Medical Student Faculty Teaching
Responsibilities and Policies

Below is information that all teaching faculty of the LLU School of Medicine should know in order to provide the best education and learning environment for our medical students.

1. Loma Linda University Nondiscrimination Policy

While Loma Linda University (LLU) gives preference in its selection processes to students and employees who are aligned with the faith-based mission of the University and the Seventh-day Adventist Church, LLU does not and shall not unlawfully discriminate on the basis of race, color, religion, gender, sexual orientation, gender identity, national origin, medical condition, physical handicap, mental condition, veteran's status, or age in the provision of any of its services. Further, LLU is committed to providing a work environment that is free of unlawful discrimination and harassment. In keeping with this commitment, LLU strictly prohibits all forms of harassment, including but not limited to sexual harassment and harassment based on race, color, religion, gender, sexual orientation, gender identity, national origin, medical condition, physical handicap, mental condition, veteran's status, or age. Also prohibited is retaliation of any kind against individuals who file complaints in good faith, or who assist in an LLU investigation.

2. Educational Objectives of the Medical Curriculum

“Tell me and I forget. Teach me and I remember. Involve me and I learn.”

-Benjamin Franklin
It is fundamental to the educational mission of the LLU School of Medicine that each faculty member know the Core Educational Objectives of the Medical Curriculum as well as the specific educational objectives relevant to each part of the curriculum in which they teach. These objectives have been determined to be vital to the educational curriculum by committees of faculty educators. Each course or clerkship director will inform their faculty of educational objectives specific to each course in which they teach.

Loma Linda University School of Medicine MD Program
Objectives/Competencies

Competency Domains

Interpersonal & Communication Skills
- Students must be able to demonstrate culturally sensitive interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and professional associates.

Practice-based Learning & Improvement
- Students must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning.

Systems-based Practice
- Students must demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources, including interprofessional teams, in the system to provide optimal health care.

Medical Knowledge
- Students must demonstrate the ability to effectively source and validate medical information, possess an adequate foundation of basic science knowledge, and apply this knowledge and information to the care of patients using clinical reasoning and problem solving skills with a whole person care approach.

Whole Person Care
- Through the study and application of whole person care, students will develop a knowledge of wholeness that can be applied to their personal and professional lives and the care of patients.

Patient Care
- Students must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health in the context of whole person care.

Professionalism
Students must demonstrate professional behaviors, attitudes and beliefs that allow patients, colleagues, members of the healthcare team and society to approach each physician encounter with an expectation of trustworthiness.

A graduate of the School of Medicine shall embody the ethics, values, and behaviors of the medical profession. As such, the graduate must consistently demonstrate the values of compassion, integrity, excellence, freedom, justice, self-control, and humility in their professional and personal responsibilities.

3. Student Learning Environment

Each July, Loma Linda University Health and it’s affiliated sites welcomes a number of new trainees in various health professions in a variety of learning sites. While the primary purpose of the healthcare is to provide care for patients, please remember that this is also a learning environment for our students. It is the responsibility of everyone to contribute to a positive learning and work environment for all learners. Many studies have shown that hostile environments negatively affect students and trainees and are detrimental to learning and associated with higher rates of student depression, stress, anxiety and burnout. Faculty should treat students and trainees as they wish students and trainees to treat their patients.

Please remember that students do not have significant experience in the clinical environment. They may be anxious about how they will fit in and what they will experience. Some of the things that we can do to improve the learning environment for our trainees include:

- Welcome each student and trainee to the work environment; introduce them to the various team members.

- Orient the students to the work place (give a tour) and explain to them the various schedules and activities of their floor, clinic or other work unit.

- Vow to improve the professional environment for faculty, staff and trainees and encourage your colleagues to join you in this effort. Students are always learning from what they observe – not just from formal lectures and rounds but also from informal interactions — both positive and negative. Let’s strive to keep those lessons positive.

- Communicate to trainees that faculty and staff value trainee education and consider it to be a high priority in the medical center.

- Practice appreciative inquiry – don’t just criticize shortcomings – also point out and praise good practices and performances by our trainees.
• When possible, optimize flexibility and choice for health profession students to decrease the perception of lack of control (this helps to decrease stress).

4. Guidelines for Medical Student Supervision During Patient Care Experiences

The school of medicine curriculum committee has adopted the following guidelines for medical student supervision.

