

## Grievance/Problem Resolution Policy - GME

### 1. SCOPE

- 1.1. Division of Education
  - Residents and Fellows
- 1.2. Facilities and departments included in the scope listed above are further defined in the [Scope Definition Resource Guide](#) if not specifically outlined above.

### 2. DEFINITIONS & EXPLANATIONS OF TERMS

- 2.1. Abbreviations
  - ACGME: Accreditation Council for Graduate Medical Education
  - DIO: Designated Institutional Official
  - GME: Graduate Medical Education
  - GMEC: Graduate Medical Education Committee
  - MCHS: Marshfield Clinic Health System
- 2.2. Definitions

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### 3. POLICY BODY

**Purpose Statement:** This policy presents the process and procedures to follow in the event a grievance or problem should arise within the residency or fellowship programs. Residents benefit from an environment that fosters and encourages the free discussion of matters of mutual concern and effectively addresses complaints on specific issues and in real time. MCHS Residency/Fellow Program unequivocally endorses [ACGME Institutional Requirements](#): "The Sponsoring Institution and each of its ACGME-accredited programs must provide a learning and working environment in which residents/fellows have the opportunity to raise concerns and provide feedback without intimidation or retaliation and in a confidential manner as appropriate."

#### 3.1. Procedure and Sequence for Grievance Resolution

##### a. Resolution with the person or persons most closely related to the concern

- Residents or fellows who feel they have not been treated in accordance with organization policy, or have been treated unfairly, or who are in conflict should exercise their rights by first attempting to resolve the issues of concern at the most immediate step of authority possible which would include a chief resident and/or faculty member.

#### 3.2. Disputes and Grievances

##### a. Grievances

- Resolution by attending, chief resident, or senior resident on the service
  - A resident or fellow should bring the matter to the attention of the immediate supervisor, i.e. the current attending physician or chief resident. Recognizing the value and importance of complete discussion in clearing up misunderstandings and preserving harmonious relations, every reasonable effort shall be made to settle problems promptly at this point through discussion. Should the resident's current attending physician or chief resident be the subject of the problem or the problem cannot be resolved, the next higher level of authority should be contacted.
  - A problem brought to the supervising physician or chief resident in a face-to-face discussion and not resolved should then be submitted in writing to the supervising physician or chief resident as appropriate and be brought to the next higher level of authority in Division leadership.
  - The supervising physician or resident who has been contacted in writing will respond to the resident or fellow within a reasonable period of time following the written submission of the problem (this typically occurs within a recommended three-week time frame). A copy of the response (in addition to an acknowledged receipt of the response by the resident) will be provided to both the program director and the DIO) to keep the line of communication about the issue open to all parties.

The written response will suggest a solution to the problem or state why the issue under discussion does not require remedial action.

- Resolution by program director if program director is not the subject
  - If the resident or fellow believes satisfactory resolution has not been achieved after interacting with the attending, chief resident or senior resident, as outlined in previous steps, the problem must be submitted in writing, by the resident, to the program director within a reasonable period of time after receipt of the unsatisfactory response (this typically occurs within a recommended two-week time frame). A face-to-face meeting with the program director is required.
  - The program director will respond to the resident or fellow in writing within a reasonable period of time stating his/her position on the issue raised (this typically occurs within a recommended three-week time frame).
- Resolution by DOI leadership
  - If the resident or fellow believes that the aforementioned responses did not resolve the problem, he/she may, within a reasonable period of time after receiving the response, request in writing that the DIO review the issue (this typically occurs with a recommended two-week time frame).
  - If the issue is deemed irresolvable by the DIO, then it may be brought forward to an ad hoc subcommittee of the GMEC by the DIO.

3.3. Statement of Non-Retaliation

- a. Resident or fellows will not be penalized in any way for exercising rights through this procedure or any part thereof.

3.4. Process Summary

<b>Grievance/Problem Resolution</b>	
<b>Step 1</b>	Resident/fellow should attempt to resolve issues of concern with the person or persons most closely related to the concern through face-to-face discussion.
<b>Step 2</b>	If problem is not resolved with face-to-face discussion, the resident/fellows should meet with current attending physician or chief resident through face-to-face discussion.*
<b>Step 3</b>	If problem is not resolved though face-to-face discussion with current attending physician or chief resident, resident/fellow should submit concern in writing, to the supervising physician or chief resident as appropriate. The recipient of the written communication will respond to the resident/fellow within a reasonable period of time (this typically occurs within a recommended three-week time frame).**

<b>Step 4</b>	If the resident/fellow feels the written response is unsatisfactory, the problem must then be submitted to the program director within a reasonable period of time after receipt of the unsatisfactory response (this typically occurs within a recommended two-week time frame).
<b>Step 5</b>	The program director will respond to the resident/fellow with a written communication within a reasonable period of time (this typically occurs within a recommended three-week timeframe).
<b>Step 6</b>	If the resident/fellow feels the program director's response does not resolve the problem, he/she may send a written communication to the DIO – within a reasonable time frame - requesting a review of the issue (this typically occurs within a recommended two-week time frame).
<b>Step 7</b>	If the DIO deems the issue irresolvable, the request may now be referred to an ad hoc subcommittee of the GMEC by the DIO.

\*The subject of the problem may lead to the need to contact the next level of authority.

\*\*A copy of the response will be provided to the next higher level of leadership authority to keep the lines of communication open to all parties.

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#### 4. ADDITIONAL RESOURCES

4.1. References:

- [ACGME Institutional Requirements](#)

4.2. Supporting documents available:

- None

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**5. DOCUMENT HISTORY**

Version No.	Revision Description
1.0	New Document: Reformatted and migrated to DCS DOE site. Approved by GMEC: 02/21/17, 09/13/17 Revised: 12/18/18
2.0	Updated scope to remove System-wide, updated setting
3.0	

**6. DOCUMENT PROPERTIES**

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