

Fostering a climate of respect and inclusion

Quarterly Report

January - March 2022

OVERVIEW

In June 2019, the UNM School of Medicine (SOM) launched the Learning Environment Office (LEO) to enhance institutional efforts to prevent, reduce, and address mistreatment, and simultaneously, improve learning environments.

In an effort to promote transparency while preserving confidentiality, LEO is producing quarterly reports that share aggregated data to enhance the overall understanding of learning environments as well as protect anonymity. The data will remain aggregated until we have enough data to not be identifiable. These reports also contain data on exemplary teachers and mistreatment incidents as well as information about LEO's activities.

WHAT'S NEW IN LEO'S QUARTERLY REPORTS

Beginning with this report, the 2022 1st Quarter Report, we will include case studies and/or trend analyses with accompanying discussion prompts. We invite you to engage in deep thinking, critical analysis, and open discussions within your colleagues, programs, divisions, and departments about these cases and focus areas.

We see each of you as a partner with responsibility for ensuring respectful, positive, and inclusive environments. LEO seeks to help build such skills through our education portfolio, which includes our trainings and workshops, and now these cases studies. Thus, LEO hopes to increase individual skills *and* a sense of responsibility as "upstanders" for inclusion.

REPORT CONTENTS

Challenges in Medical & Research Education

LEO & OPW are pleased to offer our next Speaker Series: *Challenges in Medical & Research Education*.

Spotlighting LEO's Prevention Work

Learn about LEO's prevention activities and how to connect with us if your group would like to have a specific training or workshop.

iTeach Data

Learn about updated data related to exemplary teaching and behavior across the SOM.

Case Studies & Trend Analysis

Gain insight into the types of cases LEO is thinking through and see highlights of trends to discuss with your colleagues and peers.

Mistreatment Data

Learn about updated data related to mistreatment and mistreatment response across the SOM.

NEW LEO + OFFICE OF PROFESSIONAL WELL-BEING SPEAKER SERIES

CHALLENGES IN MEDICAL & RESEARCH EDUCATION

Join us on the first working Monday of the month from 12-1pm on zoom

04.04.22 Creating Fair & Consistent Remediation Processes & Procedures Presented by Joanna Fair, MD, PhD

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Session recording available on <u>LEO's moodle</u>

05.02.22 Real Talk: Acknowledging & Understanding Retaliation Presented by Martha McGrew, MD

Session recording available on LEO's moodle

06.06.22 Centering Disability: Identifying & Implementing Structural, Curricular, and Interpersonal Interventions

- **07.11.22** Improving Performance Through Evaluation & Feedback This is the second Monday of the month due to the July 4 holiday
- **08.01.22** You Know It When You See It: Engaging with Unprofessionalism
- **09.09.22** Using Your Power to Create a Culture of Well-being This is the second Monday of the month due to the Labor Day holiday

Click here to RSVP

Open to all HSC faculty, staff, and learners.

The University of New Mexico School of Medicine is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. The University of New Mexico School of Medicine designates this live activity for a maximum of 5 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

SPOTLIGHTING MORE OF LEO'S PREVENTION WORK

LEO offers trainings, workshops, and seminars to the SOM and HSC community that are intended to build skills to ensure that positive and inclusive learning environments. Here is a summary of this work.



SPEAKER SERIES:

In conjunction with SOM OPW and/or HSC OfDEI 2019 - 2020 LEARNING ENVIRONMENT SERIES 6 EVENTS

2020 BUILDING INCLUSIVE ENVIRONMENTS FOCUS ON RACE AND ETHNICITY 5 EVENTS

- 2021 BUILDING INCLUSIVE ENVIRONMENTS FOCUS ON GENDER
- 2021 TRUST MATTERS G EVENTS
- 2022 CHALLENGES IN MEDICAL & RESEARCH ED 6 EVENTS (1 SO FAR)

ORIENTATIONS:

EACH YEAR, LEO PROVIDES ORIENTATION SESSIONS FOR:

MEDICAL STUDENTS INTERNS YEAR 2 RESIDENTS FELLOWS RESEARCH EDUCATION STUDENTS ALL 7 HPP PROGRAMS INCOMING FACULTY

ON DEWAND WORKSHOPS: CONFLICT TRANSFORMATION MICROAGGRESSIONS & POWER DYNAMICS BYSTANDER INTERVENTION CREATING POSITIVE & INCLUSIVE LEARNING ENVIRONMENTS GIVING & RECEIVING FEEDBACK MISTREATMENT DATA & TRENDS FACILITATION SKILLS

To request an on-demand workshop, <u>please click here</u>. Note that capacity is limited, so not all requests can be fulfilled.