- Course/clerkship directors and department designee are responsible for ensuring student and patient safety during patient care activities.

- Course and clerkship directors and department designee must inform students of the expectations for their participation and supervision in patient care.

- Course/clerkship directors and department designee are responsible for assigning students to designated faculty and resident supervisors for all patient care experiences and for ensuring that faculty, residents, and students are notified of these assignments.

- Medical students on duty for patient care activities must be directly supervised by qualified faculty and/or resident physicians at all times. Direct supervision implies a physician is either physically present with a student or is on duty and rapidly available to provide personal supervision.

- Students on duty must have rapid and reliable systems for communicating with their supervising faculty and resident physicians.

- The degree of direct supervision shall vary according to the clinical task and status of each patient, and be commensurate with each student’s level of training, education and clinical experience.

- Supervision should foster progressive responsibility and provide opportunities for students to demonstrate increasing independence when appropriate.

- Course/clerkship directors and department designee are responsible for determining the types of patient interactions and the clinical procedures that medical students can perform during patient care experiences and the levels of direct supervision required for these
interactions and procedures. Clerkship directors will provide faculty, resident physicians and students with a list of the types of patient interactions and the clinical procedures that students may perform and the level of direct supervision required for each of them.

- Course/clerkship directors and department designee will stratify the types of student-patient interactions and clinical procedures that may be performed by medical students according to the potential risk incurred by the student and patient. The level of supervision required for each procedure must be adequate and appropriate for the potential level of risk.

- Course/clerkship directors or departmental designee are responsible for providing the list of procedures allowed by medical students to faculty physicians, resident physicians, and the students on each clinical service.

- A supervising physician may delegate some medical student teaching and supervising responsibilities to non-physician care providers after ensuring the non-physician providers are appropriately credentialed and working within the scope of their practice.

- Physician supervisors should provide students with proximate and constructive feedback related to problem areas that are encountered during direct patient care experiences.

5. **Student Clinical Work Hour Policy**

Background - Loma Linda University School of Medicine recognizes the importance of balance and wholeness in student’s lives. It is also imperative that students gain valuable clinical experience, which includes caring for patients during night and weekend hours. In addition to the educational value of caring for patients in these hours, it is also essential that students develop professionalism and altruism in learning to put patients’ needs ahead of their own. Part of professionalism is for students to develop personal habits (work, study, rest, etc.) that allow them to present themselves for duty prepared to learn and care for patients.

Student safety is of the utmost importance. Students who are too tired to drive home after working will be allowed to use a call room in the hospital to rest until they believe they are safe to drive home.
**Policy:** In general, students should not work more than interns and residents. Therefore the ACGME (Accreditation Council for Graduate Medical Education) residency work hour limitations will also apply to students as follows:

- Students will not work more than 80 hours per week when averaged over four weeks.
- Students will have one day in seven off, when averaged over four weeks.
- Students will either be held to the intern limitation of 16 hours maximum work shift, or the senior resident limitation of 24 hours maximum work shift, with an additional 4 hours allowed for handoff of care and educational activities. Clerkship educational committees will designate which of these standards apply to their rotation, and inform the students prior to beginning the rotation.
- Students should have 8 hours free of duty between work shifts.
- After a 24-hour shift, students should have 14 hours free of duty.

Work hours activities include patient care and all required educational activities. Studying, reading and academic preparation do not count towards the work hour maximums. Travel time to rotations does not count as work hours.

Clerkship directors are responsible for monitoring student work hours. Work hour compliance should be confirmed with students at the mid-rotation evaluation, and at the end of the clerkship. Students who believe that they are being asked to violate work hour limitations should first meet with the Clerkship Director. If the clerkship director is not available, or does not address the student’s concerns to their satisfaction, they should meet with the Associate Dean for Clinical Education or the Senior Associate Dean for Medical Education.

6. **Faculty Evaluation and Feedback**

A. An essential role of faculty members in medical education is to provide evaluation and feedback to learners. Giving effective feedback is essential to helping students learn. Students who receive regular feedback about their performance perform significantly better, develop better judgment, and learn faster than those who do not. Students appreciate feedback and feel that it as one of the most important qualities of a good preceptor, second only to clinical competence. Feedback focuses on providing information, with the goal of
improving whatever is being addressed. Effective feedback should be frequent, specific and timely and given in a climate of respect and mutual trust.

