

Undergraduate and Postgraduate Medical Education Guidelines for the Evaluation of Faculty Teaching and Supervision by Learners in Undergraduate and Postgraduate Medical Education



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Section A: Introduction

A1: Background

Excellent teaching forms a core element of the mission of the Faculty of Health Sciences (FHS) at McMaster University. Faculty are required to fully understand the expectations and responsibilities of their educational roles as detailed in the FHS Appointment and Annual Review Mutually Agreed Responsibilities (R4) and Undergraduate and Postgraduate program-specific guidelines and policies.

Evaluation and educational development of faculty members is intended to promote excellence in teaching and assist faculty members in gaining insight into their educational roles in the broad domains of clinical supervision, teaching, assessment, and professional role modeling.

A2: Definitions

Assistant Dean, McMaster Community and Rural Education (Mac-CARE): senior academic leader responsible for the oversight of UGME and PGME education at the Regional Campuses and Clinical Education Campuses (CECs).

Associate Dean, Postgraduate Medical Education (PGME): senior academic leader responsible for the overall conduct, supervision, and evaluation of postgraduate medical education within the Michael G. DeGroot School of Medicine within the Faculty of Health Sciences. The Associate Dean, PGME reports to the Vice Dean, Education.

Associate Dean, Undergraduate Medical Education (UGME): senior academic leader responsible for the overall conduct, supervision, and evaluation of undergraduate medical education within the Michael G. DeGroot School of Medicine within the Faculty of Health Sciences. The Associate Dean, UGME reports to the Vice Dean, Education.

Dean and Vice-President, Faculty of Health Sciences: most senior academic leader of the Faculty of Health Sciences (hereinafter referred to as the 'Dean'), responsible for the operation and management of the Faculty, the provision of academic leadership, fiscal management, and relations of the Faculty with agencies and institutions external to the University. The Dean reports to the President.

Department Chair: chief executive officer of the department (hereinafter referred to as the 'Chair') and is ultimately responsible for overseeing the educational responsibilities of faculty within the department. The Chair reports to the Dean.

Department Representative: It is recognized that the organizational structure varies from department to department and the Chair may choose to delegate certain educational responsibilities to another

individual in the department such as the **Department Education Coordinator (DEC) or an Associate Chair of Education, or Division Head.**

*For the purposes of this document, the individual who is responsible for overseeing departmental faculty teaching will be referred to as the **Department Representative.** The Department Representative reports to the Chair (or is the Chair).*

Distributed Education Sites: clinical teaching sites with level 2, 3, or 4 affiliation agreements with McMaster University, including the Medical Education Campuses in the Waterloo and Niagara Regions; the McMaster Community & Rural Education (Mac-CARE) Clinical Education Campuses; and other clinical teaching sites affiliated with McMaster University; but excluding the Academic Health Science Centres with level 1 affiliation agreements.

Division Director: head of an academic division within a department with faculty members who share a common area of specialty. Division heads report to the Chair. In matters concerning faculty teaching, Division Heads may report to the Department Representative.

Documented feedback: refers to feedback from learners that arise outside the MedSIS faculty evaluation system and includes but is not limited to information that is documented from feedback obtained from town halls, individual learner meetings with educational leaders, accreditation activities (e.g., PGME Internal/External Reviews), concerns raised to the Office of Learning Environment and Mistreatment (OLEM).

Educational Director (ED): academic leader responsible for an education program (e.g., Residency Program Director/Foundation Director/Clinical Skills Chair/Professional Competencies Chair/Electives Chair/Clerkship Director). The Educational Director may delegate responsibility to another individual, depending on the site and/or nature of the education activity or event. For example, the Educational Director may, at their discretion, delegate to the Regional Educational Leader at a distributed site

Educational Program: refers to the UGME or PGME programs (residency and fellowship).

Employee and Labour Relation (ELR): leads in the provision of Human Resources Services in these areas:

- Employee Relations
- Labour Relations
- Collective Bargaining
- Collective Agreement Administration
- Manager Training

The team also serves as an intake office for faculty/employee concerns raised under the [Discrimination & Harassment Policy](#) and the [Sexual Violence Policy](#).

Equity and Inclusion Office: responsible for proactively identifying and addressing campus-wide systemic equity and inclusion issues; in campus advising, awareness-raising, education and training on accessibility, equity, and inclusion; and support the development and implementation of policies and practices for effective, timely and procedurally fair response and resolution to incidents of harassment, discrimination, and sexual violence, including investigative services.

Faculty of Health Sciences (hereinafter referred to as the 'Faculty'): McMaster University's Faculty of Health Sciences educates health care professionals including but not limited to physicians, nurses,

physiotherapists, occupational therapists, midwives, speech language pathologists, physician assistants, child life professionals and health care researchers.

Faculty Member: individual who holds an appointment at McMaster University within a department who is responsible for supervising, teaching, and/or assessing learners. For this policy, the term faculty member shall refer to those individuals involved in the teaching of learners enrolled in the UGME or PGME programs.

- Geographic full-time (GFT)
- Part-time (PFT)

Faculty Navigator, Office of Learning Environment and Mistreatment (OLEM): senior faculty lead for the FHS Office of Learning Environment and Mistreatment (OLEM), serving learners in UGME, PGME and Physician Assistant Education Program (PAEP). The Faculty Navigator reports to the Associate Dean, UGME and PGME and the Assistant Dean, PAEP.

Intake Office: university office where formal complaints under the Discrimination and Harassment or Sexual Violence Policy can be made, including:

- The Human Rights & Dispute Resolution Program (HRDR), Equity and Inclusion Office (All Community Members)
- Student Support & Case Management Office (SSCM), Student Affairs (Students)
- Employee and Labour Relations (ELR), Human Resources Services (Faculty or Staff members)
- Faculty of Health Sciences (FHS) Professionalism Office (FHS Community Members)

Learner: individuals who are registered UGME or PGME at McMaster University, including learners from other institutions who are registered for electives.

Medical Student Information System (MedSIS): electronic platform used by UGME and PGME for registration, scheduling and learner and faculty evaluation data.

Office of Learning Environment and Mistreatment (OLEM): OLEM will respond to confidential mistreatment concerns and meet with learners in UGME, PGME and the Physician Assistant Education Program (PAEP) to debrief, consider options and next steps. OLEM will liaise with other offices/individuals depending on the nature of the report to decide upon management and resolution. OLEM does not serve as an intake office but will refer learners, as appropriate.

Office of Professionalism (FHS): resource for all members of the Faculty of Health Sciences needing support and guidance with issues of professionalism. The office also facilitates informal conflict resolutions, such as mediation and facilitated conversations, and acts as an intake office for concerns raised under the [Discrimination and Harassment Policy](#) and [Sexual Violence Policy](#).

Regional Assistant Dean: academic leader responsible for the overall conduct and supervision of undergraduate and postgraduate medical education within the Regional Campuses. The Regional Assistant Dean reports to the Associate Deans, UGME and PGME.

