Committee on Learning Environment Oversight (CLEO) – Medical Students
Frequently Asked Questions

Q: What is the Committee on Learning Environment Oversight (CLEO)?
A: The Committee on Learning Environment Oversight (CLEO) is responsible for the review of student concerns regarding the learning environment and the development of action plans in response to episodes of alleged medical student mistreatment to prevent future occurrences.

Q: Who participates in CLEO meetings?
A: The committee is composed of faculty, students, and administration that are dedicated to promoting a positive learning environment with a strong focus on specific and timely feedback and education. There are four medical students that include representation from each class.

Q: How often does the committee meet?
A: The committee has a reoccurring monthly meeting scheduled. If needed, ad-hoc meetings will be scheduled to address high volumes of mistreatment reports.

Q: What does the committee review at meetings?
A: The committee reviews Mistreatment Incident Reporting Forms (MIRF) and end-of-course evaluation comments that are submitted through the learning environment open text question.

Q: Are Mistreatment Incident Reporting Forms (MIRF) anonymous?
A: There is an option to submit a MIRF anonymously for reporters that prefer that option. The MIRF is not linked to mednet accounts to allow for anonymous submissions for those that choose this option. If the reporter includes their name and contact information, the reporter's name will remain confidential with the CLEO Co-Chairs and CLEO staff. As mandated reporters, an exception would be when reports need to be referred to Title IX or DPO.

Q: Can the status of a MIRF be tracked even when submitting anonymously?
A: Yes, the Mistreatment Incident Reporting Form (MIRF) Status dashboard allows for tracking of all cases. When submitting a MIRF, the reporter is provided with a Case ID # at the start of the form and at submission. By saving the Case ID #, the reporter is able to track the status on the dashboard.
Q: What do each of the statuses on the Mistreatment Incident Reporting Form (MIRF) Status dashboard mean?

A: The following are definitions for each of the statuses on the MIRF Status dashboard:

**MIRF Submitted:** The reporter has submitted a MIRF regarding an incident that negatively impacted the learning environment.

**Reviewed and Triaged by CLEO Co-Chairs:** The MIRF has been triaged by the CLEO Co-Chairs and CLEO staff member within 72 hours of submission. If needed, the MIRF will be referred to the appropriate entities (Title IX or DPO) for further review during the triaging process. If needed, interim measures will be implemented to provide the medical student with a safe learning environment.

**Scheduled to be Reviewed during next CLEO Meeting:** The MIRF has been added to the CLEO reoccurring monthly meeting, which is scheduled for the second week of each month. If there is a high volume of MIRFs, the committee will have an ad-hoc meeting.

**Intervention Plan Developed by CLEO:** The committee has reviewed the MIRF and assigned a triage level and determined an action plan to address the learning environment concerns.

**Implementing Intervention Plan by CLEO Co-Chairs:** CLEO Co-Chairs will contact the appropriate stakeholders to address the learning environment concerns. This may include but is not limited to: providing feedback to the individual reported; providing feedback to residency or fellowship Program Director; engaging departmental leadership and if needed, developing a remediation plan; reviewing clinical site, faculty or trainee evaluations to determine whether there are trends; and monitoring faculty or trainees for a designated period of time in collaboration with course/clerkship leadership and the Educational Measurement Unit.

**Closed:** CLEO leadership has confirmed that the action plan developed by the committee has been fully executed. If there was a request for continued monitoring, the case will not be categorized as “Closed” until that monitoring period has been fulfilled.

Q: What are the steps taken by the committee after a MIRF is submitted?

A: The following steps are taken once a MIRF is submitted:

1) The MIRF will be triaged by the CLEO Co-Chairs and CLEO staff member within 72 hours of submission.
   a. If needed, the MIRF will be referred to the appropriate entities (Title IX or DPO) for further review during the triaging process.
   b. If needed, interim measures will be implemented to provide the medical student with a safe learning environment.

2) The MIRF will be added to the next monthly CLEO meeting for review.

3) Prior to committee meetings, all members are provided with a summary of the case along with a redacted version of the MIRF. Any identifying information about the reporter and the individual being reported is redacted.

