1. **Definition**

   A. A “grievance” is defined as any controversy or claim arising out of an alleged violation of a stated Family Medicine Residency Program policy/procedure, excluding: evaluation of academic or clinical performance, evaluation of professional behavior, and decisions regarding re-appointment based upon failure to attain the educational objectives or requirements of the program. Appeals related to the academic matters are covered under the Academic Action Review Policy.

2. **Principles**

   A. The grievance procedure is intended to be an informal process to resolve disagreements internally and is not intended to be an adversarial forum. At each step, residents and Family Medicine Program faculty/administration are encouraged to resolve differences through discussion and negotiation. However, the procedure as set forth here provides for those instances in which outside assistance is needed for resolving conflict.
   
   B. Grievances may be filed by individual residents or by groups of residents.
   
   C. Grievances relate to violations of stated program policies. No grievance will be filed under this policy that petitions for a change in program policy.
   
   D. Throughout the grievance procedure, another resident or Harrison Medical Center staff employee, who shall be identified as an “associate,” may accompany the aggrieved resident.
   
   E. The resident may confer with an associate during proceedings; however, the associate may not actively participate or present at the hearing.
   
   F. Attorney representatives may not attend the grievance proceedings for either party.
   
   G. The resident(s) must initially file a grievance within the current academic year (July 1 to June 30) or within 90 calendar days after the resident knew or should have known of the act or omission upon which the grievance is based, whichever time period is longer.
   
   H. Interpretation of any aspect of this policy and procedure will be the responsibility of the Chair of the Graduate Medical Education Committee (GMEC), whose decision shall be final.

3. **Procedures**

   A. **Family Medicine Program Level Actions**

      I. A written grievance letter must be submitted by the aggrieved resident and must meet the time limits stated in Section 2g. The grievance letter must include the following information:

         a. A factual description of the grievance,
         b. the date in which the grievant(s) first became aware of the alleged violation,
         c. the remedy sought; and
         d. attachments of any documentation relevant to the grievance.
II. Within 30 calendar days of receiving the grievance letter, the Family Medicine Program Director must schedule a meeting to include the her/himself, the aggrieved resident(s) and their designated associates, program administrator/coordinator, and other faculty members who have direct knowledge of the circumstances around the grievance.

III. Failure of the program to hold the meeting within the 30 calendar day time limit will result in the grievance automatically proceeding to the Institutional level.

IV. The Program Director will chair the meeting at which all parties will be allowed to present their concerns.

V. A written decision regarding the grievance and requested remedy will be issued by the program director and must include: 1) a determination of whether the specified policy/procedure has been in fact violated and 2) a proposed remedy if there has been a violation.

VI. This written decision shall be presented to each grievant within 7 calendar days of the meeting.

VII. The findings of the program director will be final unless request for Institutional Level evaluation is filed by the aggrieved resident(s) within 7 calendars days after receipt of the program director’s decision.

B. Institutional Level Actions (per CHI-FH Harrison Medical Center GME Policy)

I. Resident(s) may file their grievance to the Chair of the GMEC following program level response if it is felt the program-level response doesn’t resolve the grievance.

II. The written grievance letter must meet the time limit stated in Section 3aVII, and include the following information:
   a. A factual description of the grievance;
   b. the date in which the grievant(s) first became aware of the alleged violation;
   c. the remedy sought;
   d. any documentation relevant to the grievance; and
   e. explanation of disagreement with the decision rendered by the Family Medicine Program Director.

III. The Chair of the GMEC will call a special meeting of the Committee within 30 calendar days after receipt of this grievance.
   a. A quorum (outlined within the GMEC Charter) must be present to review the grievance;
   b. At least one resident member of the GMEC must be present;
   c. The DIO or her/his designee must be present;
   d. The Family Medicine Program Director or her/his designee must be present but will not vote in proceedings;
   e. Attendance of the Resident’s associate is permitted at the Resident’s option.
   f. Family Medicine faculty are permitted to attend even if not required to be present at the meeting as a party to the grievance.
The GMEC Chair will allow each party to state their case with a time limit of 20 minutes each and a final rebuttal of 10 minutes each.

- The aggrieved resident(s) will make the initial presentation and rebuttal.
- Committee members may ask questions at the conclusion of each presentation and rebuttal but should not ask questions during the presentation except for short requests for clarification of fact.
- The Chair of the Committee will permit or deny questions that interrupt presentations.

IV. Each member of the GMEC (excluding the Family Medicine Program Director) has one vote, and a simple majority is required to reach final decision.

V. Remedies will be restricted to restoration of rights or services provided by the program; remedies will not include changes to the referenced GME policy or procedure.

VI. Following Committee review and decision, the GMEC Chair shall issue a written statement within 7 calendar days to all parties to the dispute.

VII. All decisions of the Committee are final.

Michael J Watson, MD
Program Director

5-20-2016

References
Accreditation Council for Graduate Medical Education – Institutional Requirements effective 1Jul2015 IV.D.