



School of Medicine Vice Dean Town Hall

Pat Thomas, MD
November 26, 2018

Teacher Learner Relationship Policy

- Find it on the Student Affairs Website
- Details the behaviors expected of faculty, other teachers and students
- Describes **multiple** methods of reporting unprofessional behaviors
- Describes how mistreatment reports are handled:
Addendum: **Mistreatment Working Group**
- Specifies a yearly aggregated report to the community

Explanation of mistreatment

“Mistreatment arises when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process. It can take the form of physical punishment, sexual harassment, psychological cruelty, and discrimination based on race, religion, ethnicity, sex, age, or sexual orientation.”

-AAMC questionnaire



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Explanation of neglect

“Neglect might be used to describe situations in which a student is openly ignored, is excluded from important decisions, or made to feel ‘invisible.’ Neglect is different from overt mistreatment but can still interfere with the learning process.”



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Sources of Information

- Graduation Questionnaire
- End of Clerkship Evaluations
- Individual Reports



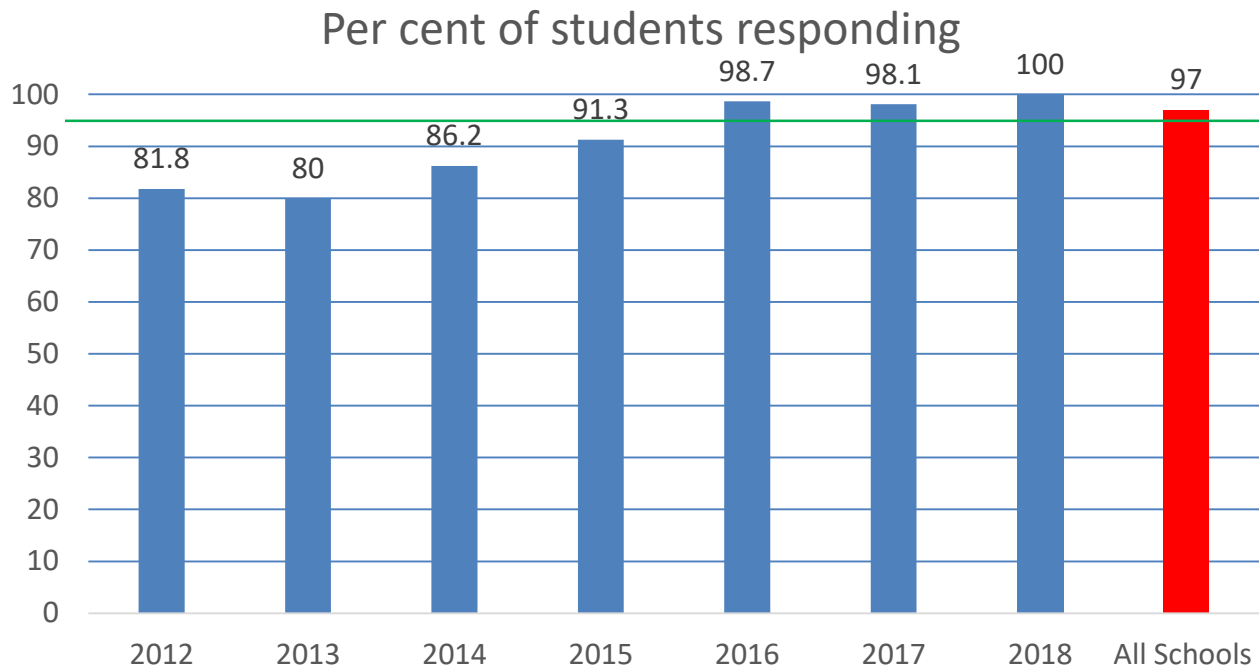
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2018 AAMC Graduation Questionnaire

- Aggregate data for 141 LCME-accredited schools
- 16,223 graduates
- CWRU respondents: 166
- 134 “Main Campus” and 32 CCLCM

