



Responding to Learner Mistreatment from Faculty, Staff, and Other Learners: Toolkit

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PURPOSE

[Toronto Academic Health Science Network](#) (TAHSN) exists as a dynamic consortium of the University of Toronto and its [affiliated academic hospitals](#) to serve as a leader in Canadian health care. This is done through developing collaborative initiatives that optimize, advance, and sustain high-quality patient care, education, knowledge transfer and research innovation. Specifically, [TAHSN's Education Committee](#) (TAHSNe) commits to supporting and developing a TAHSN-wide strategy to further excellence in health professional education. A key TAHSNe priority is to address learner mistreatment.

Responding to Learner Mistreatment from Faculty, Staff, Other Learners: Toolkit was created by TAHSN's Learner Mistreatment by Others (Faculty, Staff, Other Learners) Working Group. The information in this toolkit is intended to support TAHSN hospitals and all of their associated clinical teaching environments (referred to as 'TAHSN hospitals' in this document) in addressing learner mistreatment.

This document provides guidance for various situations, but should not be presumed or construed as complete or exhaustive. These options may not be appropriate for/applicable to every situation. The education leader (e.g., Director and/or Vice President of the Education department/program at your institution) will need to assess each situation individually. Within the guidance of this Toolkit, applicable policies and legislation (including the academic partner's policies and processes), and their own role, to identify the best course of action.



GUIDING PRINCIPLES

When a learner reports mistreatment by faculty, staff, or peers (i.e., other learners), the process of responding to, managing, and debriefing about the incident should follow the eight guiding principles collaboratively established by the hospitals, and academic partners.

1. Develop a defined guideline and/or process to address learner mistreatment.
2. Ensure fair and transparent process for all involved parties.
3. Encourage contemporaneous disclosures/reporting, but with no time limits.
4. Ensure disclosing parties are thoroughly informed and educated about the process of discussions/disclosures/reporting, and available supports.
5. Ensure education leaders at TAHSN hospitals are aware of guidelines/processes and be able to support any learner wishing to discuss, disclose, or report mistreatment.
6. Maintain confidentiality where possible.
7. Ensure privacy and secure documentation on learner mistreatment disclosures or reports.
8. Allow informed choice of anonymity of learner when possible.

ADDRESSING LEARNER MISTREATMENT BY FACULTY/STAFF/OTHER LEARNERS

There are multiple ways learner mistreatment can be brought forward (e.g., via education or professional practice leader, the Learner Experience Unit, a school's office for learner affairs, preceptors or clinical instructors, email, telephone, or in person).

Incidents of mistreatment may be reported by any individual, which includes the following: Learner (reporting on behalf of themselves or as a witness), physician, staff, patient, or staff member from the learner's academic institution. Ideally, all incidents of mistreatment at the hospital will be brought to the hospital's education leadership team in order to understand the volume, and scope of incidents in the organization. This should also be done in partnership with the University, College, or Training program the learner is enrolled in (E.g., University of Toronto's Faculties like Medicine, Nursing, etc.). [Appendix A](#) shows the flowchart that indicates the steps that follow once an incident of mistreatment is brought to the education team member's attention. This section will explain the steps and questions asked in the flowchart.

Incident of mistreatment brought to education team member's attention

Mistreatment can occur in a variety of ways, including, but not limited to social media, in person, over email, and over the phone. Situations may involve an individual reporting some inappropriate behaviour witnessed, but may not be personally involved in. In these situations, it is best to encourage the person directly involved to connect with the Education leadership team within the hospital, or the relevant office with expertise at the academic partner and seek advice. Depending on the nature of what has been witnessed, this will dictate the options available to the learner or the witness. We encourage those that have witnessed inappropriate behaviour to share with their peer(s) directly involved that there is a process set up to provide support through the hospital education unit and / or through the academic partner.