Regional Mac-CARE Director: academic leader responsible for teaching and supervision of learners based at Clinical Education Campus.

Remediation Plan: written document providing individualized educational support, assessment, and monitoring, designed to assist faculty member in correcting identified significant performance deficiencies that may impede their ability to teach and supervise learners.

Teaching Effectiveness Reports (TER): collated evaluations of faculty; can include clinical teaching, and supervision and academic sessions. Undergraduate and postgraduate TERs are generated separately.

- The Teaching Effective Score (TES) refers to the numerical score (1-7) for overall teaching effectiveness on individual evaluation forms.

Vice Dean, Faculty Affairs: senior academic leader responsible for promoting and championing an environment of professionalism, inclusivity, equity and diversity with regards to faculty members. The Vice Dean, Faculty Affairs reports to the Dean.

Vice Dean, Education: senior academic leader who assists the Dean and Vice-President, FHS with guiding the educational mission of the Faculty. The Vice Dean, Education works closely with other Senior Leaders across FHS to lead, promote and develop both undergraduate health sciences and health professional education within the faculty. The Associate Deans, UGME and PGME report to the Vice Dean, Education who reports directly to the Dean and Vice-President, FHS.

A3: Purpose

The purpose of these guidelines is to outline the process of obtaining and reviewing written evaluations of faculty by undergraduate and postgraduate medical learners and to provide guidance for faculty development, remediation, and grounds for suspension from the teaching and/or supervision of learners. It does not address other means by which faculty may be evaluated (e.g., peer-to-peer, self-evaluations, evaluation by other health professionals, etc.), although it is recognized that these mechanisms may also form part of a complete educational dossier for individual faculty members.

These guidelines will serve to support leaders in applying corrective action and remediation to enable full engagement by faculty members in meeting academic expectations in the teaching and supervision of undergraduate and postgraduate learners. These guidelines will supplement actions that intersect with the “Code of Conduct for Faculty and Procedure for Taking Disciplinary Action” (the “Code of Conduct”).

These guidelines describe the processes for:

- Obtaining information on faculty teaching and supervision in a reliable and consistent format.
- Reviewing evaluations and sharing information to faculty members involved in educational roles with learners.
- Providing feedback, advice, opportunities for professional development and a process for faculty remediation.
- Establishing reasonable sanctions, where necessary.

A4: Scope

- These guidelines apply to all faculty members who hold a faculty position at McMaster University (i.e., full-time and part-time) responsible for teaching, assessing, and/or supervising learners (including visiting learners registered at other institutions) in UGME and PGME programs. These

guidelines are subject to the relevant University policies.

- It is recognized that information about faculty teaching, supervision and behaviour in the learning environment can be obtained from learners in a variety of formats including but not limited to: written evaluation reports, meetings with educational leaders, PGME internal reviews, reviews by the Royal College/CFPC formal complaints to the Office of Professionalism, FHS, and concerns communicated to the Office of Learning Environment and Mistreatment (OLEM).
- It is understood that comprehensive performance reviews of teaching may include peer reviews, examples of innovation in teaching and education and other sources of information. These guidelines apply only to written evaluations by learners and/or documentation collected by and from learners as part of the process for the evaluation of faculty in their role as teachers.
- Where matters under these guidelines are escalated, such matters will proceed through the processes described in Section E: FHS Intervention in these guidelines and/or the *Code of Conduct for Faculty and Procedure for Taking Disciplinary Action*.
- Faculty members may have a right to file an appeal for decisions related to their teaching responsibilities through the McMaster University *Faculty Grievance Policy*, as appropriate and if within the scope of the policy.
- Matters relating to another University policy for which specific procedures exist are not within the scope of this guideline, such as in the *Discrimination and Harassment Policy*, *Sexual Violence Policy* and the *Research Integrity Policy*.

Section B: Principles of Faculty Evaluation

B1: General Principles for Evaluation of Faculty by Learners

1. Academic and educational leaders, faculty members and learners are expected to strive to create an environment where the exchange of feedback is a routine and expected part of the educational experience.
2. Faculty members must be routinely evaluated on teaching, supervision, and formal educational activities (e.g., group lectures) as part of continuous quality improvement, designed to improve the learner experience and provide meaningful feedback to faculty members for professional development.
3. Learners are expected to complete faculty teaching evaluations, in accordance with the processes of the educational program, as part of their professional responsibility.
4. Teaching evaluations of faculty must be incorporated into the educational dossier of the faculty for the purposes of performance reviews and consideration for promotion and tenure, as applicable.
5. The faculty evaluation process adheres to the principles of transparency, confidentiality, and procedural fairness.

6. The Chair or delegate must inform all faculty members about the departmental, FHS, and University processes for faculty evaluations, including but not limited to:
 - Activities which must be formally evaluated.
 - Impact of teaching evaluations in the departmental/University promotions processes.
 - Frequency of receipt of collated evaluations.
 - Individuals who will have access to the information.
 - Individual(s) who will debrief with faculty members on evaluations.
 - Process to be followed if concerns are raised by collated faculty evaluation and/or other sources of documented feedback.
 - Relevant policies, including but not limited University process for appeals.
7. Inherent and recognized power differentials exist between faculty members and learners. The process of faculty evaluations must be designed to protect the identity of individual learners.
8. In a formal complaint process and/or investigation, while the anonymity of learners cannot be maintained, confidentiality will be provided.
9. Learners must be protected from reprisal in the evaluation of faculty members for teaching and supervision in educational programs.
10. Each educational program will assess faculty members academic activities using and/or developing tools consistent with the format defined by Faculty and University policies, guidelines, and practices. The methods of data collection and frequency may vary.
11. Evaluation data will be collected and confidentially stored for a minimum of seven years.
12. Faculty members should be recognized for excellence in teaching and supervision.
13. Concerns regarding faculty teaching, supervision and/or behavior must be addressed in a timely, procedurally fair, and consistent manner.
14. Concerns raised from other sources outside the written faculty evaluation process must be brought forward to the Chair, with the consent of the learner, when appropriate (i.e., when anonymity cannot be maintained).
15. If there is a substantial perceived risk or safety concern to one or more parties, the matter may be escalated to the proper authorities internal or external to the University, as appropriate.

B2: Access to Information

16. The following individuals may have access to aggregated faculty evaluations, as required, depending on the process used by the department and educational program. It is the Departmental Representative's* responsibility to notify the faculty member if there are additional individuals involved in the departmental process.
 - Faculty member
 - Department Representative (can refer to Chair, Division head or DEC)
 - Associate Chair Education

- Departmental Chair
- Division Director, if applicable
- Director(s) of Educational Programs (or equivalent) in which the faculty member teaches
- Regional Assistant Deans for Regional Campus faculty members
- Educational leaders in other distributed education sites (e.g., CEC Mac-CARE Directors)
- Site Coordinators, including but not limited to Regional Educational Leads (REL)

** For the purposes of this document, the individual who is responsible for overseeing departmental faculty teaching will be referred to as the **Department Representative**. The Department Representative reports to the Chair (or is the Chair). In regional campuses, the activities described in these guidelines may be delegated to the Regional Assistant Deans.*

17. With respect to cross or joint appointments, the department where the faculty member's primary academic appointment will be the main point of contact for the educational programs.

