



David Watters and Rob Knowles AO on the release of the EAG report

## TIME FOR CHANGE

The EAG's report into discrimination, bullying and sexual harassment is expected to lead to fundamental changes throughout the College.

The Expert Advisory Group's (EAG) report into discrimination, bullying and sexual harassment in surgery is expected to lead to fundamental changes to College interaction with hospitals, surgical educators, supervisors and Trainees, particularly women and International Medical Graduates (IMGs).

The report, presented to and accepted by the College in September, now stands as one of the single most significant advocacy milestones in the College's history and is considered to have the potential to spark sweeping reforms to the way medicine is taught and conducted in hospitals across Australia and New Zealand.

After months of investigation and with significant rates of participation by Surgeons and Trainees, the EAG established beyond doubt that discrimination, bullying and sexual harassment existed in the practice of surgery.

In particular, the research found that: 49 per cent of Fellows, Trainees and IMGs report being subjected to discrimination, bullying or sexual harassment;

- 54 per cent of Trainees and 45 per cent of Fellows less than 10 years post-Fellowship report being subjected to bullying;
- 71 per cent of hospitals reported discrimination, bullying or sexual harassment in their hospitals in the last five years, with bullying the most frequently reported issue;
- 39 per cent of Fellows, Trainees and IMGs report

bullying, 18 per cent report discrimination, 19 per cent report workplace harassment and 7 per cent sexual harassment;

- The problems exist across all surgical specialties; and
- Senior Surgeons and surgical consultants are reported as the primary source of the problems.

The report reflects the findings of five major independent research streams and highlights gender inequity in surgery as a central issue that must be addressed.

It identifies three core areas for action: culture and leadership; surgical education; and complaints management.

It called for increased transparency and external scrutiny in College processes, making it safe for Surgeons and Trainees to make a complaint without risk to their future careers, to

***“Treating people respectfully and decently should not be negotiable and I was interested in understanding a culture where some thought this was not occurring”***

### Expert Advisory Group on discrimination, bullying and sexual harassment Advising the Royal Australasian College of Surgeons

#### Issues Paper

**There is no place for discrimination, bullying or sexual harassment in the practice of surgery or in any modern workplace**

June 2015

#### Purpose

This Issues Paper aims to trigger debate and find solutions that will prevent and address discrimination, bullying and sexual harassment in the practice of surgery. This research found: It draws on research published in the attached Background Briefing. This research found:

- Discrimination, bullying and sexual harassment in the workplace occur in many countries and many workplace environments.
- In the medical work environment, despite the fact that discrimination, bullying and sexual harassment in the workplace have been prohibited by law for decades, these behaviours continue to be endemic.
- Trainees, medical students, female staff and colleagues have been identified as the most likely targets or victims.
- Surgeons as a group have been commonly identified as perpetrators.
- Onlookers and observers can be both co-victims and co-supporters of discrimination and bullying.
- Some workplaces support a 'culture of abuse' through a wide range of covert sanctions, including bystanders failing to act and disincentives for change.

#### Share your experience

This Issues Paper is the third major initiative of the Expert Advisory Group (EAG). It is part of a wide-ranging campaign to understand the extent of the problem and hear about experiences of discrimination, bullying and sexual harassment in the practice of surgery. It follows:

- a prevalence survey of College Fellows, trainees and international medical graduates that aims to scope the extent of discrimination, bullying and sexual harassment
- qualitative research, designed to hear from people who have been exposed to discrimination, bullying and sexual harassment in the practice of surgery, who do not wish to make a complaint. These people can confidentially share their experiences to help the EAG understand the problems and their impact. Thematic analyses of these personal stories will inform the work of the EAG.

The EAG urges all College Fellows, Trainees and international medical graduates to complete the prevalence survey. We encourage anyone who has been exposed to discrimination, bullying and sexual harassment in the practice of surgery to share their experience.

#### Share your ideas

The EAG wants to hear your ideas about preventing and addressing existing discrimination, bullying and sexual harassment in the practice of surgery. This Issues Paper provides a framework for this discussion and a framework to share your ideas by:

- responding to the Issues Paper in a written submission and/or
- taking part in the online facilitated discussions for College Fellows, Trainees and international medical graduates

More information about how to take part in these discussions is published on the College website at [www.surgeons.org](http://www.surgeons.org)

This Issues Paper discusses recurrent themes and poses questions for your feedback. To help our analysis of your ideas, please use the Issues Paper Response Template or reference your comments to the issues as they are numbered in this Issues Paper.

There is scope at the end of this Issues Paper for you to raise other issues and make different suggestions for the EAG to consider.

Go to Section 6 for details about how to make a submission.

end bystander silence and improve surgical education and training.

Upon the release of the report, College President Professor David Watters publicly apologised on behalf of all Fellows, Trainees and IMGs to everyone who had suffered discrimination, bullying or sexual harassment by surgeons.

“These behaviours have been too long tolerated and have compromised the personal and professional lives of many in the health workforce,” Professor Watters said.

“It is time to bring about meaningful cultural change and address the problems caused by some members of our profession.

“The EAG Report has identified that many of those affected have not felt they could trust the College to complain.

