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# MEDICAL COLLEGE OF WISCONSIN OFFICE OF THE OMBUDS

# 1st Annual Report to Faculty and Staff

November 15, 2011 – December 31, 2012

Peter M. Layde, MD, MSc Ombuds Jenny Her Assistant to the Ombuds

Curative Building, Room 2512 1000 N. 92nd Street Milwaukee, WI 53226



414-266-8776 (confidential line) ombuds@mcw.edu www.mcw.edu/ombuds The Ombuds Office at the Medical College of Wisconsin officially opened on November 15, 2011. Established in the fall of 2011 by Dr. John Raymond, President and CEO of the Medical College of Wisconsin, the Ombuds Office is a resource for faculty and staff who wish to discuss concerns, conflicts or grievances confidentially. This inaugural *Annual Report of the Ombuds Office* to the faculty and staff of the Medical College provides data on the volume and characteristics of the visitors who have utilized the Ombuds Office, as well as detailed information on the types of issues they have raised—which are categorized according to the International Ombudsman Association's standard reporting practices. Additionally, this report describes systemic issues and patterns which were shared by numerous visitors to the Ombuds Office.



#### **Our Core Principles**

#### We are confidential

We will not identify you or discuss your concerns with anyone without your permission. The only exceptions to this pledge of confidentiality are when the Ombuds determines that there is an imminent threat of harm or if the Ombuds is legally compelled to report the situation.

#### We are independent

We are independent of central administrative offices and are not aligned with any campus department or group.

#### We are informal

Any communication with us is "off the record" and does not put the Medical College on formal notice.

#### We are neutral

We do not take sides. We consider the rights and interests of all parties. We are advocates for good communication and fair process.

#### The Ombuds Office DOES:

- Listen and discuss workplace questions, concerns and complaints
- Offer a **SAFE** place to discuss your concerns
- Informally investigate complaints
- Explain Medical College of Wisconsin policies and procedures
- Facilitate communication between people
- Advise individuals about steps to resolve problems informally
- Assist with problems that have not been resolved by other offices
- Make appropriate referrals when informal options don't work

#### The Ombuds Office DOES NOT:

- Participate in formal grievance processes
- Conduct formal investigations
- Make administrative decisions for the Medical College
- Determine "guilt" or "innocence" of those accused of wrong-doing
- Assign sanctions to individuals
- Serve as witness in administrative or legal proceedings, unless compelled to do so
- Receive official "notice" for the Medical College
- Maintain records that identify visitors to the office

### Consulting the Ombuds

Individual MCW faculty or staff members or group of employees wishing to consult the Ombuds typically contact the Office by email (ombuds@mcw.edu) or confidential telephone line (414-266-8776) to schedule a personal visit. On occasion – particularly for fairly straightforward factual questions – a phone consultation with the Ombuds can be arranged. Visitors to the Ombuds Office usually raise one or more issues or concerns – a number of which can be resolved fairly quickly during a single session. Often, visitors raise more complicated issues which will prompt the Ombuds to seek additional information while also protecting the confidentiality of the individual or group. Before others are contacted during this informal "fact-finding," the Ombuds and visitor always agree upon exactly what information will be discussed and with whom. For example, determining how a specific policy is interpreted might require contact with the departments of Human Resources, Faculty Affairs, General Counsel or the Compliance Office. Accordingly, the Ombuds and visitor would agree at the initial session whom would be consulted and whether information such as the department or name of the individual would be shared. In most cases, these types of inquiries would not require any reference to the individual or his/her department – so it is relatively straightforward to preserve anonymity.

Ombuds offices at institutions across the country utilize varying methods to report activities. These may include the total number of visitors to a particular office, the number of groups of visitors to the office, or the total number of individuals with whom the office has had contact (including both visitors to the office and individuals contacted to seek additional information or guidance). The International Ombudsman Association (IOA) (http://www.ombudsassociation.org/) recommends tracking and reporting the number of issues discussed with the Ombuds rather than the number of visitors, groups of visitors or total individuals contacted, citing greater reliability in categorizing and reporting issues. To that end, this annual report provides a detailed tally of the issues discussed with the MCW Ombuds Office according to the recommended reporting categories of the IOA.

