



Anesthesiology & Pain Medicine UNIVERSITY OF TORONTO

Code of Conduct

EDI Committee Members:

Chief Diversity Officer: Dr. Gianni R. Lorello

Representatives:

- Dr. John Peel (PGY3)
- Dr. Maha Al Mandhari (PGY5)
- Dr. Tara Der (Hospital for Sick Children)
- Dr. Filipe N. Caparica Santos (St. Michael's Hospital)
- Dr. Salima Ladak (NP at Toronto General Hospital)

A. Introduction

The Department of Anesthesiology and Pain Medicine strives to create a culture of inclusion, equity, and respect. Members of the University of Toronto, Department of Anesthesiology and Pain Medicine (including learners at all levels) represent a diverse group. Membership may intersect with any number of different socio-cultural backgrounds; therefore, the department is committed to celebrating this diversity. The following document intends to inform what the Department of Anesthesiology and Pain Medicine expects of all members with respect to equity, diversity, and inclusion (EDI).

B. Key Terms

- **Equity:** concept of promoting fairness and justice to all individuals and striving to ensure access to the same opportunities; takes into consideration that individuals come from different backgrounds and identify with different socio-cultural constructs (e.g., gender, race, class, sexual orientation, etc...) that may lead to privileges or barriers that create imbalances which must be addressed through systemic processes in order to reduce outcome disparities.^{1,2}
- **Diversity:** embraces the overarching differences between individuals in all aspects of one's being, including but not limited to: age, sex, gender identity, sexual orientation, ethnicity, race, colour, national origin or ancestry, core spiritual beliefs, culture, family or marital status, socioeconomic status, political affiliation, disability, and means of communication or language.^{1,2}
- **Inclusion:** comprises of a safe and welcoming learning and workplace environment that promotes a climate of respect, acceptance and value while embracing the diversity of its members throughout the institution and supporting the engagement of all people.^{1,2}
- **Learners:** includes prospective medical students (e.g. high school students who participate in the faculty's Summer Mentorship Program, undergraduate students in the faculty's Community of Support Program), undergraduate medical students, graduate students, residents, fellows, post-doctoral fellows, and other trainees. Learners also include faculty members who are engaged in a variety of teaching, research, and administrative activities;
- **Microaggression:** relates to intentional or non-intentional repeated insults, dismissals or invalidation, at the interpersonal level, that conveys a derogatory or negative message towards marginalized groups.³⁻

- **Macroaggression:** systemic and institutional circumstances that create inequity towards and negatively impacts marginalized groups of people.³⁻⁵

C. Code of Conduct

The Department of Anesthesiology and Pain Medicine's Code of Conduct aligns with the overarching concepts of the Faculty of Medicine Standards of Professional Behaviour for Medical Clinical Faculty⁶ and the CanMEDS competencies⁷, which apply to all members of our department. This document highlights and consolidates the expectations of all department members. Further, this document outlines how the CanMEDS competencies (leader, communicator, health advocate, collaborator, scholar, professional, and medical expert) relate to EDI and constitute behaviour expected by our Code of Conduct.

Thus, it is expected that faculty, staff and learners of the Department of Anesthesiology and Pain Medicine will:

- Learn, provide care, and *communicate* with *professionalism*, honesty, compassion and empathy while ensuring patient safety, physical, and mental well-being, regardless of the individual's socio-cultural construct;
- Apply their *medical expertise* without distinction and with fairness to all individuals;
- *Advocate* equitably for the needs of patients, regardless of the patient's socio-cultural construct, and support actions and attitudes that empower socially-marginalized groups;
- Be considerate of the diversity of learners, staff, and patients in the learning and workplace environment and make an effort to ensure that everyone has equal work and learning opportunities, regardless of the socio-cultural construct;
- Make an effort to gain *expertise* on how to recognize personal bias and mitigate or eliminate its impact on patient care and interpersonal relationships in general;
- Refrain from originating, colluding, dismissing or accepting any form of microaggression or macroaggression, but rather *collaborate* to create a cultural, physical, and psychologically safe environment for all;
- As soon as appropriately feasible, *communicate* with your supervisor, leadership, or professional body any identified microaggressions and/or macroaggressions;
- Be a *leader* and *health advocate*, recognizing, and confronting microaggressions and/or macroaggressions in the learning and work environment;
- Ensure that everyone is respected and is not excluded from *scholarly* endeavours, either as investigators or participants, including socially-marginalized groups. Wherever possible, any resulting benefits or contributions to the medical body of knowledge should take into consideration the diversity of human nature and its applicability to minorities and socially-marginalized groups;
- Harassment and/or abuse of any colleagues, employees, learners, or patients will require remediation as per institutional, University, and College guidelines and processes.

The College of Physicians and Surgeons of Ontario delineate the “[Physician Behaviour in the Professional Environment](#).”

The Department of Anesthesiology and Pain Medicine at the University of Toronto has a zero-tolerance policy for sexual harassment.

I have read and understood this document in its entirety. I agree to abide by this code of conduct.

Print Name

Signature

Date

D. References:

1. Ontario Human Rights Commission, Appendix 1: Glossary of Human Rights Terms. In Teaching Human Rights in Ontario; 2013 [cited 2019 Nov 17]. Available from: http://www.ohrc.on.ca/sites/default/files/Teaching%20Human%20Rights%20in%20Ontario_2013.pdf
2. University of Toronto Governing Council, Statement on Equity, Diversity, and Excellence; 2016 [cited 2019 Nov 17]. Available from: <https://governingcouncil.utoronto.ca/sites/default/files/import-files/ppdec1420064756.pdf>
3. Druck J, Perry M, Heron S, Martin ML. Microaggressions. Diversity and Inclusion in Quality Patient Care. 2019:15-22.
4. Sue DW, editor. Microaggressions and marginality: Manifestation, dynamics, and impact. 2010.
5. Sue DW. Microaggressions in everyday life: Race, gender, and sexual orientation. 2010.
6. Faculty Council, Faculty of Medicine, University of Toronto. Standards of Professional Behaviour for Medical Clinical Faculty; 2009 [cited 2019 Nov 17]. Available from: <https://medicine.utoronto.ca/sites/default/files/standards2.pdf>
7. Frank JR, Snell L, Sherbino JC. Physician competency framework. Ottawa: Royal College of Physicians and Surgeons of Canada. 2015.