RATIONALE

2018 GQ Data

Institutional Data

LCME Self-Study

Best Practices & Core Values

1) Centralize Efforts
2) Document Efforts
3) Promote Excellence
4) Close the Loop
# LEEP Timeline

<table>
<thead>
<tr>
<th>Month</th>
<th>Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 2018</td>
<td>• Proposal</td>
</tr>
<tr>
<td>April 2018</td>
<td>• LEEP planning group</td>
</tr>
</tbody>
</table>
| June 2018   | • Director of LEEP  
              • Documentation dig                                                    |
| September 2018 | • LEEP launch  
             • Awareness system goes live                                           |
| January 2019 | • Clinical affiliate presentations  
                  • Student clerkship presentations                                       |
| March 2019  | • Exemplary reports go live                                            |
| July 2019   | • M1 orientation presentations                                          |
| September 2019 | • Inaugural celebration                                               |
| February 2020 | • LCME site visit                                                      |
| September 2020 | • Two year presentation to CCD                                       |
| March 2021  | • Standing committee and office                                        |

As needed, monthly, and quarterly email communications

Learning Compact

Meetings and presentations

Student Misreatment Policy
Appreciative Inquiry

Asset Based

Look at what we've got!!

Deficit Focused

Look at what we're missing!!

© J. Logan 2012
Mission
To foster a mutual commitment for cultivating a professional and dynamic learning environment dedicated to the Aggie Core Values of excellence, integrity, leadership, loyalty, respect, and selfless service.

Vision
To be an institution of education with a robust learning environment that actively contributes to the personal and professional development of our constituents.

Goals
For constituents to: (1) identify the importance of the learning environment, (2) recognize the mutual responsibility for modeling exemplary behaviors, and (3) exhibit the Aggie Core Values.
LEEP Environment Awareness System

Learning Environment Awareness System

No Aggie does not lie, cheat, or steal, or tolerate those who do.

LEER Team
- Learning Environment Rapid Response Team (LERRT)
- Learning Environment Enrichment Committee (LEEC)

Teams and Committees

Aggie Awareness Website
Search: medicine.tamu.edu/conduct
Environment Awareness System (EAS)

**Inputs**
- Ombudspersons (COM & TAMU)
- Aggie Conduct Awareness Form
- Student Advocates
- Virtual Feedback & Evaluations*
- Institutional surveys
- Direct reporting (e.g., SA, AA) of issues (e.g., dishonesty, misc. complaints)

**Mechanisms**
- Learning Environment Rapid Response Team
  - Low-level: E, C1-3 non-Eg
  - High-level: T7&9**, C4-5, Eg, M
- Non-MD***

**Points of Contact**

**Outputs**
- Monthly Updates and Quarterly Reports
  - (E)xemplary
  - (Q)ualifications

**Actions**
- COM Supervisor
- Texas A&M University or System Person
- Cup of Coffee Messenger
- Learning Environment Support Team
  - Committee (e.g., SPC), chair, supervisor, Faculty Affairs department (e.g., Human Resources), Graduate Medical Education, Environmental Health and Safety etc.
- VDEA & Inquiry Mistreatment Committee

---

“I just want to share this with you. It’s your choice to take it or leave it…”

---

* If student mistreatment is identified in either mechanism, the Director of the Learning Environment will be notified and submit an Aggie Conduct Awareness Form to document allegation.
** Or if identified after submission of a report
*** HSC administration, College of Nursing, School of Public Health, etc.
Annual learning environment Celebrations

Aggie Core Value Coins

Recognize Exemplary Conduct

Highlight exemplary behavior in quarterly reports

Dear [Name],

I hope you are well and safe. I am thrilled to let you know that the Learning Environment Enrichment Program (LEEP) awarded you the Excellence Aggie Core Value coin... I

Personalized communications to person and supervisor

I hope you are well and safe. I am thrilled to let you know that the Learning Environment Enrichment Program (LEEP) awarded you the Excellence Aggie Core Value coin... I

I hope you are well and safe. I am thrilled to let you know that the Learning Environment Enrichment Program (LEEP) awarded you the Excellence Aggie Core Value coin...
Email submitter (if known) to acknowledge receipt of form

Email submitter to confirm action date

Monthly email updates to COM and Campus Deans

Quarterly reports to COM

Biannual Council of Course Directors

Annual report to Academic Affairs
Cup of Coffee
"The learning environment [LE] is the physical, social, and psychological context in which a student learns..."