18. In the event of serious performance concerns, the circle of confidentiality may be extended at the discretion of the Chair and with advice from the appropriate Vice and Associate Deans. The faculty member's confidentiality will be respected to the extent permitted by relevant policies within FHS and the University.

19. Individuals who may have access to performance data of the faculty member if the circle of confidentiality has been extended include but are not limited to:

- Associate Deans, UGME and/or PGME
- Vice Deans, Education and Faculty Affairs
- Dean and Vice-President, FHS
- Advisor and Faculty Lead, Office of Professionalism, FHS
- Employee Labor and Relations, FHS
- University Legal Counsel
- Hospital Chiefs and appropriate hospital administration/legal counsel

B3: Reporting Process

20. The Department Representative is responsible for the overall monitoring of faculty performance, progress towards professional goals, and oversight of remediation, subject to the overall authority of the Chair. Chairs/delegates are responsible for recommending faculty appointments and/or promotion/tenure based on faculty performance with data that includes but is not limited to aggregated teaching evaluations.

21. Chairs, DECs, and Division Directors have access to collated published teaching evaluations for faculty in their department/division through the MedSIS Faculty Evaluation Dashboard.

21.1. Regional Assistant Deans have access to collated published faculty evaluations for those based at the regional campuses.

21.2. The Assistant Dean, Mac-CARE has access to collated published faculty evaluations for those based at distributed learning sites, outside to the regional campuses.

22. UGME and PGME processes for formal written faculty evaluations by learners are designed to protect the anonymity of learners. Faculty members are entitled to have access only to their

aggregated evaluations.

23. Aggregated evaluations will be based on a minimum of three evaluations from three different learners from either UGME or PGME. The aggregated report may include learner comments that contain specific identifying information. Learners should use their own judgment in providing these comments.
24. In each department, UGME and PGME evaluations will be kept separate for a faculty member's educational dossier or summary.

Section C: Process for Evaluating Teaching and Supervision of Learners by Faculty Members

A general process for the evaluation of faculty teaching is outlined below. Departments may modify the general process depending on the size of the department, number of divisions and/or number of postgraduate programs within the department. It is recognized that processes may differ for full-time faculty and those with part-time appointments, based at distributed education sites. Departmental processes should include the responsibilities and duties of the Regional Assistant Deans for faculty based at the regional campuses with consideration of volume and feasibility.

25. Each faculty member must have access to their own Teaching Effectiveness Reports (TER).
26. Faculty evaluation data must be reviewed at faculty performance reviews by the Departmental Representative (according to departmental processes).
 - 26.1. Opportunities for formal review may include but are not limited to: annual performance reviews for GFT faculty, appointment renewals for part-time Faculty, etc. Part-time faculty should review teaching evaluations and feedback at the time of annual review and/or appointment renewal.
 - 26.2. The review of evaluations with faculty members for performance reviews (if applicable) should define areas of strength and potential areas requiring improvement. A documented action plan may be devised for performance development with the faculty member, as required.

C1: Collection and Distribution

27. Learners must complete evaluations of faculty members as required by the educational program.
 - 27.1. UGME: all faculty evaluations will be distributed by the UGME program.
 - 27.2. Each PGME program (e.g., residency program) is responsible to ensure the completion and distribution of faculty evaluations from learners who complete educational experiences with faculty within their own program.
 - 27.3. Faculty evaluations will remain within the faculty member's primary department.
28. Teaching Effectiveness Reports (TER) will be generated annually by MedSIS, provided that a minimum of three separate learners from either UGME or PGME have completed evaluations. After review by the Educational Director, the reports are distributed to the individual faculty members.
 - 28.1. The Educational Director is responsible for forwarding the TERs to the appropriate

individuals, as defined by departmental processes.

28.2. Chairs, DECs, Division heads and Regional Assistant Deans will be informed by the MedSIS system when faculty evaluations are published and available for review on the Faculty Evaluations Dashboard.

29. All UGME and PGME published collated evaluations will be available for review on the MedSIS Faculty Evaluation Dashboard for Department Chairs, Department Educational Coordinators, Division Heads and Regional Assistant Deans (as applicable).

Appendix: Process map for MedSIS and PGME evaluation reports

C2: Review of Evaluation Reports

Please note this is a general outline and departmental processes may vary. Departments must define their process for review of faculty evaluations and ensure that it is clearly communicated to faculty members. Processes of review may vary between full-time members and part-time members based at the distributed educational sites.

30. The Educational Director or defined delegate must review aggregated faculty performance data when published and available through MedSIS.
- 30.1. In PGME, the Educational Director refers to the Program Director where the period for review of aggregated faculty performance data is 4 weeks prior to the release of the TER to the faculty members.
- 30.2. In UGME, the Education Director can include the foundation director, clinical skills chair, professional competencies chair, electives chair, clerkship director, regional educational leads, etc. depending on the nature of the educational experience being evaluated.
31. The faculty member will be notified by MedSIS when annual collated evaluations are available for review.
32. The review of evaluations with faculty members by the Departmental Representative (if applicable) should define areas of strength and potential areas requiring improvement. The Departmental Representative or delegate should devise a documented action plan for performance development with the faculty member, as required and applicable.
33. It is the responsibility of the department in which the faculty member has their primary academic appointment to share information in writing with departments in which the faculty member is cross- or joint-appointed, when appropriate.

Section D: Departmental Process for Reviewing Concerns

34. Concern(s) may arise from the TER and/or other modes of documented feedback about faculty teaching and/or supervision of learners and/or professionalism.
35. The Educational Director will inform the Departmental Representative if significant concerns are raised on the TER or other sources of documented feedback from learners.

