



QUILLEN COLLEGE *of* MEDICINE

EAST TENNESSEE STATE UNIVERSITY

Policy Name: **Mistreatment Prevention**

Policy Replaces a Previous Policy (this includes change in policy name): Yes/ No

If so, list name of previous policy (include policy number if different):

Policy Number (issued by the Office of Academic Affairs upon final approval): **ADMIN-0621-14**

Policy Owner (Individual, Department, or Committee/Chair): **Beth Anne Fox, MD / Vice Dean for Academic Affairs**

Committees, Departments, or Individuals Responsible for Implementation: **Offices of Academic and Student Affairs**

Original Approval Date and Who Approved by: **6/9/2021 – Office of the Dean**

Effective Date(s): **6/9/2021; 11/9/2023; 5/23/2024**

Revision Date(s) (include a brief description) and Who Approved by (made by Policy Owner and/or Policy Advisory Committee):

Administrative Edits (briefly describe) by Staff and/or the Policy Advisory Committee (PAC) and Date (these revisions do not require voting/approval by the policy owner):

11/9/2023 – change of policy being maintained by the Office of the Dean to the Offices of Academic Affairs and Student Affairs / PAC.

Exemption(s) to Policy (date, by what committee or individual, and brief description):

LCME Required Policy: Yes/ No

If yes, please list the Element(s) Affiliated with this Policy (include Element number/name/statement):

3.6 Student Mistreatment

A medical school develops effective written policies that define mistreatment, has effective mechanisms in place for a prompt response to any complaints, and supports educational activities aimed at preventing mistreatment.

Mechanisms for reporting mistreatment are understood by medical students, including visiting medical students, and ensure that any violations can be registered and investigated without fear of retaliation.

All policies will be reviewed by the Policy Advisory Committee every three years unless an earlier review is identified.

Date of Review: **5/23/2024**

Revisions Made: Yes/ No If yes, list revisions made:

1. Additional language added to examples of inappropriate and unacceptable behavior (intentional *intimidation*, neglect/*isolation*) and added “or patient and learner” to other behavior that is contrary to the spirit of learning and/or violates the trust.
2. Updated links to ETSU policies.

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3. Language added regarding the Office of University Compliance receiving and processing complaints in accordance with ETSU's Title IX Rule or ETSU's policy on Discrimination, Harassment, and Sexual Misconduct.

Revisions Require Approval by Policy Owner: Yes/ No

Policy Statement:

Quillen College of Medicine (QCOM) has a responsibility to foster the development of professional and collegial attitudes needed to provide caring and compassionate health care by all members of the Quillen College of Medicine community, including medical students, graduate students, resident physicians and fellows, faculty, and other staff who participate in the educational process. An atmosphere of mutual respect and collegiality is essential to nurture these attitudes and promote an effective learning environment. Despite the intensity of interactions that can occur in a health care setting with varied members of the academic and clinical community, mistreatment of any kind is not expected or condoned.

Purpose of Policy:

This policy is meant to promote a positive environment for learning in the Quillen College of Medicine, and affirm the importance of collegiality and respect for all.

Scope of Policy (applies to):

This policy applies to all QCOM students, visiting students, faculty, residents, fellows, graduate students, and staff.

Policy Activities:

The policy on mistreatment prevention has three main components.

1. A statement of Quillen College of Medicine standards of behavior with regard to mistreatment, including: a definition of mistreatment; examples of types of mistreatment; persons who may be the object or perpetrator of mistreatment; and the purpose of the policy on mistreatment.
2. A plan for the ongoing education of the Quillen College of Medicine community concerning these standards of behavior and the process by which they are upheld.
3. A description of the Quillen College of Medicine process for responding to allegations of mistreatment.

Note: Accusations of discrimination or harassment based on a protected class are not handled under this policy, but rather by the ETSU Office of University Compliance and ETSU's applicable institutional policies and rules. Reports of this nature may be made directly to the Office of University Compliance. Similarly, disputes about grades are handled under the Quillen College of Medicine Academic Grievance Procedures and Grade Appeal Process.

