

YALE-NEW HAVEN MEDICAL CENTER (YNHMC)

POLICIES AND PROCEDURES

Subject: Grievance

Policy #: II.008

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Distribution: Accredited and GMEC Approved Programs

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Introduction:

It is the policy of Yale-New Haven Medical Center to foster sound communications between Specialty and Subspecialty Residents programs (hereafter known as Residents) in ACGME accredited, ABMS accredited and GMEC approved training programs and their respective Chiefs of Service and to ensure that problems arising within the programs are appropriately discussed and resolved. This policy is intended to address those situations in which a trainee may have a disagreement with an action taken or treatment received within the program.

Application and Definitions:

This policy shall apply to all Specialty and Subspecialty Residents in ACGME accredited, ABMS accredited and GMEC approved training programs who are employed under a contract with Yale-New Haven Hospital or Yale University School of Medicine. This policy does not apply to research post-doctoral fellows.

Residents: Specialty and Subspecialty (Clinical Fellows) Residents in ACGME accredited, ABMS accredited and GMEC approved training programs.

Grievance: A grievance is defined as an expression of dissatisfaction regarding any of the following:

- a) the Resident's written contract
- b) duties assigned to a Resident
- c) application of Hospital or University policies
- d) unfair or inequitable discipline or performance reviews or evaluations
- e) an issue regarding non-renewal of a Resident's appointment
- f) termination of a Resident's appointment prior to the end of the contract term
- g) discrimination of any type

Complaints related to sexual harassment must be made pursuant to the Hospital's Policy or the University policy, depending on the salary source of the Resident.

Complaints of academic fraud/scientific misconduct must be brought under the "Policies

and Procedures for Dealing with Allegations of Academic Fraud at Yale University" (see <http://www.yale.edu/grants/acadfraud.html>) and will be referred to the Special Advisor to the Dean of the School of Medicine.

Violations of Title VII (acts of discrimination against protected classes under federal law) may be directed to the Hospital or University Compliance Officer.

Grievance Panel: A standing panel will be selected consisting of 4 Chief Residents, three Program Directors, three Chiefs/Associate Chiefs of the Medical Staff, three administrative officials (from both Hospital and Medical School). These individuals will serve for a period of two years. Upon submission of a grievance, the Director/Associate Dean of GME will select with the Resident pursuing the grievance a panel consisting of 2 Chief Residents not from their specialty. The Director/Associate Dean will select one Program Director not from the trainee's specialty, one member of the Medical Staff not from their specialty and an administrative officer. The Chair of each panel will be selected by the panel members.

Working Days: Monday through Friday, excluding Hospital holidays.

Policy and Procedure:

- A. When an incident forming the basis for a grievance arises, the grievant must follow the procedure outlined below. Each grievance shall be handled promptly and impartially, without fear of coercion, discrimination or reprisal. Each participant in a grievance shall do his or her part to protect this right.
- B. All time limits specified in this policy refer to working days. To achieve a prompt resolution of Resident's grievances, the action at each step of the Grievance Procedure should be taken as rapidly as possible, but not later than the prescribed time limits. In the event of extenuating circumstances, a time limit may be extended by mutual agreement of the parties at that step.
- C. Grievance meetings shall be scheduled at times which are mutually satisfactory to all parties concerned. No resident, faculty member, member of the Grievance panel, administrator, or witness shall suffer loss of compensation or leave time for the time spent in any step of this procedure.
- D. A Resident may obtain the assistance of another Hospital or University employee of his/her choice in preparing and presenting a grievance at any step, including a member of the Human Resources Department. In the latter case of a Hospital employee, notification should be made to the Manager, Employee Relations. Other outside individuals, including attorneys, are not permitted to participate directly in the grievance process, though consultation with an attorney is permitted.

- E. All issues to be raised in a grievance must be raised from the first step and may not be introduced for the first time in Step 2 without having been previously raised.
- F. At each step of the grievance, the Resident must prepare a written summary of the complaint, facts, information accumulated, and the remedy or outcome being sought. This must be forwarded to the Chairperson of the Graduate Medical Education Committee (GMEC), as well as to the individual/panel hearing the next level of the grievance.
- G. The Chairperson of the GMEC will serve to ensure that the procedure for the grievance is adhered to at each step.
- H. At the conclusion of each step of the Grievance Procedure, the involved Resident and the Chief of Service and/or Section Chief, as appropriate, shall both receive a copy of the written decision which includes an explanation of the reasoning behind the decision.
- I. All information, whether provided in writing or through interviews, obtained in connection with a grievance shall be treated in a confidential manner by all parties involved. Only the final outcome and disposition will be recorded and maintained in the Resident's file, while the detailed information referred to in paragraph F above shall be discarded by the Chief of Service or Section Chief and others hearing the grievance. However, the complete record will be maintained in the Program Director's file.
- J. Data regarding numbers of grievances, their general subject matter and their departments, as well as their final outcomes will be an agenda item at each scheduled meeting of the GMEC, when applicable. Annually the GMEC shall summarize the number of grievances, the Department and type of grievances for the committee. Trends in this data may be used by the GMEC to provide specific feedback to the Departments.

Administrative Procedures

A. General Conflict Resolution

Every effort should be made to resolve all questions, problems and misunderstandings as soon as they arise. Accordingly, Residents are encouraged to initiate discussions with their Chief of Service, and when appropriate, Section Chief, at the time the dissatisfaction or questions arise. In addition, the Director/Associate Dean GME may be asked to facilitate this discussion.

B. Step 1 – Grievance Panel

If a Resident is unable to resolve his/her problem, a grievance may be initiated through the Director/Associate Dean of GME. A written statement setting forth the basis for the grievance and the outcome or remedy sought shall be submitted to the GME Coordinator, who will give it to the Chairperson of the GMEC. To be accepted for consideration, a grievance must be initiated by the Resident within ten (10) working days of the time he/she first had knowledge of the

incident that gave rise to the grievance. The Chair of the GMEC shall then arrange a meeting with the House Officer to select the grievance panel. The panel will be immediately notified and shall meet with the resident within fourteen (14) working days after receiving the Step 1 appeal. The panel shall conduct a review of the grievance, shall develop the facts and information which are relevant to the grievance, shall meet with all other relevant parties and shall issue a written decision. The panel's decision shall be issued within fourteen (14) working days of the meeting. A copy of the decision shall be given to the Resident and to the GME Coordinator, who shall give it to the GMEC Chairperson.

C. Step 2 - Chief of Staff or Dean's Representative

If the Resident is not satisfied with resolution of the Grievance at Step 1, the Resident may appeal to Step 2 of the Grievance Procedure. This appeal must be in writing and comply with the requirements of paragraph F under Policy above, 2 copies must be submitted to the GME Coordinator, within seven (7) working days after receiving the Step 1 decision. He/she will deliver the appeal to individuals who will hear the Step 2 grievance. In the event a grievance is not appealed to Step 2 within the seven (7) working day time frame, the Step 1 decision shall be considered final.

A second step grievance will be reviewed by one of the following, depending on the salary source of the Resident: 1) Chief of Staff/Senior Vice-President for Medical Affairs of Yale-New Haven Hospital, 2) Representative of the Dean, Yale University School of Medicine.

Either the panel or the Chief of Staff, as applicable, shall meet with the resident within fourteen (14) working days after receiving the Step 2 appeal. The Chief of Staff/Representative of the Dean shall conduct a review of the grievance and reach a written decision promptly. The Chief of Staff's /Representative of the Dean's decision shall be issued within ten (10) working days of his/her meeting with the Resident. Either decision shall be deemed final and binding on all concerned parties.