The first point of contact for a learner discussing/disclosing/reporting mistreatment is critical in terms of helping the learner understand their rights, the process, their options, and next steps. The script in [Appendix B](#) may help the first points of contact to support the learner using a [trauma-informed approach](#). The script includes "must-say statements" in order for the individual reporting to capture accurate



information and resources, and to ensure the learner feels safe and heard through the process. More information can be found in the [Temerty Faculty of Medicine, University of Toronto: How to Navigate Learner Mistreatment](#)

Intake Meeting

The learner is informed of these options for next steps:

- A) Learner chooses to talk to someone immediately, which could include a faculty education lead, or an office identified as an objective third party i.e., OLA.
- B) Learner chooses to schedule an appointment with a member of Education leadership team for another time. Give option of who is available to meet the individual and schedule the meeting time before the individual leaves and/or conversation ends. Advise the individual that an Education leadership team member will endeavor to follow-up as soon as possible but no longer than 3 business days.

Prior to connecting the learner, ensure consent to share their contact information has been received. Give the learner the leader's contact information if they wish to contact them sooner. The admin/education coordinator/preceptor (first point of contact) will document the date and time of their conversation in an email to the Leader. The learner's contact information is also documented.

Important note: If the learner's complaint suggests that the mistreatment may be of a sexual/physical harassment nature, then it must be processed as a formal report and as a first step, the academic partner must be consulted / advised to ensure that applicable university policies on Sexual Violence are adhered to, along with relevant supports / resources for affected learners.

From a trauma informed approach, minimizing the number of times a learner shares their story is critical. As noted above, establishing jurisdiction over the complaint review process should be done collaboratively as soon as possible.

Initial Discussion: Meeting with Education Leader

If the learner chooses to continue in this process and speak with an Education Leader, who will support them with their report/disclosure, it is that leader's responsibility to ensure that the learner is thoroughly informed of the potential implications and outcomes of their decision/action during these processes. The leader also needs to be aware of, and review, the appropriate institutional and academic partner's policies as per the affiliation agreement. This is critical because the jurisdiction for managing certain forms of mistreatment may be with the academic partner.

Note: The reporting/disclosure/discussion process should only involve individuals who are pertinent to each step of the review and management process for the disclosure or report of learner mistreatment.

During the initial discussion with a learner, the Education Leader will enact on the following:

- ensure the learner is aware of the hospital and academic partner's policies and processes (refer to [Appendix E](#) for policies on learner mistreatment at different healthcare and education institutions) to address harassment and discrimination, and all supports available to them. The leader will explain to the learner that the hospital will collaborate with the academic partner to ensure jurisdiction over investigation/process if needed, based on each parties' policies.
- explain the discussion/disclosure/reporting options available (distinction between Discussion, Disclosure and Report), including limits of confidentiality.



- share the hospital’s legal obligations to report any form of sexual/physical harassment due to the nature and severity of the claim. In addition, depending on the nature of the complaint, a formal investigation may be required due to the employers’ obligations under respective legislation.
- remind the learner of expectations of, and commitments to, confidentiality regularly throughout the process of reporting, investigating, and managing.

The Education Leader will use the Intake Form ([Appendix C](#)) or a form that is in accordance with the organization’s Workplace Harassment and Discrimination Procedure, during the initial meeting and conversation to document the learner’s report/disclosure/discussion. If they choose to proceed with a Discussion or a Disclosure, they will sign the Consent Form (sample in [Appendix D](#)) to indicate that they are aware of, and in agreement with, what is involved with the informal process. At the completion of the initial meeting, the leader will send a summary email referencing any/all policies and possible next steps.

The leader will work iteratively to create a plan to support resolution and will flag all mistreatment reports to the Office of the Vice President, Education and the academic partner and/or other stakeholders i.e., Legal, Human Resources, Medical Affairs if appropriate. The leader will track/document the steps, impressions, outcomes of the interactions/investigations that result from a complaint.

3 options to respond to mistreatment

Learners can choose from three options available in Discuss/disclose/reporting mistreatment. Except for reports involving any form of sexual/physical harassment (described above), the learner can select any of the options for response/resolution and is able to change their mind during the process.