From November 15, 2011 - December 31, 2012, the Ombuds Office logged 146 initial visits by single individuals or groups of individuals (note that repeat visits by individuals/groups for the same issues were not counted in the number reported above). Of these visits, 56.2% were by faculty, 42.4% were by staff, and 1.4% were by "other" or unknown. The majority of the visitors/ visitor groups worked in MCW clinical departments (67.1%), followed by centers/institutes, administrative units and basic science departments (17.1%, 9.6% and 4.8%, respectively). In addition, 1.4% worked in "other" or unknown departments. The visits noted above also included 22 exit interviews with faculty who had recently departed MCW (exit interviews were added to the purview of the Ombuds Office in July 2012, and are offered to faculty who are retiring, have elected to move to a new medical school for career advancement or personal reasons, or have not had their MCW contracts extended).

The issues and/or concerns raised by visitors to the MCW Ombuds Office are detailed in the *Appendix*. The most common reasons people visited the Ombuds Office related to concerns about their "evaluative relationships" – that is, relationships with both supervisors and supervisees. The second most common category of issues concerned "career progression and development," which included issues regarding employee advancement and career progression, as well as termination, nonrenewal and resignation. Matters related to peer and colleague relationships (including conflicts with coworkers) were the third most frequent category. The only other category accounting for more than 5% of visits to the Ombuds Office was "legal, regulatory, financial and compliance." In these instances, visitors frequently wished to discuss behaviors or issues related to fellow employees while preserving confidentiality and anonymity. I believe most visitors to the Ombuds Office have benefitted from our services.

Among the roles of the Ombuds Office is to identify patterns, trends, or systemic issues that should be brought to the attention of college leadership. These are issues of broader concern – raised by multiple visitors on multiple occasions – which could influence the MCW environment for faculty or staff. *Table 1* on page 5 provides a brief description of these systemic issues which have been, or will be, addressed with college leadership. In addition to the issues noted in *Table 1*, I have discussed a number of department-specific issues with college leadership.

#### Table 1 Systemic Issues and Concerns Identified by the MCW Ombuds Office November 15, 2011 - December 31, 2012

#### Civility and Respect

- \* Treatment of international graduates serving as MCW faculty or postdoctoral fellows, particularly their perception that they are treated disrespectfully by some colleagues
- \* The operating room climate is an important concern for many faculty, particularly related to treatment by certain colleagues of international medical graduates and women
- \* Bullying by faculty of post-docs and research scientists

#### Management and Administration

- \* Performance evaluation issues related to the new format being used for employee evaluations
- \* Issues related to VA benefits and policies, including retirement contributions and travel policies, for MCW faculty who work part-time at the VA Hospital and part-time at Froedtert or other MCW-affiliated sites
- \* Faculty and staff with long-standing relationships with MCW find that relationship abruptly terminated upon retirement
- \* MCW policy of discouraging unpaid volunteers

#### Training and Career Development

- \* Faculty management skills, particularly the lack of training and experience in leadership and administration of some chairs and section chiefs
- \* Need for more training opportunities for faculty and staff, encompassing time management, personnel management and leadership

#### **Intellectual Property and Related Issues**

\* Authorship and intellectual property issues, including disputes over authorship/ ownership of manuscripts, abstracts and patents

#### **Confidentiality and Retaliation**

- \* Concerns about confidentiality of responses on faculty and staff surveys such as *Faculty Forward*
- \* Concerns about discretion of quality-of-care issues related to specific patients relayed on email
- \* Fear of retaliation for visiting the Ombuds Office

## Message from the Ombuds

I welcome the opportunity to share this information with MCW faculty and staff, and hope that information on the variety of issues and concerns raised by visitors to the Ombuds Office will be of interest. I also welcome comments and suggestions for improving these annual reports, as well as how we can make the services of the Ombuds Office as useful as possible to MCW faculty and staff.

Sincerely,

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Peter M. Layde, MD, MSc Ombuds

February 8, 2013

6

# Location and Directions to the Ombuds Office

Curative Care Network, Room 2512 1000 N. 92nd Street Milwaukee, WI 53226

The Ombuds Office is located on the second floor of Curative Care Network.

We recommend that you park in the West Visitor Parking Lot and enter the building via the West (Main) Entrance.