Mistreatment in the Learning Environment

Mistreatment is any behavior, intentional or unintentional, that shows disrespect for the dignity of others. Mistreatment interferes with the learning process and promotes an atmosphere in which abuse is accepted and perpetuated in medical training.

Examples of inappropriate and unacceptable behavior include harmful, injurious, or offensive conduct; verbal attacks; insults or unjustifiably harsh language in speaking to or about a person; public belittling or humiliation; threats of physical harm; physical attacks (e.g., hitting, slapping, or kicking a person); requiring performance of personal services (e.g., shopping, baby-sitting); threatening a lower grade or poor evaluation for reasons other than course/clinical performance; sexual harassment; discrimination on the basis of race, gender, sexual orientation, religion, ethnic background, age, or physical disability; intentional intimidation, neglect/isolation, or lack of communication; taking credit for another individual's work; disregard for student safety; or any other behavior that is contrary to the spirit of learning and/or violates the trust between the teacher and learner or patient and learner.

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Ongoing Education to Prevent Mistreatment

To promote a positive learning environment respectful of all individuals, the Quillen College of Medicine will provide ongoing education to students, residents, fellows, faculty, and other staff that emphasizes the importance of professional, respectful, and collegial attitudes and behavior. The materials and methods for providing this education will be the responsibility of the faculty in consultation with the Associate Dean for Student Affairs, the Associate Dean for Clinical Affairs, the Associate Dean of Academic and Faculty Affairs, the Office of University Compliance, the QCOM Grievance Officer, and Executive Associate Dean/Chief of Staff.

Education will alert all members of the Quillen College of Medicine community to expected standards of behavior. Education will also inform persons who believe they have been mistreated of the avenues for redress and will inform all concerned parties of the policies and processes for responding to allegations of mistreatment.

The methods for the education of specific groups are described below:

1. Medical Students
 - a. The policy will be maintained within the Offices of Student Affairs and Academic and Faculty Affairs
 - b. The topic will be addressed at medical school orientation and during transitions from the preclinical courses to the clinical rotations.
 - c. Each department is encouraged to include this topic in the course policies for each preclinical course and each clinical rotation. The policy on mistreatment will be included in all course and clerkship syllabi.
2. Resident Physicians and Fellows
 - a. The policy will be included in the Policies and Procedures Manual in the Division of Graduate Medical Education.
 - b. The topic will be addressed at the annual resident physician orientation.
 - c. The clinical department chairs and program directors will ensure all their fellows and residents are cognizant of the policy.
3. Graduate Students
 - a. The policy will be included in the Policies and Procedures Manual in the Department of Biomedical Sciences
 - b. The topic will be addressed at the annual graduate student orientation.
 - c. The department chair and program director will ensure all their graduate students are cognizant of the policy.
 - d. The Associate Dean of Research and Graduate Programs will ensure all core and adjunct faculty who participate in the teaching process are made aware of the mistreatment policy.
4. Faculty
 - a. An informative written message will be sent each year from the Vice Dean of Academic Affairs to all departmental chairs to ensure an annual review of the policy within their departments or divisions.
 - b. The department chairs and Associate Dean of Graduate Medical Education/Designated Institutional Officer (GME/DIO) will ensure annual review of the mistreatment policy by their faculty.
 - c. The Department Chairs, the Vice Dean of Academic Affairs, the Associate Dean of Student Affairs, and the Associate Dean of GME/DIO will direct the course directors, clerkship directors, and program directors to convey this information to all adjunct faculty who participate in the teaching process in order to ensure that all faculty are cognizant of the policy.
5. Nursing and Other Clinical/Support Staff

The Associate Dean of Clinical Affairs and the Chief Operating Officer will create and implement a plan to annually review the mistreatment policy with all ETSU Health nursing and clinical/support staff. The mistreatment policy will be sent by the Division of Academic Affairs to each training site with the introductory medical student documents to explain the policy and to request its distribution to all staff interacting with QCOM trainees.