JOIN US FOR OUR LEO CHAT

What are the latest trends in the learning environment? What is LEO noticing?

Come join the LEO team to discuss the most updated data and trends in the learning environment.

- We'll discuss the cases and trends presented in this report
- Check out the case on the next page that we'll be discussing!
- Bring your questions!
- Invite your colleagues and learners



Our next chat will be held on Thursday June 2nd from 12-1pm



Click here to RSVP

CASE STUDY: Gender-based Mistreatment

Sarah is a third year medical student who shares with a trusted faculty member in Department X that during her clerkship in X, an attending asked if she had a boyfriend and proceeded to touch her on her lower back. The trusted faculty member feels very badly and tells her she is sorry that happened and reminds her of the mental health resources at UNM.

Six months later, the same attending makes similar comments to another medical student, Alejandra, who reports it to LEO. During the fact-finding process, LEO learns about this first incident that was never reported to LEO or to the UNM Office of Compliance, Equity, and Equal Opportunity (CEEO).

Discussion Questions

- What should the trusted faculty member have done differently?
- Why is it important for LEO and CEEO to know about the first incident?
- If you were the trusted faculty member, what would you say to Sarah?
 What would you do after talking to her?
- What happens if the trusted faculty member is a close friend of the attending who was reported and does not believe this behavior sounds like their friend?

TREND ANALYSIS: What is Verbal Abuse?

"Verbal abuse" is one of the most commonly reported types of mistreatment. People may have different ideas of what constitutes as "verbal abuse," so we have compiled a deidentified list of some of the most frequent types of verbally abusive comments that do constitute mistreatment.

Calling learners stupid, for example:

- "I don't expect much from med students"
- "It's so stupid to do that" and "That's stupid, we would never do that."
- "What are they even teaching you? Are they teaching you anything? You should know this."
- When asking for feedback: "I thought you said you'd done this before, so you should already know."
- "You think that's normal? You don't know what you're talking about."
- Attending asked a med student a question, student said they didn't know. Attending asked them to guess, then laughed and said "That would be the last thing on my list."
- Faculty comment to a patient: "Don't listen to [the learner]. They don't know what they're talking about."
- The attending said "It's okay you don't know anything because that's just how med students are" and then "taught me how to use Velcro and laughed sarcastically."

Cursing at learners and staff, calling peers, patients, and family members derogatory names.

"One fellow was very condescending toward the medical students. I was reduced to a number instead of my name for the better part of a week."

"You clearly don't care about patients," "The patient is ready if you even care."

Blaming learners for adverse outcomes in advance, for example:

- "If you mess this up you're done [the patient dies]."
- The attending called the clinic back angry and stated that if we did not refer the patient directly to her, then she would "just stand there and let the girl bleed out."
- After a student made an incorrect guess while being "pimped," the attending said, "Oh my goodness, no! Don't allow this student to match here, she'll kill patients."
- "If he dies it's on you."
- "The attending would get irritable, short and dismissive repeatedly, and occasionally resort to threats of failing me, belittle me by telling me I am a terrible doctor, tell me there was no help in teaching me, would make accusations that I am not intelligent or extrapolate that she thought I wouldn't be a good physician in my unrelated intended subspecialty that I was applying to."

Comments like these are often experienced in public settings and are reported as both "verbal abuse" and "public humiliation."

Discussion Questions

- What might you do if you witnessed someone verbally abusing a learner?
- Would you intervene? Is there something you could say that would protect the learner and stop the abuse?
- What resources would be important to have in order to ensure the learner was ok?
- What would you do if you didn't witness it but a learner told you about the incident?

LEO is here to help!

If you have witnessed or experienced any of these behaviors, or other behaviors that have harmed the learning environment, please reach out to us. We can ensure the best direct response, ensure proper documentation, and support for those involved.

iTeach: Recognizing Exemplary Teachers



<u>Click here</u> to send an iTeach recognition to a teacher today!

How many learners have recognized each of those teachers?



47% recognized by one learner 20% two learners 10% three learners 10% 4-5 learners 7% 6-10 learners 3% 11-20 learners 3% 21-130 learners!

Why are some people recognized by so many more learners than others? Are they **that** much more exemplary?

Well, they're certainly exemplary! But medical student course instructors tend to be recognized by more learners than others, because they work with large groups of students, and iTeach questions are asked on mandatory course evaluations.