(Dunham et al., 2017, p. 383; Stern & Papadakis, 2006)
Why should we care about the learning environment?

Physical + Social + Psychological =

“...contexts in which medical students learn and grow professionally, and it influences how students develop behaviors and form identities as future physicians”

(Dunham et al., 2017, p. 383; Stern & Papadakis, 2006)
"A supportive learning environment contributes to student well-being and enhances student empathy, professionalism, and academic success..."

(Dunham et al., 2017, p. 383)
"... unsupportive learning environment may lead to burnout, exhaustion, and cynicism"

(Dunham et al., 2017, p. 383)
“Indeed, throughout medical training, students learn many implicit lessons: what one needs to do in order to survive; how one gets ahead; how to interact with patients, teachers, and peers; where one fits into the broader medical culture and hierarchy; and what ideas and behaviors are considered acceptable. Collectively, these unwritten, unspoken, and unofficial lessons and rituals have come to be known by medical educators as the ‘hidden curriculum.’”

(Green, Myers, & George, 2017)
“Normalization of deviance”
(Banja, 2010; Gina, 2017; PRI, 2018)

“If behavior is not addressed, others in the environment may behave similarly, so the behavior becomes ‘normal’ and accepted…”
(Hickson et al., 2007, p. 1046; Felps et al., 2006; Hickson et al., 2007; Webb et al., 2007; Webb, 2018)
The Cup of Coffee intervention was designed by The Center for Professional and Patient Advocacy (CPPA) at Vanderbilt University Medical Center (VUMC).

Informal, and non-punitive, approach to aid physician self-awareness and self-regulation of personal concerning behavior as identified through unsolicited complaints (adapted patients [PARS] and coworkers [CORS] national system).

Awareness as a catalyst for change…cannot force change.

(Vanderbilt CPPA, 2019a)
CUP OF COFFEE INITIATIVE

A "CUP OF COFFEE" IS.....

- a brief, informal, low-stakes conversation (2-3 minutes in length)
- initiated by a Peer Messenger
- a non-punitive way to deliver a single story/observation that lets the receiver know how the behavior was perceived based on institutional values

WHAT THE "CUP OF COFFEE" IS FOR THE COMMUNITY...

- Mechanism to increase awareness of potentially concerning behavior and empower responsibility for the learning environment
- One more way to have a "finger on the pulse" of the learning environment
- Not an infallible silver bullet but part of a larger program --> people can also report exemplary behaviors
AGGIE CONDUCT AWARENESS

INPUTS
- Aggie Conduct Awareness Form
  - Surveys
  - Feedback and Evaluations
  - Other

MECHANISMS
- Rapid Response Team
  - Enrichment Committee

ACTIONS
- Cup of Coffee
  - Support Team
  - Student Promotions Committee
  - Department, VDFA (mistreatment)
  - COM

Monthly, quarterly, CCD

Title VII & IX, risk, fraud or misconduct

Texas A&M University & Texas A&M University System

“I just want to share this with you. It's your choice to take it or leave it…”
Selected CPPA Partners (VCPPA 2020; Webb, 2018)

Selected System, Regional and Medical Practice Partners
- Beaumont Health
- Charlotte Ear, Eyes, Nose, Throat Assoc.
- Cone Health
- Edward Elmhurst Health System
- Geisinger Health System
- Hospital Sisters Health System
- Long Beach Memorial
- Mercy Health System
- North Mississippi Medical Center
- NorthShore University Health System
- OrthoCarolina
- Palo Alto Medical Foundation
- Queen’s Medical Center
- Renown
- Sanford Health
- Winchester Valley Health