Process for responding to allegations of mistreatment:

When an allegation of mistreatment is reported, the incident is reviewed and investigated by the responsible party(s) dependent on the type of incident reported.

This process is designed to be an impartial, effective collection of information and fair to both the complainant and the respondent.

Evidence and memories tend to deteriorate with time; therefore, complaints of mistreatment should be introduced without delay. Whenever possible, this should be initiated within a three-month period of the incident.

The Grievance Officer

The position of Grievance Officer has been established to serve as a resource for students who feel they have suffered mistreatment and

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to help investigate complaints of mistreatment, resolve conflicts, and strive for reconciliation when appropriate. Either party, the complainant or the respondent, may contact the Grievance Officer to seek assistance in resolving the conflict. The officer is chosen from the faculty in the Quillen College of Medicine and is appointed to this position by the Dean of the Quillen College of Medicine. The Grievance Officer is accountable to the Dean concerning advocacy issues. The Grievance Officer will communicate with the Office of University Compliance to appropriately report and respond to complaints of discrimination or harassment.

The Conflict Resolution Committee

If a reasonable effort by the Grievance Officer does not yield a solution, upon request of either party, a conflict resolution/due process committee will be convened. Additionally, the Grievance Officer or the Dean may also call for convening of the committee.

The purposes of the committee include ascertaining the facts to the extent feasible, mediating between the parties, striving for resolution, and ensuring due process is followed. The committee will assess the evidence objectively, be fair in its deliberations, and protect the rights of both parties.

The Dean will assemble the seven-member Conflict Resolution Committee from an established roster of Quillen faculty and medical students available at the identified time to serve. This Committee will include five (5) faculty members and two (2) students. The Grievance Officer is not a member of the Committee; however, the officer is present at committee meetings to provide information. The Dean will select the chair to preside over deliberations and provide a recorder. The Chair shall not vote except to break a tie vote.

Duties of the recorder shall be:

1. To record adequate minutes of every meeting;
2. To record by audio tape those portions of a hearing as hereinafter specified;
3. To take charge of and record the receipt of all correspondence, written statements, and other official papers received by the council; and,
4. To secure, file, and maintain in proper order in a special lock box in the office of the Grievance Officer.

The committee becomes involved in a given case at the request of the Grievance Officer, the complainant, the respondent, or the Dean. When the selected committee hears a case, the Grievance Officer, complainant, and the respondent are present. The committee chair is responsible for notifying the parties concerning the time and place of the committee meeting. The proceedings begin with the Grievance Officer presenting the case. Both the complainant and respondent have an opportunity to speak and to bring witnesses to speak.

The committee recorder shall record all hearing proceedings, except deliberations of the committee on findings and recommendations and committee deliberations regarding excusing committee members from sitting on a case. This record shall serve as the official documentation of the hearing.

The order of speakers is the complainant and the witnesses for the complainant followed by the respondent and the witnesses for the respondent

The respondent has the right to be present whenever the Grievance Officer, the complainant, or any witnesses are making statements. Similarly, the complainant has the right to be present during statements by the Grievance Officer, the respondent, or any witnesses.

Witnesses will be present only when they are called to give information. After speaking, they will be asked to leave and will not speak to each other prior to or during the proceedings. Both the respondent and the complainant can be harmed by breaches of confidentiality. Thus, all who are involved in the process of responding to allegations should maintain confidentiality.

All individuals involved in the process should know and understand the need for confidentiality. The complainant and respondent are not allowed to bring lawyers to committee meetings as advocates, advisors, or observers, nor may they bring any other persons, but may bring one advocate with whom the student may consult during the meeting; the advocate may not address the committee or question witnesses, consistent with due process and the grievance procedure.

When the committee convenes deliberations, the Dean will be notified.

Outcomes of Committee Deliberations

The committee's record of deliberations summarizing their findings and recommendations for action and disposition will be discussed with the Dean of the College of Medicine (or designee), recorded, and maintained by the Grievance Officer. The Dean (or designee) will advise the complainant and respondent concerning the final disposition of the matter. Decisions of the Dean shall be final.