Discussion

- This process primarily gives the learner an opportunity to have a private discussion or informal conversation with the leader without disclosing any information to outside parties, notifying the alleged individual(s), or taking corrective action with the hopes that:
 - The learner will feel relieved, reassured, and supported by the leader just by having an avenue to communicate their concerns.
 - The leader, through empathic listening, can encourage and empower the learner to create solutions for themselves based on mutual respect and consensus.
 - Depending on the nature of the complaint, the learner can wait until they have completed their placement/rotation to proceed with a Disclosure or Report in collaboration with the Education leadership team.
 - To appropriately support the learner, the leader will give the individual supplemental tips and advice on conflict resolution and how to approach difficult conversations.
- Leader may suggest the learner seeks further advice and/or support – i.e., from academic partner’s specialized office (ex. Learner Experience Unit, Office of Learner Affairs), faculty, professor, manager, friend, or counselor (available through a school’s Learner Health Services and/or primary health care provider). Seeking advice can provide assistance, coaching, and referrals for any individual who has brought forward the concern.
- It is important to keep all documentation of the advice and meetings, in case the learner decides to proceed with a Disclosure or Report. See [guiding principle 7 regarding documentation practices](#).



Disclosure

- Disclosure involves discussion with a learner with the aim of assisting the learner to access safety, support, or administrative accommodations.
- This often involves the leader notifying the academic partner to ensure the appropriate jurisdiction over action items required. Should the reported mistreatment be related to another learner's actions or a school faculty, the leader will prioritize connecting with the appropriate contacts at the academic institution.
- The leader, in conjunction with any other required parties (i.e., unit manager, HR, Medical Affairs, Academic Partners etc.), will determine if there is a mandatory reporting requirement met (due to an imminent safety risk or legal or regulatory reporting requirement).
- The education leader and most appropriate party as noted above will follow up with the learner to close the loop. Important note: level of disclosure of outcome will depend on situation and institutional policy/process and/or legislation.

Report

- Reporting involves a learner disclosing and consenting for the concerns to be formally reviewed / addressed. This may or may not involve an investigation.
- Ensure all individuals involved in the reporting process understand organizational policies and processes and complete, sign and submit any forms required; this includes ensuring that, as outlined above, you have consulted with your academic partner to understand the jurisdiction for review.
- Contact the respective parties involved:
 - Office of the Vice President, Education Department and;
 - Academic Institution of all and any learners (including, but not limited to, medical students, residents, clinical fellows, nurses, all health disciplines) involved.
 - Contact HR department if complaint involves a staff member
 - Chief Medical Officer if complaint involves physician
- The Education leadership team, in collaboration with HR and respective management, will investigate formal complaints if it is within their jurisdiction to do so; if the jurisdiction is with the university, then the matter will be forwarded to their attention. If there is a joint jurisdiction for reviewing the concerns, a determination will be made by the Vice President Education and the relevant education lead (usually decanal level) of the academic partner. An investigation may be internal or external, and may involve some of the below actions:
 - Collecting evidence (e.g., emails, texts, social media) involved with complaint.
 - Ensuring that documents (e.g., forms) completed on a learner's report about the subject should be kept in a secure location/system as per the hospital's process relating to secure record retention.
- Conducting interviews with all persons involved in the reported incident, first interviewing the complainant, then witnesses, then the respondent.
 - Respondents should be apprised of allegations against them, be reminded of their right to bring a support person to any interviews, be afforded the opportunity to tell their side of the story and be connected with supports and resources.
 - If a staff member is involved, then HR will support interview and investigation process.
 - If a physician (may or may not be a faculty member) is involved, then the CMO office will support the process and the VP, Education (or equivalent) will collaborate with the decanal lead of the academic affiliate who will take the lead on the investigation. **Education**