Selected Academic Medical Center Partners
- Duke University
- Emory University
- Johns Hopkins University
- Johns Hopkins Bayview MC
- Loyola University
- Lucille Packard Children’s Hospital
- Rush University Medical Center
- Saint Louis University
- Stanford University
- UCLA
- UC San Francisco
- UC Davis
- UC Irvine
- UC San Diego
- University of Illinois, Chicago
- University of Iowa
- University of Michigan
- University of Mississippi
- University of North Carolina
- University of Pennsylvania
- University of Southern California
- University of Toledo
- Vanderbilt University Medical Center
- Wake Forest University
Vanderbilt SOM CORs highlights

- 2013-2018
  - 434 peer messengers trained
  - ≈2,400 cups of coffee peer awareness conversations
  - 83% improvement
CUP OF COFFEE INITIATIVE-WHY

Vanderbilt SOM CORs highlights

• 2013-2018
  o 434 peer messengers trained
  o ≈2,400 cups of coffee peer awareness conversations
  o 83% improvement

TAMUCOM LEEP highlights

• 2018-2020
  o 324 peer messengers trained
  o 345 reports (09.01.18-08.31.20)
  o ≈175 cups of coffee peer awareness conversations
  o 79% improvement
  o Exemplary behaviors (61% of total reports)
Peer Messengers
• Peer messengers **deliver** the message and...
  o Maintain trust and respect
  o Balance empathy and objectivity
  o “I just want to share this with you. It’s your choice to take it or leave it…”
  o Validation is in the eye of the person receiving the message

(Bogdewic, 2014; Hickson et al., 2007; Webb, 2018)
CUP OF COFFEE INITIATIVE

• Peer messengers do NOT:
  o Investigate the facts surrounding the report,
  o Communicate credibility or validity of the report,
  o Advise or counsel peers, and engage in “pushback”
CUP OF COFFEE INITIATIVE

COMPONENTS OF A "CUP OF COFFEE" CONVERSATION

Peer messenger opens the conversation with the observation that was reported

Reviews the data (paraphrase)

Responds tactfully to any push back or questions

Closes the conversation by encouraging reflection and self-regulation
CUP OF COFFEE INITIATIVE

• Pushback
  o Deflection
    – It’s not me, it’s the ____________.
    – Students/faculty/staff, system, reporter’s perception, administration, faulty program.
  o Dismissal
    – “Do you know who I am? I don’t believe _____ I don’t have time for this!”
    – Data, seriousness of the claim, the reporter, process.
  o Distraction
    – “We should really be focusing on __________.”
    – Data analysis, students, doing your homework, fixing or helping me get my job done (*body language and an emotional response).

(Pritchard, September 2018; VCPPA, 2018b; Webb, 2019)
CUP OF COFFEE INITIATIVE

• Responses
  o **Remind** (overarching values)
    – This is part of OUR overall effort to improve our learning environment.
    – WE are committed to mutual accountability and mutual respect. This is just to bring awareness of perceived behavior.
  o **Reinforce** (value)
    – You are a valued member of OUR __________.
    – I’m sharing this information as part of our overall effort to improve OUR learning environment. It’s your choice to take it or leave it.
  o **Reflect** (personal development)
    – It may be useful for you to know how you were perceived by others.
    – I encourage you to reflect on this report.

(Pritchard, September 2018; VCPPA, 2018b; Webb, 2019)
DATA

Programmatic
- Aggie awareness reports, cup of coffee, themes, training, aggie core value coins
- Independent Student Analysis (ISA)
- Multi-Stakeholder Survey of Learning Environments (MSSLE)
- Professionalism and Mistreatment Survey (PROMISS)
- Graduate Questionnaire (GQ)

Institutional

National
**Emotional Climate**: The educational experience leads to a sense of achievement, valuing oneself, and confidence in one’s academic abilities.

