

February 12, 2008

MEMORANDUM

TO: William Montgomery
Chair, University Senate

FROM: Boden Sandstrom
Chair, Senate Student Conduct Committee

SUBJECT: Report on charge by the Senate Executive Committee to review Proposal on Discipline and Calls for Emergency Medical Service (Senate document Number 07-08-20)

The Senate Executive Committee charged the Student Conduct Committee to review a request from Anastacia Cosner for a "Senate review of disciplinary policies that apply to students who call for Emergency Medical Services for a drug or alcohol related illness or overdose."

The Student Conduct Committee (SCC) did extensive research on this subject by reading articles and surveys on medical amnesty policies (MAP) and soliciting opinions on MAP from the members of the University Community who would be knowledgeable about the current practices on campus and the possible impacts of such a change in policy. The SCC held a three-hour meeting on January 24, 2008 to discuss the wealth of information we gathered and analyzed. As a result of this meeting, we passed the following motions:

Motion #1:

It was moved that the Student Conduct Committee not recommend a change to the Code of Student Conduct at this time.

This motion was carried unanimously.

Motion #2:

The Student Conduct Committee recommends that the Senate Executive Committee:

- ascertain which recommendations of the Alcohol Task Force* have been implemented to date
- conduct or work with the Alcohol Coalition to conduct a survey to determine students' awareness of, and reaction to, suspected alcohol poisoning
- investigate the feasibility of an anonymous campus "hot-line" for reporting suspected alcohol poisoning
- develop or work with relevant campus or student groups to develop an educational tool such as a "business card" or magnet containing relevant information on the signs of alcohol poisoning and appropriate sources of help for distribution during the upcoming academic orientation period (Fall 2008).
- examine the appropriateness of current penalties for alcohol violations imposed by Resident Life on residents of University-based housing.

*for clarification purposes (University of Maryland Alcohol Task Force Final Report March 2004)

This motion was carried by a majority.

We are not recommending a change in the Student Conduct Code at this time for the following reasons:

First, the SCC feels strongly that it is premature to institute a Medical Amnesty Policy by changing the Student Conduct Code due to lack of sufficient information and data. The question of what students do or do not do in regards to calling for help in a drug or alcohol emergency is, at the present, under-documented. The research, available to date, however, does reveal one important fact: education has the largest impact on students' willingness to call for help in such situations. There was also a consensus that, because of the differences in alcohol poisoning and drug overdoses and their related penalties, any MAP deliberations should consider them separately. On and off campus policies for these two concepts would need to be considered separately as well.

Second, we spent a great deal of time collecting data and analyzing data. Perhaps one of the most critical outcomes of our research was that we learned that we were not qualified to recommend solutions at this time. Design and implementation of a MAP need to involve multiple stakeholders - students, staff in Greek and resident life, campus police, on- and off-campus healthcare providers, the University of Legal Affairs, members of the surrounding community, and off-campus local, state and federal law enforcement agencies. However, we discovered that the campus has already done much research on these issues and continues to do so. We would like to direct you to the work of the current UM Alcohol Coalition, which is considering a MAP as well as additional ways to better educate the University community, and the past reports of University of Maryland Alcohol Task Force Final Report (March 2004) and Report to the University of Maryland Board of Regents Summary of Alcohol and Substance Abuse Prevention Programs from the University of Maryland, College Park (February 2006).

Third, we discovered that Fraternity and Sorority Life, Resident Life and Office of Student Conduct practice a progressive disciplinary process that takes into account violation severity, mitigating or aggravating circumstances, and past disciplinary offenses while agreeing that education is a key component of the process. While not directly related to the SEC charge, the SCC recommends that Resident Life policies be examined to make sure that they are consistent with those of the Office of Judicial Programs, etc. and that they contain an educational component. The SEC may wish to consider referring this matter to the Directors of Student Conduct and Resident Life for further consideration. In contrast, however, there are no statistical data that indicate the penalties for reporting medical emergencies are unduly severe or act as a deterrent from seeking medical assistance.

Fourth, J. Terrance Roach, Chief Counsel for the University, pointed out that the "Code of Student Conduct is a Board of Regents policy, not a campus policy over which the President has control. Only the BOR has the authority to make substantive changes to it. For that reasons, it is important that any proposal presented by the President to the

Regents be supported by careful research convincingly demonstrating the need for change.” (Roach, J. Terrance. Email to the author. 20 Dec. 2007.)

Fifth, the SCC reviewed a recently released national survey conducted by the University of Virginia examining MAPs at colleges and universities nationwide. Eric Hoffman, co-chair of the UM Alcohol Coalition and Coordinator of Campus Alcohol Programs at the University forwarded these results to the SCC. The following data are from his summary. Limitations of the study included a small sample size (61 institutions) and an inherent bias in that most responders either have a MAP in place or are considering one. Only 4 of the 17 institutions with enrollment over 12,000 students were public institutions (such as UM). Approximately 50% of institutions require an educational component for students when using the policy and a follow-up education class following infractions. The survey results indicate mixed results on the perceived effectiveness of MAP policies and the difficulty of getting all campus constituents on board. For more information see:

Survey Results

http://www.surveymonkey.com/sr.aspx?sm=4kAmd_2f_2fe_2bHy40n0Nz_2bkOzPB2eGU799kBJK_2bXm6Vopw_3d

Comparison of the responses of Private and Public institutions and a summary of open-ended responses

<http://www.virginia.edu/case/about/documents/masummary.pdf>

Sixth, the SCC also read a major report on the outcome of a MAP at Cornell University in 2002. The report indicated that there was both an increase in calls to emergency medical services and hospital emergency room visits for acute alcohol intoxication. However, the MAP developed at Cornell is a protocol not a change to the Cornell Code of Conduct and education is a major component of the MAP.

(Lewis, Deborah K. and Marchell, Timothy C. “Safety First: A Medical Amnesty Approach to Alcohol Poisoning at a U.S. University. International Journal of Drug Policy 7 (2006). <<http://www.sciencedirect.com>>)

In conclusion our extensive research on this topic has shown that there is insufficient data both for the UM Community and at comparable institutions to warrant the recommendation of a change to the UM Code of Student Conduct. Rather, we believe the best course of action is to concentrate on education and information dissemination about alcohol poisoning. Therefore, in Motion #2, the SCC recommends that the SEC work with the UM Alcohol Coalition to conduct a survey to determine students' awareness of, and reaction to, suspected alcohol poisoning. We also recommend an emphasis on creative ways to get information to the students about alcohol poisoning, such as establishing an anonymous campus "hot-line" and work with relevant campus or student groups to develop an educational tool such as a "business card" or magnet containing relevant information. The Committee strongly recommends a deadline of September 2, 2008 for survey completion and distribution of an educational tool. The SCC also encourages that the SEC promote collaboration with the existing components of the UM campus who have expertise in the arenas of alcohol use and research on a MAP and to see that they get the necessary resources to continue this work.