



University of the Virgin Islands School of Medicine

Policy Name and Section: <i>Student Mistreatment Policy & Procedures</i>	Effective Date:	UVISOM Policy Number: <i>005</i>
Responsible Authority: <i>Associate Dean for Student Affairs and Admissions</i>	UVISOM Documents where Policy Available: <i>UVISOM Student Handbook</i>	Approval Body and Date: <i>Executive Council, Curriculum Committee, Self-Study Committee</i>

(ADAPTED FROM UNIVERSITY OF CENTRAL FLORIDA COLLEGE OF MEDICINE)

The University of the Virgin Islands School of Medicine holds the core belief that all medical students, residents, faculty and staff have the right to learn and work in an environment of respect. This policy was developed to educate the UVISOM community about student mistreatment and outline the procedures for addressing medical student mistreatment when it does occur. It is the policy of the UVISOM that mistreatment of medical students will not be tolerated.

This policy and related procedures aim to protect medical students from mistreatment by any faculty (pre-clinical and clinical) or staff member associated with UVISOM, including clerkship directors, attending physicians, residents, and other medical students by:

- Educating all members of UVISOM about student mistreatment;
- Prohibiting medical student mistreatment by anyone associated with UVISOM;
- Encouraging the early identification of medical student mistreatment as a preventative measure;
- Identifying individuals to whom medical students can report mistreatment;
- Requiring those who receive complaints regarding student mistreatment to report the complaint to the appropriate administrator;
- Providing a confidential system for reporting mistreatment;
- Prohibiting retaliation against those who report mistreatment;
- Assuring confidentiality to the fullest extent possible;
- Assuring that all reports of mistreatment will be thoroughly and promptly addressed;
- Providing an avenue for corrective action.

Reports of mistreatment will preferably be addressed within an informal framework when appropriate, but formal procedures are available for use when necessary.

MEDICAL STUDENT MISTREATMENT DEFINED

UVISOM has defined mistreatment as any behavior that is harmful or offensive and unreasonably interferes with a student's learning. Such behavior may be verbal (swearing, humiliation, insults), emotional (neglect, a hostile environment), and physical (threats, physical harm). Students should be aware that medical student training is a rigorous process and feedback may occasionally be uncomfortable. For example, the Socratic Method is frequently utilized in medical education, to not only assess knowledge, but also to promote synthesis and application of that knowledge. In and of itself, the Socratic Method does not constitute mistreatment. (However, once it is clear that a student has reached the limit of his/her knowledge, it is not appropriate to continue berating students with questions or with denigrating comments about his/her knowledge base.) Students should take this into account when assessing potential cases of mistreatment.

EXAMPLES OF MISTREATMENT INCLUDE BUT ARE NOT LIMITED TO:

- verbal attacks or speaking insultingly to or about a person
- public belittling or humiliation (e.g., beyond the appropriate use of the Socratic method)
- threat of harm or being physically attacked (e.g., hitting, slapping, or kicking a person, or throwing instruments at a person)
- requiring performance of personal services (e.g., shopping, babysitting)
- intentional neglect or lack of communication (e.g., neglect, in a clerkship, of students with interests in a different field of medicine) or other instances that cause unwarranted exclusion from reasonable learning or professional opportunities
- disregard for student safety
- denigrating comments about a student's field of choice
- threat of grading and other forms of assessment as a reward or punishment other than course/clinical performance
- assigning duties as punishment rather than education
- other behaviors which are contrary to the spirit of learning and/or violate trust between the teacher and learner.

Violation of this policy may lead to disciplinary action, up to and including expulsion or termination.

Other mistreatment behaviors such as sexual harassment, discrimination based on race, color, religion, sex, national origin, age, disability, marital status, sexual orientation, gender identity, gender expression, and veteran status are covered under this and other University policies. The Associate Dean for Student Affairs and Admissions has the authority to determine (on a case by case basis) whether or not an alleged form of mistreatment would be more appropriately covered under this or other policies. When a medical student is alleged to have engaged in medical student mistreatment, the Associate Dean for Student Affairs and Admissions will determine whether such cases shall be handled under this policy or by the Honor Council (once it has been formed). Disputes over grades are handled by MD Program academic policies found in the MD Student Handbook.

