

Appropriate Treatment of Medical Students

The Paul L. Foster School of Medicine is a learning community whose goal is to enable the learner to achieve an education to his/her fullest potential while providing quality patient care. A cornerstone of the educational community is the expectation that learners will be treated appropriately and with dignity. The guiding principle of professional behavior is the absolute requirement of "respect for other persons". In our diverse learning community, respect is to be demonstrated toward all individuals, regardless of race, ethnicity, national origin, gender, sexual orientation, or religion. Such a learning environment includes honest and constructive corrective feedback. Such feedback should be provided in a helpful, specific and accurate manner, focused on behaviors, and, and when negative, given privately and respectfully.

Those providing feedback should do so mindful of the goal of helping the learner to improve. Those receiving feedback should do so graciously, with the assumption that it is given generously and in good faith. When inappropriate treatment is perceived to have occurred, learners must be able to communicate their concerns free from the fear of retaliation. Academic growth often occurs best when the learner is challenged; therefore, heated discourse and conflict are inherent to an academic environment of openness but must be conducted in a civil and respectful way.

Expectations of the Faculty (in accordance with the AAMC compact between teacher and learner):

- Demonstration of the professional virtues of fidelity, compassion, integrity, courage, temperance, and altruism
- Maintenance of high professional standards in all interactions with patients, colleagues and staff
- Provision of high quality educational program for medical students
- Nurturance of the medical students' intellectual and personal development and achievement of academic excellence
- Demonstration of respect for medical students as individuals, without regard to gender, race, national origin, religion, or sexual orientation
- Support of an environment that ensures the wellbeing of medical students
- Development of an intolerance for abuse or exploitation of the medical students
- Encouragement of medical students who experience mistreatment or who witness unprofessional behavior to report the occurrence immediately to appropriate faculty and staff in an atmosphere of confidentiality
- Non-tolerance of reprisals or retaliations against medical students who report instances of unprofessional behavior

Expectations of Medical Students (in accordance with the AAMC compact between teacher and learner):

- Demonstration of the professional virtues of fidelity, compassion, integrity, courage, temperance, and altruism
- Maintenance of the highest standards of the medical profession in all interactions with patients, patients' families, medical students, residents, other health care colleagues, and staff
- Acquisition and demonstration of the knowledge, skills, attitudes, and behaviors required to fulfill all educational goals and objectives established by the faculty
- Demonstration of respect for faculty members, medical students, residents, patients, patients' families, other health care professionals, and staff as individuals, without regard to gender, race, national origin, religion, or sexual orientation
- Demonstration of accountability and responsibility in the educational program and in the provision of patient care

Definition:

Mistreatment is behavior that adversely affects the learning environment and negatively impacts the learner/teacher relationship. Inappropriate and unacceptable behaviors promote an atmosphere in which abuse is accepted and perpetuated in the learning environment. In general, actions taken in good faith by faculty or residents to correct unacceptable performance is not considered mistreatment. Pointing out

during rounds, conferences, operating rooms, or other settings that a learner is not adequately prepared for his/her assignments or required learning material is not mistreatment unless it is done in an inappropriate manner.

The following are some specific illustrations of behaviors that would promote appropriate treatment of medical students and residents, and behaviors that would be considered inappropriate:

Examples of appropriate behavior include, but are not limited to:

- Conducting all interactions in a manner free of bias or prejudice of any kind
- Providing a clear description of expectations by all participants at the beginning of all educational endeavors, rotations and assignments
- Encouraging an atmosphere of openness in which students and residents will feel welcome to offer questions, ask for help, make suggestions, and disagree
- Providing timely and specific feedback in a constructive manner, appropriate to the level of experience/training, and in an appropriate setting, with the intent of guiding students and residents towards a higher level of knowledge and skill
- Focusing feedback on observed behaviors and desired outcomes, with suggestions towards improvement
- Focusing constructive criticism on performance rather than personal characteristics of the student or resident
- Basing rewards and evaluations on merit, not favoritism
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Examples of inappropriate behavior include, but are not limited to:

- Questioning or otherwise publicly addressing students or residents in a way that would generally be considered humiliating, dismissive, ridiculing, berating, embarrassing, or disrespectful by others (including persons outside the medical profession)
- Asking students or residents to perform personal chores (e.g., buying lunch, bringing coffee, running errands, etc.)
- Telling inappropriate stories or jokes (e.g., ethnic, sexist, racist, crude)
- Behaving in an aggressive manner (e.g., yelling, throwing objects, cursing, threatening physical harm) that creates a hostile environment
- Assigning tasks or denying educational opportunities with the intent of punishment
- Making disparaging comments about students, residents, faculty, patients, patients' families, other health care professionals, or staff
- Touching students or residents in a sexual manner
- Taking credit for a student's or resident's work
- Intentional neglect or habitual disregard for student/resident learning

Under no circumstances is it considered acceptable practice for any participant in the educational programs to demonstrate bias, prejudice, exclusion, or other unprofessional behavior. Such unacceptable behavior also includes the creation of a concern of "retaliation". Any perceived or witnessed action of mistreatment shall warrant the filing of a complaint or grievance as desired by the aggrieved party according to the procedures for filing a complaint or grievance.

Students who experience mistreatment are urged to proceed with the formal process of reporting that mistreatment as described in the dispute resolution policies (Student Faculty dispute resolution policy).