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Additional Committee Responsibilities

The Grievance Officer may request that the committee be convened to resolve a case, neither the complainant nor the respondent may prevent the committee from meeting. The function of this called committee is to decide whether the matter should be brought to the attention of the Dean. It is in the interest of the respondent to meet with the committee to resolve the matter without involvement of the Dean. If the respondent refuses to attend the committee meeting, the committee will notify the Dean. If a committee member is approached by someone who believes that mistreatment has occurred, the committee member will refer the individual to the Grievance Officer and provide information on the methods available for reporting mistreatment.

The Grievance Officer maintains essential records.

Protections

Those who are accused of mistreatment will be informed that retaliation is regarded as a form of mistreatment and will not be tolerated. Accusations that retaliation has occurred will be handled in the same manner as accusations concerning other forms of mistreatment, using the Grievance Officer, Office of Compliance, and Conflict Resolution committee if needed. If the committee finds that retaliation has occurred, a letter will be sent to the Dean.

All reasonable action will be taken to ensure that the complainant and those providing information on behalf of the complainant or supporting the complainant in other ways will suffer no retaliation as a result of their activities in regard to the process.

A complainant or witness found to have been intentionally dishonest or malicious in making the allegations may be subject to disciplinary action.

All investigations and committee deliberations are confidential and will not be divulged by the Grievance Officer, the Committee members, or the Dean (or designee).

Relation to Other University Policies

This policy outlines an additional process for responding to complaints of mistreatment and is subordinate to the formal policies of East Tennessee State University and Quillen College of Medicine.

- [PPP-26 ETSU Policy Statement on a Drug-Free Campus](#)
- [PPP-27 ETSU Employee Grievance/Complaint Procedures](#)
- [PPP-04 Equal Employment Opportunity, Affirmative Action and Discrimination](#)
- [PPP-45 Americans with Disabilities Act](#)
- [ETSU Title IX Rule](#)
- [ETSU Policy on Discrimination, Harassment, and Sexual Misconduct](#)

Student Conduct

Regardless of reporting mechanism, complaints concerning sexual harassment or discrimination based on a legally protected class including gender, gender expression, gender identity, race, sexual orientation, age, color, ethnicity, national origin, religion, disability, veteran's status, or genetic information must be submitted to the ETSU Office of Compliance. The Office of University Compliance will receive and process such complaints in accordance with either (1) ETSU's [Title IX Rule](#) or (2) ETSU's [Policy on Discrimination, Harassment, and Sexual Misconduct](#) following an evaluation of the claim to determine applicability

Allegations of student misconduct may also be addressed according to the Student Honor Code or through the submission of a professionalism report.

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Administrative Reviews/Approvals	Date Approved
<i>University Compliance (if applicable)</i>	5/17/2024
<i>Policy Advisory Committee (includes three-year reviews)</i>	11/9/2023; 5/23/2024
<i>Associate Dean for Accreditation Compliance (if applicable)</i>	
<i>Vice Dean for Academic Affairs</i>	11/9/2023; 5/23/2024

Policy Review and/or Revision Completed By (if applicable)	Date Policy Reviewed and/or Approved (if applies to that department, committee, or group)
<i>Office of the Dean</i>	6/9/2021
<i>Office of Academic Affairs</i>	11/16/2023; 5/31/2024
<i>Office of Student Affairs</i>	
<i>Department of Medical Education</i>	
<i>Medical Student Education Committee</i>	
<i>Student Promotions Committee</i>	
<i>Faculty Advisory Council</i>	
<i>Administrative Council</i>	
<i>M1/M2 Course Directors</i>	
<i>M3/M4 Clerkship/Course Directors</i>	
<i>Student Groups/Organizations (describe):</i>	
<i>Other (describe):</i>	

Final Policy Emailed to:	Date of Email Notifications
<i>Medical Education Director for Posting on Educational Policies Website</i>	11/16/2023; 5/1/2024; 5/31/2024
<i>Policy Owner</i>	11/16/2023; 5/1/2024; 5/31/2024
<i>Admissions Office for Catalog (only new policies)</i>	11/16/2023;