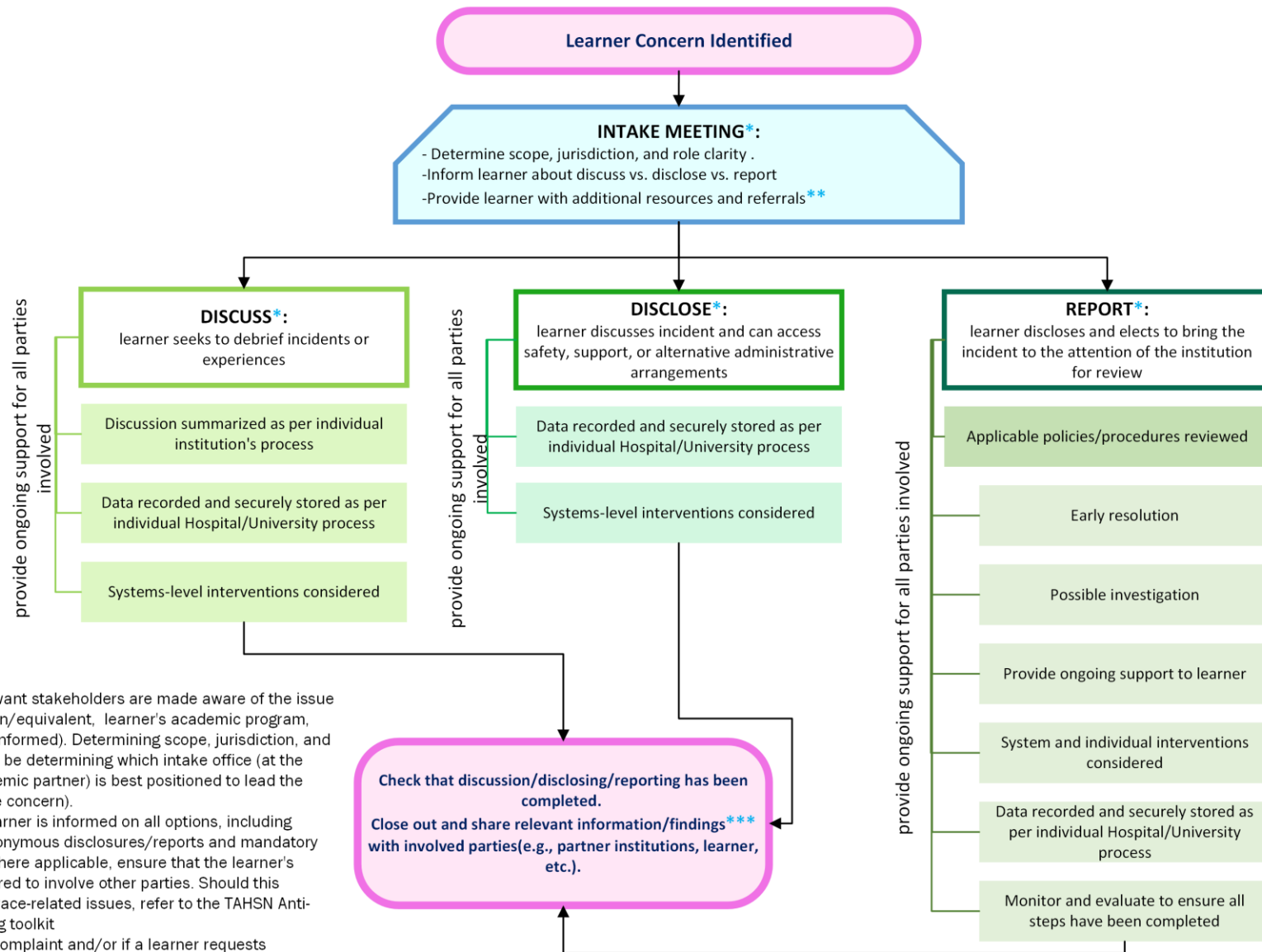
Leadership Team and HR, and/or CMO together with academic affiliate to create action plan and recommendations.

- Recommendations will be created by the Education Portfolio, in conjunction with HR and/or the academic affiliate as indicated, and/or the CMO which could consist of but not limited to: corrective action in the form of (but not limited to) an apology, switching preceptors/supervisors, counselling, education/training, and or disciplinary outcomes (e.g. temporary or permanent removal from a teaching, supervisory, or leadership role; at an extreme – surrender or revocation of hospital privileges and / or university appointment; reporting to a relevant regulatory college).