It is most imperative that students be given formative feedback regularly along the course of a rotation or course including mid-rotation feedback so that they have an opportunity to improve their performance before the final evaluation. Faculty should strive to provide direct observation of medical student activities in order to give optimal feedback and evaluation.

It is an important responsibility of each faculty member to complete course evaluations in an accurate, complete and timely fashion. Students and trainees deserve the feedback provided by evaluations. The LCME accrediting body requires that grades be completed in a timely fashion and delayed evaluations can hinder this process. Any questions about evaluations should be addressed to the clerkship, rotation or course coordinators or directors.

B. Faculty and other health care professionals who provide sensitive health, psychiatric or psychological care to medical students must not evaluate student academic performance or participate in decisions regarding student advancement and/or graduation. See policy below.

**Noninvolvement of Providers of Student Health Services in Student Assessment Policy**

On occasion medical students may receive healthcare treatment of a sensitive nature from a healthcare provider who also has a teaching and assessment role in the curriculum. It is the school of medicine’s responsibility to ensure that these individuals have no influence on the academic assessment or progress of the student they have treated.

1. Health professionals who provide psychiatric/psychological assessment or treatment, or other sensitive health services to medical students, will have no involvement in the academic assessment or promotion of the medical student receiving those services.

2. If a student is assigned to an educational environment where the supervising faculty member has previously provided mental health assessment or treatment, or other sensitive health care to the student, the faculty member must advise the course/clerkship director of a need to re-assign the student to a different evaluating supervisor. It is the responsibility of the course/clerkship director to make sure that faculty are aware of this policy.

3. If a student should be assigned to an educational environment where the supervising faculty member does not immediately recall having treated the student and/or has not initiated the steps in Number 2 (above), the student should request and will be granted an alternative assignment. The student
may go directly to the relevant curriculum director (i.e. course director, clerkship director) or to the office of medical student education to have the assignment changed.

4. A faculty mentor involved in the competency development or academic evaluation of a student cannot be a health care provider for a student they are mentoring.

5. A healthcare provider on the Academic Review Committee or on any committee that evaluates students (voting or nonvoting members) must recuse himself or herself from deliberations related to a student that he or she has treated.

6. Those who provide mental health services or other sensitive health care to students may lecture in a large group setting where the students may be present but cannot assign their grade or provide narrative feedback to them. They cannot be a small group facilitator or mentor for a student they have treated.

7. Those who care for students in the Student Health Center may lecture in a large group setting at LLUSM but cannot assign their grade or provide narrative feedback to them. They cannot be a small group facilitator or faculty mentor.

6. Standards of Conduct in Teacher-Learner Relationship
LLUSM values a climate of mutual respect within the teaching and learning environment and is committed to promoting an abuse free environment for all students, staff, volunteers, and physicians. In addition, LLUSM is committed to creating an educational environment in which students, staff, volunteers, and physicians may raise and resolve issues without fear of intimidation or retaliation. The School is dedicated to investigating all cases of abuse in a prompt, sensitive, confidential, and objective manner.

STUDENT MISTREATMENT POLICY
Loma Linda University School of Medicine seeks to educate ethical and proficient Christian physicians and scholars through instruction, example, and the pursuit of truth. In order to do this, the School of Medicine and its faculty are committed to the following fundamental values: compassion, integrity, excellence, freedom, justice, purity/self-control, and humility. These values may occasionally be formally taught by faculty; but more often they are learned informally by students through observation of models of professional behavior toward students, colleagues, and patients.

The development and nurturing of these values is enhanced by and based upon the presence of mutual respect between teacher and learner. The diversity of students, faculty, residents, and staff—combined with the
intensity of their interactions—may, however, lead to alleged, perceived, or real incidents of inappropriate behavior or mistreatment of students.

Examples of such mistreatment include verbal mistreatment\(^1\), physical mistreatment\(^2\), discrimination\(^3\), excessive or unreasonable time demands\(^4\), sexual harassment\(^5\), and the use of grading or other forms of assessment in a punitive manner. Such behavior by faculty or staff, or other behavior that is inimical to the development of mutual respect, is unacceptable.

