



QUILLEN COLLEGE *of* MEDICINE

EAST TENNESSEE STATE UNIVERSITY

Policy Name: **Student Professionalism Reporting Policy**

Policy Replaces a Previous Policy (this includes change in policy name): Yes/ No

If so, list name of previous policy (include policy number if different): **Student Professionalism Reporting Policy SPROMO-0918-00 (policy changed from a Student Promotions policy to an administrative policy)**

Policy Number (issued by the Office of Academic Affairs upon final approval): **ADMIN-1123-31**

Policy Owner (Individual, Department, or Committee/Chair): **Beth Anne Fox, MD, MPH / Vice Dean for Academic Affairs**

Committees, Departments, or Individuals Responsible for Implementation: **All faculty, staff, and students**

Original Approval Date and Who Approved by: **10/16/2012 – Kenneth Olive, MD / EAD and MSEC Chair (2012-2013); 11/9/2023 – Beth Anne Fox, MD, MPH / Vice Dean for Academic Affairs**

Effective Date(s): **10/16/2012; 11/13/2012; 9/19/18; 5/25/2021; 6/9/2022; 9/23/2022; 11/9/2023**

Revision Date(s) (include a brief description) and Who Approved by (made by Policy Owner and/or Policy Advisory Committee):

11/13/2012; 9/19/2018;

6/9/2022 – new language for reporting to SPARC / Beth Anne Fox, MD, MPH

9/8/2022 – new language added regarding who reviewed by / Beth Anne Fox, MD, MPH

11/9/2023 – policy changed from a Student Promotions policy to an administrative policy, policy owner changed from Dr. Ramsey McGowen to Dr. Beth Fox, Student Performance Review Committee changed to Student Success Committee / Beth Anne Fox, MD, MPH

Administrative Edits (briefly describe) by Staff and/or the Policy Advisory Committee (PAC) and Date (these revisions do not require voting/approval by the policy owner): **5/25/2021**

Exemption(s) to Policy (date, by what committee or individual, and brief description):

LCME Required Policy: Yes/ No

If yes, please list the Element(s) Affiliated with this Policy (include Element number/name/statement):

3.5 Learning Environment/Professionalism

A medical school ensures that the learning environment of its medical education program is conducive to the ongoing development of explicit and appropriate professional behaviors in its medical students, faculty, and staff at all locations. The medical school and its clinical affiliates share the responsibility for periodic evaluation of the learning environment in order to identify positive and negative influences on the maintenance of professional standards, develop and conduct appropriate strategies to enhance positive and mitigate negative influences, and identify and promptly correct violations of professional standards.

9.9 Student Advancement and Appeal Process

A medical school ensures that the medical education program has a single set of core standards for the

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advancement and graduation of all medical students across all locations. A subset of medical students may have academic requirements in addition to the core standards if they are enrolled in a parallel curriculum. A medical school ensures that there is a fair and formal process for taking any action that may affect the status of a medical student, including timely notice of the impending action, disclosure of the evidence on which the action would be based, an opportunity for the medical student to respond, and an opportunity to appeal any adverse decision related to advancement, graduation, or dismissal.

All policies will be reviewed by the Policy Advisory Committee every three years unless an earlier review is identified.

Date of Review:

Revisions Made: Yes/ No

If yes, list revisions made: Revisions Require Approval by Policy Owner: Yes/ No

Policy Statement:

The Quillen College of Medicine is dedicated to helping future physicians develop and maintain professional behaviors. Professionalism may encompass communications between patients and providers; appropriate attire/appearance; reliability, motivation, and responsibility; interpersonal relationships; ability to accept instruction and feedback; integrity. The Quillen College of Medicine professionalism policy and procedures support the ongoing development of learners and provide a framework for reporting unprofessional behaviors and correcting any deficiencies.

Through modeling and upholding professionalism, the College supports ETSU's values statement: people come first, are treated with dignity and respect, and are encouraged to achieve their full potential; relationships are built on honesty, integrity, and trust; diversity of people and thought is respected; excellence is achieved through teamwork, leadership, creativity, and a strong work ethic; efficiency is achieved through wise use of human and financial resources; and commitment to intellectual achievement is embraced.

The Student Professionalism Report is designed to allow faculty, staff, or students to document an incident or trend of student unprofessional or unethical behavior and becomes part of this policy ([Professionalism Report form](#)). It is also used to measure institutional success in accomplishing the Quillen College of Medicine's Professionalism Institutional Educational Objective.

