork and registration requirements for MD program |
| **Maturity**    | • Accepts blame for failure  
• Doesn't make inappropriate demands  
• Is not abusive and critical in times of stress  
• Listens well  
• Motivated to improve |
| **Communication skills** | • Participates in group sessions  
• Is not hostile, derogatory, sarcastic  
• Is not loud or disruptive  
• Maintains patient confidentiality  
• Is patient  
• Demonstrates appropriate relationships with patients or interpersonal relationships with other members of small groups or health care team |
| **Respect**     | • Is sensitive to physical/emotional needs  
• Is not biased/discriminatory  
• Is not disruptive in group or lecture setting  
• Is present for standardized patient-related activity  
• Does not falsify financial information to procure student loans |
1. RESPONSIBILITIES
   a. The course/clerkship coordinator will ensure the completion of an end-of-course/clerkship rotation PAF for each student that participated in the course/clerkship rotation.
   b. The Director of Professionalism for UME and a UME Professionalism Committee (UPC) member (herein referred to as the intake committee) will review all student PAFs that are submitted with any number or type of lapses, and any forms where the student does not agree with their professionalism assessment or have requested a meeting.
   c. The informal or formal appeal of a professionalism assessment resulting in a failing grade would be processed via the Appeals Process as outlined in 113.3 of the University calendar.

2. ROLES
   a. The intake committee will review all PAFs submitted with lapses.
   b. The Director of Professionalism, in consultation with the UPC, will propose a remediation plan and make recommendations to the Associate Dean, MD Program.
   c. The Associate Dean, MD Program will liaise with the Director of Professionalism in order to identify any curriculum revisions that may be required if global patterns of professionalism lapses are identified over time.
   d. The Director of Professionalism will inform the Associate Dean, MD Program should there be potential of failure of a course/clerkship rotation based on professionalism lapse(s) to be brought forward for discussion and ratification at Academic Standing Committee and Faculty Academic Standing and Promotion Committee.

3. REVIEW OF PAF
   The intake committee will use the following guidelines to review forms:
   a. If a student indicates that they wish to speak to someone about their form, the form will be flagged to the Director of Professionalism regardless of whether any professionalism lapses are noted or not.
   b. If there are no professionalism lapses noted, the intake committee will 'approve' the form.
   c. If there are 1 or 2 minor lapses noted on the form, the intake committee will review the entire form, including narrative comments, and determine if the lapses warrant further attention. If the lapses were addressed by the preceptor or course/clerkship director with the outcomes documented in the student’s professionalism form and no follow-up is deemed warranted by the triage committee, the form will be ‘approved’. If the intake committee wishes to investigate further, the Director of Professionalism (as a designate of the UPC) will meet with the student and perform any necessary investigation into the situation. If formal remediation is necessary, the Director of Professionalism, in consultation with the UPC, will propose a remediation plan and communicate this to Associate Dean, MD Program.
   d. If a student has 3 or more minor lapses (at a single point in time or accumulated over time) and/or a major lapse or an Institutional PAF, the Director of Professionalism will meet with the student and carry out any necessary investigation into the situation. If formal remediation is necessary, the Director of Professionalism, in consultation with the UPC, will propose a remediation plan to the Associate Dean, MD Program to be brought forward for discussion and ratification at Academic Standing Committee and Faculty Academic Standing and Promotion Committee.
   e. In the event that a student has 3 or more minor lapses and/or a major lapse or an Institutional PAF and/or a course/clerkship rotation coordinator flags the student as a “fail” of the course/clerkship rotation based on professionalism, the Director of Professionalism, in consultation with the UPC, will propose a
remediation plan and communicate this to the Associate Dean, MD Program to be brought forward for discussion and ratification at Academic Standing Committee and Faculty Academic Standing and Promotion Committee.

f. The student may be referred to the College of Physicians and Surgeons of Alberta, as required by the College of Physicians and Surgeons of Alberta Code of Conduct guidelines.

Professionalism remediation can consist of (but not be limited to) one or a combination of the following:

a. Educational interview with the Director of Professionalism to discuss and emphasize the importance of the professional role in the attainment of professional competence, to identify gaps and learning needs in the area of professionalism as well as to discuss and understand the ramification and possible outcome of the unsuccessful completion of the remediation.

b. Student letter of apology to involved preceptors/course and/or clerkship coordinator to aid in the reflective process.

c. Readings on professional behaviour in medicine to increase knowledge on the principles and practice of professionalism through focused reading and review of the literature, and professional guidelines and policies.

d. Reflective essay on professionalism issues in medicine which will address the effect and consequence to patient care, colleagues, as well as self from the exhibited lapse in professionalism. The essay will discuss why and how to attain and maintain competencies in the professional role.

e. Student will attend communication sessions or workshops on recommendation of the UPC.

f. Community service

g. Educational webinars (ethics, professionalism, gender sensitivity etc)

4. MSPR

With regards to the Medical Student Performance Report (MSPR), lapses in professionalism will be treated in exactly the same manner as medical knowledge lapses or deficiencies. Explicitly stated, no reports of lapses in professionalism shall be included on a student’s MSPR, unless approved by the Associate Dean, MD Program and only after it is established that lapse(s) in professionalism are egregious in nature, related to a violation of Code of Student Behavior and/or are persisting despite remediation occurring.

5. Dismissal from medical school is a potential consequence for a single egregious act or repeated failure of remediation for professionalism competency.
DEFINITIONS

Any definitions listed in the following table apply to this document only with no implied or intended institution-wide use.

1. **Professionalism or professional competence** is the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served. (Epstein and Hunder: Proc (Bayl Univ Med Cent). Jan 2007; 20(1): 13–16.)

FORMS

1. PAF
2. MSPR

RELATED LINKS

3. Code of Student Behaviour, University of Alberta
4. Practicum Intervention Policy, University of Alberta

APPROVER | STATUS | DATE
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MD Program Committee | Approved | 22 January 2015