**Student-Faculty Interaction**: Supportiveness... to what extent students feel that faculty are helpful when providing academic advice, when providing non-academic advice, and when answering questions and providing criticism.
DATA – 2020 GQ: LE

Culture

□ 2018 □ 2019 □ 2020 □ All COMs (2020)

- COM foster's student personal development (+11%)
- Faculty respect diversity (+10%)
- Faculty show empathy and compassion
- Faculty use professional language
- Respectful faculty-student interactions
- Faculty respectfully resolve conflicts (+13%)

(Likert; Very Often, Always, Agree, Strongly Agree)
### DATA - Institutional

#### Multi-Stakeholder* Survey of Learning Environments (MSSLE)

(*Students*) The learning environment...

<table>
<thead>
<tr>
<th>Survey Question</th>
<th>Percentage</th>
<th>Combined Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responded positively** to encourages professional behavior (Q6)</td>
<td>91%</td>
<td>Somewhat agree and strongly agree</td>
</tr>
<tr>
<td>Fosters a culture of respect and dignity of others (Q19)</td>
<td>89%</td>
<td></td>
</tr>
<tr>
<td>Promotes appreciation of others (Q27)</td>
<td>85%</td>
<td></td>
</tr>
<tr>
<td>I am aware of how to report concerns or issues regarding the learning environment (Q24)</td>
<td>92%</td>
<td></td>
</tr>
<tr>
<td>I am comfortable reporting concerns or issues regarding the learning environment (Q25)</td>
<td>81%</td>
<td></td>
</tr>
</tbody>
</table>

*Data on faculty and staff was collected.

**Combined somewhat agree and strongly agree

#### Independent Student Analysis

(Fall 2019; 2018 = 86% response rate; 2019 = 93% response rate)

<table>
<thead>
<tr>
<th>Satisfaction Category</th>
<th>Fall 2018</th>
<th>2018</th>
<th>2019</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Familiar with student mistreatment policy?</td>
<td>80</td>
<td>94</td>
<td></td>
<td>+14.2%</td>
</tr>
<tr>
<td>Satisfaction with student mistreatment or misconduct policy</td>
<td>80</td>
<td>93</td>
<td></td>
<td>+14.2%</td>
</tr>
<tr>
<td>Satisfaction with mechanisms to report mistreatment or misconduct</td>
<td>79</td>
<td>92</td>
<td></td>
<td>+14.2%</td>
</tr>
<tr>
<td>Satisfaction with the medical schools activities to prevent mistreatment</td>
<td>76</td>
<td>90</td>
<td></td>
<td>+14.2%</td>
</tr>
<tr>
<td>Satisfaction with schools actions on report of mistreatment</td>
<td>72</td>
<td>89</td>
<td></td>
<td>+14.2%</td>
</tr>
</tbody>
</table>

*Data on faculty and staff was collected.

**Combined somewhat agree and strongly agree
**DATA**

**TOTAL REPORTS FROM SEPTEMBER 1, 2018 – AUGUST 31, 2020**

<table>
<thead>
<tr>
<th>TOTAL REPORTS</th>
<th>345 REPORTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>61% Exemplary</td>
<td>+ 36% Concerning</td>
</tr>
</tbody>
</table>

| AVERAGE REPORTS PER MONTH | 14 |
| EXEMPLARY REPORT AVERAGE | 9 |
| CONCERNING REPORT AVERAGE | 5 |

**EXEMPLARY REPORTS**

- **Most Likely to Submit**
  - Staff: 46%
  - Medical Students: 39%

- **Most Likely to Receive**
  - Staff: 40%
  - Medical Students: 39%

**CONCERNING REPORTS**

- **Most Likely to Submit**
  - Medical Students: 64%
  - Staff: 24%

- **Most Likely to Receive**
  - Medical Students: 55%
  - Faculty: 32%

**RECIDIVISM**

- **18% Exemplary Reports Received at Least A Second Report**
- **79% Concerning Reports Did Not Receive A Second Report**

*Removed reports that were tests, incomplete, or misplaced submissions (e.g., parking concerns). **Defined as another concerning report within two years per VCPPA.