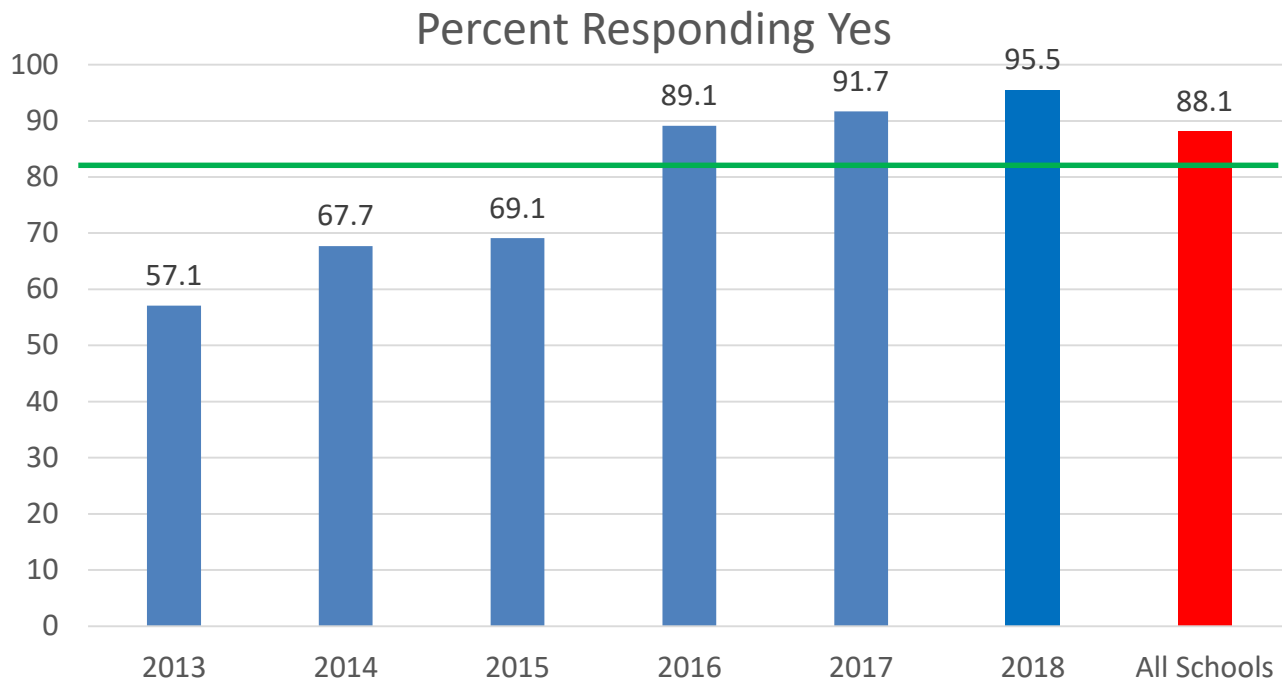
Aware of Policy on Student Mistreatment



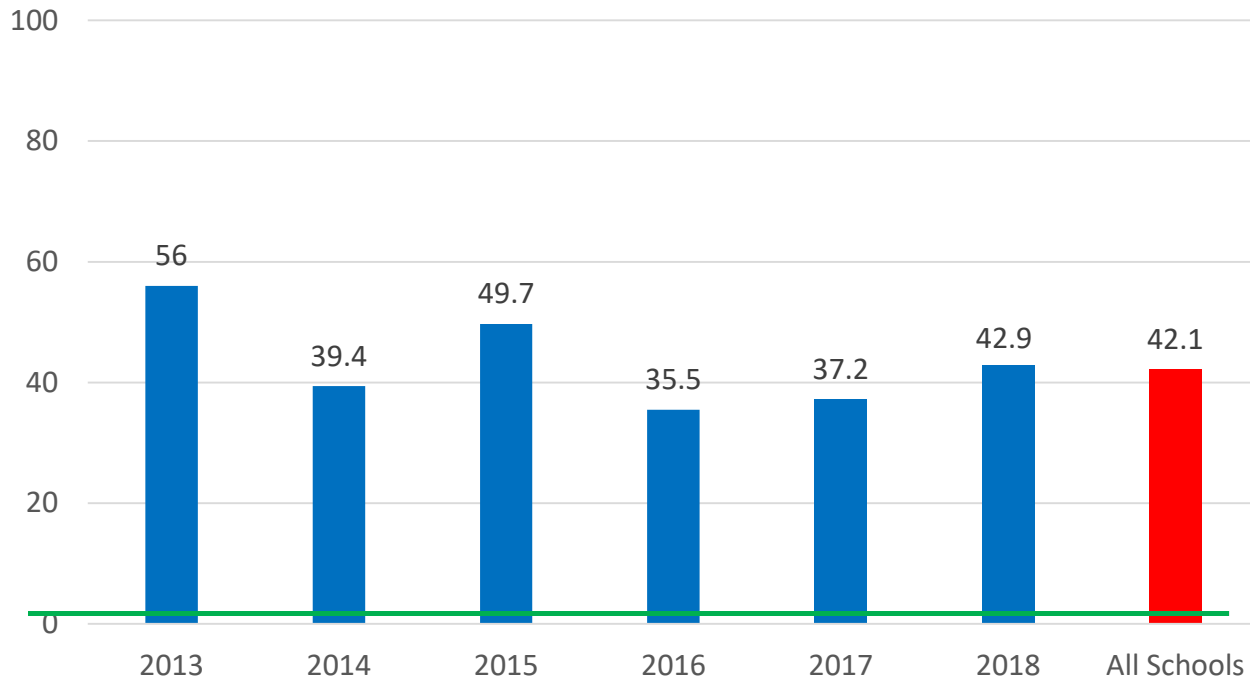
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Do you know the procedures for reporting the mistreatment of medical students?

