Policy on Appropriate Treatment of Medical Students - Standards of Professional Behavior

The UCSD School of Medicine is dedicated to creating and maintaining an educational environment in which every student is able to achieve his or her highest potential. Interactions between those representing the School of Medicine and students should be characterized by compassion, civility, support, integrity, excellence, humility and respect. Faculty should serve as role models for students in their interactions with patients, staff, and each other.

UCSD School of Medicine seeks to recruit and train individuals who demonstrate exemplary behavior in all of their interactions. Professors should adhere to the best scholarly standards of their disciplines and should encourage the free pursuit of learning in their students. Professors should demonstrate respect for students as individuals, and they should adhere to their proper roles as intellectual guides and counselors. Professors must make every reasonable effort to foster honest academic conduct and to assure that their evaluations of students reflects each student’s true merit. In addition, they respect the confidential nature of the relationship between professor and student; they must avoid student exploitation and harassment, and they should protect students’ academic freedom.

Mutual respect between students and other healthcare professionals may be expressed in many ways but all interactions should include honesty, fairness, and evenhanded treatment. Behaviors that are inherently destructive to the teacher-learner relationship or the learning environment are prohibited. Students are adult learners and, as such, deserve the respect one would give to colleagues. Examples of abusive treatment of students include but are not limited to the following:

Public berating and humiliation

Intellectual “bullying”

Deliberately and repeatedly excluding students from reasonable learning opportunities

Asking students to carry out personal chores or tasks to cull favor or to avoid explicit or implicit criticism

Destructive criticism

Physical punishment or physical threats (e.g., hitting, slapping, pushing, kicking, the threat of physical punishment or intentionally or negligently placing another at risk of physical harm)

Sexual harassment (e.g., physical or verbal advances, discomforting humor, soliciting sexual favors in exchange for grades or opportunities)

Discrimination based on student’s race, religion, ethnicity, sex, age, sexual orientation, or physical or mental disabilities

Grading used to punish a student rather than to evaluate objective performance
Assigning tasks for punishment rather than to evaluate objective performance

Intentional neglect or intentional lack of communication

It is important to note, however, that setting standards is a necessary part of medical education and when students are unable to meet those standards, it is crucial for those working with students to deliver feedback. Oftentimes feedback will be painful, and that, in and of itself, does not constitute mistreatment. In determining mistreatment, it is important to take into account whether the activity or action is damaging, unnecessary, undesirable, ongoing, or if it could be reasonably expected to cause damage.

Procedure for Reporting Student Mistreatment
Often the most difficult issue for a student is deciding whether a particular incident constitutes mistreatment and should be reported. In this circumstance, discussion with a trusted friend or mentor may help to clarify the situation. Discussion with the individual involved might also be appropriate and might lead to a resolution without a complaint being made.

If a student decides mistreatment has occurred, he/she should report the incident to an appropriate official. Appropriate officials may include the clerkship or course director, the department chair, the student’s faculty advisor, Deans, or other university officials.

Informal Route for Resolution
If the student wishes to pursue an informal route for resolution and/or the situation is deemed appropriate, the student should report the incident to an appropriate official. The following may then occur:

A meeting takes place between the appropriate official and the accused, with or without the student present (such a course of action would be appropriate in order to clarify a situation or when an understanding of the effect of nature of the behavior would have a reasonable expectation of being sufficient to effect change).

An informal resolution, satisfactory to both the accuser and the accused, is reached. In this case, no further action need be taken.

Note: The above course of action would be appropriate if an incident is not deemed to be serious by the student and the appropriate official; however, if a pattern of such actions subsequently occurs, a formal route for resolution may be appropriate.

Formal Route for Resolution
If an incident is sufficiently serious to warrant a formal investigation, or if resolution cannot be reached through informal means, the Associate Dean for Admissions and Student Affairs and/or the Chair of the Student Affairs Committee should be informed by the student or the appropriate official to whom the student has previously reported. If the Chair of the Student Affairs Committee has not been previously informed, he/she should be informed according to established policies.

Incidents regarding sexual harassment will be referred to the Director of the Office of Sexual Harassment Preventions and Policy for investigation and resolution, according to established policies. Investigation of other types of incidents may be undertaken by the Chair of the Student Affairs Committee or Associate Dean for Admissions & Student Affairs, and/or referred to the appropriate body of authority as dictated by University or institutional policy. Such authorities may include the Department Chair or the Committee on Privilege and Tenure (if the accused is a faculty member), the Department Chair of Residency Program Director and Associate Dean for Graduate Medical Education (if the accused is a house officer), the Director of Nursing (if the accused is a nurse), or the department supervisor and Human Resources (if the accused is a staff employee).
Any appropriate disciplinary actions would be undertaken by these bodies as determined by University policy, in consultation with the Associate Dean for Admissions & Student Affairs, the Chair of the Student Affairs Committee, and, as needed, University counsel.

Any complaints filed under this policy should occur within ninety calendar days of the incident giving rise to the complaint. The resolution of all formal complaints should occur promptly. The result of any action taken as a result of these policies should be transmitted to the accuser and accused in writing. If said action is not satisfactory to the accuser or accused, a written appeal may be made to the Vice Chancellor for Health Sciences. Such appeals should be filed within thirty calendar days of the written notification of the finding or action taken.

Protection of Students
Complaints filed under this policy, whenever possible, shall be held in confidence to protect the student. A record of the investigatory proceedings and the resulting action shall be held in a sealed file in the office of the Associate Dean for Admissions & Student Affairs. It is the policy of the School of Medicine to protect students who come forth under this policy and to take all steps possible to prevent retaliation.