

## Student - Policy on Student Mistreatment

**Policy Number: 100.1155.100**

**Policy Revision Date: 5-24-2022**

**Policy Category: General Administrative**

**Policy Owner: Associate Dean for Student Affairs**

**Policy Audience: Students, Staff and Faculty**

### 1. Definitions:

For purposes of this Policy, student mistreatment is generally defined as behavior that shows disrespect for the dignity of others and unreasonably interferes with the learning process.

#### **Examples of Student Mistreatment that GCSOM Considers Unacceptable and Prohibited by this Policy Include:**

1. Public humiliation
2. Threats of physical harm or actual physical harm or punishment
3. Requirements to perform personal services, such as shopping or childcare
4. Being subjected to negative or offensive behaviors based on personal beliefs or personal characteristics other than gender, race/ethnicity, disability or sexual orientation.

***Please note:*** Incidents of sex discrimination and sexual harassment/violence must be handled Under the school's Title IX policy and students should report to Title IX resource advisors or directly to the Title IX coordinator as outlined in the Title IX policy: <https://www.geisinger.org/-/media/OneGeisinger/pdfs/ghs/Education-GCSOM/student-life/policies/title-ix.pdf>

Similarly, incidents of discrimination on the basis of other protected classifications (race, religion, creed, national origin or ancestry, age, physical or mental disability, veteran status, genetic information, citizenship) and thus potentially in violation of state or federal law must be handed through the Policy on Non-Discrimination Other Than Sexual Discrimination and Sexual Harassment/Violence and should be reported to the Associate Dean for Student Affairs for the MD Program or the Interim Associate Dean of Graduate Programs)

In addition, some behaviors covered by the Policy on Student Mistreatment may also be covered by the GCSOM Workplace/Learning Anti-Harassment and Bullying Policy.

## 2. Medical Curriculum Committee Review:

Last Review: Medical Curriculum Committee May 24, 2022

## 3. Introduction / Purpose:

Geisinger Commonwealth School of Medicine is committed to maintaining an environment where there is mutual respect between students, faculty, staff, and fellow students. Behavior that is abusive or mistreats students or others in the learning environment is prohibited.

## 4. Governance and Enforcement:

Vice Dean, Associate Dean for Student Affairs, Chief Diversity Officer, Chief Medical Officer, Designated Institutional Official (Residency Programs).

## 5. Policy:

GCSOM defines mistreatment as behavior that shows disrespect for students and unreasonably interferes with their learning process. Such behavior may be verbal (e.g., swearing, humiliation), electronic, emotional (e.g., neglect, a hostile environment), and/or physical (e.g., threats, physical harm). When assessing behavior that might represent mistreatment, students are expected to consider the conditions, circumstances, and environment surrounding such behavior.

### **THIS POLICY INCLUDES:**

- Standards for Conduct in the Teacher-Learner Relationship
- Reporting and Investigating Allegations of Mistreatment
- Dissemination of Policy and Education
- Appeal Process

### **STANDARDS FOR CONDUCT IN THE TEACHER-LEARNER RELATIONSHIP:**

(For additional information, *see Policy on Teacher-Learner Relationship in Policy section of the Student Bulletin*).

GCSOM is a professional school that trains physicians, scientists, and other professionals, many of whom will be entrusted with the lives and well-being of others. GCSOM, therefore, must assure that its students learn in an environment that fosters mutual respect and the values of professionalism, ethics, and humanism in the practice of medicine and related disciplines.

An environment conducive to learning requires that faculty, students, and staff treat each other with civility. Since faculty serve as role models for students and potentially influence career advancement of students through evaluations and references, the members of the faculty bear responsibility to assure that students are treated fairly and with respect in the learning environment.

The learning environment includes GCSOM facilities (e.g., classrooms and laboratories,) and affiliated settings (e.g., hospitals, clinics, research institutions, and businesses) where students learn. The quality and worth of a GCSOM education rests not only in the excellence of the curriculum content and the skills that are taught, but also in the examples provided by humane and ethical physicians, educators, and scientists who respect their colleagues in health care education and delivery, their patients, and one another.

Students are also expected to be respectful of one another and of the faculty, staff, and support staff that they encounter in the classroom, laboratory, and clinical settings.

GCSOM does not tolerate incivility, verbal, electronic, or physical abuse, exploitation, or mistreatment of students or one another. Personal humiliation and the use of psychological or physical punishment are unacceptable as teaching methods.

#### **REPORTING AND INVESTIGATING ALLEGATIONS OF MISTREATMENT OF MEDICAL STUDENTS:**

GCSOM believes that the standards of appropriate conduct in the educational setting are generally respected and practiced throughout the GCSOM. GCSOM recognizes, however, that there are occasions when the intensity and pace of study and work, and the differing expectations that members of its pluralistic, diverse community bring to their work and study, may lead to perceived or to real incidents of inappropriate behavior on the part of faculty, residents, staff, patients, and students towards students.

When this happens, GCSOM is committed to providing mechanisms to assist students and improve the learning environment. This includes procedures for establishing the facts through a fair process that respects, to the extent possible, the rights and confidentiality of the involved parties.