- Take the right set of elevators to the second floor and turn left upon exiting
- Turn right, past the Injury Research Center, then turn left and proceed down the hallway
- The Ombuds Office (room 2512) is on your right

<u>Map</u> Directions

7

#### Appendix INTERNATIONAL OMBUDSMAN ASSOCIATION Reporting Categories

MCW Ombuds Office Annual Report: November 15, 2011 - December 31, 2012 Issues, Questions, Concerns, or Inquiries Addressed with Ombuds

	Category	Number	Percent
1	<b>Compensation &amp; Benefits</b> Questions, concerns, issues or i appropriateness and competitiveness of employee compensation programs.	•	
	Sub-total	29	4.4%
1.a	<b>Compensation</b> (rate of pay, salary amount, job salary classification/level)	7	24%
1.b	Payroll (administration of pay, check wrong or delayed)	2	7%
1.c	<b>Benefits</b> (decisions related to medical, dental, life, vacation/sick leave, education, worker's compensation insurance, etc.)	11	38%
1.d	<b>Retirement, Pension</b> (eligibility, calculation of amount, retirement pension benefits)	4	14%
1.e	<b>Other</b> (any other employee compensation or benefit not described by the above categories)	5	17%
2	<b>Evaluative Relationships</b> Questions, concerns, issues or in in evaluative relationships (i.e. supervisor-employee, faculty-state)	•	g between people
	Sub-total	311	47 1%

Sub-total	311		47.1%
2.a Priorities, Values, Beliefs (differences about what should be			
considered important - or most important –often rooted in ethical or			
moral beliefs)	18	6%	
2.b <b>Respect, Treatment</b> (demonstrations of inappropriate behavior,			
disregard for people, rudeness, crudeness, etc.	27	9%	
2.c <b>Trust, Integrity</b> (suspicion that others are not being honest, whether			
or to what extent one wishes to be honest, etc.)	5	2%	
2.d <b>Reputation</b> (possible impact of rumors and/or gossip about			
professional or personal matters)	7	2%	
2.e <b>Communication</b> (quality and/or quantity of communication)	21	7%	
2.f Bullying, Mobbing (abusive, threatening, and/or coercive behaviors)			
	12	4%	
2.g <b>Diversity-Related</b> (comments or behaviors perceived to be			
insensitive, offensive, or intolerant on the basis of an identity-related			
difference such as race, gender, nationality, sexual orientation)			
	12	4%	
2.h <b>Retaliation</b> (punitive behaviors for previous actions or comments,			
whistleblower)	9	3%	
2.i <b>Physical Violence</b> (actual or threats of bodily harm to another)	1	0%	
2.j Assignments, Schedules (appropriateness or fairness of tasks,			
expected volume of work)	28	9%	
2.k <b>Feedback</b> (feedback or recognition given, or responses to feedback			
received)	16	5%	

2.1 <b>Consultation</b> (requests for help in dealing with issues between two or			
more individuals they supervise/teach or with other unusual situations			
in evaluative relationships)	3	1%	
2.m Performance Appraisal/Grading (job/academic performance in			
formal or informal evaluation)	29	9%	
2.n Departmental Climate (prevailing behaviors, norms, or attitudes			
within a department for which supervisors or faculty have responsibility)			
	67	22%	
2.0 Supervisory Effectiveness (management of department or			
classroom, failure to address issues)	29	9%	
2.p Insubordination (refusal to do what is asked)	2	1%	
2.q <b>Discipline</b> (appropriateness, timeliness, requirements, alternatives, or			
options for responding)	4	1%	
2.r Equity of Treatment (favoritism, one or more individuals receive			
preferential treatment)	13	4%	
2.s <b>Other</b> (any other evaluative relationship not described by the above			
categories	8	3%	

3 <u>Peer and Colleague Relationships</u> Questions, concerns, issues or inquiries involving peers or colleagues who do not have a supervisory-employee or student-professor relationship (e.g., two staff members within the same department or conflict involving members of a student organization).