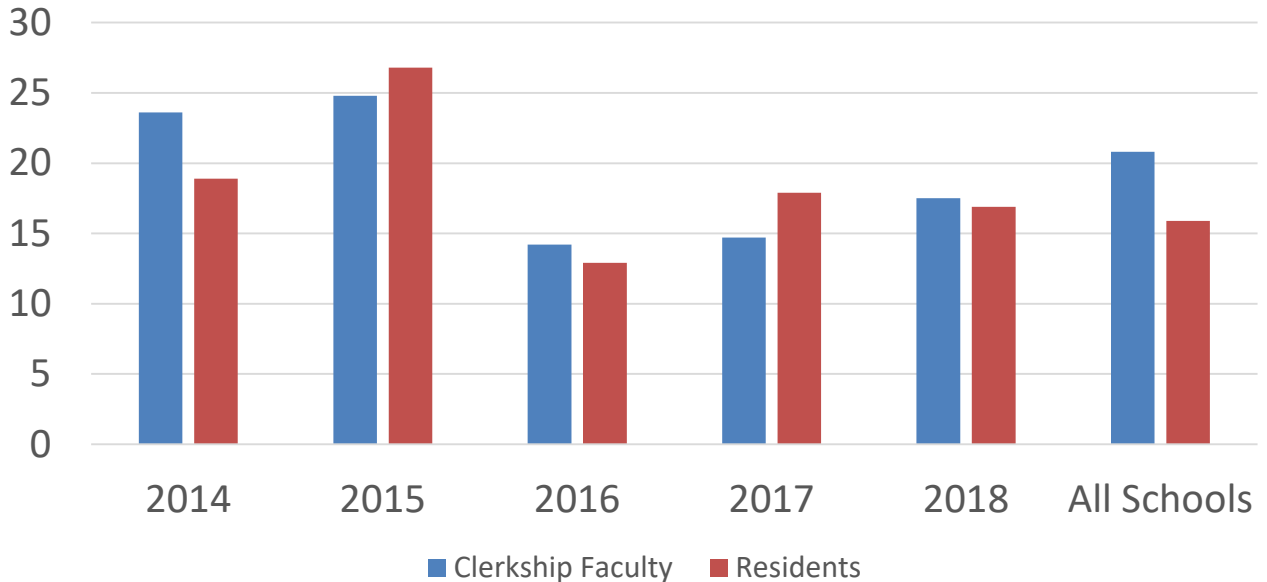


Percent of respondents personally experiencing mistreatment

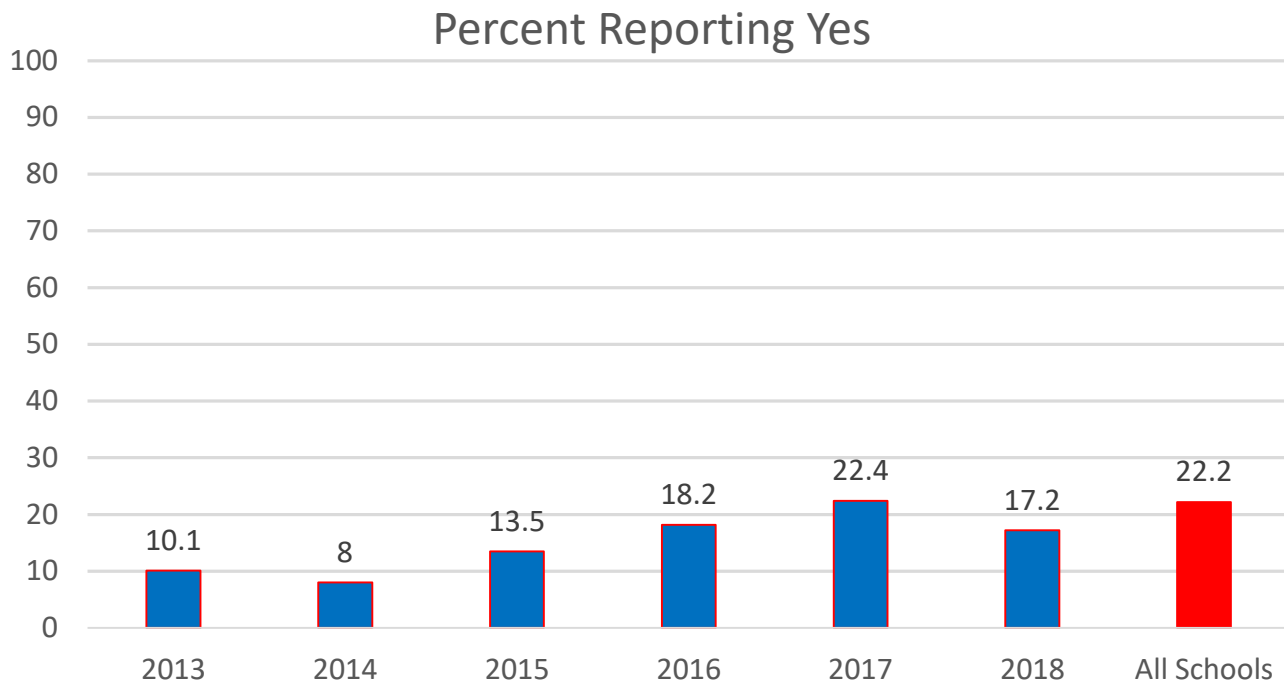


Who was the source?

Per Cent of Students Responding Yes



Did you Report to a Designated Faculty Member or Institutional Administrator Empowered to Handle Complaints?



To Whom Did You Report the Behaviors?

	2015	2018
Dean of Students	50	36.4
Designated counselor/advocate/ ombudsperson	20	0
Other med school administrator	20	9.1
Faculty member	40	45.5



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Why didn't you report?