- 35.1. Documented feedback outside MedSIS collated faculty evaluations may also be conveyed to the Chair/Departmental Representative by other educational leaders who have access to these reports (e.g., Faculty Navigator, OLEM; Associate Deans, UGME/PGME).
36. Once the information is received and reviewed by the Educational Director (or as defined by the Department/Division process), the process to be followed will be determined based on the nature of concerns and previous performance evaluation data (e.g., repeated concerns, previous interventions etc.).
37. The process of review and debriefing concerns with the faculty member must be defined by the department/division.
38. Following review of the concerns, including previous performance information, the Departmental Representative should identify the areas requiring support including but not limited to
 - Creation of a positive learning environment
 - Effective teaching and assessment strategies
 - Appropriate supervision
 - Professionalism
39. If the concerns are considered egregious in nature, including but not limited to:
 - Serious professionalism breaches
 - Issues with supervision, resulting in potential risks to patients or learners.
 - Concerns with clinical competenceThe Departmental Representative should seek input from others, including but not limited to the Chair/Division Head if not already involved, Associate Deans, UGME and PGME, Regional Assistant Deans, Vice-Deans and Hospital leads, as appropriate.
- 39.1. Departmental Representative is advised to consult with an intake office under the *Discrimination and Harassment Policy* and/or the Director of the Sexual Violence Prevention and Response Office if issues fall outside the scope of these guidelines.
40. Concerns of faculty performance raised outside of the written faculty evaluation process requiring further action must be shared with the Chair of the Department, depending on the nature of the concerns.
 - 40.1. Concerns brought forward by learners outside the written evaluation process must consider confidentiality if maintenance of anonymity is not possible.
 - 40.2. Where appropriate, consent should be sought from the learner to extend the circle of confidentiality.
41. Discussion with faculty members by Departmental Representative should include the following:
 - Relay the concerns outlined by the documentation and/or verbal feedback from learners and the impact on the learners.
 - Discuss the faculty member's interpretation of the concerns and give opportunity for self-reflection and sharing of contributing factors that may influence performance.
 - Shared development of an individualized educational plan and identification of required resources and support.
 - Shared plan for monitoring for improvement and timelines for review.
 - Discussion of consequences if no significant improvement.

42. In some instances, discussing the details of feedback may result in unintentionally revealing the identity of the individual raising concerns. The Education Director or delegate should be aware of the risk of revealing the identity of people reporting concern(s) and mitigate this risk where appropriate, including:
- Clarify with the individual whether their identity can be disclosed;
 - Only share enough information to adequately explore the concern(s);
- 42.1. Indicate to the faculty member whether they could/should or should not contact anyone involved with the concern(s) if known; and
- 42.2. Escalate the matter to an FHS/University intervention, as appropriate.
43. In some instances, upon reviewing the concerns, it may be determined that the concern(s) are best addressed by moving immediately to a Faculty of Health Sciences/University intervention. This includes but is not limited to:
- An assessment of whether the concerns are within the scope of these guidelines or within the jurisdiction of other University policies.
 - Prior attempts at program interventions around the same or similar concern(s) were ineffective or poorly received.
 - The circumstances of the concern(s) are egregious in nature and/or require emergent or urgent attention (e.g., patient, learner, other(s)' safety potentially affected; institutional reputational issues).
 - Issues related to clinical competence brought forward by learners that need to be investigated/addressed by hospital leads, in collaboration with the University.
44. The departmental intervention may result in the following outcomes after consideration of the evidence, including weight and relevance. Written documentation is required to outline the areas of concerns, discussion with the faculty member, and the outcome:
- 44.1. No further action is required:
- If the information provided by the faculty member clarifies the situation; or
 - The faculty member has derived insight from the discussion alone; or
 - The events were not felt by the Departmental Representative to require further intervention.
- 44.2. A developmental/remediation plan is developed in collaboration with the faculty member which clearly outlines:
- Areas of concerns
 - Educational resources (e.g., coaching, faculty development sessions)
 - Monitoring plan and timelines
 - Consequences if concerns are not appropriately addressed
- Please note that McMaster University Employee and Labour Relations can assist with the development of educational plans for addressing concerns and identifying potential resources (e.g., professional coaches).*
- 44.3. The Departmental Representative recommends to the Chair the application of concerns through University policies (e.g. *Faculty Code of Conduct, Discrimination & Harassment Policy, Sexual Violence Policy, Research Integrity*) as appropriate. This recommendation is made for the following reasons, including but not limited to:
- The faculty member does not demonstrate adequate understanding of the concern(s) or insight into the concern(s).

- The faculty member fails to engage in the developmental plan.
- The faculty member identifies other issues or concerns that would necessitate an FHS intervention.

In these circumstances, the Chair shall consult with an intake office.

44.4. Faculty members may choose to seek additional support, such as a discussion with the Department Chair, Faculty Affairs, McMaster University Faculty Association, etc.

45. In some cases, information shared in the TERs may fall under the jurisdiction of other policies of the University and in rare circumstances, regulatory bodies or laws not otherwise reflected in university policy which may obligate external reporting. In those cases, subject to limitations at law, the information will be shared with the relevant governing body as per policy.

46. Legal counsel at McMaster University must be consulted if a faculty member retains legal counsel to represent them in the process and/or decisions following review of performance concerns.

47. FHS intervention* is required when:

- Prior attempts at departmental interventions around the same or similar concern(s) have been unsuccessful.
- The faculty member refuses to engage in the departmental Intervention.
- Removal of learners from the supervision of the faculty member is being considered or has taken place.
- The faculty member identifies other issues or concerns necessitating a FHS intervention.
- The circumstances of the concern(s) are egregious in nature and/or require emergent or urgent attention (e.g., patient, learner, other(s)' safety potentially affected, institutional reputational issues).
- Other issues at the discretion of the Chair of the Department (e.g., social media).
- A formal complaint has been made to any of the University intake offices.
 - Office of Professionalism, FHS
 - Employee/Labour Relations
 - Equity and Inclusion Office
 - Sexual Violence Prevention & Response Office

**FHS intervention will follow the processes outlined in the Faculty Code of Conduct, Discrimination and Sexual Violence Response policies. These processes will not be detailed in these guidelines.*

48. The Chair of the Department will lead/participate in the FHS Intervention and formally involve appropriate leadership as required, including but not limited to

- Associate Deans, UGME, PGME
- Vice-Dean, Education,
- Vice Dean, Faculty Affairs
- Regional Assistant Deans
- Advisor, Office of Professionalism
- Employee and Labour Relations
- University Legal Counsel
- Chiefs of Hospitals, as appropriate

Section E: Development and Implementation of a Remediation Plan

A formal documented remediation plan may be required after either a departmental or FHS process. A remediation plan is required for significant concerns that may or has affected the ability of a faculty member to discharge their teaching responsibilities.

E1: Development and Approval Process

49. The faculty member is expected to be actively involved in the development of a remediation plan. The Department Representative may consult with the following individuals and groups, as appropriate, to develop an appropriate plan for remediation to address identified concerns.

- Education Director
- Department Chair
- Associate Dean, Undergraduate or Postgraduate Medical Education
- Vice Deans, Faculty Affairs and Education
- Advisor, Office of Professionalism
- Employee and Labour Relations, McMaster
- Assistant Dean, Faculty Development
- Any other person deemed relevant

50. The remediation plan must include the following information:

- Identification of the areas of deficiency
- Components/nature of the remediation
- Suggested timelines for monitoring and review
- Expected outcomes of the remediation plan
- Specification of how the faculty member's performance in the remediation plan will be evaluated.
- Consequences of receiving an unsatisfactory outcome of the remediation plan
- Any modifications to current duties/responsibilities and conditions for their resumption
- A specific plan for implementation and follow-up, including a process to ensure the effective and timely implementation of the remediation
- Confirmation of individuals responsible for evaluation of specific remediation activities

51. The faculty member will have the opportunity to review and respond to the remediation plan within a timely manner, regardless of their involvement in the development of the plan. The faculty member's response will be taken into consideration and may be incorporated into the remediation plan at the discretion of the Chair or Departmental Representative.