Purpose of Policy:

The Student Professionalism Report is to assist the student in developing appropriate professional behaviors. The intent is to mold professional behavior – not to punish inappropriate behaviors.

Additionally, in aggregate form, the rate of event reporting will be used as a measure of institutional success in accomplishing the Professionalism Institutional Educational Objective.

Scope of Policy (applies to):

All faculty, staff, and students.

Policy Activities:

Reporting Incidents or Trends

1. Concerns related to student professional behaviors will be reported on the Student Professionalism Report form.
2. The report will be signed and submitted to the Associate Dean for Student Affairs who will forward a copy to the Vice Dean for Academic Affairs with record of action plan instituted.

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3. The Associate Dean for Student Affairs and the Assistant Dean for Student Affairs will review each report and one or both will meet with the student who is the subject of the report on an individual basis. The Director of Diversity, Equity, and Inclusion will also review the report as a measure of assessment of the diversity climate. An overview of professionalism reports submitted on students will be forwarded to the Student Success Committee (SSC) for review and record keeping. Professionalism complaints deemed egregious by the reviewers may be forwarded to the Vice Dean immediately.
4. Where appropriate, reports will be addressed within the Office of Student Affairs via individual student counseling regarding the necessary professional behaviors expected.
5. The judgment of the reviewers will determine what further action or actions, if any, need to occur, including notification of the relevant clinical departmental chair, if appropriate. Based on the individual student meeting, it may be deemed appropriate to refer a student:
 - a. for other counseling or treatment;
 - b. to the Tennessee Medical Foundation per the [Fitness for Duty policy](#) guidelines, if the student’s behavior appears to reflect a significant impairment;
 - c. to the Student Promotion Committee if the student’s behavior raises significant concern about the student’s fitness to function as a physician;
 - d. to the Honor Council if the student’s behavior represents a possible Honor Code violation;
 - e. to the Grievance Officer if the behavior constitutes mistreatment.
6. Reports that meet state and/or federal definitions of harassment or discrimination will be referred to the Compliance Office within University Counsel as directed by state or federal law. The Grievance Officer for the College of Medicine will also be informed of the referral.
7. The Associate or Assistant Dean of Student Affairs acknowledges to the person submitting the form receipt of the form and that issues raised will be addressed through formative feedback with the individual student and a professional development action plan developed. SSC may make additional recommendations or requirements.
8. The Professionalism Report and action plan documentation will be maintained in the student record.

Multiple or repeated reports regarding the same student or single incidents determined to be egregious may warrant other responses, including review by the Student Promotions Committee, which likely would be reported on the MSPE ([please see MSPE policy ADMIN-0916-1 for full details](#)).

Administrative Reviews/Approvals	Date Approved
<i>University Compliance (if applicable)</i>	
<i>Policy Advisory Committee (includes three-year reviews)</i>	6/9/2022; 9/8/2022; 11/9/2023
<i>Associate Dean for Accreditation Compliance (if applicable)</i>	
<i>Vice Dean for Academic Affairs</i>	9/23/2022; 11/9/2023

Policy Review and/or Revision Completed By (if applicable)	Date Policy Reviewed and/or Approved (if applies to that department, committee, or group)
<i>Office of the Dean</i>	Upon review to MSEC; 5/25/2021
<i>Office of Academic Affairs</i>	11/13/2012; 9/19/2018; October 2018; 6/10/2021; 6/9/2022; 9/23/2022; 11/15/2023
<i>Office of Student Affairs</i>	September 2018; 11/9/2023
<i>Department of Medical Education</i>	
<i>Medical Student Education Committee</i>	10/2/2012; 10/16/2012; 11/13/2012; 10/16/2018
<i>Student Promotions Committee</i>	11/14/2012; revised and approved 9/19/2018
<i>Faculty Advisory Council</i>	October 2012
<i>Administrative Council</i>	
<i>M1/M2 Course Directors</i>	October 2012

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<i>M3/M4 Clerkship/Course Directors</i>	October 2012
<i>Student Groups/Organizations (describe):</i>	October 2012
<i>Other (describe):</i>	

Final Policy Emailed to:	Date of Email Notifications
<i>Medical Education Director for Posting on Educational Policies Website</i>	9/26/2022; 10/4/2022; 11/15/2023
<i>Policy Owner</i>	11/9/2023
<i>Admissions Office for Catalog (only new policies)</i>	6/11/2021; 11/15/2023