	Percent (N=58)
The incident did not seem important enough to report	64
I resolved the issue myself	14
I did not think anything would be done about it	30.3
Fear of reprisal	24.2
I did not know what to do	9.1
Other	6.1

CWRU SOM Neglect and Mistreatment Data (End of Clerkship Questionnaires) July-June All Sites Combined

	Family Medicine	Internal Medicine	Ob-Gyn	Pediatric	Surgery	E Med	Neuro	Psych
N	216	215	211	211	171	179	179	178
Witness mis- treatment?	0	1	11	2	7	0	0	1
Personally experience?	3	4	12	4	7	0	0	0
Report?	4 No	1 to CD 1 to SD 5 No	1 to CD 2 to SD 23 No	3 to CD 3 to SD 3 No	7 to CD 12 No	-	-	1 No
Do you know procedures for report?	88%	89%	86%	89%	95%	90%	89%	89%



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CWRU SOM Neglect and Mistreatment Data
(End of Clerkship Questionnaires) July-June
All Sites Combined

	Family Medicine	Internal Medicine	Geriatric	Ob-Gyn	Pediatric	Surgery	E Med	Neuro	Psych
N	216	215	215	211	211	171	179	179	178
Neglect	4	10	5	39	9	14	5	4	3
Public Humiliation	0	2	1	7	2	5	0	0	0
Intimidation	3	1	1	6	1	8	0	0	0
Behavior/lang about gender, sex	0	0	0	1	0	1	0	0	0
Behavior/lang about race/religion	0	0	0	2	1	0	0	0	0
Other*	0	3	0	2	2	6	0	0	0



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	Int Medicine	Ob-Gyn	Pediatrics	Surgery
Subjected to offensive sexist remarks	2		1	2
Received lower evaluation because of gender/race/ethnicity		1	1	
Subjected to offensive racial/ethnic remarks			1	
Subjected to offensive remarks about age			1	
Required to perform personal service	1			1
Subjected to negative/offensive behavior based on your personal beliefs				1

Individual Reports

- 17 reports submitted
- 4 in pre-clerkship curriculum
- De-identified description of event and how it was handled follows

Case 1: Faculty Member

Complaint: Clerkship student report CCF faculty made inappropriate comments to the student, resident laughed at the student, said the student is too sensitive.

- Chair of Institute was notified; faculty member had a history of inappropriate conduct
- Faculty was presented to Physician Conduct Committee
- PCC determined conduct unacceptable; Board of Governors did not renew contract
- Resident in remediation plan



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Case 2,3,4,5: Faculty

Complaint: Inappropriate touch, contact, inappropriate behavior and aggressive demeanor, inappropriate and sexist behavior

All referred to University Title IX Office



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Case 6: Sim Center Staff

Complaint: Student witnessed rude, demeaning behavior by a Sim Center Staff member

Intervention: Supervisor notified and met with staff member; reviewed Teacher Learner Relationship Policy

Case 7, 8: IQ Facilitators

Complaint: Student report acts of intimidation and harassment from IQ facilitator. Student report of neglect/inappropriate actions and comments by IQ facilitation.

Intervention: Assoc. Dean of Curriculum met with faculty members to discuss inappropriate behaviors and communication.

Case 9, 10: Faculty Member

Complaint: Two students reported inappropriate and rude behavior by a faculty member; vulgar language in reference to medical students and sexually suggestive remarks.

Intervention: Faculty member removed from teaching.



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Case 11: Clerkship Resident

Complaint: Student reported racist comments by a resident.

Intervention: Clerkship Director met with Resident.

Case 12: Clerkship Faculty

Complaint: Student reported neglect during Ob-Gyn clerkship.

Intervention: Clerkship Director held faculty retreat and discussed setting expectations and avoiding neglect. [Evaluations have since improved].

Case 13: Acting Internship

Complaint: Student reported neglect on AI.

Intervention: Society Dean and Assist. Dean for Clinical Education met with department leadership to review complaint and institute coaching.

Case 14: Faculty Member

Complaint: Student reported that faculty member was sharing inappropriate photos on phone with team.

Intervention: Department Chair met with faculty member, who signed document acknowledging TLRP policy. Faculty removed from teaching responsibilities.

Case 15: Faculty Member

Student reported inappropriate and aggressive demeanor by a faculty member on surgery rotation.

Intervention: Referred to Title IX. Assistant Dean reviewed TLRP and expectations with faculty member.



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Case 16: Faculty Member

Complaint: Student reported inappropriate and sexist behavior by a faculty member on a clinical rotation.

Intervention: At student request, action is being held until after Match.

Case 17: Students

Complaint: Student reported lack of respect for dietary restrictions; other students take the reserved meal.

Intervention: Society Dean discussed with CSR.