52. The remediation plan will have final review/approval by the Department Chair. The Chair must notify all educational programs and teaching sites where the faculty member has responsibilities of any amendments or restrictions in a timely manner that would preclude them from fully discharging their teaching responsibilities.

53. Once finalized, the Department Chair will provide a copy of the remediation plan to the faculty member and any other individuals, as appropriate for timely final review and acceptance.

54. If the faculty member does not accept the remediation plan, the matter will be subject to the [Code](#)

[of Conduct for Faculty and Procedure for taking Disciplinary Action.](#)”

55. A copy of the remediation plan and any other relevant documentation, including documentation of the satisfactory resolution of the issue through remediation, will be maintained in the faculty member’s departmental file for a minimum of seven years. This period may be extended at the discretion of the Chair. If the faculty member has a cross- or joint- appointment, that department will be notified as appropriate. The relevant educational programs must also be notified.

E2: Following Completion of the Remediation

56. After completion of the remediation, documentation will be reviewed by the Department Chair or delegate and a decision will be made regarding the status of the remediation, which may include:

- Satisfactory completion of the remediation
- Provisional satisfactory completion of the remediation – some minor items outstanding, potentially triggering the need for further remediation and/or continued monitoring of performance.
- Unsatisfactory completion of remediation

57. After consideration of all available information, including but not limited to the status of the remediation plan and any other relevant information provided by the faculty member, the Department Chair will make the final determination for next steps.

Section F: Suspension from Teaching Duties

58. Situations that may lead to suspension include but are not limited to:

- Lack of professionalism of an egregious nature including but not limited to breaches of confidentiality, boundary issues, mistreatment etc.), including but not limited to the McMaster University, Undergraduate or Postgraduate Medical Education Policies.
- Lack of appropriate supervision with concerns regarding patient or learner safety resulting in significant detriment to the educational environment.
- Any other urgent or emergent situations as identified by the Departmental Chair, and/or Associate Dean, UGME/PGME or as identified by the application of other university policies.
- CPSO complaints and/or ongoing investigations, dependent on nature of complaint.
- Repeated concerns despite appropriate attempts at professional development and/or remediation.
- Unsatisfactory formal remediation

59. The decision to suspend teaching duties of a faculty member can be made after consultation and review by the Associate Dean, UGME/PGME and Division Head/Department Chair with timelines determined by the reasons for removal (e.g., immediate or after a short interval).

59.1. The Regional Assistant Dean will be involved (and/or lead) in all decisions and processes related to suspension of teaching duties for faculty based at the regional campuses.

60. Decisions to remove one group of learners from the teaching activities of a faculty member must consider all learners assigned to the faculty member (e.g., removal of postgraduate learners and effect on undergraduate learners), and appropriate communication and consultation must occur

with the relevant educational leader.

- 60.1. The teaching duties of the faculty member must be reviewed to determine if there is partial or complete removal of learners (e.g., clinical/administrative; educational). Partial removal of learners must be based on educational performance and nature of concerns and not the provision of service.
61. The decision to suspend teaching duties must be made in consultation with the following individuals, as appropriate.
 - Hospital leads, if anticipated effects on the provision of clinical service.
 - Employee Labour and Relations
 - Faculty Advisor, Office of Professionalism
 - Associate Dean, PGME/UGME
 - Regional Assistant Deans
 - Vice Deans, Education and Faculty Affairs
62. The Chair of the Department (delegate) must communicate the decision to the faculty member, outline the reasons for removal of learners and next steps. This meeting must be documented.
63. A remediation plan must be developed as appropriate, following the guidelines in Section E. Clear expectations of improvement for re-instatement of learners must be outlined in the remediation plan and timelines for consideration of re-instatement.
64. After completion of the remediation period, the Associate Dean, PGME/UGME and the Chair (or delegate) of the Department must consider if the criteria for re-instatement of learners have been achieved.
 - 64.1. A written summary of the faculty member's compliance with, and successful completion of the remediation plan must be provided by the individual responsible for evaluation of the components of the remediation plan.
 - 64.2. Based on above, determine if extension of the remediation period is required.
 - 64.3. Determine the terms of re-instatement (e.g. graduated) and if formal monitoring will be required after re-instatement.
65. The decision of the Associate Dean, PGME/UGME and the Chair of the Department/delegate will be communicated to the faculty member in writing, including but not limited to the terms of reinstatement, monitoring if recommended and consequences if there are further concerns.

