Student Mistreatment Guideline - NEW

Preamble
Mount Sinai School of Medicine (MSSM) is dedicated to providing its students, residents, faculty, staff and patients with an environment of respect, dignity and support. All members of the MSSM community are responsible for protecting student rights as specified in our Student and Faculty Codes of Conduct, the oaths we take, and institutional policy. Educators (defined broadly to include anyone in a teaching role, including faculty, residents, fellows, nurses, staff, and students) bear significant responsibility in creating and maintaining this atmosphere. As role models and evaluators, educators must practice appropriate professional behavior toward, and in the presence of, students, who are in a particularly vulnerable position due to the formative nature of their status. This guideline, therefore, supplements the institutional policy on harassment and grievances, will assist in developing and maintaining optimal learning environments, and encourages educators and students alike to accept their responsibilities as representatives of MSSM in their interactions with their colleagues, patients, and staff. Description of Mistreatment

Mistreatment interferes with the learning environment, adversely impacts the student-educator relationship, and has the potential for disrupting patient care and research. Inappropriate and unacceptable behaviors promote an atmosphere in which mistreatment is accepted and perpetuated in medical education and training. While the perception of mistreatment may differ between individuals, examples of mistreatment of students include, but are not limited to:

- Intentional neglect or marginalization (e.g., ignoring, speaking down to, yelling at, ridiculing)
- Insults or inappropriately harsh language in speaking to or about a student
- Berating, belittling, humiliating or intimidating behavior
- Threat of physical harm or physical punishment (e.g. hitting, slapping, kicking)
- Asking to perform personal services (e.g., shopping, babysitting, picking up food)
- Threat of receiving a poor evaluation/grade for reasons other than course/clerkship performance
- Threat of altering authorship on a publication for reasons other than proper contribution
- Disregard for patient or student safety by requiring a student to perform a procedure or engage in patient care without adequate supervision.
- Sexual harassment, including offensive remarks, being asked to exchange sexual favors for grades or other awards, or being subjected to sexual advances
- Discrimination or harassment based on race, color, national origin, gender, sexual preference, age, religion, disability, marital status, military status, genetic predisposition, being the victim of spousal abuse, or based on any other characteristic protected by law.

Such actions are contrary to the good will, trust, and compassion central to the learning culture and working environment in an academic medical center. These actions cannot be tolerated. The sources of mistreatment include, but are not limited to research, preclinical, and clinical faculty, fellows, residents, post-docs, nurses, allied health care workers, fellow students and patients.
The Student Mistreatment Resource Panel

I. The School will form a student panel to (1) serve as a sounding board for students with concerns about mistreatment and (2) assist in school-wide education about this topic.

II. Members of the panel will be elected by their peers annually.

III. The Student Mistreatment Resource Panel will be comprised of:

- One (1) medical student at the MS IV level*
- One (1) medical student at the MS III level*
- One (1) medical student at the MS II level*
- One (1) medical student at the MS I level*
- One (1) MD/PhD student*
- Two (2) graduate students*
- One (1) scholarly year student, who will act as chair of the Panel*
- Two (2) Faculty Advisors who are the medical school ombudspersons.

*At least one (1) student member of the Panel will also sit on the Grievance Committee.

IV. Panel members will:

1. Serve as a sounding board for students with concerns about mistreatment in the educational environment.

2. Assist in educating the MSSM community about mistreatment as outlined in the section entitled “Dissemination.”

3. Meet with the Dean for Medical Education, Dean of the Graduate School and other medical school leadership on a biannual basis at the end of each semester. At that time, the panel’s de-identified records will be reviewed in order to improve this guideline and/or the program. If the panel or Deans deem it necessary, additional meetings may be scheduled.

4. Update this guideline and programming based on the biannual review.

5. Sign a statement detailing their understanding of the expectation of confidentiality in dealing with mistreatment related concerns and agreeing to serve on the panel for a one year term.

6. Recognize potential conflicts of interest: if a panel member has a potential conflict of interest that relates to a situation brought before the group (for example, a strong personal relationship with someone involved in the situation) the panel member must recuse himself or herself when the group learns about or discusses the situation. Likewise a student bringing a situation to the panel may request that one of the members not participate if there is a potential conflict of interest. The student should make this request to the chair of the panel or the ombudspersons.
IV. One (1) member of the panel will act as secretary and maintain de-identified records which include but are not limited to:

- All mistreatment concerns brought before the panel
- Next steps taken on mistreatment concerns (i.e. sent to Grievance Committee, spoke to Dean, etc.)

All Student Mistreatment Resource Panel records will remain anonymous and only de-identified data will be presented at biannual review meetings.

V. Student mistreatment concerns will be handled according to the following process:

- Students may report a concern either in person directly to a student member of the panel or by emailing a member of the panel. The panel will meet to discuss the case. Depending upon the severity and complexity of the complaint, the panel may deem it necessary or desirable for the student to meet with the group in order for the panel to ask questions or make suggestions.
- Depending upon the severity or complexity of the mistreatment, or at the request of the affected student, the panel may refer the case to an appropriate group or department at MSSM. When this occurs, the Dean for Medical Education and/or Dean of the Graduate School will also be notified.

At any time during the process, if the panel becomes concerned about an immediate threat to the safety or well-being of the complainant, alleged aggressor, or any person at MSSM or in the community, the panel will notify the Dean for Medical Education and/or Dean of the Graduate School.

**Dissemination**

To promote a learning environment respectful of all individuals, MSSM will publicize the concern about student mistreatment and this panel’s existence across the institution. Education is a cornerstone in the prevention of student mistreatment. An on-going effort will be made to inform all individuals involved in student education about the appropriate treatment of students and of this guideline. To that end, the following notification mechanisms will be utilized:

*Medical Students:* A discussion of mistreatment and our guidelines will occur each year during year, course, and clerkship orientations. Each course and clerkship director will include this guideline in their course and clerkship materials.
Graduate Students: A discussion of mistreatment and our guidelines will occur during Orientation for first year students.

Faculty, Residents and Fellows: This guideline will be sent each year from the Dean’s office to all Course and Clerkship Directors and all MTA directors, who will help disseminate the guideline to those involved in medical student education.

Protection from Retaliation

Retaliation against individuals who bring forward complaints of mistreatment (including but not limited to adverse effects on student evaluation) is strictly prohibited and will not be tolerated.