◊ TAMU COM's results are similar to VCPPA's findings from 2003-2018 (83%).
LESSONS LEARNED

• Develop a small working group to start initial planning...allow for ample time to communicate need and rationale.
• Take stock of institutional artifacts (e.g., student handbook).
• Communicate early and often to cultivate buy-in from stakeholders at various levels.
• Early “ground game” is critical.
• Concise messaging (e.g., Dean’s ACTS communications)
  o We are all in this together!
  o Cup of Coffee → perception, self awareness, low level, non-punitive.
LESSONS LEARNED

• Clearly define boundaries when concerning reports require punitive action (e.g., Faculty Affairs, HR etc.).
• Actively promote appreciation alongside addressing concerning behavior (e.g., Appreciative Inquiry).
• Careful identification of personnel for rapid response team (LERRT) as well as larger committee to review actions and offer direction to program (LEEC).
QUESTIONS?
Thank you!
dewsnap@tamu.edu
waer@tamu.edu
MISC.
<table>
<thead>
<tr>
<th>Level</th>
<th>Description</th>
<th>Examples</th>
<th>Potential Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>Persistent pattern of exemplary reports</td>
<td>Person acquires all six coins</td>
<td>End of the year award for acquiring all six coins</td>
</tr>
<tr>
<td></td>
<td>Demonstrated pattern (two or more coins) of exemplary reports; Senior VP, Executive Dean, or LECC’s discretion</td>
<td>Person acquires two or more coins</td>
<td>Nomination by peers for excellence coin and public recognition by the COM (e.g., staff advisory committee)</td>
</tr>
<tr>
<td></td>
<td>Three or more reports (pattern) by two or more parties within 2 years; Senior VP, Executive Dean, or LECC’s discretion</td>
<td>Person repeatedly assists above and beyond assigned duties</td>
<td>Award value coin, public acknowledgement, certificate, share report, and notify supervisor</td>
</tr>
<tr>
<td></td>
<td>Another report by two or more parties within 2 years; Senior VP, Vice Dean, or LECC’s discretion</td>
<td>Worked beyond responsibilities</td>
<td>Peer messenger shares report with person and Director of LEEP Shares with supervisor</td>
</tr>
<tr>
<td></td>
<td>An exemplary report</td>
<td>Worked late on project above and beyond assigned duties</td>
<td>Informal Cup of Coffee via peer messenger and notification to supervisor</td>
</tr>
<tr>
<td></td>
<td>Kudos report</td>
<td>Completing duties in an excellent manner</td>
<td>Email to person and notification to supervisor</td>
</tr>
<tr>
<td></td>
<td>0 Does not qualify and requires no further action by LEEC or other pertinent administrative bodies.</td>
<td>Availability of parking spots; funds for lunch</td>
<td>Document. If deemed significant, forward to respective department.</td>
</tr>
<tr>
<td>Low</td>
<td>A concerns report (instance)</td>
<td>Person-to-person outburst</td>
<td>Informal Cup of Coffee via peer messenger</td>
</tr>
<tr>
<td></td>
<td>Another concerns report (instance) within 2 years</td>
<td>Person-to-person outburst</td>
<td>Formal Cup of Coffee via messenger; mention second report in two years</td>
</tr>
<tr>
<td></td>
<td>Three or more concerns (pattern) noted by two or more parties within 2 years</td>
<td>Reports from various phases (e.g., M1) or departments</td>
<td>LE Support Team develops remediation action plan for students and/or directs reports to pertinent body (e.g., SPC, VDFA, chair, HR) for action</td>
</tr>
<tr>
<td></td>
<td>Reported concerns continue after level three intervention; egregious, identified as mistreatment with no perceived peril</td>
<td>Persistent Person-to-person intimidating behavior in the hallway</td>
<td>Directs reports to pertinent body (e.g., SPC, VDFA, chair, HR) for action</td>
</tr>
<tr>
<td></td>
<td>Mandatory or Egregious</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mandatory (e.g., Title IX, policy violations) or egregious, identified as mistreatment with perceived peril or pattern with no evidence of change after level three and four interventions</td>
<td>Person-to-person direct harassment in the clinic</td>
<td>Directs reports to pertinent body/department (e.g., SPC, VDFA, chair, Title IX, HR, Compliance &amp; Risk Management) for action</td>
</tr>
</tbody>
</table>