“We must now earn that trust by fairly and effectively

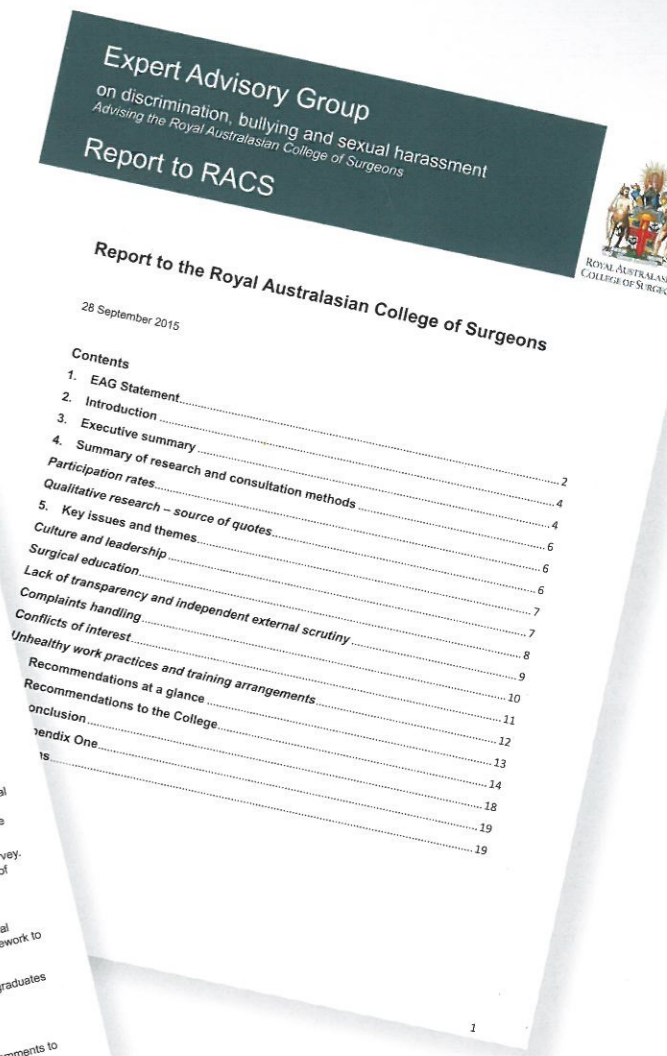
addressing these problems.”

The EAG was established in March in the wake of media reports of bullying and harassment suffered by Fellows and Trainees.

It was chaired by the Hon Rob Knowles AO, a former Victorian Minister of Health and current Chair of the Royal Children's Hospital in Melbourne. The Deputy Chair was Dr Helen Szoke, CEO of Oxfam and former Victorian Equal Opportunity and Human Rights Commissioner.

Other members included:

- Dr Joanna Flynn AM, Chair of the Medical Board of Australia and Chair of Eastern Health Victoria;
- Mr Ken Lay, APM, former Chief Commissioner of Victoria Police;
- Dame Judith Potter, DNZM, CBE, former Judge of the



High Court of New Zealand;

- Mr Graeme Campbell, General Surgeon and Vice President of the RACS;
- Dr Cathy Ferguson, Otolaryngology Head and Neck Surgeon from New Zealand and Chair of the College's Professional Standards Committee.

In releasing the report, Mr Knowles congratulated the College for having the courage to establish the enquiry and provide the EAG with the resources to do its work.

He said members of the group had been shocked by the stories they had heard and the long-term impact of the behaviour upon victims including depression and suicidal ideation.

"Now that the extent and impact of these issues is clear, there can be no turning back," Mr Knowles said.

"The College must be bold and embrace this opportunity to make lasting positive change.

"There is no room for bystanders and hospitals, employers, governments, health professional and industrial



*Rob Knowles presenting the EAG report to Graeme Campbell with Joanna Flynn*

associations and other partners in the health sector must also meet their responsibilities and make a sustained commitment to action.

"The College has made a serious commitment to understanding the scope of these problems and seeking the best possible advice about how to deal with them.

"We sincerely hope that the work of

the EAG has created a tipping point for action – by the College, Specialty Societies, employers, government and other partners in the health care sector – that will increase patient safety by making discrimination, bullying and sexual harassment in the practice of surgery a thing of the past."

The RACS will prepare and publish an Action Plan by the end of November

which addresses the issues raised and recommendations made in the EAG Report which is expected to include changes to surgical education including the incorporation of adult learning models and independent complaint investigation mechanisms.

So comprehensive is the EAG Report and the scope of the changes recommended, it is being seen by many within the College as a milestone as significant as the investigation into RACS practices conducted by the Australian Competition and Consumer Commission (ACCC) in the late 1990s.

That investigation found there was a need to increase transparency, procedural fairness, clarity and accountability in the selection and treatment of candidates for surgical training, all of which the College agreed to undertake.

Then, as now, the investigation acknowledged the important role of the College in training and maintaining high standards of patient care.

College President Professor Watters re-iterated that the RACS had a zero tolerance policy on discrimination, bullying and sexual harassment.

He said that the EAG's final report provided a clear blueprint for an Action Plan to rid the profession of such behaviour and provide strong direction for other health industry organisation to follow.

"All Fellows, Trainees and IMGs will need to champion and model the high standards of behaviour we expect of others," he said.

"There is no place for discrimination, bullying or sexual harassment in surgical practice, surgical training or the health sector more broadly."

*With Karen Murphy*



*The final EAG meeting discussed the findings of the last report provided to RACS*



*Rob Knowles AO addressing the press*