Students who wish to come forward and report inappropriate behavior on the part of a faculty, resident, staff member, patient, or peer may do so without fear of retaliation or reprisal. Students can expect that confidentiality will be maintained to the extent possible consistent with conducting a fair and thorough review, as well as providing for the safety and security of individuals and the GCSOM community.

## **RESOURCES FOR INFORMAL RESOLUTION:**

Students may be reluctant to discuss mistreatment for fear of being identified or for fear of reprisal, yet they often want alleged mistreatment incidents to be investigated.

To provide students with the opportunity to informally discuss forms of student mistreatment (other than alleged discrimination on the basis of classifications protected under federal and state law), a student can seek the assistance and counsel of an advisor by presenting to the Associate or Assistant Dean of Student Affairs, their Regional Assistant Dean of Student Affairs, or a trusted faculty member.

Students who seek the assistance and counsel of one of the advisors listed above can request that discussions be confidential and that no one else will be contacted without the permission of the student unless the situation holds a potential of immediate harm to the student or to others.

The role of the advisor is to hear the student's concerns, provide information related to GCSOM policies and procedures for reporting incidents of mistreatment, and support the student as they engage in decision making related to pursuing the matter through informal or formal resolution channels.

Students may choose to resolve a concern informally, either through direct communication with another individual or group of individuals (e.g., faculty, staff, residents, or other students) and/or with the assistance of an advisor as outlined above. GCSOM and healthcare affiliate policies and procedures should be supportive in these efforts. Many incidents of mistreatment are amenable to resolution in this manner.

In addition, students can provide open-ended feedback and, therefore, informally report incidents of perceived mistreatment on their course evaluation forms, the Learning Environment Survey and Learning Environment Report Form. Information from these sources is reviewed and referred to the Vice Dean, Associate Dean for Student Affairs, and Learning Environment Committee for further action as warranted. It should be noted that the GCSOM is limited in the actions it can take regarding incidents of mistreatment that are reported anonymously.

GCSOM also provides an Ethics Hotline (844-600-0042) through the Geisinger system and an online Lighthouse Reporting link that is managed by an outside vendor:

[https://www.lighthouseservices.com/\\_StandardCustomURL/IncidentLandingPageV2.asp](https://www.lighthouseservices.com/_StandardCustomURL/IncidentLandingPageV2.asp)

These resources provide alternate means to report alleged incidents of mistreatment and offer options for both signed and anonymous reports. Reports received through these avenues are referred to Student Affairs for further review and disposition.

## **RESOURCES FOR FORMAL RESOLUTION:**

A student who chooses to file a formal complaint must do so in writing to the Associate Dean for Student Affairs or Regional Assistant Dean for Student Affairs. Written grievances are preferred. However, if a student is only able to provide an oral grievance, the grievance will be converted to writing by staff and then reviewed by the student for accuracy. The statement should be as specific as possible regarding the actions(s) or inaction(s) that precipitated the report: date; place; persons involved; efforts made to resolve the matter informally (if applicable); and the remedy sought.

### ***If the report alleges mistreatment by a student:***

Students may file a formal report of student mistreatment perpetrated by a peer to the Associate Dean for Student Affairs or a Regional Assistant Dean of Student Affairs who will review the report and may refer it to the Committee on Academic and Professional Standards (CAPS). (*For information on the CAPS process, please see the Policy on Academic and Professional Standards Governing the MD Program in the Policy section of the Student Bulletin.*) The Committee on Academic and Professional Standards (CAPS) is a standing committee that responds to reports of violations of GCSOM's academic and professional standards within the student body.

### ***If the report alleges mistreatment by anyone other than a peer:***

Students may file a formal report of student mistreatment perpetrated by anyone other than a peer to the Associate Dean of Student Affairs or a Regional Assistant Dean of Student Affairs.

On receipt of a written complaint, the Associate or Regional Assistant Dean of Student Affairs or their designee will consult with the Vice Dean who will appoint an ad hoc committee to investigate the complaint within ten business days.

The ad hoc committee will conduct a prompt, thorough, and fair investigation of the complaint. The investigation will include an interview with the complainant and respondent and an opportunity for the complainant and respondent to present witnesses and other evidence. The investigation may also include interviews with witnesses, interviews with concerned parties, review of oral or written statements, or other appropriate inquiries as indicated by the complaint and evidence.

Students may request that an administrator or faculty advisor attend the ad hoc committee meeting with them during the investigation of the incident. Completely anonymous complaints will not result in any action or referral to an ad hoc committee. Students wishing to submit anonymous reports should reference the informal resolution section of this policy.

Investigations of mistreatment in the clinical learning environment may be investigated during or after the course/clerkship is over upon the student's request. The Regional Associate Dean/Regional Assistant Dean of Student Affairs can remove a student from a clinical learning environment at any time for reassignment, if needed.

