



Regional Academic Affairs

TITLE: Grievance	POLICY NUMBER: S-05
DEPARTMENT: Graduate Medical Education	Effective Date: 07/01
	Revised: 02/23
	Reviewed: 02/23
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POLICY:

Residents/Fellows (“Residents”) are provided a procedure to initiate grievances to allow for effective problem solving and resolution. All information will be handled in a confidential manner. This policy does not apply to complaints by residents regarding sexual harassment, sexual misconduct, violence, or discrimination of any kind, including race, color, religion, age, disability, sexual orientation, gender identity, or citizenship status. Resident complaints about harassment or discrimination fall under the Bon Secours Mercy Health (BSMH) Non-Harassment and Non-Discrimination policy (BSMH-HR-CUL_007).

PURPOSE:

A grievance is defined as a controversy, claim, or written complaint related to any of the following areas, including but not limited to:

1. Working hour/schedule issues
2. Professionalism or lack thereof
3. Health and safety issues for a resident, fellow, faculty member, or patient
4. Substance abuse concerns
5. Discipline, conduct, and discharge matters, including suspension, non-renewal, non-promotion, or dismissal

PROCEDURE:

If a resident has reason to believe that any policy, practice, or procedure has been denied him/her or has been applied in an inconsistent manner, or if a resident has a problem with any individual, the following procedure has been established for the discussion and resolution of such a problem

1. Program/Sponsoring Institution Level
 - a. Step I – Initial Reporting of Grievance
 - i. If the grievance is related to working hours/schedule issues the Resident must discuss the grievance with the appropriate senior or Chief Resident. It is the resident’s responsibility to initiate these discussions within five (5) calendar days following the occurrence which gave rise to the grievance. It is the senior or Chief Resident’s responsibility to reply by email to the resident’s complaint within five (5) working days of the discussion. The senior resident or Chief Resident must include via carbon

copy the Program Director or their designee in the email response to the resident's grievance.

- ii. If the grievance is related to matters other than working hours/schedules the resident should notify the Program Director in writing within five (5) calendar days following the occurrence which gave rise to the grievance. The Program Director shall respond in writing to the resident's complaint within five (5) working days receipt of the written complaint.
- iii. If for any reason a resident does not feel comfortable reporting their grievance to any of the aforementioned parties, they can report their grievance to the Designated Institutional Official (DIO) or their designee. Both program and institutional leadership personnel will uphold an open-door policy and ensure that all grievances are kept confidential to protect the reporting party.
- iv. A resident/fellow may choose to report a concern to the Chief Resident Council/Resident forum. In this case, following a Resident forum meeting, The peer selected Chair of the Chief Resident Council/Resident Forum from the Graduate Medical Education Committee (GMEC) will anonymously communicate any questions, concerns, or issues from the forum to DIO and/or GMEC.

b. Step II-Unresolved Grievance

- i. Reported to Senior or Chief Resident: If the grievance related to working hours/schedules remains unresolved, the resident should notify the Program Director in writing within five (5) working days from receipt of the response from the Senior or Chief Resident. The Program Director shall respond in writing to the resident's complaint within five (5) working days receipt of the written complaint.
- ii. Reported to the Program Director: If the Resident is not satisfied with the resolution proposed by the Program Director, the Resident may submit the grievance, in writing, to the *Designated Institutional Official ("DIO")* within five (5) working days of receiving the Program Directors proposed resolution. The *DIO* shall respond, in writing within ten (10) working days of receipt of the grievance.

c. Step III: Appointment of Ad-Hoc Committee

- i. If necessary, the DIO may appoint an ad hoc committee to investigate the complaint fully, and to make recommendations to resolve the complaint. If an ad hoc committee is appointed, its recommendations are made to the DIO Education. The DIO is expected to render a final decision on the complaint as expeditiously as possible. Written notice of this decision shall be sent to the resident and Program Director. The answer to any complaint at Step III will be regarded as binding on all parties.

Any answer to Steps I and II shall be considered final and binding unless the resident advances the complaint to the next step within five (5) working days after receipt of an answer. All

Grievance Procedure time limits may be modified by mutual agreement for good reason, such as vacation, work schedule, illness or similar absence. In the absence of such agreements to extend the time limits, the resident's grievance will be advanced without prejudice to the next step. The resident must promptly notify the DIO if an answer is not received, and the DIO will then arrange for the grievance to be advanced.

2. Accreditation Council for Graduate Medical Education Level

- a. **GME Annual Resident/Fellow Survey:** The annual Resident/Fellow Survey can be utilized for reporting grievances. These evaluations focus on the learning and working environment and provide residents/fellows with a confidential method to report any issues and/or concerns. The GME Annual Resident/Fellow Survey also provides residents/fellows a reporting outlet if they do not feel comfortable reporting concerns directly with program or institutional leadership..
- b. **ACGME Office of the Ombudsperson**
 - i. The ACGME's Office of the Ombudsperson serves as an independent, unbiased party and provides a safe method for residents/fellows to raise concerns about training-related issues and concerns. Reporting of grievances to the Office of the Ombudsperson will not affect the accreditation status of the program or institution. Residents/fellows may directly call the Office of the Ombudsperson to report training-related issues or to discuss how they should proceed.
 - ii. In order for the Office of the Ombudsperson to officially begin an internal inquiry, requests must be emailed to ombuds@acgme.org. This email should contain a brief summary of the issue(s), any steps taken to attempt resolution, and the name, city, and state of the residency/fellowship program. The reporting party must also include contact information for the Office of the Ombudsperson to use moving forward.
- c. **ACGME Office of Complaints** a. If for whatever reason an issue cannot be resolved through the Office of the Ombudsperson, reporting parties can raise allegations/grievances regarding the training program or non-compliance with ACGME Institutional, Program, or Accreditation Requirements with the Office of Complaints. Formal complaints can be submitted by emailing complaints@acgme.org. This reporting method can be utilized by residents/fellows at any time to report program or institutional issues. All formal complaints submitted to the Office of Complaints must include a brief summary of the allegation(s), the name, address, city, and state of the residency or fellowship program, the reporting party's contact information, and the reporting party's signature.

Residents are encouraged to try to resolve grievances directly with the chief resident, program director, DIO as outlined in the Program/Institutional process before contacting the ACGME.

Due Process:

Residents may initiate due process for grievances related to suspension, non-renewal, non-promotion, or dismissal by following the the Sponsoring Institutions Due Process Policy S-04.

Approved by:



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