APPENDICES

Appendix A: Flowchart to address learner mistreatment by faculty/staff/other learners.



* Ensure all relevant stakeholders are made aware of the issue (i.e., VP Education/equivalent, learner's academic program, and learner are informed). Determining scope, jurisdiction, and role clarity would be determining which intake office (at the hospital or academic partner) is best positioned to lead the processing of the concern).

** Ensure the learner is informed on all options, including limitations of anonymous disclosures/reports and mandatory requirements. Where applicable, ensure that the learner's consent is garnered to involve other parties. Should this incident involve race-related issues, refer to the TAHSN Anti-Racism Reporting toolkit

*** If a faculty complaint and/or if a learner requests anonymity, ensure that the information is anonymized.

Adapted from Temerty Medicine's Learner Experience Unit, Office of Learner Affairs, and St. Michael's Hospital, with thanks



Appendix B: Sample Script for First Contact

The Education Leader/coordinator should seek to understand as fully as possible and assess the situation based on what the learner is sharing: If the learner seems harmed or distraught, recommend them to go straight to the police, seek further medical assistance, or access crisis resources as required. Seek support from education team as required, offer to stay with the learner while they call the police or Crime Stoppers.

Important: Any complaints involving any form of sexual/physical harassment **must** be processed as a Formal Complaint, due to the nature and severity of the claim in order to protect other individuals who work with the accused. In addition, depending on the nature of the complaint, a formal investigation may be required due to the employers' obligations under respective legislation. The academic affiliate must be notified in these instances to ensure that academic Sexual Violence policies are adhered to.

Overview of script

- ❖ Thank the learner for sharing while acknowledging that it was brave to come forward.
- ❖ Express that you are sorry that this has been their experience.
- ❖ Remind the learner that the organization is committed to providing a work environment that is safe and free from Inappropriate conduct, Bullying and/or Harassment so they are doing the right thing by bringing this forward.
- ❖ Explain the process and next steps:
 - Learner can talk to a leader immediately (if available) or book an appointment; they can also be connected with relevant supports and resources within the academic affiliate, if indicated.
 - The leader will listen to their concerns and/or experiences confidentially (where able- in the case of physical/sexual harassment there is a duty to proceed with a Report)
 - The leader will explain available options for proceeding with a Discussion, Disclosure or Report
- ❖ Ask for their contact information and consent to share with an appropriate education leader.
- ❖ Direct learner to the Learner Assistance Button on the organization's or the academic partner's website (if available) or a list of wellness resources.

Script

Learner: [Explains or alludes that they have experienced mistreatment]

Response from Learner Centre Team/admin/coordinators:

Thank you, we really appreciate you reaching out to us about this situation. We acknowledge that it is a very brave thing to come forward and talk about any type of issue that can happen during your time with us. We are sorry you experienced this, and we will do our best to work with you through the process. All our education leaders are trained to help support difficult situations like yours. They are here first and foremost for you and have worked with many different types of learners for multiple years. I am going to give you a few options and then you can decide how to proceed.



The leader will listen to you about your experience (judgment-free) and then explain the options in further detail. Would you like to speak to a leader now?

Could I please have your contact information (name, email, phone number)? I will give you the contact information for the leader or I can also help direct you to your school resources e.g., OLA. Our education leadership team will collaborate with the school so that you don't have to tell your story multiple times as we know this can be very difficult.

I recommend that you check out all the resources on our website/academic institution's website and review the appropriate hospital policies/procedures. (Provide available resources to the learner for their respective academic partner if available.)

Please read up on the resources especially the document about defining bullying and harassment. Thank you again for coming forward, a superior learner experience is what we strive for in the education portfolio.