Health Education Campus

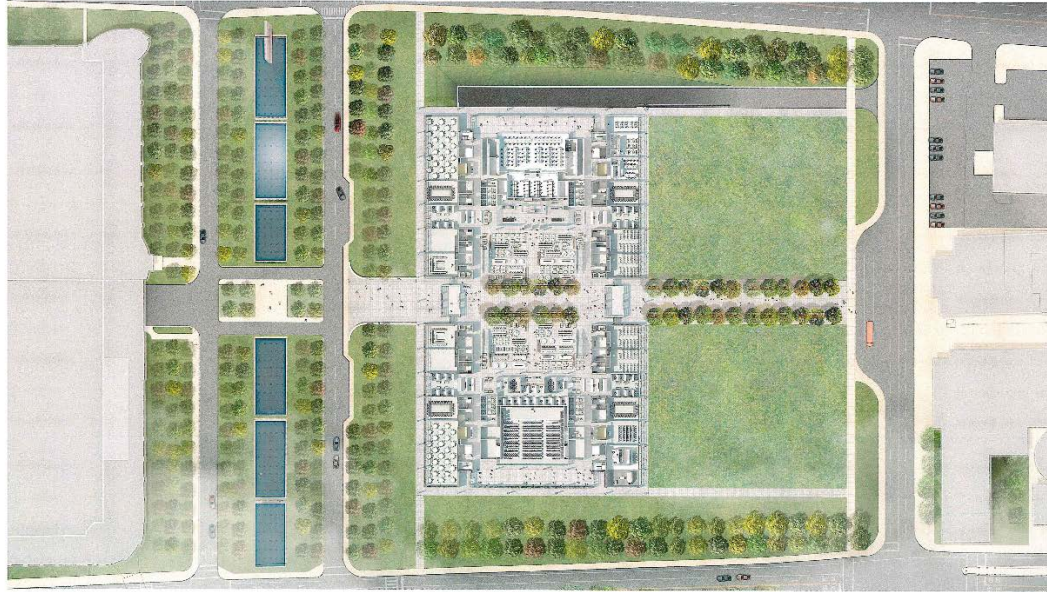


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Parking

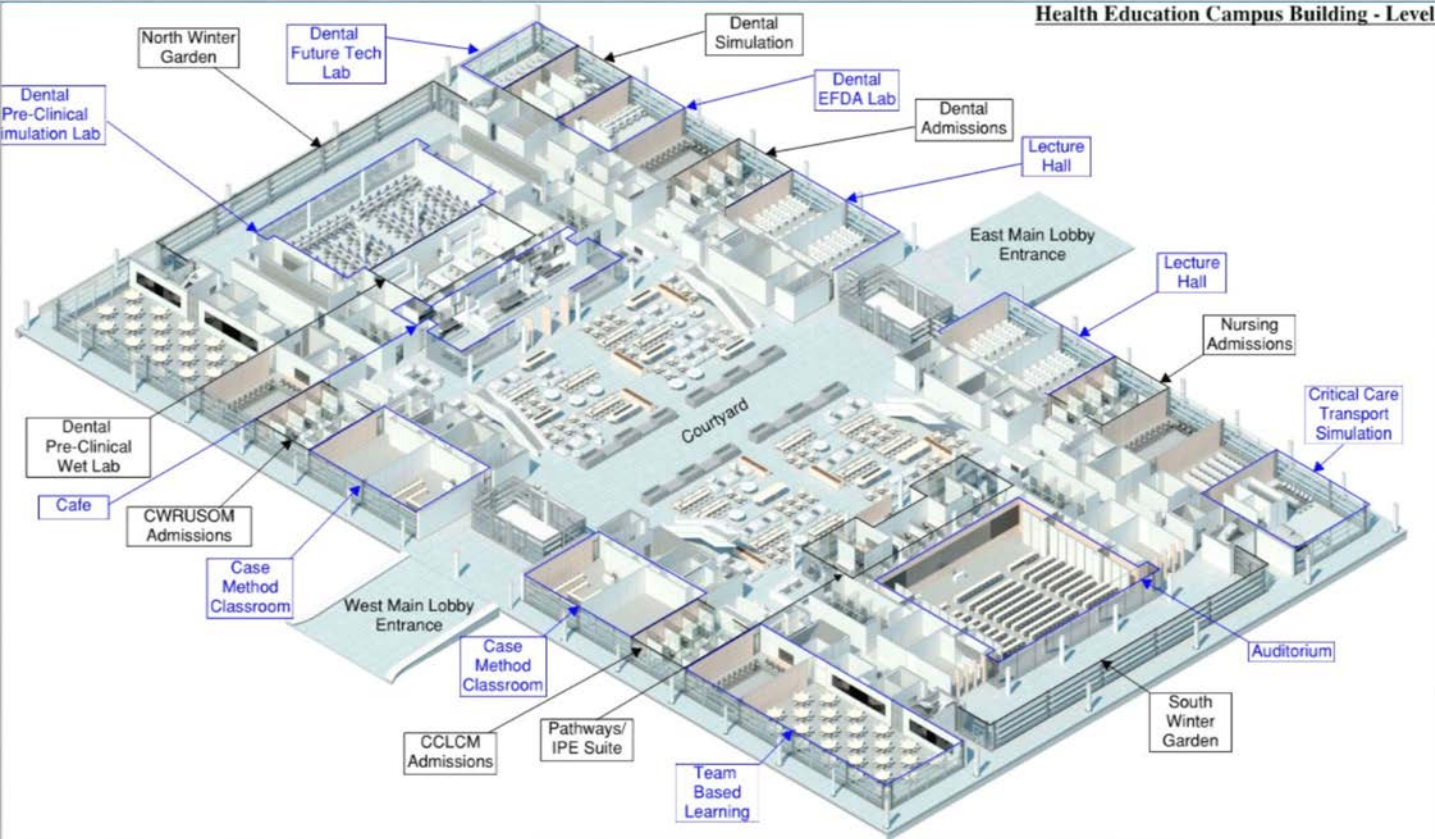
- Student parking at West Campus/Mt. Sinai
- Bike racks located in JJ garage





