Preamble
All affiliated institutions of the University of Toronto have in their mission statements the facilitating of education of healthcare professional trainees. Students, at all levels of experience, encounter learning opportunities in a wide variety of clinical settings. It is the aim of the University and its teaching institutions to provide healthcare professional trainees and clinical faculty or supervising clinicians with a welcoming learning environment and strong positive role models for professional behaviour and professional practice. In doing so, the following guidelines for the conduct of clinical teaching in the clinical environments are suggested for use across the affiliated teaching institutions. Teaching is not only defined as ‘specific acts’ but includes all activities when someone in training is providing care to patients on a day-to-day basis.

Purpose
This document is intended to provide guidance for all healthcare professional trainees and the clinical faculty or supervising clinicians in determining their rights and responsibilities when participating in clinical education.

University healthcare professional trainees and clinical faculty or supervising clinicians participating in clinical teaching at designated affiliated teaching locations (e.g. hospitals and community settings) must adhere to the Regulated Health Professions Act (RHPA) and the Health Care Consent Act (HCCA), the policies and procedures outlined by the host institutions and the policies and procedures of the University. In addition, each trainee and clinical faculty or supervising clinicians should make use of any ethical guidelines provided by their professional college or organization.

The University, the Affiliated Teaching Institutions, the Clinical faculty or supervising clinicians and the Healthcare Professional Trainees Are Committed To Their Roles in:

A. Teaching and Learning and :
1. To the education and training of all healthcare professional trainees.
2. To excellence in patient care, teaching and research.
3. Agree that clinical teaching is an essential component in the development of healthcare professional trainees.
4. Agree to attempt to clearly, effectively and appropriately communicate to patients that the affiliated teaching institution(s) is a learning environment(s) and therefore healthcare professional trainees are concurrently involved in both patient care and learning.
5. Agree that it is the responsibility of the clinical faculty or supervising clinician to provide not only instruction in clinical reasoning and technical skills, but also to exemplify ethical behaviour and to act as a role model to trainees for ethical practice. This includes maintaining confidentiality and affording patient dignity and respect, being open to questions trainees may have pertaining to what constitutes ethical practice and a commitment to the highest standards of ethical conduct in teaching activities, including integrity and honesty.
B. Supervision and Communication:
1. Agree that the information regarding the role and training of healthcare professionals is a vital part of the mission of the affiliated teaching institutions and that this fact should be shared with patients by means of appropriate signage and by communication with professional healthcare providers and/or administrative staff. Patient consent for care and exchange of information should be sought at the first appropriate opportunity.

2. Agree that patient’s consent to treatment in a clinical teaching setting should be obtained as soon as appropriately possible after an explanation of this setting and discussion of the patient’s concerns have taken place. Patients must be informed as to who is responsible for their care. The patient’s right to refuse treatment under such circumstances must be respected.

3. Agree that the responsibility for the supervision of healthcare professional trainees lies with the clinical faculty or supervising clinician. Details of the responsibility and dispute resolution procedures are to be found in the documents specific for each clinical group. Relevant documents are appended to these guidelines.

4. Agree that the clinical faculty or supervising clinician is responsible for the ongoing evaluation of the healthcare professional trainee’s competence in order to determine the degree of supervision that the healthcare professional trainee requires and the degree of delegation of controlled acts that the healthcare professional trainee is able to accept.

5. Agree that regular and appropriate exchange of information between a healthcare professional trainee and clinical faculty or supervising clinician is essential for the healthcare professional trainee’s learning experience and for the optimum care of the patient.

6. Agree that healthcare professional trainees are required to document patient care information and interventions and are required to notify the clinical faculty or supervising clinician of his/her actions in a timely fashion.

7. Agree that the clinical faculty or supervising clinician is responsible for receiving healthcare professional trainee’s communications on patient care activities, validating the trainee’s findings in an appropriate fashion.

C. Informed Consent:
1. Agree that patient information is invaluable for the education of healthcare professional trainees.

2. Agree that healthcare professional trainees will have access to patient information and that patients will be informed that trainees have access to the patient’s information.

3. Agree that patient consent should be obtained for participation in teaching activities that are purely educational in nature (e.g. teaching sessions with healthcare professional trainees, bringing patients into seminars, lectures, etc.) and that patients have the right to refuse to participate in such activities.

4. Agree that patients have the right to refuse the use of their information for educational conferences and seminars when the identity of the patient is provided.

5. Agree to ensure that the relevant faculties, programs, teaching institutions and the relevant governing bodies will define the profession-specific invasive procedures that require a patient’s written consent prior to a healthcare professional trainee’s participation in the defined invasive
D. Protecting Patient Confidentiality:
1. Agree that clinical faculty or supervising clinicians and healthcare professional trainees are required to maintain the confidentiality of patient information including written, verbal and electronic information at all times.

E. Managing Ethical Concerns:
1. Agree that the expectation is that most ethical or difficult situations in the teaching institutions will be discussed in a collegial atmosphere that normally exists in healthcare professional interactions and be satisfactorily resolved at the teaching or clinical interface.

2. Agree that the clinical faculty or supervising clinician must provide the healthcare professional trainee with an opportunity to discuss an ethical or difficult situation and that all health care professional trainees and the clinical faculty or supervising clinicians will have access to alternative avenues to resolve misunderstandings and differences of opinion.

3. Agree that a healthcare professional trainee has the right to refuse to participate in patient care or clinical teaching if the trainee has ethical concerns about the activities, is concerned regarding their own competency, lack of knowledge, lack of understanding of the duties/ tasks/ responsibilities or believes there is a lack of explanation or supervision.

4. Agree that the clinical faculty or supervising clinician is responsible to accept the trainee’s refusal to participate in patient care activities or clinical teaching, for ethical reasons.

5. Agree that in situations when a healthcare professional trainee expresses concern about ethical issues, refuses to participate in patient care activities or clinical teaching based on reasonable ethical grounds, or seeks consultation on an ethical issue, there will be no repercussions to the trainee.

6. Agree that healthcare professional trainees and clinical faculty or supervising clinicians have the right to consultation with a bioethicist, clinical ethics consultant or other individuals specifically trained in the management of ethical issues. Each institution should have policies and procedures to facilitate these consultations.

7. Agree that procedures will be implemented for healthcare professional trainees and clinical faculty/ supervising clinicians to report ethical concerns. These procedures may proceed through usual academic or hospital service routes for dispute resolution or through the institutional committee (described in E8).

8. Agree that each affiliated institution will identify a committee to receive unresolved ethical issues, adjudicate them as necessary and report to all parties involved. Committees will consist of an institutional bioethicist or his/her delegate, and institutional VP Education or his/her delegate and at least one other member.

9. Agree that information will be available to ensure that healthcare professional trainees and clinical faculty or supervising clinicians are aware of the procedures available to them to address ethical concerns and/or other issues by performing periodic audits of ethical issues brought forward for dispute resolution as in E8.

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