**Ad hoc committee composition:**

1. For a complaint against a resident or fellow, the committee will include the ACGME/Designated Institutional Official, the specific residency or fellowship director, the relevant Chief Medical Officer (or designee), VP for Human Resources (or their designee), a faculty member of the student's choosing, and a designated faculty contact assigned to communicate with the student asserting the complaint.
2. For a complaint against a faculty member, the committee will include the Associate Dean for Education Administration, the relevant department chairperson, a faculty member of the student's choosing, and a designated faculty contact assigned to communicate with the student asserting the complaint.
3. For a complaint against a graduate student, the committee will generally include the Interim Associate Dean of Graduate Programs, the relevant department chairperson, a faculty member of the student's choosing, and a designated faculty contact assigned to communicate with the student asserting the complaint.
4. For a complaint against a GCSOM staff member, the committee will generally include the VP Finance or their designee, the appropriate staff supervisor, a faculty member of the student's choosing, and any designated faculty contact assigned to communicate with the student asserting the complaint.
5. For a complaint against personnel at an affiliated clinical site, the committee will include the appropriate staff supervisor, the Chief Medical Officer and Vice President of Human Resources (or their equivalents) at the affiliate, or their designees, a faculty member of the student's choosing, and any designated faculty contact assigned to communicate with the student asserting the complaint.

**Ad hoc committee process:**

The Vice Dean will refer the complaint to an ad hoc committee which will proceed in the following manner:

1. The ad hoc committee will conduct a prompt, thorough, and fair review. The ad hoc committee will select a chair to coordinate the process and communicate recommendations to the Vice Dean. The ad hoc committee will interview the individual submitting the complaint who may present witnesses and additional information. Students may request that an administrator or faculty advisor attend the ad hoc committee meeting with the student during the investigation of the incident.
2. In all cases, the person against whom the complaint is made will have the opportunity to review the evidence presented to the ad hoc committee, to address the committee, to present witnesses, and to present additional information.

3. After completion of its investigation, the ad hoc committee will make a recommendation to the Vice Dean for an appropriate action. The Committee may: a) find that no mistreatment occurred and report that to the Vice Dean; b) recommend that the complaint be resolved between the parties and report that recommendation to the Vice Dean; or c) find that mistreatment occurred and refer the matter with specific findings and recommendations for corrective action to the Vice Dean
4. The Vice Dean will communicate to the student that an action was or was not warranted maintaining confidentiality as much as possible for all involved.
5. Any disciplinary proceedings must be conducted, and any suspension, termination, or other discipline must be imposed in accordance with the existing personnel policies and procedures if applicable.
6. Recommendations from the Vice Dean regarding a resident, fellow, or staff member at a Geisinger Health System site or other affiliated clinical site shall result in appropriate disciplinary action by the affiliate, in the context of their own policies and procedures. In the case of faculty members, suspension from all teaching activities may be considered. Intermediate actions might include a formal verbal or written reprimand and/or requirement to complete an educational or therapeutic activity addressing the behavior that led to the complaint.
7. Retaliatory action of any sort during or following the investigation will be specifically prohibited, and written warning to this effect will be promptly provided to the parties under investigation.

#### **DISSEMINATION OF POLICY AND EDUCATION:**

GCSOM is committed to preventing and remedying mistreatment of students. To that end, this policy and related procedures will be disseminated among the GCSOM community.

In addition, GCSOM will periodically sponsor programs to inform students, residents, fellows, faculty, administrators, nursing staff, and other staff about student mistreatment and its resulting concerns; advise GCSOM community members of their rights and responsibilities under this policy and related procedures; and train personnel in the administration of the policy and procedures.

All medical students will receive an electronic copy of the Policy on Student Mistreatment as part of their orientation information, and it will be discussed during Phase 1, Phase 2, and Phase 3 orientation and during class meetings.

In addition, a statement regarding the policy will be posted on all pre-clinical and clinical courses in the Learning Management System. Each course director and clerkship director will be responsible for seeing that the Policy on Student Mistreatment is made known to their teaching faculty and to all students at the start of each course and required or elective clerkship.

Chairs and directors will be responsible for seeing that the policy and procedures are known to their faculty and discussed at departmental/center meetings and that it is discussed at all orientations of clinical faculty and house staff.

On an annual basis, the Associate Dean for Education Administration will share a copy of the Policy on Student Mistreatment with all affiliate institutions that includes instructions to distribute and explain the policy and procedures to all staff involved in the training of and interaction with medical students.

The Vice Dean, Chief Diversity Officer, Associate Dean for Student Affairs, Learning Environment Committee, and CAPS, will be responsible for recommending to the Dean further steps to foster an environment conducive to learning and respectful of its members.

**APPEAL:**

Either student or the accused party may appeal the decision of the Vice Dean to the Dean. Findings of fact, remedies granted to the student, and penalties imposed on the offending party are all subject to appeal. A written appeal must be submitted to the Dean within ten working days of the date of the letter informing them of the Vice Dean's decision.

Normally, the Dean takes no longer than thirty working days to evaluate an appeal. The Dean usually confines their review to the written record but reserves the right to collect additional information in any manner that will help to make the decision on the appeal. The Dean will inform both the student and the accused of the decision in writing.

**The Dean's decision is final.**

**6. Key Stakeholders:**

Students, Staff and Faculty