Year 3 Public Description of Work for Action Collaborative on Preventing Sexual Harassment in Higher Education

Icahn School of Medicine at Mount Sinai

The Patient Advocacy Reporting System (PARS) and Co-worker ObservationReporting System (CORS)

Relevant Rubric Area(s):

- Improved Policies
- Addressing Gender Harassment and Other Harmful Behaviors
- Implementing Restorative or Transformative Justice and Alternative Means of Resolutions

Description of Work:

In the summer of 2021, the Committee on Professionalism in Healthcare (COPHE) launched the Patient Advocacy Reporting Systems (PARS) and Co-Worker Observation Reporting System (CORS) across the Mount Sinai Health System (MSHS). MSHS built and launched these initiatives in partnership with Vanderbilt University's Center for Patient and Professional Advocacy (CPPA); PARS and CORS are part of a formal program to increase professional accountability and utilize a systematic process to detect and address unacceptable behaviors.

PARS and CORS are evidence-based tools that CPPA developed and will provide MSHS the opportunity to adopt a data-driven approach to accountability of professional behaviors. CPPA has decades of experience conducting the program in almost 200 hospitals/health systems across the country, and have garnered strong evidence for their intervention approach.

COPHE's process for these reporting systems follows the following steps: 1) A faculty, student or staff member submit a report to one of MSHS' centralized reporting portals (e.g., The Compliance Hotline, SafetyNet, Student Mistreatment Portal, OB Code of Professionalism) where a proprietary algorithm makes determinations on next steps. 2) The Vanderbilt-driven algorithm codes the report and MSHS receives the report. 3) internal COPHE Co-Chair reviews the report and either: a) forwards to a messenger trained in the evidence-based intervention strategies or b) huddles with key stakeholders to determine the appropriate next steps. If the co-chair forwards the report to a messenger, the messenger hosts the "Cup of Coffee" intervention. To-date, there are 85 trained peer messengers from across the system, and another 25 will receive training at the end of June, 2022.

The "Cup of Coffee" intervention has strong evidence indicating that professionals at high-risk for colleague and patient complaints most often self-regulate after such an awareness intervention. In this intervention, peer messengers have conversations that are confidential, collegial, non-defensive, and hosted in a private space. These conversations serve as an "early warning" and there is the same standard of behavior across system. MSHS asks all leaders to encourage reporting and has spread the word about the initiative through a cascading system of presentations, senior leadership meetings, grand rounds for the school and system, broadcast announcements to the entire Mount Sinai community, and feature pieces in our Quality and Patient Safety Newsletter. It is important to note that COPHE does not replace an investigation when warranted; COPHE is initial and supplemental and the

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"Cup of Coffee" intervention is when there is a single, non-egregious concern. If there is an apparent pattern to the behavior or the pattern persists, other interventions are taken as determined in coordination with HR.

Researchers at Vanderbilt University, under the leadership of Gerald Hickson, have rigorously evaluated the algorithm and systems in play here. The article *Using Coworker Observations to Promote Accountability for Disrespectful and Unsafe Behaviors by Physicians and Advanced Practice Professionals* published in a 2016 issue of The Joint Commission Journal on Quality and Patient Safety speaks in more depth to both the structure of the process and the ways it is impactful.

Website for further information (if applicable): <u>https://icahn.mssm.edu/about/faculty-</u>

resources/institutional-resources/council/professionalism-committee

and

https://icahn.mssm.edu/education/students/handbook-policies/misconduct-policy

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