In the history of medical education, it has not been uncommon for teachers, in an effort to motivate students to excellence, to publicly degrade or humiliate those whom they judge are inadequately prepared or behaving inappropriately. This practice is not acceptable at Loma Linda University. While teachers do have the responsibility to motivate and correct students, when correction of an individual is needed, this is usually best done in private, but always in a way that shows respect for him/her as a person.

An important part of the teaching of mutual respect among professionals is the perception of students as they observe faculty in their interactions with each other. Therefore, faculty should avoid inappropriate behavior or mistreatment of other professionals and staff. This includes the avoidance of derogatory remarks about or attitudes toward individual colleagues, services, or departments.

Students also learn professional behavior and demeanor by observing their teachers as they interact with patients. Such professional interactions should always be courteous and respectful. Respect for individuals includes, but is not limited to, such things as punctuality, thoughtfulness, mindfulness of personal space; as well as manner and mode of address, appropriately modest draping, tone and content of verbal interchanges, and body language. In addition, discussion of patients out of their hearing should continue to show the same degree of respect and should not include contemptuous, derogatory, judgmental, or demeaning remarks.

If a medical student expresses an unwillingness to participate in an aspect of training or patient care as a matter of conscience, that stance should be explored in a nonjudgmental manner to ensure that the teacher and student fully understand the issue. The student’s position on matters of conscience should be honored without academic or personal penalty, as long as it does not interfere with the welfare of the patient and the overall educational goals of Loma Linda University School of Medicine.

Any student who feels he/she may have been mistreated or treated in an unprofessional manner by residents, faculty or staff in violation of these
standards of behavior is encouraged to report their concerns to one of the
individuals below. Reports of unprofessional treatment should be made to the
School of Medicine Administration. Reports of sexual harassment or any
violation of the University’s Title IX policy should either be made to one of the
administrators listed below or directly to the LLU Title IX officer. Within the
School of Medicine, mistreatment can be reported to the following
administrators: the vice dean for academic affairs (Tamara Thomas, M.D.);
the senior associate dean for medical student education (Leonard Werner,
M.D.); the associate dean for clinical education (Tamara Shankel, M.D.); the
associate dean for student affairs (Henry Lamberton, Psy.D.); or the associate
dean for basic sciences and translational research (Penny Duerksen-Hughes,
Ph.D.). The Title IX officer may be contacted by calling Employee Relations at
(909) 651-4048 or directly at (909) 651-4079.

1 Verbal or nonverbal mistreatment—includes:
   a. shouting, hostility, profanity, or offensive gestures; and/or
   b. repeated or blatant conduct directed toward any person, which is intended to insult or stigmatize that person.

2 Physical mistreatment—including physical punishment such as hitting, slapping, pushing or kicking; the threat of
physical punishment; and intentionally or negligently placing another at risk of physical harm. 3 Discrimination—
includes disparate treatment based on gender, age, ethnicity, race, disability, or sexual orientation that stigmatizes or
degrades that person.

4 Unreasonable time demands—includes:
   a. requiring a student to perform personal services, such as shopping or babysitting; and/or
   b. requiring a student to perform menial tasks with the intent to humiliate the student.

5 Sexual harassment—see “Policy Prohibiting Sexual Misconduct and Discrimination on the Basis of Sex (Title IX)” in
the University Policy section of the Student Handbook which is available online. If the mistreatment involves sexual
harassment, the procedures of this policy must be followed.

Confidentiality
The University shall protect the privacy of individuals involved in a report
of mistreatment to the extent possible. Some level of disclosure may be
necessary to ensure a complete and fair resolution. Disclosure may be made
only on a need-to-know basis. In keeping with ideals of professionalism and
courtesy, the student is advised to refrain from discussing the complaint
with individuals not directly involved.

Retaliation prohibited
All reasonable action will be taken to assure no retaliation against the
student, witnesses, or anyone cooperating with the investigation for their
cooperation.

Specific actions that attending physicians, staff and residents can take to ensure
an abuse-free environment for medical students and other trainees include:

- Ensure that all members of the health care team know their roles and
expectations and students know the appropriate mechanisms by which they
can report unprofessional behavior. Create an environment where incidents of abuse are acknowledged and discussed rather than ignored.

- Direct house staff, faculty physicians, or staff to identify racial, sexist, or gender jokes and comments as inappropriate and unprofessional. Students should be supported when they speak up to complain about such comments or actions.