Adapted from University of Arizona
College of Medicine, Indiana University
School of Medicine, Hickson et al., 2007
Adaptive-Generative Development Model (AGD-M)

Appreciative Inquiry
## Purpose:

- **LEEC (Learning Environment Enrichment Committee)**: To foster a mutual commitment for cultivating a professional and educationally dynamic learning environment dedicated to excellence, integrity, leadership, loyalty, respect, and selfless service. Reviews aggregate programmatic data and provide direction to the learning environment program.

- **LERRT (Learning Environment Rapid Response Team)**: To review, and direct reports to the appropriate process or entity. In addition, the LERRT communicates and coordinates with the LEEC to ensure that these concerns are handled in an appropriate and timely manner. LERRT is tasked with ensuring an after action report is submitted to LEEC.

- **LEST (Learning Environment Support Team)**: To coordinate the professional remediation of students. LEST will also inform or, if requested, advise the entity, unit, or supervisors in regards to the professional remediation of faculty and staff. LEST is tasked with ensuring an after action report is submitted to LEEC for remediating activities of students or deferred actions to entities, units, or supervisors directly from the LEST.

- **Inquiry Mistreatment Committee**: To investigate, and report on, claims of mistreatment submitted through the online website or any other avenues (e.g., inputs).

## Members:

### LEEC Members:
- Student Affairs (2)
- Academic Affairs (1)
- Faculty Affairs (1)
- COM staff [SAC] (1)
- MD Students [M4; M3 alternate] (1)
- PhD Students [2 alternating] (1)
- COM Faculty (1)
- COM FAC [2 alternating] (1)
- Diversity and Inclusion (1)
- Director, Learning Environment [chair] (1)
- Office of Evaluation and Assessment [ex officio] (1)
- Assistant Dean of Educational CQI (1)
- Faculty Ombudsman [NON voting] (1)
- Staff Ombudsman [NON voting] (1)
- Human Resources (1)

**TOTAL = 16**

### LERRT Members:
- Assistant Dean, Academic Affairs (1)
- Director of the Learning Environment (1)
- Evaluation and Assessment (1)
- Associate Dean for Student Affairs (1)
- Executive Director of Staff (1)
- Assistant Vice President, Risk and Compliance (1)

**TOTAL = 6**

### LEST Members:
- Director of Academic Support Services (1)
- Assistant Director of Academic Support Services (1)
- Coordinator of Academic Support Services (1)
- Director of the Learning Environment (1)
- Director of Wellness (1)
- Faculty member (1)

**TOTAL = 6**

### Inquiry Mistreatment Committee Members:
- Vice Dean of Faculty Affairs
- TBD but in consultation with the Associate Dean of Academic Affairs and Executive Associate Dean of Student Affairs may include: (p. 88)
  - Associate Dean of Academic Affairs
  - Executive Associate Dean of Student Affairs
  - Clerkship Directors
  - Phase/Block leaders
  - Department Chairs
  - Respondent
  - Complainant

**TOTAL = 3+**
DATA

DAY AVERAGE TURN AROUND TIME*
Exemplary: 8
Concerning: 12
Mistreatment: 21

CUPS OF COFFEE CONVERSATIONS
Exemplary: 102
Concerning: 73

SELFLESS SERVICE
MOST CITED AGGIE CORE VALUE EXEMPLIFIED BY COM COMMUNITY MEMBERS IN EXEMPLARY REPORTS

RESPECT
MOST CITED AGGIE CORE VALUE NOT EXEMPLIFIED BY COM COMMUNITY MEMBERS IN CONCERNING REPORTS

15 Aggie core value coins awarded
1 Integrity
1 Leadership
8 Selfless Service
1 Loyalty
0 Respect

175+ REPORTS CLASSIFIED AN L0 OR AT A HIGHER LEVEL THAN L2 DID NOT MERIT A CUP OF COFFEE INTERVENTION.