Consider following reference if you are dealing with a learner from the Temerty Faculty of Medicine:
<https://meded.temertymedicine.utoronto.ca/sites/default/files/inline-files/Learner%20Mistreatment%20PRIMER%20for%20Teachers.pdf>



Appendix C: Learner Mistreatment Intake Form

Learner's name:

Learner's program:

Where the Learner was placed when the incident occurred:

Name of alleged individual(s), job title(s), and contact information, if available:

Details of the mistreatment

Please describe in as much detail as possible the bullying and harassment incident(s), including:

(a) the names of the parties involved;

(b) any witnesses to the incident(s);

(c) the location, date and time of the incident(s);

(d) details about the incident(s) (behaviour and/or words used);



Appendix D: Sample Consent Form

Informal Resolution with Student Centre Manager

The Manager assigned to my case has:

- Informed me of the Workplace Harassment and Discrimination Procedure/Policy at St. Michael's Hospital
- Explained the level of confidentiality I can expect for an informal resolution vs. a formal complaint
- Reminded me that I can speak with a Human Resources Consultant, Employee Assistance Program, my own academic institution and informed me of further resources available to me outside of this institution
- Reminded me that I can proceed to file a Formal Complaint at any time in the informal process
- Reminded me that I can choose to stop pursuing an informal or formal complaint at any point of this process

Signature: _____

Date: _____

I am beginning an Informal Resolution Process with a manager. I understand that:

- The manager will try to help me resolve my complaint informally
- The manager may speak with involved parties as necessary (at discretion of manager) about my complaint without identifying the people or groups involved or my personal information
- The manager will follow up with me (as required) at which point I can decide how I would like to proceed
- My signed consent form will stay on file (in a password protected folder) for minimum one year

Signature: _____

Date: _____



Appendix E: Policies on Learner Experience/Mistreatment at different healthcare and education institutions across the Greater Toronto Area

Healthcare Institutions

1. Baycrest
[Student-Trainee-Guide.pdf \(baycrest.org\)](#)
2. CAMH
(couldn't find any specific policies but they have [CAMH Health Equity Framework for Education and Training](#), that can be used by any organization)
3. Michael Garron Hospital, Toronto East Health Network
[Medical Education | Michael Garron Hospital, Toronto East Health Network \(MGH/TEHN\)](#)
(page section Wellness + the Learning Environment)
4. North York General Hospital
[Learner Assistance | North York General Hospital \(nygh.on.ca\)](#)
[Learner Mistreatment | North York General Hospital \(nygh.on.ca\)](#)
[Policies | North York General Hospital \(nygh.on.ca\)](#)
5. Scarborough Health Network
[Clinical Student and Clinical Instructor Orientation – Scarborough Health Network \(shn.ca\)](#) (
6. Sunnybrook
[Student Assistance - Sunnybrook Education & Training](#)
[Health & Wellness - Sunnybrook Education & Training](#)
7. Unity Health Toronto
[Student Centre - Unity Health Toronto](#) (page section Reporting Learner Mistreatment)
8. University Health Network
[Learners Assistance \(uhn.ca\)](#)
[Policies - The Michener Institute](#)
[Student Success Network - The Michener Institute](#)

Educational Institutions

1. Humber College
[WIL Additional Forms - Humber College](#) (forms for incidents during placement)
2. Seneca College
3. Toronto Metropolitan University (formerly Ryerson University)
[Clinical Incident Reporting Tool \(google.com\)](#)
[Incident Reporting - Nursing Central Placement Office - Toronto Metropolitan University \(torontomu.ca\)](#)
4. Trent University
[TFSON Student Handbook \(trentu.ca\)](#) (Nursing)
5. University of Toronto
[Clinical Incidents Form - Lawrence S. Bloomberg Faculty of Nursing \(utoronto.ca\)](#)
[Guidelines, Policies & Regulations - Lawrence S. Bloomberg Faculty of Nursing \(utoronto.ca\)](#)



[Faculty of Nursing Confidential Student Event Disclosure Form \(EDF\) \(office.com\)](#)

[Office of Learner Affairs | Medical Education \(utoronto.ca\)](#)

[Learner Mistreatment Information for University of Toronto Students | Medical Education \(utoronto.ca\)](#)

[Accommodation & Accessibility | Medical Education \(utoronto.ca\)](#)

6. York University

[NPCO Forms and Policies | School of Nursing \(yorku.ca\)](#)

[Student Policies | School of Nursing \(yorku.ca\)](#)