- Welcome students of all genders and ethnicity to your service and create a comfortable environment for them.

- Welcome students as learners and realize that learners are nervous and vulnerable when they are beginning to learn something new. Help break the cycle of “acculturation” that has persisted in the past, which is exemplified by such statements as, “When I was in medical school, I was treated terribly and you should expect the same.”

- All health care team members should speak respectfully and honestly about patients whether on rounds or in more private settings. Help the students learn to be respectful in the way they talk about patients in all settings.

- Treat residents and interns kindly and professionally to effectively model the professional and positive way that they will treat students.

- Work professionally with students of all ethnic and gender groups and avoid discriminatory remarks that would make them uncomfortable.

- Include opportunities at regularly scheduled meetings for residents to communicate and exchange information on their working environment and their educational programs.

Excerpted from Suggestions for creating an abuse free environment Ohio State medical school faculty teaching responsibilities.

7. Romantic & Sexual Relationships and Sexual Harassment Policy

The School of Medicine adheres to the LLU Sexual Harassment Policy. Excerpts are presented below; the policy in its entirety is available at the following website:

“Sexual harassment and illegal discrimination are reprehensible and will not be tolerated by Loma Linda University. It subverts the mission of the University and threatens the careers, educational experience, and well-being of students, employees and patients. Any employee found to have acted in violation of this
policy shall be subject to appropriate disciplinary action -- including warnings, reprimands, suspensions and/or dismissal.”

POLICY GUIDELINES
Definition: For purposes of the LLU policy, sexual harassment includes, but is not limited to, making unwanted sexual advances and requests for sexual favors where:

• submission to such conduct is made an explicit or implicit term or condition of employment;
• submission to or rejection of such conduct by an individual is made as the basis for employment decisions affecting such individuals;
• such conduct has the purpose or effect of substantially interfering with an individual’s employment performance or creating an intimidating, hostile or offensive working environment

Any behavior in the University community creating an unacceptable educational, working or clinical environment that is contrary to the mission of the University is prohibited.

Examples of Sexual Harassment: Sexual harassment may encompass perceived sexual attention that is unwanted or inappropriate. Examples of the verbal or physical conduct prohibited by this policy include, but are not limited to:

• Physical assault

• Inappropriate or unwanted touching

• Direct or implied threats that submission to sexual advances will be a condition of employment, raises, promotions, etc.

• Direct or subtle propositions of a sexual nature

• Dating, requesting dates, or entering into a romantic relationship when one employee, or faculty, is in a position of power over the other or is able to exert influence over the other employee’s or student’s conditions of employment or academic status, e.g., no supervisor may date or enter into a romantic relationship with a person under his/her supervision.

• A pattern of conduct that would discomfort and/or humiliate another individual -- including, but not limited to: unnecessary touching, remarks
of a sexual nature about a person’s clothing or body, remarks about sexual activity or speculations about previous sexual experiences, visual conduct including leering, sexual gestures or the display of sexually suggestive objects, pictures, language, cartoons or jokes.

- Use of electronic means, including the Internet and the email system, to transmit, communicate, or receive sexually suggestive, pornographic or sexually explicit pictures, messages or materials.

(See LLU Faculty Handbook 5.3.7)

C. Statement on romantic/sexual relationships

Individuals in positions of power must be aware that romantic or sexual relationships with students pose both a risk for exploitation and a legal risk to both the individual and the institution. There are risks in any romantic relationship between individuals in inherently unequal positions of power. Such relationships can undermine the atmosphere of trust essential to the educational process and the employment relationship. They may also be less consensual than the individual in a position of power believes.

LLU wishes to promote the ethical and efficient operation of its academic programs and business. In this setting, the University wishes to avoid misunderstandings, complaints of favoritism, other problems of supervision, security and morale, and possible claims of sexual harassment among its students, staff, and faculty. For these reasons:

- A faculty member is prohibited from pursuing a romantic relationship with or dating a student who is registered in any course or program or who is involved in any other academic activity in which the faculty member is responsible as an instructor, coordinator, mentor or committee member, for the duration of such course, program, or other academic activity.

- A staff member is prohibited from pursuing a romantic relationship with or dating a student who is registered in any course or program or who is involved in any other academic activity in which the staff member participates in any direct supporting role, for the duration of such course, program, or other academic activity.