PREVENTION AND EDUCATION

UVISOM is committed to preventing mistreatment of medical students through education of the UVISOM community. This policy and related procedures will be disseminated among UVISOM on an annual basis. In addition, UVISOM will periodically utilize varying methods (e.g., email, workshops, orientations) to inform medical students, residents, faculty, administrators, and other staff about medical student mistreatment and the UVISOM policy on addressing mistreatment.

Methods of communicating to specific groups include but are not limited to the following:

TO MEDICAL STUDENTS:

- a section on medical student mistreatment in the MD Program Student Handbook and clerkship handbooks,
- a topic during annual orientations,
- education of the medical student body through class meetings,
- web page dedicated to mistreatment information and resource guide.

TO MEMBERS OF THE UVISOM COMMUNITY:

- annual transmittal, by the Associate Dean for Student Affairs and Admissions, of a copy of the policy and procedures to department chairs, module directors, clerkship and site directors at UVISOM and at affiliated institutions, with instructions to distribute and explain the policy and procedures to faculty and staff participating in the teaching and training of medical students,
- annual discussions at clinical and medical education faculty meetings as well as meetings of the Committee on Academic Performance.

PROCESS

When mistreatment is believed to have occurred, the following procedure must be followed.

REPORTING

The initial step is to report the concern or incident. All students and faculty and staff of UVISOM shall report incidents of mistreatment. Reports may be anonymous and confidential. Confidential, non-anonymous reports with sufficient detail are most useful in support of follow up; however, all reports (using de-identified, aggregated information) may be used to assess and improve the educational setting. Students should be aware that anonymous reports may not be able to be fully investigated due to lack of information and lack of the ability to confirm the report. When required by law, the incident may be reported to the proper authorities.

RESOLUTION

After reporting, there are three procedural avenues of redress available to medical students:

- consultation,
- informal resolution, and
- formal grievance.

Often, concerns can be resolved through consultation or informal resolution. However, the student who made the report (the “Grievant”) can initiate a grievance if the matter is not satisfactorily resolved through the consultation or informal resolution procedure. In addition, another person, or the person about whom the report was made (the “Respondent”), can initiate a formal grievance.

CONSULTATION

A medical student who believes he/she has been mistreated, or an individual who becomes aware of mistreatment, may discuss the matter with the person who has alleged to have engaged in the behavior, or with the module director, clerkship director, site director (if within a hospital system), program director (if within a residency program), or the Associate Dean for Student Affairs and Admissions.

Consultation Procedure

The consultation procedure consists of one or more confidential meetings between the medical student and the Associate Dean for Student Affairs and Admissions, Module Director, Clerkship Director, Site Director, or Program Director. The person requesting consultation will be provided with the mistreatment policy and will be given guidance in developing strategies to address the situation. The final outcome may be that no further action is necessary, or may be to initiate the informal resolution procedure. Confidentiality will be maintained (unless conditions exist as stated under “Confidentiality”). In all cases, the findings and recommendations shall be reported to the Associate Dean for Student Affairs and Admissions, who will report the findings and recommendations to the Associate Dean for Faculty and Academic Affairs and appropriate hospital administrator (if relevant) for ongoing monitoring of the learning environment.

INFORMAL RESOLUTION

Following the consultation, an individual may initiate an informal resolution procedure which entails a non-anonymous report of alleged mistreatment and subsequent investigation of the charges by the Associate Dean for Student Affairs and Admissions (if at SOM) or the relevant clerkship/site/program director (if at an affiliated partner).

Informal Resolution Procedure

The student who makes the allegation of mistreatment (the “Grievant”) and who requests consultation may pursue an informal resolution. The student will be asked to provide a factual account of the alleged mistreatment and to sign or otherwise certify accuracy and authorship of a statement to such effect. This account must be forwarded to the Associate Dean for Student Affairs and Admissions who will in turn forward it to relevant parties (i.e., clerkship director, designated institution official, etc.).

The Associate Dean for Student Affairs and Admissions or Module/Clerkship/Site/Program Director (as appropriate based on the nature of the reported mistreatment) will inform the person accused of mistreatment (“the Respondent”) of the allegation in sufficient detail to enable the Respondent to make an informed response. The Associate Dean for Student Affairs and Admissions or Module/Clerkship/Site/Program Director will (i) investigate the alleged mistreatment as promptly as circumstances permit, (ii) afford the Respondent a reasonable opportunity to respond to the allegation, (iii) advise the parties and persons interviewed, or notified, about the alleged mistreatment of the need for discretion and confidentiality. Upon initiating an investigation, the Associate Dean for Student Affairs

and Admissions or designee may inform the dean, University, or Hospital officials who would be charged with recommending corrective and disciplinary action ("Responsible Officials") of the fact that an informal resolution procedure is under way.