GENERAL THEMES IN CONCERNING REPORTS
- General Disrespect: 56%
- Following the rules: 14%
- Mistreatment and/or Discrimination: 15%
- Insensitivity: 5%
- Dishonesty: 3%
- Tone: 7%
- Integrity: 1%
- Excellence: 4%
- Leadership: 1%
- Loyalty: 0%
- Selfless Service: 8%

Dishonesty 3%
Mistreatment and/or Discrimination 15%
Following the rules 14%
Insensitivity 5%
Dishonesty 3%
Tone 7%
Integrity 1%
Excellence 4%
Leadership 1%
Loyalty 0%
Selfless Service 8%

*Only accounts for exemplary and concerning dating back to 10/12/18 when preliminary actions initiated by a rapid response team.
+ Reports classified an L0 or at a higher level than L2 did not merit a cup of coffee intervention.

INDIVIDUALS TRAINED
- 144 Faculty
- 116 Staff & Others
- 64 Residents & Students

324
STUDENT MISTREATMENT: Knowledge of Procedures

- 2018: 86%
- 2019: 86%
- 2020: 99%
- All COMs (2020): 90%

+13% increase

STUDENT MISTREATMENT: Reporting

- Direct:
  - 2018: 21%
  - 2019: 18%
  - 2020: 26%
  - All COMs (2020): 26%

+14% increase

- Observed:
  - 2018: 0%
  - 2019: 5%
  - 2020: 10%
  - All COMs (2020): 15%

2020 PROMISS
95% Pre-Clerkship & Clerkship

(Likert; Yes)
DATA – 2020 GQ: LE

STUDENT MISTREATMENT

- Personally experienced mistreatment: 42%, 40%, 40%, 36%
- Satisfied with outcome: 39%, 40%, 38%, 33%
- Did not report—did not think anything would happen: 39%, 38%, 38%, 26%
- Did not report—fear of reprisal: 38%, 38%, 38%, 29%
- Did not report—fear of reprisal of sources [classroom and clinical faculty]: 26%, 21%, 21%, 18%
- Sources [classroom and clinical faculty]: 11%, 15%

(Likert; Yes; Satisfied, Very Satisfied)
ROLES

**Director**
- Chair, LEEC
- Lead, Cup of Coffee leadership team
- Liaise with locations regarding the LEEP and Cup of Coffee training
- Direct LEEP and manage reports in Environment Awareness System
- Liaise with Diversity and Inclusion as well as Student Affairs regarding programs and initiatives
- Serve on pertinent committees and teams
- Policy creation and/or updates
- As needed…

**Program Manager**
- Vice-Chair, LEEC
- Co-Lead, Cup of Coffee leadership team
- Assist Director with trainings, presentations, and connecting with COM sites and locations
- Dispatch peer messengers
- Coordinate re-training peer messengers
- Assist Ombuds
- Create and disseminate educational tools and presentations
- Log report data, maintain records, and analyze data
- As needed…

**Faculty and Staff Ombuds**
- Serving as a confidential outlet if a College of Medicine faculty or staff person needs to verbally process an issue
- Being available within a timely manner to meet one-on-one with College of Medicine faculty and staff
- Interfacing with the Texas A&M Faculty Ombudsman where appropriate/indicated
- Participating in the monthly Learning Environment Enrichment Committee meetings
- Working collaboratively with the College of Medicine Faculty Ombudsman to address learning environment concerns
- Being familiar with the College of Medicine and Texas A&M policies (such as Title IX) and procedures