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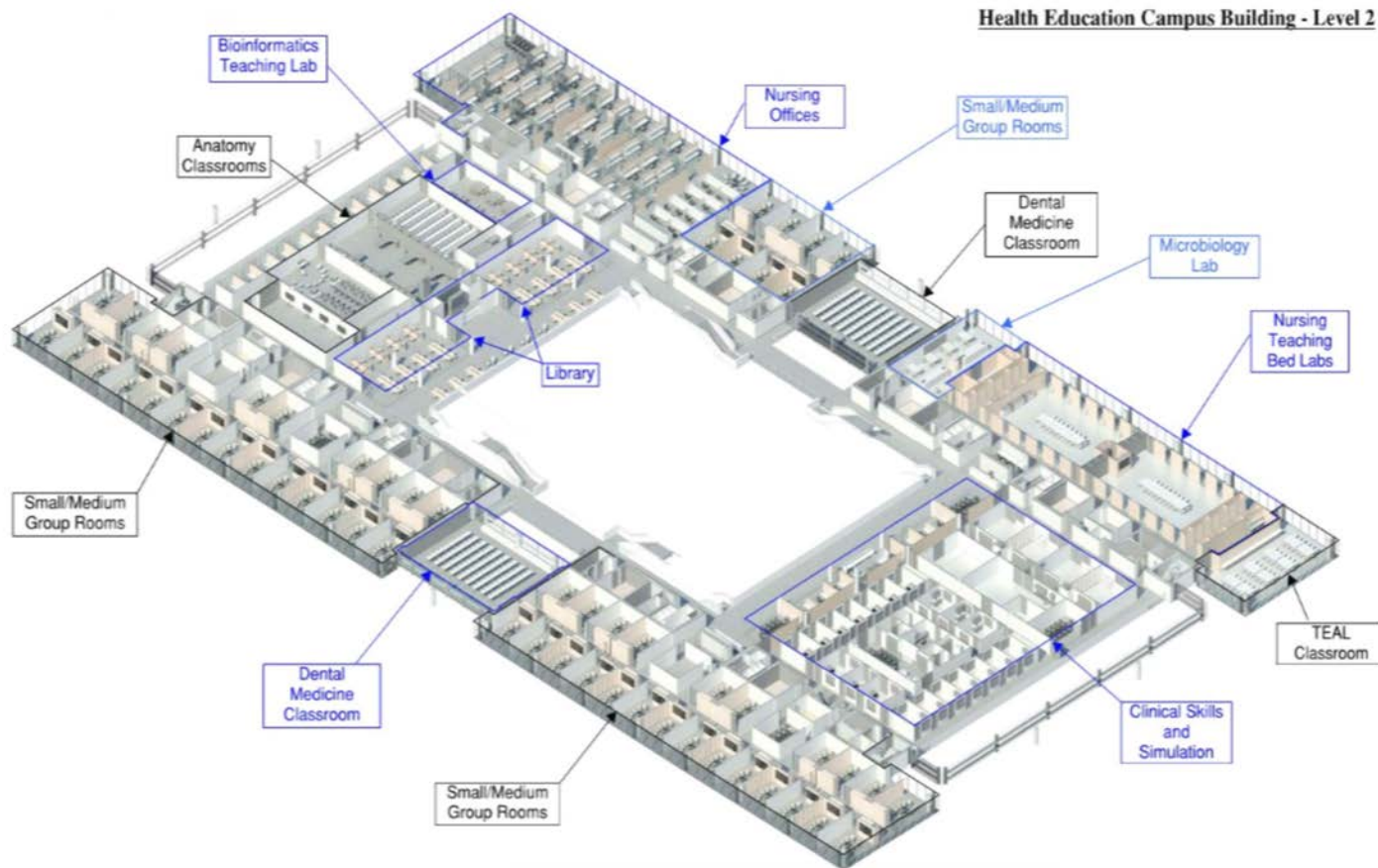
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First Floor