If the Associate Dean for Student Affairs and Admissions or Module/Clerkship/Site/Program Director is unable to resolve the matter informally, they shall determine, based on the report, whether or not to suggest or impose corrective or disciplinary action. Any action imposed by the Responsible Official shall be in his or her discretion, consistent with his or her authority.

Within seven days of the decision, the Associate Dean for Student Affairs and Admissions or Module/Clerkship/Site/Program Director will notify the grievant, respondent and responsible officials of the disposition of the informal resolution procedure to the extent consistent with UVISOM and University policies, appropriate considerations of privacy and confidentiality, fairness, and applicable law. If dissatisfied with the disposition of the informal resolution procedure, the student who alleged the mistreatment, the Respondent, or the Associate Dean for Student Affairs and Admissions or designee may initiate the formal grievance procedure. In all cases, the findings and recommendations shall be reported to the Associate Dean for Student Affairs and Admissions, who will report the findings and recommendations to the Associate Dean for Faculty and Academic Affairs and appropriate hospital administrator (if relevant) for ongoing monitoring of the learning environment.

FORMAL GRIEVANCE PROCEDURE

The formal grievance procedure is available when the informal resolution procedure fails to resolve satisfactorily the allegation of mistreatment. The student who made the allegation of mistreatment (the "Grievant"), the person against whom the allegation was made (the "Respondent"), or a responsible UVISOM official may initiate a formal grievance. A formal grievance is initiated by submitting to the Associate Dean for Students a signed, written request to proceed with a formal grievance. The request is due within 15 business days after the student receives from the responsible UVISOM official a written statement of the disposition of the informal resolution procedure. The formal grievance submitted to the Associate Dean for Student Affairs and Admissions should provide an account of the facts pertinent to the incident and the reasons why the student believes the treatment to be the result of prejudice or otherwise improper conduct. The student should be as specific as possible.

The Associate Dean for Students will inform the requesting party of the process that will be followed and provide a copy of the applicable procedure.

A grievance hearing will be granted to review the case (within 15 business days from the date of the request) before a committee comprised of the Associate Dean for Faculty and Academic Affairs, two medical students, and two members of the medical faculty. The medical students and faculty who sit on this committee will be appointed by the Associate Dean of Student Affairs and Admissions at the beginning of each school year, during student and faculty orientations, respectively, to serve one year terms as a Grievance Panel. Two alternate faculty and students will also be selected in the event that a student or faculty from the Grievance Panel is directly involved in issues scheduled to appear before the Grievance Panel.

A student has the right to present his/her case during the appeal hearing, but may not be present for any discussions or deliberation by the committee. The student will be given reasonable notice of the

time and place of the hearing. The Associate Dean of Student Affairs and Admissions shall direct the questioning of witnesses and determine the order of presentation of any testimony or other evidence. The Associate Dean of Student Affairs and Admissions shall insure that the parties involved, and all other witnesses are treated fairly and that no witness is intimidated or harassed. The Associate Dean of Student Affairs and Admissions shall have the authority to recess the proceedings from time to time in the interest of convenience and justice.

In any appearance before the committee, an advisor of choice may assist the student if he/she has informed the Associate Dean for Student Affairs and Admissions at least 24 hours before the hearing. The role of the advisor shall be limited to assisting the student, and, unless the chairman of the committee specifically permits, the advisor may not directly question witnesses or otherwise participate in the proceedings. That individual will be present at an appeal hearing only while the student is present, but may not be present for any appeal hearing discussion and decision.

At the conclusion of the hearing, the committee shall vote on whether or not mistreatment occurred, by secret ballot. The committee's report may include a suggested corrective or disciplinary action. Within fifteen days of the committee meeting, the committee shall submit its report and conclusions to the Associate Dean of Student Affairs and Admissions. If the committee hearing results in a determination that mistreatment occurred, the findings and recommendations shall be referred, by the Associate Dean for Student Affairs and Admissions, to the appropriate UVISOM, University, Hospital or faculty official for imposition of corrective action, including sanctions that the official is authorized to impose. Any action imposed by the Responsible Official shall be in his or her discretion, consistent with his or her authority. If the Associate Dean for Student Affairs and Admissions disagrees with the committee recommendation and chooses to take a different action, the Associate Dean shall be required to discuss the committee's report and findings as well as the Associate Dean's suggested action with the Dean. Thereupon the recommended action shall be taken to rectify or settle the matter and it shall be concluded. The Associate Dean will communicate the decision to the student involved within 5 business days of the committee meeting.

