

Enhancing Our Learning Environment
**UNC School of Medicine, the UNC Health Care System
and Educational Partners**

11/07/11

I. Introduction

The purpose of this policy is to enhance the learning environment for students in the UNC School of Medicine, residents, fellows, attendings, hospital staff and other trainees. As our institution adapts to a rapidly changing health care environment, we must support an atmosphere in which learning is encouraged and the roles of all participants in the system are respected and valued. Institutionally, we have an ethical responsibility both to affirm our aspirations for a positive learning environment and to specify procedures in case of mistreatment of trainees. What follows is consistent with the UNCHCSCode of Conduct and existing UNC policy on the relationships of students and faculty. (See appendices.)

II. Towards a Positive Learning Environment

The cornerstones of a positive learning environment at the University of North Carolina are honesty, respect and personal responsibility.

Honesty is an absolute requirement in interactions with patients, peers and hospital teams.

Respect for patients, students, peers, residents, other trainees and staff is also fundamental. All have key roles to play in patient care and in education.

Responsibility for oneself and for one's interactions with peers, patients, other trainees, faculty and staff is the final component.

Promoting a positive learning environment is a responsibility of all members of our community. Specific behaviors that promote a positive learning environment include:

- Orientation to schedule and roles at the beginning of rotations.

- Provision of learning resources (e.g., web sites, articles, texts) that are accessible, up to date and evidence based.
- Modeling protection of patient privacy.
- Identifying, disclosing and ensuring resolution or management of any financial conflicts of interest between caregivers and patients.
- Explicit recognition of the roles and responsibilities of each member of the team, from students to residents, staff and attendings.
- Expecting learners to identify and pursue their own learning needs.
- Organizing mid-rotation feedback for learners.
- Providing timely and behaviorally specific feedback.
- Establishing continuity of teaching—that is direct supervision over time by the same supervising faculty/residents.
- Solicitation of feedback about improving the educational experience.
- Insistence on students' active roles in patient care with appropriate supervision.

The institution is committed to promoting a positive learning environment. Orientation for new faculty, new residents and new hospital staff, as well as ongoing departmental educational meetings about medical student curriculum and competencies, and annual general faculty meetings will all address learning environment. The Office of Medical Education will formally follow up any positive comments about staff, faculty or residents that are mentioned in evaluations written by students.

III. Avoidance of Mistreatment

In addition to support of a positive learning environment, we are committed to the avoidance of mistreatment of students and other trainees.

We support University policy that prohibits discrimination on the basis of age, race, gender, ethnicity, disability, sexual orientation and veteran status and also prohibits physical and verbal abuse. Guidelines for reporting and follow-up through both the School of

Medicine/University system and UNC Health Care System are presented elsewhere (see Appendix and website).

In addition to these legally sanctioned behaviors, we specifically wish to prohibit the following kinds of behaviors, which do not rise to the level of legally sanctionable discrimination, but nonetheless harm the learning environment:

- Disrespect for patients on account of age, gender, race, religion, ethnicity, sexual orientation, body habitus, appearance, socioeconomic status or any other personal attributes.
- Disrespect for students, residents, other trainees, staff or faculty on account of age, gender, race, religion, ethnicity, sexual orientation, appearance.
- Disrespect for students and their role in patient care, physicians from other specialties, other types of clinicians (e.g., NPs, PAs, etc.) or referring physicians/primary care providers.
- Excluding students from core learning experiences on the basis of their specialty preferences.
- Not involving students appropriately in patient care.
- Threatening physical harm or assaulting students, residents, staff or attendings.
- Asking students, residents, other trainees, staff or attendings for sexual favors.
- Evaluating or supervising any enrolled student with whom the supervisor/evaluator has an amorous relationship or with whom he or she is related to by blood, law or marriage.
- Requiring students, residents, staff or attendings to perform personal services (e.g., shopping, babysitting).
- Publically humiliating patients, students, residents, other trainees, staff or faculty.
- Retaliation for making an allegation of mistreatment.

Such actions are contrary to the spirit of learning, violate the trust between teacher and learner, and will not be tolerated by the School of Medicine or the UNC Health Care System.

V. Community Responsibility for Learning Environment

Students, resident, staff and attendings are all responsible for promoting a positive learning environment. As noted above, the principles of respect, honesty and responsibility should drive individual actions.

In particular, the leadership of the School of Medicine, UNCH and our partner institutions are ultimately responsible for monitoring the learning environment, promoting a positive learning environment and ensuring investigation and appropriate response to possible examples of mistreatment.

Attending physicians and other senior educators are responsible for promoting and contributing to this positive learning environment. They are expected to set a high standard for professional behavior, to ensure that patients, students, residents and staff are treated with respect, to support patient privacy, to avoid or disclose any financial conflicts of interest, to avoid unauthorized use of intellectual property, to support teaching, and to intervene when they observe inappropriate behavior, reporting this to department chairs or the Office of Medical Education when necessary.

Residents are responsible for promoting and contributing to a positive learning environment. They are expected to adhere to a high standard of professionalism, to treat patients, students, staff and faculty with respect, to protect patient privacy and confidentiality, to avoid unauthorized use of intellectual property, to support teaching and to intervene with their peers if they observe inappropriate words or actions from a colleague.

Medical students are also responsible for contributing to a positive learning environment. They are expected to familiarize themselves with professional standards of conduct, to treat patients, residents, staff and faculty with respect, to protect patient privacy, to avoid unauthorized use of intellectual property, and to work to improve the learning environment by naming individuals who promote a positive environment and those who mistreat.

All members of our community are expected to call attention to exemplary conduct so that it can be shared and celebrated.

VI. Monitoring and Improving the Learning Environment

We will regularly assess the learning environment with clerkship evaluations, ongoing reviews of courses, and input from the Whitehead Medical Society. We survey students and other learners regularly about the learning environment and provide this feedback to the leaders of the School of Medicine, UNCH, campus directors and our partner institutions. These data are used to judge the effectiveness of our efforts to promote a positive learning environment.

We have developed a system for identifying individuals who nurture a positive learning environment. Students, residents, faculty and staff who contribute to a positive learning environment will be publically recognized by medical school and hospital leadership.

We are committed to as much privacy and confidentiality as possible in investigating and reporting episodes of possible mistreatment of students. All reports are investigated. We are also committed to safe reporting as much as possible; student grades are finalized before faculty and residents see students' evaluations and before faculty and residents are approached about reported incidents. We do not use students' names without their permission, unless there is a clear and compelling risk to patient safety or to students or other individuals. We are committed to due process for individuals accused of mistreatment. We are committed to zero tolerance of established instances of mistreatment. If, after investigation, we believe mistreatment has occurred, we will intervene with the trainee or employee's supervisor including and up to the chair of the department or vice president of the hospital.

VII: Reporting Process

Medical students should contact their local clerkship site coordinator, or if appropriate the clerkship director, campus ombudsman, campus director, advisory college advisor or the dean of student affairs to discuss concerns.

UNCH residents should contact their attending program director or employee relations. Residents at other institutions should contact their local clerkship site directors, their program directors or appropriate hospital offices of Employee Relations.

Employees of UNCH, UNCHCS or other health care systems should contact attending physicians, service chiefs or employee relations at their

hospital. The UNCHCS compliance office can be contacted at 919-966-8505 or at the Compliance Hotline, 1-800-362-2921, or by email at Compliance@unch.unc.edu.

Attending physicians should contact the clerkship site directors, clerkship directors, campus ombudsmen, campus directors or the Dean of Student Affairs.

Appendices

1. UNC Policy on Discrimination
2. UNCHCS Code of Conduct