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Member Code of Conduct & Civility

PREAMBLE

The Ontario Medical Association (OMA) welcomes the diverse views and opinions of its members as they relate to issues before our Association, its structures, and any associated entities. In order for these discussions to be meaningful and effective, and to uphold the OMA's proud tradition of respectful discourse, we must treat each other with courtesy, respect, dignity and professional integrity.

SCOPE AND APPLICATION

The following Code of Conduct & Civility is intended to articulate general principles of behaviour required of all members when interacting with each other and with OMA staff while participating in OMA-related activities.

These principles apply to all types of interactions with, between and among OMA members, including without limitation attending meetings, events, communicating on/via electronic platforms (listserv, message boards, social media, email etc.), public statements (oral and in writing), and/or interacting with OMA staff. Rather than focusing on preventing certain behaviour or statements, these principles support positive behaviours and seeks to ensure that all OMA interactions are conducted in a civil and courteous manner, and in a way that generates respect and fosters a culture of fairness, openness, collegiality and safety.

PRINCIPLES

1. Treat others with dignity and respect regardless of position, role, or background.
2. Maintain a professional and appropriate tone, free of animosity, in written and verbal communication.
3. Understand that some work undertaken for the OMA is confidential, and respect that confidentiality.¹

¹ It is incumbent upon members to ensure that they identify and understand what information is confidential and ought to remain protected. If in doubt as to whether certain information is confidential, member should consult with others, as appropriate.

4. Be accountable for one's words and actions and be as careful with a colleague's reputation as with one's own.
5. Value diversity, dignity, and worth and strive to respect an individual's or group's differences and encourage freedom of speech², expression and inquiry.
6. Allow everyone to take part without interruption or intimidation and make space for others to be heard.
7. Encourage and participate in healthy debate and dialogue and facilitate free exchange of diverse and dissenting ideas and points of view.
8. Seek to present information truthfully and honestly. Give due consideration to the advice of subject matter experts and avoid misrepresenting or misleading disclosure of information, including about one's own roles, responsibilities, affiliations and qualifications or that of a colleagues.
9. Exercise restraint and be respectful in how you discuss, post, text or blog about people, information or content shared at meetings and events outside of the setting.
10. Be mindful of how conflicts of interest and biases (conscious or unconscious) can affect judgement, perception and decision-making.
11. Promote a healthy, safe and positive environment free from discrimination, bullying, intimidation, harassment, and/or acts of violence whether in person or online³ in accordance with the *Ontario Human Rights Code*, the *Occupational Health and Safety Act* and the OMA's Respect & Safety in the Workplace Policy. Any form of physical or verbal abuse, bullying or harassment, including via social media, is prohibited conduct and is not tolerated. (Refer to Appendix A for additional information on bullying or harassing conduct, and for a copy of the OMA's Respect & Safety in the Workplace Policy.)
12. Report instances of bullying, incivility and disrespect, including when you see harm being done or someone behaving contrary to this Code.

² within commonly accepted limits of safety and civility. In a membership community, as in society as a whole, freedom of speech cannot be absolute.

³ The medical profession, among many other professions, has little infrastructure or policy surrounding the usage of social media for communication of opinion, fact or information. The principles in this document will serve as a guide for interactions on social media that directly relates to the member's role as a physician leader and/or containing any OMA-specific content. For example, it is expected that no abusive, false, defamatory or discriminatory information be posted online. Social media, however, can blur the boundaries between an online presence and an individual's personal and professional lives. The challenges arising from the blurring of these boundaries is beyond the scope of this document, even though we do recognize that it needs clarification.

APPENDIX A: Definitions of Discrimination, Harassment and Bullying

Discrimination occurs when harassment relates to any one of the prohibited grounds set out in the Ontario Human Rights Code⁴ (e.g. race, national or ethnic origin, colour, religion, age, sex, sexual orientation, gender identity, gender expression, marital status, family status, disability and pardoned conviction).

Harassment involves engaging in a course of vexatious conduct against someone that is known or ought reasonably to be known to be unwelcome. Harassment may include sexual harassment, which is engaging in a course of vexatious conduct against someone because of sex, sexual orientation, gender identity or gender expression where the course of conduct or comment is known or ought reasonably to be known to be unwelcome.

Bullying is a form of harassment. It is the persistent mistreatment of one individual by another, who, intentionally or unwittingly, subjects the first to behavior that humiliates, demoralizes or otherwise undermines the victim's credibility, effectiveness, and personal wellbeing.

Related policy: [Respect and Safety in the Workplace Policy](#)

⁴ Human Rights Code, RSO 1990, c H.19