

I. POLICY

Students' Rights to a Professional Learning Environment

II. PURPOSE

This policy outlines the students' rights to a professional learning environment that is characterized by appropriate treatment of students and by employee adherence to safe and ethical practices. This policy also provides information on the institutional policy on anti-retaliation.

III. RESPONSIBLE PARTY AND REVIEW CYCLE

The Associate Dean for Student Affairs will review this document annually.

IV. ACCREDITATION REFERENCES

LCME 3.5	Learning Environment/Professionalism
LCME 3.6	Student Mistreatment
SACSCOC 12.3	Student Rights
SACSCOC 12.4	Student Complaints

V. DEFINITION(S)

Learning Environment: Diverse educational approaches, cultural contexts, or physical settings in which teaching and learning occur that influence student engagement and motivation, as well as students' sense of well-being, belonging, and personal safety. EVMS' holistic definition of the learning environment includes the following components:

- Student mistreatment
- Preceptor and student positive and negative professional behaviors
- Duty hour compliance
- Medical student well-being
- Clinical supervision

VI. DESCRIPTION

Students' Right to a Respectful Learning Environment

Student and resident/fellow mistreatment is destructive to the learning environment and will not be tolerated within the EVMS community and its affiliated learning sites.

EVMS defines mistreatment as behavior that shows disrespect for learners and interferes with their respective learning process. Such behavior may be verbal, emotional, or physical. Types and examples of behaviors considered mistreatment are included below.

Public Embarrassment or Humiliation: Any behavior that dishonors or disgraces a student in a public space or uses shame or embarrassment to publicly hold a student accountable for their actions.

Examples:

- Outbursts, yelling, or exaggerated tone of voice in non-crisis situations
- Inappropriate nonverbal behaviors directed at the student (e.g., eye rolling, face making, turning away, or physical exclusion)
- Derogatory statements or names
- Cursing, cussing, or foul language directed at the student or with the effect of creating a negative environment, if not directed at the student
- Directly taunting, mocking, or humiliating the student through words or behaviors (e.g., mimicking something the student got wrong, giving highly pejorative feedback in the presence of others)
- Indirectly taunting, mocking, or humiliating the student through words or behaviors (e.g., texting other preceptors or a group of preceptors about the student's behavior)
- Ridiculing or degrading a person or group on the basis of a personal or cultural characteristic (e.g. "people like you are all stupid", "your people all expect me to read your minds", "I can't believe you want to go into specialty X and become a drone")
- Using aggressive questioning to the point of badgering or humiliation in the guise of the "Socratic method" (e.g., after questioning the student to the limits of his/her knowledge, persisting in asking the same question the student cannot answer or more difficult questions for the purpose of humiliation)
- Using aggressive questioning about non-medically related topics (e.g., music, sports teams, etc.)
- Requiring performance of menial tasks with the intent to humiliate

Abuse of Power: Any behavior that uses one's position of power to negatively impact a student or that requires a student to complete tasks unrelated to learning.

Examples:

- Requiring the student to perform personal services at any time (e.g., obtain coffee for preceptor when team does not rotate this favor, run errands in or out of clinical setting, child or pet sit, listen to personal problems)
- Creating advantage or disadvantage in learning opportunities, teaching, or feedback based on personal characteristics of the learner
- Grading based on factors other than performance on previously announced grading criteria (e.g., giving a better grade to the student who is going into the same specialty or who is the most fun of the group)

- Making student feel intimidated or dehumanized or making threats about a recommendation, grade, or career
- Endangering the student's professional development (e.g., encouraging or telling the student to ignore institutional or school policy, inviting or requiring the student to do something unethical or illegal)
- Acting in retribution against any student who reports perceived inappropriate treatment (e.g., telling others that the student is a "snitch" or to "watch out for that one," giving the student a lower than deserved grade, or calling a residency program to "warn" them about a student)

Physical Abuse: An intentional act that does or has the potential to cause injury, trauma, or other physical suffering or bodily harm to a student.

Examples:

- Standing over the student or getting "in the student's face"
- Gesturing harm (e.g., raising hand)
- Pushing (student or furniture in which student is sitting), slapping, pinching, and/or striking the student
- Requiring the student to go somewhere unsafe or to be exposed to dangerous objects or substances without education and proper protection
- Asking the student to perform tasks they are not trained to do without appropriate supervision
- Asking or telling the student not to report an occupational exposure

Harassment Based on Sex: Behavior directed at a student based on their sex (including sexual orientation, gender identity/transgender status, and pregnancy or parental status) that is unwelcome by the student, and alters the educational environment for the student.