- A University administrator or supervisor is prohibited from pursuing a romantic relationship with or dating any employee of the University whom they supervise for the duration of the supervision.

For the purposes of this policy, ‘romantic relationship’ is defined as a mutually desired courting activity between two individuals. ‘Dating’ is defined as a romantic social engagement arranged by personal invitation between the two
individuals involved or arranged by a third party. *(see LLU Faculty Handbook 5.3.6)*

D. Confidentiality and non-retaliation

**Confidentiality:** LLU shall protect the privacy of individuals involved in a report of sexual misconduct to the extent required by law and University policy. Anyone requesting confidentiality shall be informed that complete and total confidentiality may not be possible and that, depending on the nature of the alleged misconduct, some level of disclosure may be required, especially in situations alleging sexual violence. Disclosure may be made only on a need-to-know basis.

The Family Educational Rights and Privacy Act of 1974 (FERPA) permits the University to disclose the outcome of any student conduct proceedings to the person filing the complaint, without prior written consent, when the disclosure is to the victim of an alleged perpetrator of a crime of violence—including physical sexual misconduct. FERPA also permits the University to notify the student filing the complaint of any sanctions assigned to another student that may affect him or her.

**Retaliation prohibited:** All reasonable action will be taken to prevent retaliation against the complainant, witnesses or anyone cooperating with the investigation.

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8. **Professionalism and Social Networking**

A. **Professionalism**

As servants of a trustworthy God, we understand professionalism to be a set of beliefs, attitudes, and behaviors that enhance trustworthiness of physicians individually and collectively. Successful Medicine Program students consistently demonstrate personal and professional attributes and societal responsibilities that perpetuate trust by others (including patients, teachers, colleagues, members of the health-care team, and society).

B. **Breaches of Conduct and Professionalism**

Cases of student misconduct, including violations of school or University policies or breaches of professional behavior, are dealt with and resolved at various administrative levels, depending on the nature and seriousness of the misconduct and whether or not the misconduct represents a pattern of behavior. Where specific forms of misconduct are addressed by specific policies, the procedures outlined in the policies shall be followed.

Cases of student misconduct or breaches of professionalism that are identified by faculty member should be reported to the clerkship course director or the Office of the Dean and may be referred to the School of Medicine Professionalism Committee. The Professionalism Committee shall review reports of inappropriate behavior and may ask a student to meet with the members to
address questions and concerns. The committee may establish and require specific remediation—including counseling, supervision, or professional evaluation. In situations where the committee determines that a student’s behavior may merit a modification of the student’s academic program or suspension or dismissal, the committee will refer the matter, along with its findings and recommendations, to the LLUSM Academic Review Committee for further action.

C. Social Networking: Loma Linda University

Social networking increases our ability to interact with each other in positive ways. However, the ability of the internet to instantly reach millions of people, both within and outside of the medical profession makes it imperative that we take safeguards to insure that social networking does not erode the values of the medical profession or damage the reputation of the profession or the health system.

SOCIAL MEDIA POLICY: Loma Linda University Health (LLUH) encourages its employees, medical staff, faculty, and students (“individuals”) to post responsibly and exchange opinions and ideas in public forums in a way that is professional, constructive, and in compliance with all LLUH policies and codes of conduct. Accordingly, this policy is intended to set forth the terms of LLUH policy regarding use of various public media forums, e.g., radio/television appearances, newspaper editorials, conference presentations; as well as blogs, discussion forums, and other interactive websites.

This policy includes provisions for individuals creating, posting on, commenting on, or uploading to any Internet website, such as media sites, chat rooms, bulletin boards, newsgroups, discussion groups, e-mail groups, personal websites, video-sharing sites, picture-sharing sites, dating sites, and social-networking sites—e.g., MySpace, Facebook, Twitter, etc., whether or not such sites are set to private.

The policy entitled “Participation in Social Media and Public Forums” can be found in the Administrative Handbook under code I-24. Students will particularly want to be aware of the sections of the policy that are excerpted in the following.

Specific prohibitions

1. Individuals shall not allow the informality of online public forums to lapse into rash postings, careless behavior, or improper comments; and they shall be expected to comment with respect.

2. Individuals shall not post information that in any way discloses private or confidential information about employees, students, or patients of LLUH.