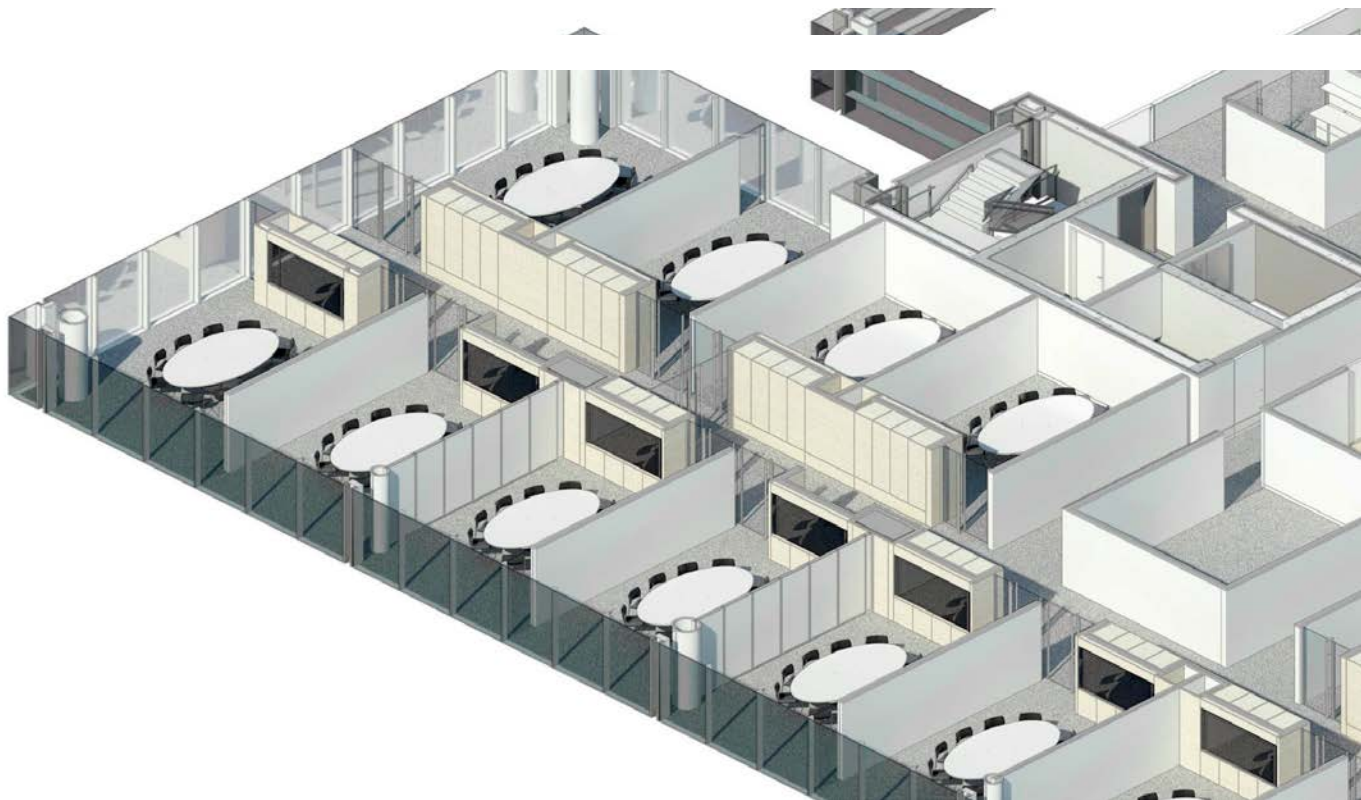
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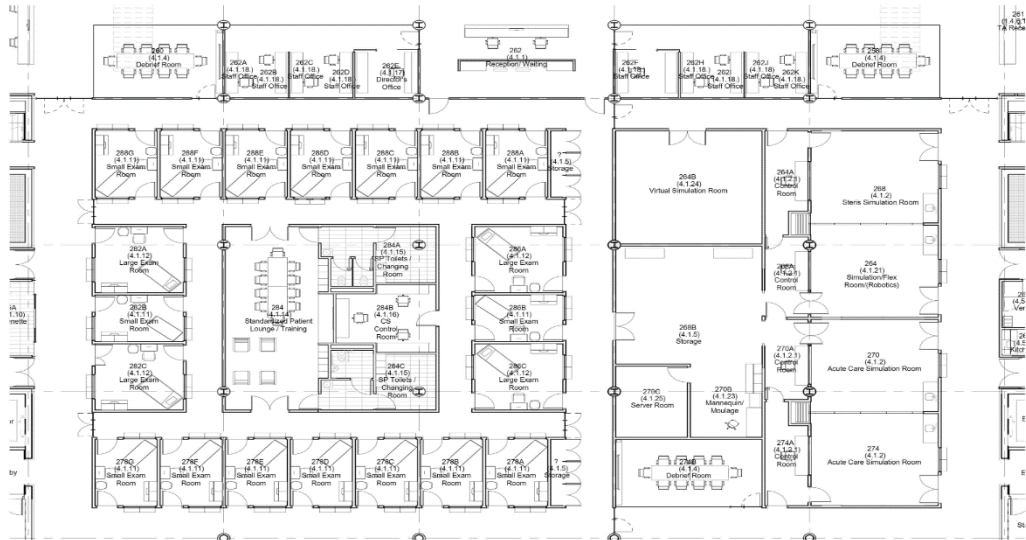
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Clinical Skills and Simulation