Section G: Charts

Chart 1: General Process for Assessing Faculty Members

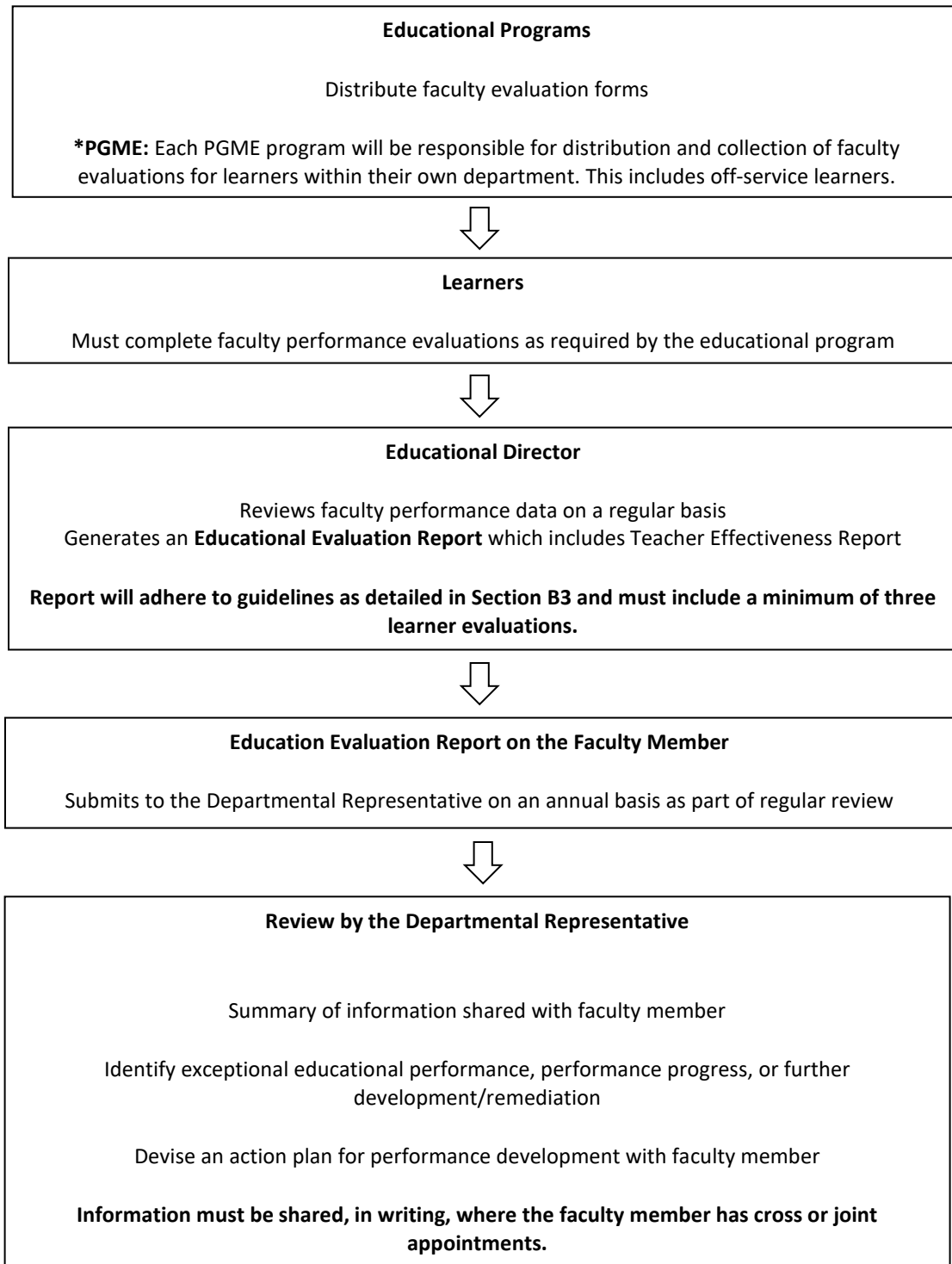
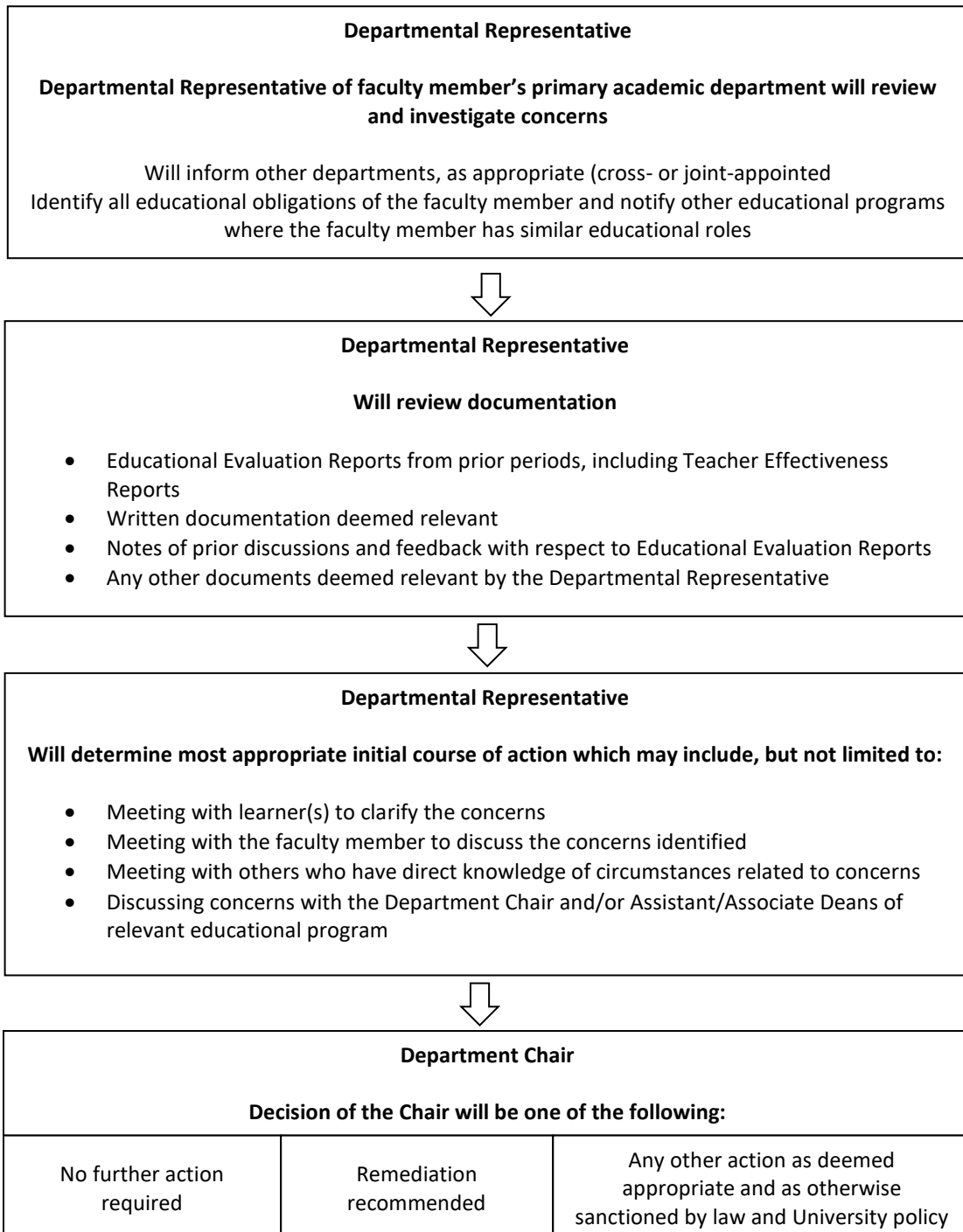


Chart 2: When Concerns are Identified/Failed Remediation/Urgent Situation (Investigation and Decision-Making)

Enact Review and Investigation Process When:

- Concerns that have been raised in multiple Educational Evaluation Reports
- Unsatisfactory completion of remediation
- Urgent or emergent situations that may require suspension from teaching pending an investigation