3. Individuals shall not post information that in any way discloses private, confidential, or proprietary information; or trade secrets of LLUH, its
employees, or any third party that has disclosed information to LLUH; or any other information of LLUH protected by its policies.

Individuals shall use caution to not allow the informality of online public forums to lapse into rash postings, careless behavior, or improper comments, and shall be expected to comment with respect.

1. Individuals shall assume that all comments made in Public Forums will be made widely available at some point and attributed back to them.

2. Individuals shall not engage in postings or comments that may harm or tarnish the image, reputation, and/or goodwill of LLUH or any of its student, employees, patients, or clients.

**Online public forums—general**

Individuals shall be prohibited from using any LLUH logo or from adding a link from an external Web page into an LLUH website in a way that would imply endorsement by LLUH.

**Responsibility to report**

Any inappropriate blogs and/or postings that violate the provisions of this policy shall be reported to LLUH management/administration immediately. Questions and concerns shall be directed to the employee’s supervisor, manager, and/or Human Resources Management Department. Failure to comply with LLUH policies regarding blogging and online posting shall be considered grounds for disciplinary action, including immediate termination.

**9. Family Educational Rights and Privacy Act**

Faculty should be aware of the Family Educational Rights and Privacy Act (FERPA). Medical students are protected by FERPA - a set of laws enacted in 1974 – which guarantees students the right to review and inspect their educational records, to seek to amend educational records and to have some control over the disclosure of educational record information. Grades should not be posted publicly with student names or other information, which would allow a third party to identify the student. Faculty should not give out student personal information or grades to third parties without the express consent of the student.

More detailed information about policies regarding privacy and release of student educational records from the Office of the University Registrar is available at:

**10. Student Health and Safety**

**Medical Student Access to Health Care**

Busy health professionals sometimes find it difficult to balance work and personal responsibilities and needs. However, the LLUSM directs that faculty,
staff and trainees be permitted and enabled to attend to important medical and personal needs to maintain health and well-being. While medical students are encouraged to use unscheduled time for personal needs when possible, some medical, dental, and other personal issues cannot be resolved except during regular business hours. Please refer students to Student Handbook for policy. Student healthcare resources can be found at http://www.llu.edu/central/studenthealth/index.page?

The policy for Blood and Body Fluid Exposure from the LLUSM Medical Student Handbook includes:
http://medicine.llu.edu/current-students/student-affairs/student-handbook-and-policies

A. Exposure Management

1. Significant exposure (as defined in Attachment I) to communicable disease will be monitored in compliance with the recommended screening and prophylactic practice of Loma Linda University Medical Center.

2. If an accidental occupational exposure occurs on campus, the incident should be reported to the attending physician and/or clerkship director. The student must be referred to the Emergency Department immediately for medical evaluation. The student needs to identify the injury and him/herself as a LLU student. Such exposure should also be reported by the student to employee health as soon as possible. Employee health must also be given a copy of the post--exposure evaluation and treatment records. It is the student’s responsibility to ensure that this occurs.

3. If an accidental exposure occurs off campus, the incident should be reported to the responsible attending physician who will work with agency personnel for appropriate emergency care. Most affiliated hospitals provide this care at either the Emergency Room or employee health. A report of the incident and source patient results must be sent to LLU employee health for appropriate student follow-up on campus. It is the student’s responsibility to ensure that this happens.

B. Blood borne Pathogen Exposure

1. Once exposed each student will be monitored according to University Employee Health Policy, based upon current national recommendations.

2. Confidential counseling in regards to testing will be available.

3. Testing and health records will be maintained by Employee Health Service of Loma Linda University Medical Center. Testing results will be kept confidential.

4. If infected, reasonable accommodations will be made with the student’s assignments based on the broader context of the institutional health and educational program, including the assessment of the provider to patient
risks and the individual’s physical and psychological status. See Attachment II.

Other types of pathogen exposure will follow the appropriate guidelines from the Center for Disease Control.