Examples:

- Inappropriate physical or verbal advances
- Comments about student's clothing or physical appearance or level of attractiveness
- Verbal, nonverbal, graphic, or physical conduct of a sexual nature
- Requests for dates or other romantic interactions
- Requests for sexual favors with or without promise for educational benefits
- Intentional neglect, jokes or cartoons, derogatory remarks, physical gestures, or other mistreatment based on sex, sex or gender stereotypes, and/or sexual orientation directed at the student or with the effect of creating a negative environment, if not directed at the student
- Favorable evaluations or grades, made explicitly or implicitly conditional for overlooking or submitting to sexually inappropriate conduct

- Stalking or threats of harm, made explicitly or implicitly related to sexually inappropriate conduct

Students can find more information concerning sex-based discrimination through EVMS' [Title IX policy](#).

Harassment Based on Race or Ethnicity: Behavior directed at a student based on their race or ethnicity that is unwelcome by the student and creates a hostile learning environment.

Examples:

- Comments and expectations based upon racial or ethnic stereotypes
- Intentional neglect, jokes or cartoons, derogatory remarks, physical gestures, or other mistreatment based on race or ethnicity directed at the student or with the effect of creating a negative environment, if not directed at the student
- Favorable evaluations or grades, made explicitly or implicitly conditional based on racial or ethnic favoritism
- Stalking or threats of harm, made explicitly or implicitly related to race or ethnicity

When assessing behavior that is perceived as mistreatment, students are expected to consider the conditions, circumstances, and environment surrounding such behavior. Provision of healthcare is inherently stressful. Medical and health professions student training is a rigorous process where the welfare of the patient is the primary focus and that, in turn, may impact behavior in the training setting.

Students' Right to an Ethical and Safe Clinical Training Environment

All licensed health care professionals have a duty to conduct themselves appropriately and provide health care services in an ethical, safe, and professional manner. Students in the medical and health professions may interact with physicians, nurses, physician assistants, and many other professionals during the course of their education and training, including didactic and clinical settings.

Whereas licensed health professionals have a duty to report unethical, unsafe, or unprofessional conduct that they observe in other licensed health professionals to the appropriate Board in the Department of Health Professions, students have no such requirement. Students are generally less experienced and may be less capable of identifying certain types of actions such as the accuracy of a diagnosis or the safety of a treatment plan, but are certainly in a position to recognize inappropriate or possibly illegal behavior such as assault or sexual harassment. The hypothetical range of possible misconduct or inappropriate behavior is vast. Students are expected to exercise reasonable judgment based on specific

circumstances and the degree of urgency, but as a general rule should follow the guidelines below if they witness or suspect misconduct on the part of a licensed health professional:

1. Initially, and if reasonable under the circumstances, ask the preceptor or health professional about the incident.
2. If concerns are not resolved, discuss the incident or behavior with an appropriate program administrator or a member of Student Affairs. Students may provide a written description of the incident prior to, during, or after the discussion with a proper official. Written remarks should be as specific as possible without violating HIPAA regulations regarding patient identifiers and information.

Reporting of Student Mistreatment

Students are encouraged to report incidences of mistreatment in accordance with the Student Complaint Process. They have four ways of reporting:

1. Program course or rotation [evaluation forms](#)
2. [Personal contact](#) with a member of Student Affairs
3. [Concerns in the Learning Environment Reporting Form](#). The form is sent automatically to the Student Affairs.
4. [EVMS Ethics and Compliance Hotline](#)
 - a. The Hotline is a confidential and anonymous reporting system which may be accessed through the above link or via phone at 800.461.9330.
 - b. Complaints made through the Hotline will be investigated by the institutional compliance officer or his/her designee

Students may also report observed incidences of resident mistreatment.

Retaliation and False Claims

Retaliation against a person who reports, complains of, or provides information in a mistreatment investigation or proceeding is prohibited. Alleged retaliation will be subject to investigation and may result in disciplinary action up to and including termination or expulsion.

A person who knowingly makes false allegations of mistreatment, or who knowingly provides false information in a mistreatment investigation or proceeding, will be subject to disciplinary action and, in the case of students, will be considered a violation of the Code of Student Conduct.

VII. RELATED DOCUMENTS

Compact Between Teacher and Learners of Medicine and Health Professions Policy

EVMS Compliance Reporting/Anti-Retaliation Policy

Non-Discrimination and Anti-Harassment Policy

Student Complaint Processes (per individual programs' handbooks)

Student Non-Academic Complaint and Formal Grievance Policy
Title IX-Sex Discrimination Reporting and Grievance Process

VIII. HISTORY OF APPROVALS AND UPDATES

The following list documents policy approvals and updates by oversight authority, date, and summary of changes. This policy is housed on the Institutional Student Handbook webpage.

- On June 9, 2020, the Board of Visitors approved the update to separate the policy from the Institutional Student Handbook.