4) During committee meetings, the case is presented by the CLEO Co-Chairs and discussion occurs to determine an action plan to address the concerns.
5) The CLEO Co-Chairs will implement the action plan as determined by the committee.
6) All information regarding the case and actions taken are entered into the database for tracking purposes.

Q: How are mistreatment incidents reported for those that occur at an affiliate site?
A: All incidents of mistreatment that occur involving a DGSOM medical student should be formally reported through the Mistreatment Incident Reporting Form (MIRF). Regardless of the site, the committee will partner with the appropriate stakeholders to address concerns at affiliate sites.

Q: How does the committee determine action plans?
A: The committee assigns a triage level to all cases of mistreatment on a 0-3 scale. The following are action plans determined that are assigned based on the triage level:

Level 0: The incident was determined to not have met the definition of the AAMC for mistreatment. Nonetheless, the committee recognizes that the behavior had a negative impact on the learning environment and/or reporter, which requires an action. The CLEO Co-Chairs will provide the faculty member with a letter outlining the impact that the reported behavior created on the learning environment. If the individual reported is a resident and/or fellow, the residency/fellowship program director is tasked with providing the trainee with feedback.

Level 1: The incident was determined to have met the definition of the AAMC for mistreatment. The incident was not deemed to be egregious and was the first reported incident for the individual reported. The CLEO Co-Chairs will arrange a meeting with the faculty member to review a redacted version of the MIRF and to provide feedback. If the individual reported is a resident and/or fellow, the residency/fellowship program director is tasked with providing the trainee with feedback.

Level 2: The incident was determined to have met the definition of the AAMC for mistreatment. The incident was of higher severity than a Level 1 or was a repeat incident for the individual reported. The CLEO Co-Chairs will communicate with the appropriate departmental leadership to request feedback and an appropriate action plan be provided to the faculty member or trainee.

Level 3: The incident was determined to have met the definition of the AAMC for mistreatment. The incident was egregious or there is an observed pattern of mistreatment. The CLEO Co-Chairs will contact the Vice Dean for Faculty and Department Chair to notify them of the incident. Leadership is responsible for developing a remediation plan to address concerns.

Q: What types of incidents should be reported through the MIRF?
A: We encourage students to submit any incident they perceive shows lack of respect for the dignity of others and negatively impacts the learning environment. Examples would include abuse, psychological cruelty, discrimination and harassment. It is best to report if you are not sure. The committee reviews and addresses all concerns.

Revised February 7, 2022
Q: How soon after the incident should a MIRF be submitted?
A: We encourage students to submit a MIRF as soon as possible, preferably the day of the incident. By doing so, CLEO leadership is able to triage the MIRF and allow for interim measures to be implemented, if needed. CLEO Co-Chairs are also able to notify course/clerkship leadership to monitor for any possibility of retaliation that might occur following the MIRF submission.

Q: What steps are taken to assess for retaliation?
A: DGSOM has zero tolerance for retaliation and any form of retaliation is considered an egregious form of mistreatment. When a medical student includes their name on a MIRF, CLEO leadership works with the Educational Measurement Unit to closely monitor student performance evaluations for any suggestion of retaliation. Likewise, if the student will continue on the same rotation, CLEO leadership will work with course/clerkship leadership to closely observe for any possible retaliatory behavior. If a medical student suspects retaliation, we encourage them to submit a MIRF.

Q: What is the difference between reporting via a MIRF vs. via the end-of-clerkship evaluations on myCourses?
A: Students should report incidents of mistreatment using the MIRF. Feedback on teaching effectiveness should be reported on end-of-clerkship evaluations. Further, by submitting an incident through the MIRF, students are provided with the options of reporting as an identified or anonymous reporter, versus the end-of-clerkship evaluations which are only anonymous. Additionally, students are able to follow-up on a MIRF whether submitted anonymously or not. MIRFs are reviewed in real time and allow for immediate actions, whereas course evaluations are only reviewed at the conclusion of the evaluation period. Regardless, any comments submitted on evaluations in the learning environment open text field are reviewed by both CLEO members and course/clerkship leadership.