Sub-total	65		9.8%
3.a <b>Priorities, Values, Beliefs</b> (differences about what should be			
considered important - or most important –often rooted in ethical or			
moral beliefs)	15	23%	
3.b <b>Respect, Treatment</b> (demonstrations of inappropriate regard for			
people, not listening, rudeness, crudeness, etc.	13	20%	
3.c <b>Trust, Integrity</b> (suspicion that others are not being honest, whether			
or to what extent one wishes to be honest, etc.)	4	6%	
3.d Reputation (possible impact of rumors and/or gossip about			
professional or personal matters)	9	14%	
3.e <b>Communication</b> (quality and/or quantity of communication)	6	9%	
3.f Bullying, Mobbing (abusive, threatening, and/or coercive behaviors)			
	3	5%	
3.g <b>Diversity-Related</b> (comments or behaviors perceived to be			
insensitive, offensive, or intolerant on the basis of an identity-related			
difference such as race, gender, nationality, sexual orientation)			
	3	5%	
3.h <b>Retaliation</b> (punitive behaviors for previous actions or comments,			
whistleblower)	5	8%	
3.i <b>Physical Violence</b> (actual or threats of bodily harm to another)	0	0%	
3.j <b>Other</b> (any peer or colleague relationship not described by the above			
categories)	7	11%	

4 <u>Career Progression and Development</u> Questions, concerns, issues or inquiries about administrative processes and decisions regarding entering and leaving a job, what it entails, (i.e., recruitment, nature and place of assignment, job security, and separation.)

Sub-total	144	21.8%
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6	4%	
19	13%	
4	3%	
17	12%	
25	17%	
2	1%	
15	10%	
14	10%	
4	3%	
3	2%	
29	20%	
6	4%	
	19 4 17 25 2 15 14 4 3 29	19       13%         4       3%         17       12%         25       17%         2       1%         15       10%         14       10%         3       2%         29       20%

5 <u>Legal, Regulatory, Financial and Compliance</u> Questions, concerns, issues or inquiries that may create a legal risk (financial, sanction etc.) for the organization or its members if not addressed, including issues related to waste, fraud or abuse.

Sub-total	37		5.6%
5.a <b>Criminal Activity</b> (threats or crimes planned, observed, or experienced, fraud)	4	11%	
5.b <b>Business and Financial Practices</b> (inappropriate actions that abuse or waste organizational finances, facilities or equipment)	4	11%	
5.c Harassment (unwelcome physical, verbal, written, e-mail, audio, video, psychological or sexual conduct that creates a hostile or intimidating environment)	2	5%	
<ul> <li>5.d <b>Discrimination</b> (different treatment compared with others or exclusion from some benefit on the basis of, for example, gender, race, age,</li> </ul>		0.10	
national origin, religion, etc.[being part of an Equal Employment Opportunity protected category - applies in the U.S.])	5	14%	
5.e <b>Disability, Temporary or Permanent, Reasonable Accommodation</b> (extra time on exams, provision of assistive technology, interpreters, or			
Braille materials including questions on policies, etc. for people with disabilities)	5	14%	
5.f <b>Accessibility</b> (removal of physical barriers, providing ramps, <u>elevators, etc.)</u>	0	0%	

5.g Intellectual Property Rights (e.g., copyright and patent infringement)	9	
		24%
5.h <b>Privacy and Security of Information</b> (release or access to individual	5	
or organizational private or confidential information)		14%
5.i <b>5.i. Property Damage</b> (personal property	0	
_damage, liabilities)		
5.j <b>Other</b> (any other legal, financial and compliance issue not described		
by the above categories)	3	8%

## 6 <u>Safety, Health, and Physical Environment</u> Questions, concerns, issues or inquiries about Safety, Health and Infrastructure-related issues.

	Sub-total	13		2.0%
6.a	Safety (physical safety, injury, medical evacuation, meeting federal			
	and state requirements for safety training and equipment)	2	15%	
6.b	Physical Working/Living Conditions (temperature, odors, noise,		00/	
•	available space, lighting, etc)	1	8%	
6.C	<b>Ergonomics</b> (proper set-up of workstation affecting physical	0	0%	
Сd	functioning)	0	0%	
6.ú	<b>Cleanliness</b> (sanitary conditions and facilities to prevent the spread of	0	0%	
6 6	disease) Security (adequate lighting in parking lots, metal detectors, guards,		070	
0.0	limited access to building by outsiders, anti-terrorists measures (not for			
	classifying "compromise of classified or top secret" information)			
		0	0%	
6.f	Telework, Flexplace (ability to work from home or other location			
	because of business or personal need, e.g., in case of man-made or			
	natural emergency)	3	23%	
6.g	Safety Equipment (access to/use of safety equipment as well as			
	access to or use of safety equipment, e.g., fire extinguisher)	0	0%	
6.h	Environmental Policies (policies not being followed, being unfair			
	ineffective, cumbersome)	0	0%	
6.i	Work Related Stress and Work-Life Balance (Post-Traumatic			
	Stress, Critical Incident Response, internal/external stress, e.g.		400/	
c ;	divorce, shooting, caring for sick, injured)	6	46%	
6.j	<b>Other</b> (any safety, health, or physical environment issue not described	1	8%	
	by the above categories)	<u> </u>	0 /0	

7 <u>Services/Administrative Issues</u> Questions, concerns, issues or inquiries about services or administrative offices including from external parties.