CWRU Health Education Campus

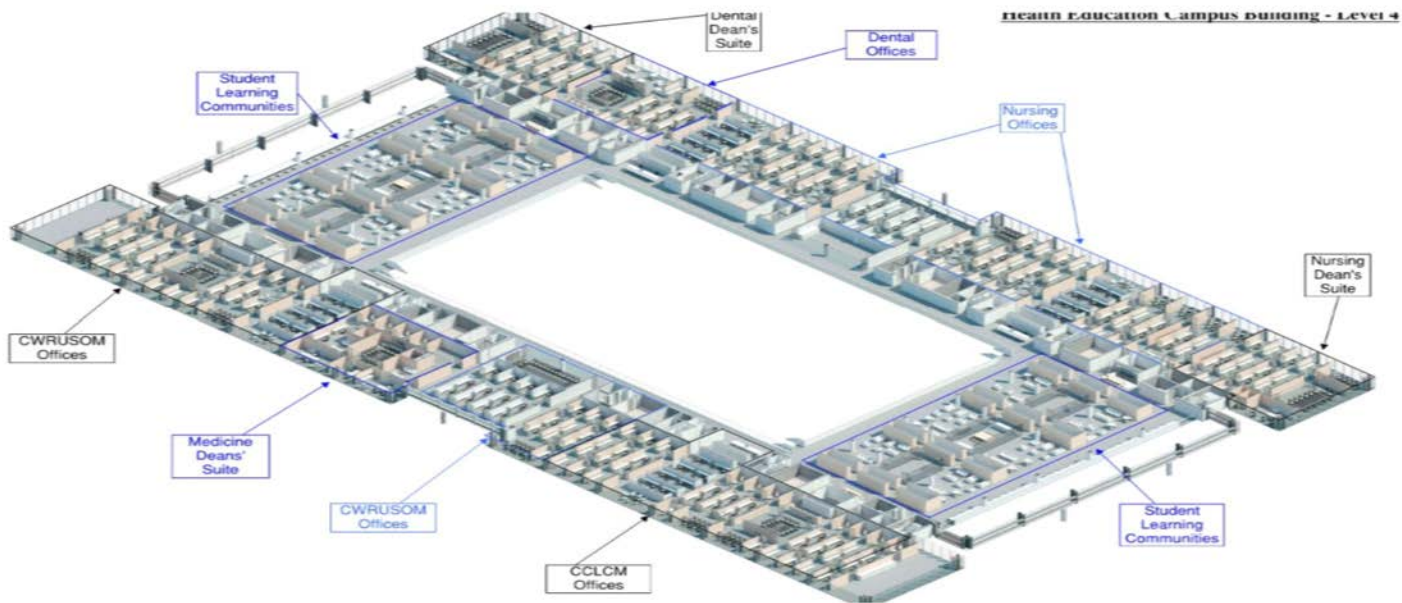
Foster + Partners



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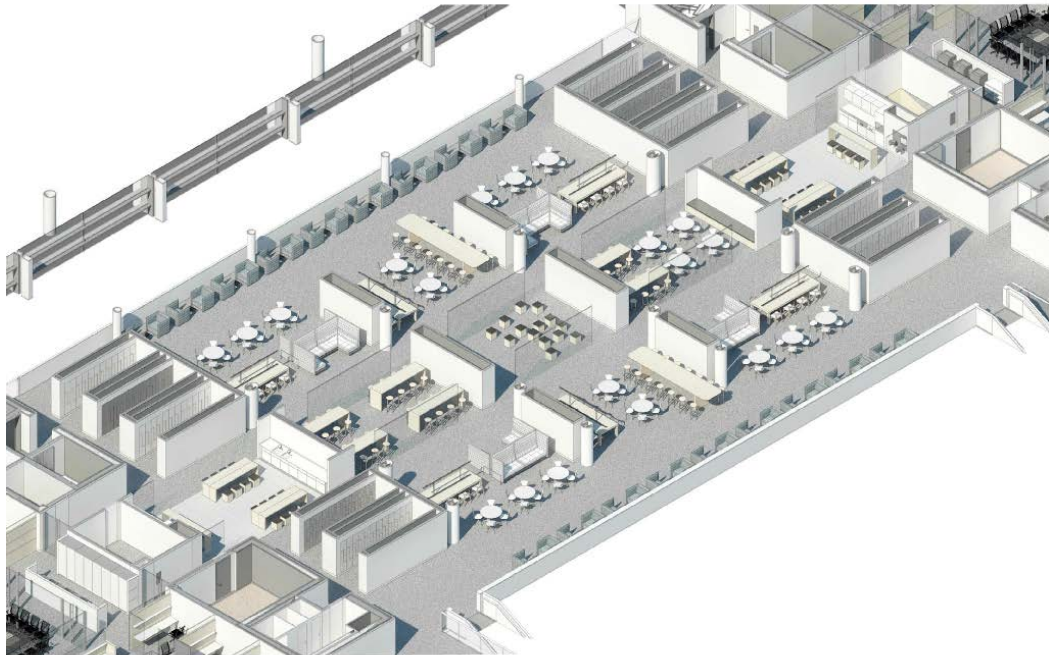
Student Learning Communities



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Student Learning Communities



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Shuttle Routes

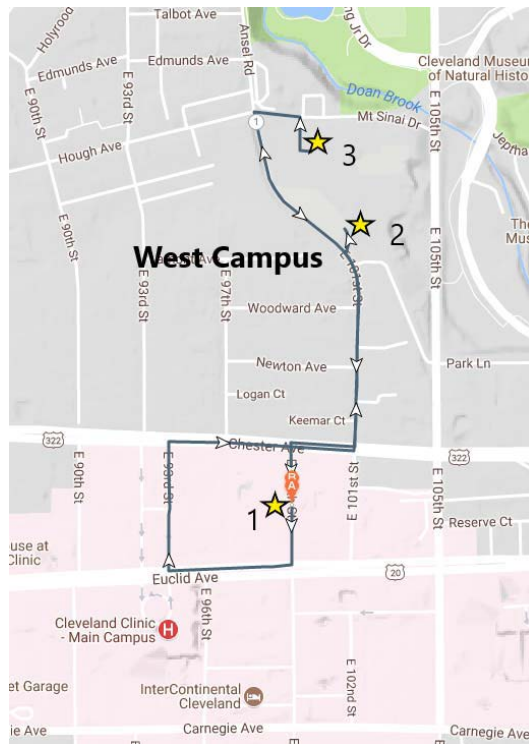
WEST CAMPUS PARKING SHUTTLE:

Overview

- Approximately 7 to 8 minute continuous loop
- One shuttle M-F 6:00am to 9:00pm Sa/Su 8:00am to 4:00pm
- 2nd shuttle during peak times of 7:30am to 9:30am and 4:00pm to 6:00pm

Stops

1. HEC Building
2. Lot 81
3. Lot 14



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Timeline

- December 2018 – Substantial completion of construction
- January-April 2019 – Building activation (AV, furniture, new equipment)
- April/May 2019 – Training and orientation
- May 1 thru mid-June 2019 – Move into building

Upcoming Events

- Student governance
- **Wednesday, December 12, 12 – 1:30 pm in E301**
- *Imagining the Future of Our New Health Education Campus*

Presented by the HEC Discovery Team