

Creighton University School of Medicine

Medical Education Program Policies

POLICY: Centralized Mistreatment Reporting & Review

GOVERNING BODY: Executive Committee

APPROVAL DATE:

REVISED DATE:

LCME ACCREDITATION STANDARD REFERENCE: Element 3.6 Student Mistreatment

PURPOSE

The mission statement of Creighton University states: “Creighton exists for students and learning.” Mistreatment of students/learners and abuse of power is unprofessional and antithetical to the Creighton mission. Additionally, all programs with specialized accreditation in the School of Medicine have accreditation requirements related to the process and procedures related to student mistreatment. Due to School of Medicine faculty teaching across programs, it is necessary to have a process to ensure a mechanism for monitoring and reporting mistreatment across School of Medicine programs.

POLICY

All School of Medicine programs adhere to the Creighton University [Title IX Sexual Harassment Policy \(2.1.35\)](#) and [Non-Discrimination Policy \(2.1.25\)](#). All academic programs are responsible for identifying processes for reporting mistreatment incidents that are consistent with the accreditation requirements of their program, if applicable.

All academic programs are responsible for submitting reported incidents of mistreatment to the Centralized Mistreatment Repository. This process is in addition to and not intended to replace each program’s established mechanism and policies for responding to mistreatment events. The Centralized Mistreatment Repository will be maintained and monitored by the Office of Accreditation and Quality Improvement. The following data will be collected on mistreatment events:

- Date(Time, if applicable) of incident
- Program the victim is associated with
- Department where incident occurred
- Campus where incident occurred
- Location/site where incident occurred
- Description of incident
- Victim role (student, resident, fellow)
- Respondent name
- Respondent role (student, resident, fellow, faculty, staff, other (specify))
- Whether reported elsewhere and where
- Final disposition and actions following incident

Data collected from the Centralized Mistreatment Repository will be reviewed on a quarterly basis by the Mistreatment Data Review Committee. The responsibility of the committee is to

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identify trends in the data and identify any potential issues that require immediate response from the School of Medicine or another office of the University. Any form of retaliation following the reporting of an alleged incident is prohibited, and complaints of retaliation will be addressed through applicable School of Medicine/university policies or by the Dean of the School of Medicine. Any identified concerns not addressed through other University offices (e.g., Research Compliance, Office of Title IX and Civil Rights Compliance) will be forwarded to the department or unit leader and respective Dean or Regional Dean for resolution. Aggregate, deidentified data will be presented on an annual basis to the School of Medicine Leadership Council.

DEFINITIONS

Mistreatment is defined as any behavior, action, or expression toward a learner that a reasonable person would consider mistreatment, demeaning, or an abuse of power. This includes activities that denies a learner access to the learning environment or interferes unreasonably with the learning process.

Program is defined as any of the School's Medical Education Program, Physician Assistant Programs, and GME Programs. Programs refers to all of the Programs.

Program Officers is defined as any Assistant or Associate Deans, Department Chairs, or Program Directors.

Respondent is defined as an individual who has been reported to be the perpetrator of the mistreatment.

Victim is defined as an individual who has been reported to be the recipient or target of the mistreatment.

PROCEDURE

1. Mandatory Reporting: Program Officers and all faculty and staff must comply with reporting requirements under Policy 2.1.25 (Non-Discrimination Policy) and 2.2.35 (Title IX Sexual Harassment Policy), as well as any other applicable reporting policies of the University and state law.

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2. Optional Reporting: Where Creighton policies do not require reporting, Program Officers and faculty/staff have the option of reporting known or suspected mistreatment using Creighton's Tell Someone, Help Someone, or EthicsPoint resources. See:
<https://www.creighton.edu/safety/tell-someone>
<https://culibraries.creighton.edu/mentalhealthPHX>
<https://secure.ethicspoint.com/domain/media/en/gui/43718/>
3. Mistreatment Repository: A report to the Program is deemed to have occurred when made to any of its administrators. Each Program is responsible for submitting mistreatment incidents once they have been adjudicated by the program. The reports are submitted to the Program to the School's Office of Accreditation and Quality Improvement.
 - A. Mistreatment reports must include the following information for each report of mistreatment:
 - Date(Time, if applicable) of incident
 - Program the victim is associate with
 - Department where incident occurred
 - Campus where incident occurred
 - Location/site where incident occurred
 - Description of incident
 - Victim role (student, resident, fellow)
 - Respondent name
 - Respondent role (student, resident, fellow, faculty, staff, other (specify))
 - Whether reported elsewhere and where
 - Final disposition and actions following incident
 - B. The Office of Accreditation and Quality Improvement will make all reasonable attempts to maintain confidentiality of data. Reports to the Leadership Council will include aggregate data and no individual reporting or names will be included.
 - C. The Office of Accreditation and Quality Improvement will coordinate with the Office of Title IX and other offices on campus to ensure statistics are not duplicated.

SCOPE

All academic programs within the School of Medicine.

ADMINISTRATION AND INTERPRETATION

The Office of Accreditation and Quality Improvement is responsible for administration of this

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policy.

AMENDMENT

This policy may be amended by majority vote of the School of Medicine Executive Committee.