In all cases, the student shall be advised that the burden is upon his/her to show by the weight of the evidence that the incident of which he/she complains was the result of prejudice or caprice or was otherwise improper.

Appeal

If the grievant is not satisfied with the outcome of the formal grievance procedure, he/she may file an appeal in writing to the Dean of the School of Medicine within 5 business days of receiving the decision. The Dean shall make a final decision on the matter within 30 business days of receipt of the student's written request for review. The Dean may act on the appeal directly or choose to have the appeal heard by a special ad hoc committee appointed by the Dean. The decision of this special ad hoc committee may be accepted or rejected by the Dean. The decision of the Dean is final and not subject to appeal.

OUTCOMES

If the informal resolution procedure or formal grievance procedure results in a determination that mistreatment occurred, the findings and recommendations shall be referred, by the Associate Dean for Student Affairs and Admissions, to the appropriate UVISOM, University, Hospital or faculty official for

imposition of corrective action, including sanctions that the official is authorized to impose. A range of relevant considerations may be taken into account in determining the extent of sanctions, such as the severity of the offense, the effect of the offense on the victim and on the University community, and the offender's record of service and past offenses. Sanctions may include, but are not limited to, oral or written warning, termination of privileges to train/interact with/evaluate medical students, probation, suspension, expulsion, or termination of employment; however, a respondent may not be dismissed except in accordance with the procedural safeguards for faculty, residents, staff, and students set forth in the relevant documents. The appropriate University, Hospital or faculty official may impose interim corrective action at any time, if doing so reasonably appears required to protect a medical student. In all cases, the findings and recommendations shall be reported to the Associate Dean for Student Affairs and Admissions, who will report the findings and recommendations to the Associate Dean for Faculty and Academic Affairs and appropriate hospital administrator (if relevant) for ongoing monitoring of the learning environment.

REDRESS OF DISCIPLINARY ACTION

Nothing in this policy or these procedures shall be deemed to revoke any right that any member of the University community may have to seek redress of a disciplinary action.

CONFIDENTIALITY

All officials involved in the investigation of mistreatment will hold all communications with those seeking assistance in confidence, and not disclose confidential communications unless given permission to do so. Substance of matters discussed in the office will remain confidential, whenever possible, but students should be advised that pursuant to this policy, different UVISOM faculty or administrative personnel will be informed to ensure that the established procedure is followed. For example, if disciplinary action is deemed necessary, it will be necessary for UVISOM leadership in the appropriate supervisory role to be informed. The Associate Dean for Student Affairs and Admissions will report general, de-identified trends of issues to provide feedback to the Dean and designees and to advocate systems change when appropriate. The only exceptions to this privilege of confidentiality are where there appears to be imminent risk of serious harm or a criminal investigation, compliance with Title IX mandated reporting, or court order.

The Associate Dean for Student Affairs and Admissions and other investigators and decision-makers will strive to maintain confidentiality to the full extent appropriate, consistent with the need to resolve the matter effectively and fairly. The parties, persons interviewed in the investigation, persons notified of the investigation, and persons involved in the proceedings will be advised of the need for discretion and confidentiality. Inappropriate breaches of confidentiality may result in disciplinary action.

RETALIATION

Retaliation against a person who reports, complains of, or provides information in a mistreatment investigation or proceeding is prohibited. Examples of retaliation include, but are not limited to, assigning a lower grade, describing the reporting individual as a "snitch," or making comments that the reporting individual is not to be trusted. Alleged retaliation will be subject to investigation and may result in disciplinary action up to and including termination or expulsion.

FALSE CLAIMS

A person who knowingly makes false allegations of mistreatment, or who knowingly provides false information in a mistreatment investigation or proceeding, will be subject to disciplinary action (, which in the case of students, may involve a referral to the Committee on Academic Performance).

TIME LIMITS

UVISOM aims to administer this policy and these procedures in an equitable and timely manner. Persons making allegations of mistreatment are encouraged to come forward without undue delay.

INTERPRETATION OF POLICY

The Associate Dean for Student Affairs and Admissions is available to provide advice on questions regarding interpretation of this policy and these procedures.