Department Chair

Will communicate the decision in writing to the faculty member

Relevant educational program will be notified

Chart 3: Remediation Plan

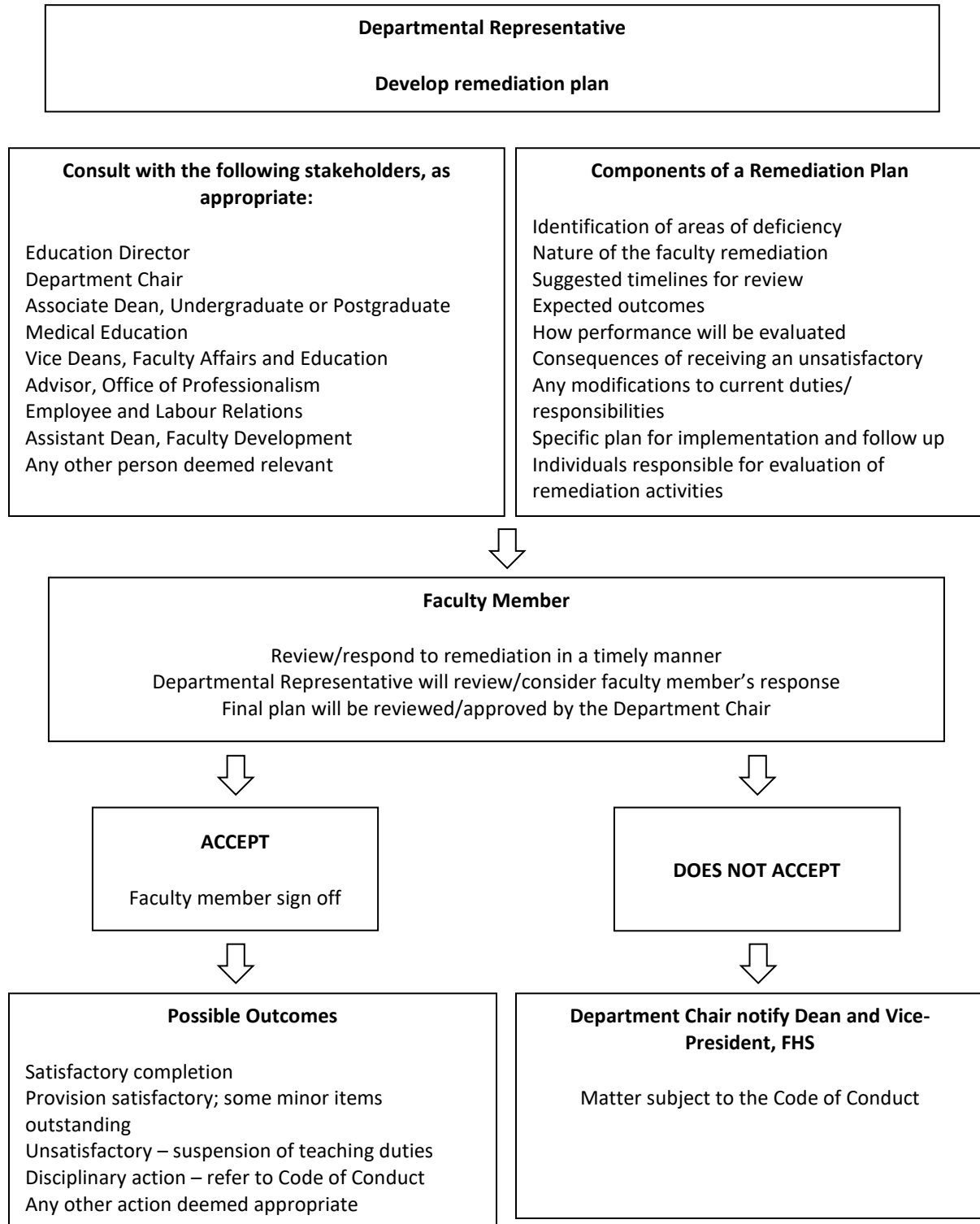
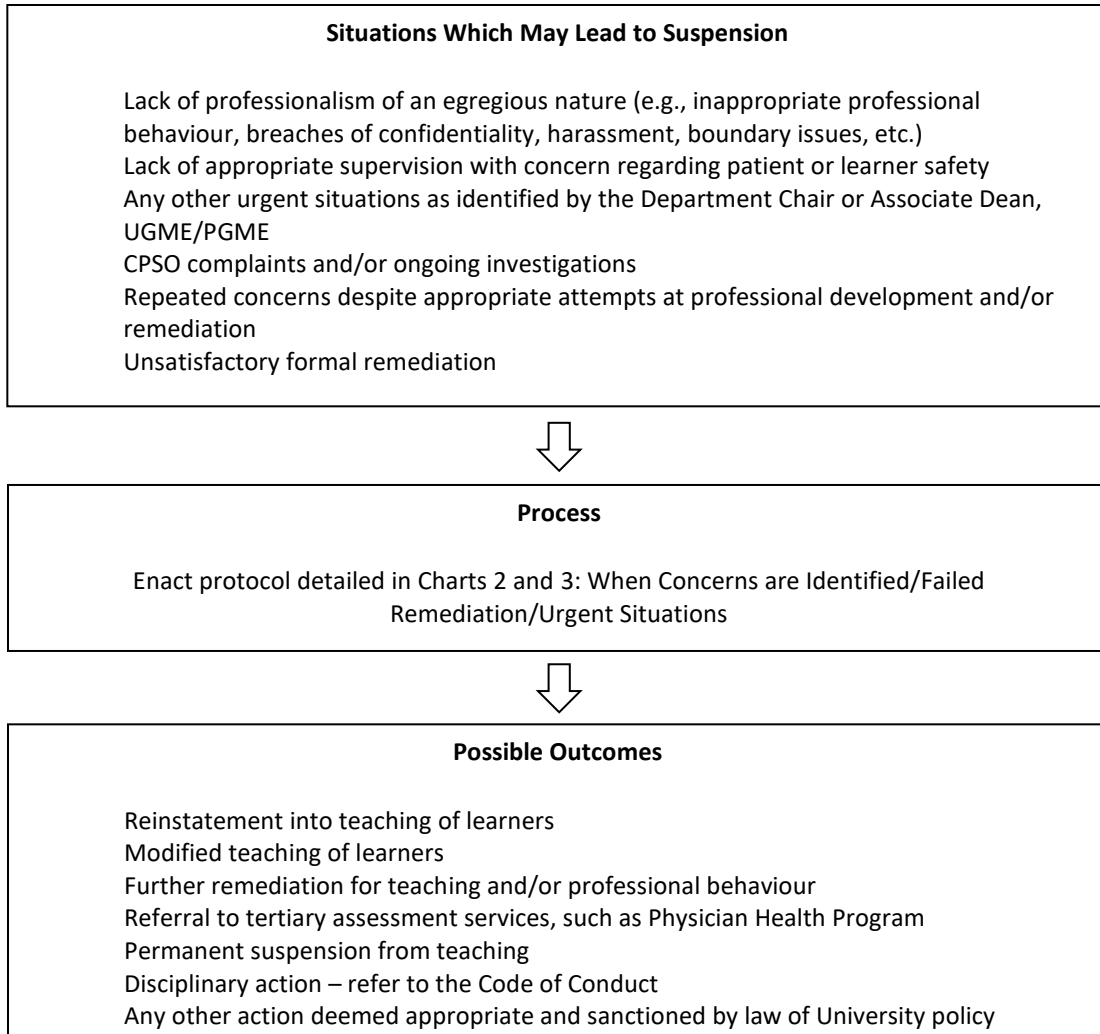