**Administrative Coordinator II**
- Administrative support (e.g., agenda, minutes, schedule meetings, schedule trainings, travel logistics etc.)
- Create and distribute promotional content
- Maintain Aggie Awareness website
- Assist Program Manager with dispatching peer messengers
- Assist Ombuds
- Coordinate logistics of disseminating core value coins, ensure after action reports are submitted
- As needed…
Part of fostering a professional and dynamic learning environment includes empowering members to call out exemplary and concerning behaviors in an effective manner; especially when it relates to concerning behavior (see below) so that those concerning behaviors do not become, “normal and accepted” and indirectly enable others to behave similarly¹. It is the LEEP’s hope that members of the COM community can feel empowered to address behaviors (exemplary and concerning) directly or to report effectively by reporting with integrity and respect. Effective reporting can start with:

1. asking yourself questions similar to those on the right;
2. focusing on the perceived behavior rather than vague generalities about the person;
3. analyzing perceived behavior for alignment/misalignment with our Aggie Core Values; and
4. utilizing the Aggie Awareness Conduct form, or other methods, to foster a professional and dynamic learning environment rather than retaliating or personally attacking others.

**CONCERNING BEHAVIORS:**

- Assigning work that does not match position or grade level
- Failure to protect patient confidentiality
- Not abiding by lab rules (e.g., eating)
- Misuse of resources
- Unintended insensitive comments
- Shaming/intimidation
- Tardiness
- Consistent tardiness

**DEGREE OF CONCERN**

- Slight
- Extreme

**QUESTIONS TO ASK YOURSELF BEFORE REPORTING**

- “Was this behavior done in a perceived negative or malicious manner?”
- “Have I observed this behavior more than once?”
- “What are the pros and cons of reporting vs. addressing this myself?”
- “Can I handle this myself with a brief conversation? Why or why not?”

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¹. Hickson et al., 2007, p. 1046; Felip et al., 2006; Hickson et al., 2007; Webb et al., 2007; Webb, 2018
Q: Is the Cup of Coffee a program?
A: No, it is an action of our environment awareness system (EAS) within the Learning Environment Enrichment Program (LEEP).
FAQs

Q: How does a report get elevated (e.g., instances or reports)?
A: Reporting of multiple instances assists with identifying patterns over time rather than multiple people observing one exemplary or concerning behavior. However, some instances, by the nature, can get elevated.

Q: Is the Aggie conduct awareness form the only way to report?
A: No. Options such as reporting to Student Affairs, supervisors etc. are still available but the reporting form takes the burden off of you to decide where to report as well as documents the behavior.
FAQs

Q: Are peer messengers only dispatched for concerning reports?
A: No. Peer messengers are dispatched for exemplary and concerning reports.
FAQs

Q: What’s the whole point of the Cup of Coffee action?
A: 1) Informal approach to empowering our community to recognize, vocalize, and promote exemplary behaviors as well as recognize, vocalize, and address concerning behaviors; and 2) Promote appreciation as well as an “early-alert” for behaviors that could become problematic down the road.

Q: How do you “close the loop?”
A: If reporter is identifiable, an acknowledgement email and final email regarding date of action. Also, quarterly and yearly aggregate reports.
What happens after a report is submitted?

Q: What's the whole point of the Cup of Coffee action?
A: 1) Informal approach to empowering our community to recognize, vocalize, and promote exemplary behaviors as well as recognize, vocalize, and address concerning behaviors; and 2) Promote appreciation as well as an “early-alert” for behaviors that could become problematic.

Q: How do you “close the loop?”
A: If reporter is identifiable, an acknowledgement email and final email regarding date of action. Also, quarterly and yearly aggregate reports.

**CLOSING THE LOOP**

- **Awareness reports** = acknowledgement email and general email with action date
- **Student mistreatment reports** = Acknowledgement of receipt of complaint and general notification of finalization of review or inquiry
Q: Is the Aggie conduct awareness form the only way to report?
A: No. Reporting to Student Affairs, supervisors etc. is still applicable but the awareness form takes the burden off of you to decide where to report as well as documents the behavior.

Q: Do these reports automatically go in my record?
A: Internal data-collection purposes (e.g., thematic analysis). LEEP does not determine what goes into a permanent record (e.g., employee file, dean’s letter, etc.).