To compensate for this, we measure in batches. We send out iTeach notifications in batches, every 1-2 months. So we can ask, how many batches (out of 19 possible) have our teachers been recognized in? The more batches, the most consistently they are being recognized—whether that's once or 92 times. (Yes, one person was indeed recognized 92 times in one batch!)



ADDRESSING MISTREATMENT: Data Review

July 24, 2019 - March 31, 2022

Since LEO began collecting reports of mistreatment in late July of 2019, we have received **441 reports of mistreatment**.

After removing duplicate reports and those that do not rise to the level of mistreatment, we are left with **350 unique incidents of mistreatment**.

LEO shares these data to create greater transparency in the UNM SOM community about mistreatment. We use these data to inform our work to reduce and prevent mistreatment, and to most effectively respond to incidents that occur.



WHEN REPORTS COME TO LEO: What's The Deal with February?

We're always interested in learning more about patterns related to mistreatment. February 2022 had more reports than ever before, and February 2021 was the second highest. **We've been wondering, what is it about February?** We mapped it all out.

Here's a chart of when reports have come to LEO since April 2020:



When we mapped it out, we noticed that it looked a bit like a COVID graph, with the big peaks and valleys.





Both of LEO's big spikes have followed hospitalization peaks in November/December 2020 and the Omicron surge in late 2021 and early 2022.

It's no surprise to us that tensions would be high during and after those surges and people may be especially exhausted, stressed, and burned out, and therefore, may not be on their best behavior. We also expect that people who were mistreated during the surge may only have had the time or emotional capacity to report mistreatment afterwards.

We look forward to learning what will happen with the pattern of reports if hospitalizations stay more consistent.

Data within this section are disaggregated by year. It remains to be seen if 2022 will stay on track to be the year with the most reports so far, or if the numbers will even out after the February surge in reports.

2019: 46 reports (**Reporting system launched in late July**) 2020: 102 reports 2021: 146 reports 2022: 56 reports (through March 31)







Who is Reported for Mistreating Learners?

n = 350

205



Types of Mistreatment

Each incident can include multiple types of mistreatment

n = 350





FAQ: What kinds of identity-based mistreatment are being reported?

Answer: Primarily offensive language, as well as differential treatment based on identity (for example, a provider who is generally kinder to residents who are men than to residents who are women). Check out the breakdown below, and remember that incidents may fall in multiple categories.



How is Mistreatment Reported?

n = 350



How Does Mistreatment Impact Learners?

Beginning June 2020, LEO added a question to the reporting form that asks how this behavior has negatively impacted them. The question offers drop-down options, as well as write-in options.

So far, **177** of the incidents included in this report have provided this information. Reporters can select as many of the options as they would like.

Belief that UNM is a good place to 65% learn and work Ability to work productively with the 53% team Sense of safety in the learning 49% environment 45% Trust 43% Sense of belonging at UNM 33% Anxietv Stress 32% Ability to take care of patients 30% 27% Burnout Self-esteem 27% Motivation 25% Ability to study or perform 18% academically 14% Ability to sleep Depression 12% Other mental health issues 9% Physical health and/or wellness 6% Other 5% 0 10 20 60 30 40 50

"This behavior negatively impacted my:"

How are Incidents Classified on the Mistreatment Response Pyramid?

n = 114 sets of classifiable incidents

Note: LEO classifies each applicable incident using the Mistreatment Response Pyramid. The pyramid takes into account both **severity** of the incident and **patterns** of behavior. Level 1 incidents are first-time offenses that are not severe. Level 4's, in contrast, are the most severe of incidents.

Note: We are changing the way we're reporting out data on level and actions taken to be more accurate. Here's why:

Imagine one person is reported for 15 incidents within a month, and LEO designates all of those reports as "Level 3," and creates one set of recommendations. It wouldn't be accurate to report that as 15 Level 3's, or 15 recommendations for XYZ. We're now reporting out on sets of recommendations and designations, so that person would count as **one** Level 3 and **one** recommendation for XYZ. Of course, if that person were to be reported next year, that would count as a new designation and a new recommendation.



Outcomes of Closed Cases

n = 248 cases that have reached this stage

Note: LEO team members do not take action themselves. LEO recommends appropriate actions to department chairs, division chiefs, program and clerkship directors, and others, based on the incident level. This partnership between LEO and leadership ensures consistency and standardization across the SOM.



Reasons LEO has Not Recommended Action LEO doesn't recommend action for every incident. Some of the reasons for that are:



GET TO KNOW THE LEO TEAM!



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