C. Suspected Student Substance Abuse

As stated in its motto, “to make man whole,” Loma Linda University is committed to providing a learning environment conducive to the fullest possible human development. The University holds that a lifestyle that is free of alcohol, tobacco, and recreational/illegal drugs is essential for achieving this goal. University policy is that all students are expected to refrain from the use of tobacco, alcohol, and other recreational or unlawful drugs during the period of their enrollment at the University. Reasons for this policy include evidence that even small amounts of alcohol retard response times and can cloud judgment, and the fact that a high percentage of accidents and crimes (including crimes of victimization and abuse) occur while the perpetrators are under the influence of alcohol or drugs. In addition, available data indicate that 14 percent of individuals who choose to use alcohol will, at some point, become problem drinkers. This policy is consistent with the beliefs and teachings of the Seventh-day Adventist Church that promote a healthy lifestyle. Students are notified of the University’s abstinence policy during the application process and are responsible for complying with this policy while they are enrolled in the University. Failure to comply with this policy will result in discipline up to and including dismissal. LLU may require drug testing of students. If you have concerns about a student, please contact LLUSM Office of Student Affairs who will be involved in arranging for assessment, treatment, and/or relapse prevention.

11. Educational Support and Teaching

There are many resources for faculty to assist in the provision of support to students and the development of faculty teaching and education skills.

LLUSM Medical Education website: [http://medicine.llu.edu/education](http://medicine.llu.edu/education)

Faculty can contact any of the administrative staff for the medical student educational mission including:

Leonard Werner, M.D. – Senior Associate Dean for Medical Education, 909-558-4255
Tamara Shankel, M.D.— Associate Dean for Clinical Education, 909-558-4271
Lynda Daniel-Underwood, M.D. – Associate Dean for Program Development and Evaluation, 909-558-4466
Tamara Thomas, M.D. - Vice Dean for Academic Affairs, 909-558-4766
Faculty should be aware of the School of Medicine support staff for medical students and feel free to contact them for advice and assistance with student issues. Any urgent or serious concerns regarding student professional behavior or health should be addressed immediately to the clerkship/course director or directly to Dr. Henry Lamberton, Associate Dean for Student Affairs, 909-558-4630, hlamberton@llu.edu
Office of Student Affairs. http://medicine.llu.edu/current-students/student-affairs

LLUSM Student Affairs is an excellent resource for faculty for assistance with various student issues. Faculty may wish to refer students to Henry Lamberton, PhD Associate Dean for Student Affairs, for contact with questions:

Medical Student Personal Counseling
- Resources are available for students help with personal issues such as anxiety, depression, and adjustment to traumatic experiences.
- Please see Student Affairs website for resources: http://medicine.llu.edu/current-students/student-affairs/student-counseling-resources

Medical Student Academic Counseling
- Ingrid Wahjudi, M.D. (iwahjudi@llu.edu) is the academic counselor and can work with students on problems with exam preparation and test-taking skills, organization, time management, etc.

- Academic resources can be found at the following website: http://medicine.llu.edu/education/medical-student-education/academic-resources

Career Advising
- Danny Wongworawat, M.D. (dwongworawat@llu.edu) is the Assistant Dean for Career Advisement. He can help with career guidance as well as provide information to faculty who are writing letters of recommendation for medical students applying for residency positions.
- Career Advising Website http://medicine.llu.edu/education/medical-student-education/career-advising

- The AAMC Careers in Medicine (CIM) website offers resources to help medical students explore career options and information to help faculty advisors. (www.aamc.org/students/medstudents/cim)

LLUSM Office of Medical Education
This office houses the staff members who support the educational mission and directly administrate each course or rotation in the medical school curriculum.
They are a great source of information regarding educational objectives, methods, evaluation and policies.
http://medicine.llu.edu/education/medical-student-education

Faculty Development Website:
http://medicine.llu.edu/faculty/faculty-development

The Center for Education and Scholarship has many resources to assist faculty with development of their teaching skills. Especially helpful are the Faculty Development Program and the Educational Resources at this website.

**LLU University-wide Student Learning Outcomes (SLOs) and Performance Indicators**

Outcome 1: Students understand and apply the University philosophy of wholeness in their personal and professional lives.

Outcome 2: Students understand the importance of integrating the University’s Christ-centered values in their personal and professional lives.

Outcome 3: Students demonstrate critical thinking.

Outcome 4: Students develop a commitment to discovery and lifelong learning.

Outcome 5: Students demonstrate effective communication skills in English.

Outcome 6: Students demonstrate effective use of technology appropriate to the discipline.

Outcome 7: Students understand the importance of embracing and serving a diverse world.

Outcome 8: Students demonstrate the importance of collaborating with others within and across disciplines.