	Sub-total		11		1.7%
7.a	Quality of Services (how well services were provided, accuracy or		2	400/	
	thoroughness of information, competence, etc.)		2	18%	
7.b	<b>Responsiveness, Timeliness</b> (time involved in getting a response or				
	return call or about the time for a complete response to be provided)				
			0	0%	
7.c	Administrative Decisions and Interpretation, Application of Rules	Γ			
	(decisions about requests for academic or administrative services, e.g.,				
	exceptions to policy deadlines or limits, refund requests, appeals of				
	library or parking fines, application for financial aid, etc.)				
			8	73%	

7.a	Behavior of Service Provider(s) (how an administrator or staff			
	member spoke to or dealt with a constituent, customer, or client, eg.,		00/	
_	rude, inattentive, or impatient)	1	9%	
7.e	Other (any services or administrative issue not described by the above		00/	
	categories)	0	0%	
8	Organizational, Strategic, and Mission Related Questions,	concerns, is	ssues or inc	quiries
	that relate to the whole or some part of an organization.			
	Sub-total	22		3.3%
8.a	Strategic and Mission-Related, Strategic and Technical			
	Management (principles, decisions and actions related to where and			
	how the organization is moving)	3	14%	
8.b	Leadership and Management (quality/capacity of management			
	and/or management/leadership decisions, suggested training,			
	reassignments and reorganizations)	7	32%	
8 c	Use of Positional Power, Authority (lack or abuse of power provided			
0.0	by individual's position)	4	18%	
b 8	<b>Communication</b> (content, style, timing, effects and amount of			
0.0	organizational and leader's communication, quality of communication			
	about strategic issues)	1	5%	
8.e	Restructuring and Relocation (issues related to broad scope			
0.0	planned or actual restructuring and/or relocation affecting the whole or			
	major divisions of an organization, eg. downsizing, offshoring,			
	outsourcing)	0	0%	
8.f	Organizational Climate (issues related to organizational morale			
	and/or capacity for functioning)	5	23%	
8.a	Change Management (making, responding or adapting to			
- 3	organizational changes, quality of leadership in facilitating			
	organizational change)	2	9%	
8.h	Priority Setting and/or Funding (disputes about setting			
	organizational/departmental priorities and/or allocation of funding within			
	programs)	0	0%	
8.i	Data, Methodology, Interpretation of Results (scientific disputes			
	about the conduct, outcomes and interpretation of studies and resulting			
	data for policy)	0	0%	
8.j	Interdepartment, Interorganization Work, Territory (disputes about			
Ĺ	which department/organization should be doing what/taking the lead)			
		0	0%	
8.k	Other (any organizational issue not described by the above			
	categories)	0	0%	

9 <u>Values, Ethics, and Standards</u> Questions, concerns, issues or inquiries about the fairness of organizational values, ethics, and/or standards, the application of related policies and/or procedures, or the need for creation or revision of policies, and/or standards.

	Sub-total	28		4.2%
9.a	Standards of Conduct (fairness, applicability or lack of behavioral			
	guidelines and/or Codes of Conduct, e.g., Academic Honesty,			
	plagiarism, Code of Conduct, conflict of interest)	9	32%	
9.b	Values and Culture (questions, concerns or issues about the values			
	or culture of the organization)	3	11%	

<ul> <li>9.c Scientific Conduct, Integrity (scientific or research misconduct or misdemeanors, e.g., authorship; falsification of results)</li> <li>9.d Policies and Procedures NOT Covered in Broad Categories 1 thru 8 (fairness or lack of policy or the application of the policy, policy not followed, or needs revision, eg., appropriate dress, use of internet or cell phones)</li> </ul>	9	32%	
9.e Other (Other policy, procedure, ethics or standards issues not described in the above categories)	1 660	4%	