Chart 4: Suspension from Teaching Duties

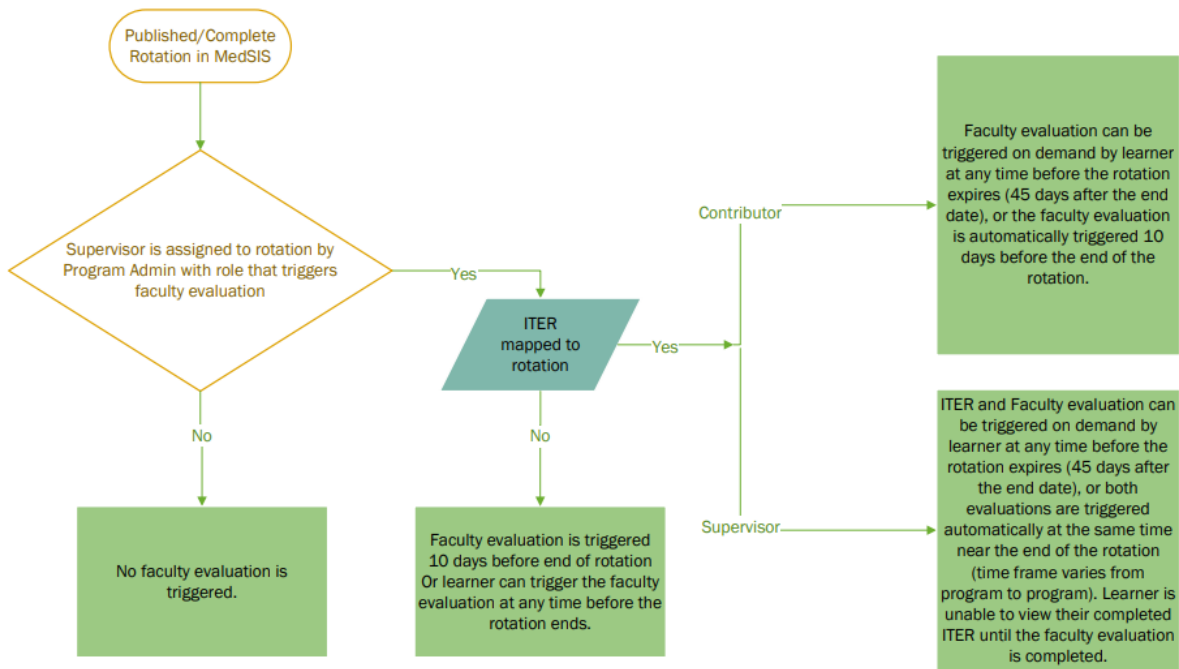


Section H: References

1. [McMaster University Code of Conduct for Faculty and Procedures for Taking Disciplinary Action](#)
2. [McMaster University, Faculty of Health Sciences Professional Code of Conduct for Learners](#)
3. [College of Physicians and Surgeons of Ontario \(CPSO\) - Physician Behaviour in the Professional Environment](#)
4. [College of Physicians and Surgeons of Ontario \(CPSO\) – Professional Responsibilities in Postgraduate Medical Education](#)
5. [SPS B1: Procedures for the Assessment of Teaching](#)
6. [Faculty Grievance Policy](#)
7. Undergraduate and Postgraduate Medical Education Policies, including *School of Medicine*

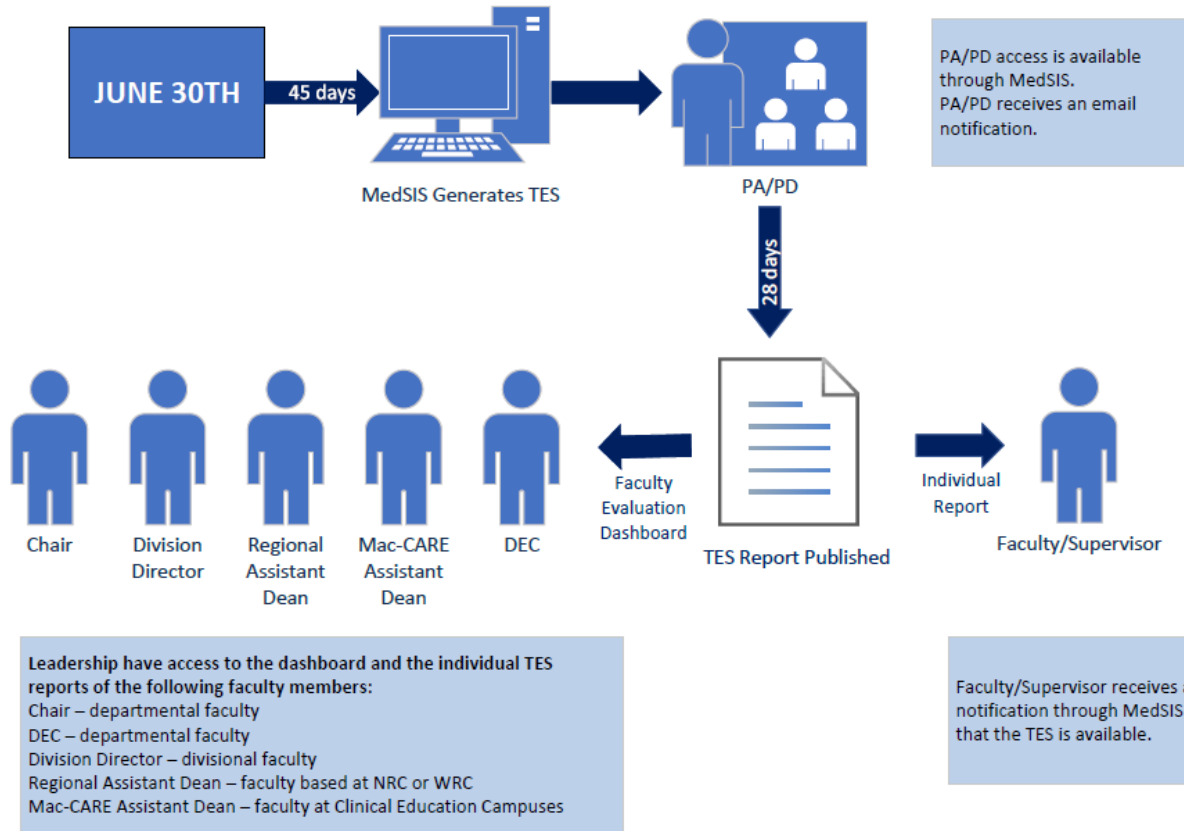
Section I: Appendices

Appendix 1 – PGME Faculty Evaluation Workflow



**Note: Faculty evaluations expire 45 days from the trigger date.

Appendix 2 – Distribution of Faculty Evaluation - PGME Workflow



Appendix 3 – UGME Teacher Evaluation Process

