

Emergency Medicine Physician Assistant Residency Program

Grievance & Due Process Policy

The University of Iowa Hospitals and Clinics (UIHC) strives to make the residency experience as rewarding as possible for the advanced practice provider in training. However, questions and concerns can arise during the training period. This Policy on Grievance and Due Process provides a mechanism for residents to obtain answers to or resolve disputes or disagreements that arise with respect to the work environment, academic performance, issues related to the program or faculty or administrative matters.

I. WORK ENVIRONMENT, ACADEMIC PERFORMANCE (INCLUDING NON-PROMOTION NOT DUE TO AN APPROVED LEAVE OF ABSENCE), PROGRAM/FACULTY ISSUES, AND ADMINISTRATIVE MATTERS. The following avenues are available for the resident to address/resolve concerns:

A. FACULTY MENTOR:

Questions and concerns may be brought up to a faculty mentor prior to contacting the Program Director. The Program Director must be apprised of the situation within 5 days of the incident in question.

B. PROGRAM DIRECTOR:

Questions and concerns can be first directed to the Program Director or his/her designee. The Program Director or his/her designee will be best able to address most questions or concerns that arise.

C. DEPARTMENT OF EMERGENCY MEDICINE ADMINISTRATIVE REVIEW:

When the Program Director cannot answer the question or resolve the issue, they will refer the resident to the Chair of the Emergency Medicine Department and/or Department Administrator for review of the matter. The resident will be required to meet with one or both of these administrators and present a written description of the concern or issue at hand.

D. CEO/DIRECTOR'S REVIEW:

If the resident is not satisfied with the response from the Department of EM Administrative Review (and the concern is not a matter of departmental discretion), the resident may make a written request to the CEO/Director of UIHC to review the matter. The CEO/Director, or his/her designee, will review the matter and provide to the resident a written response, which is final. The CEO/Director may in his/her discretion refer the matter to the Department of Emergency Medicine Administration or an ad hoc committee for its recommendation prior to review by the CEO/Director. The processing of matters of departmental discretion is further addressed in this policy under "Due Process and Grievance Procedure" (Section II).

**II. DUE PROCESS AND GRIEVANCE PROCEDURES.
(SUSPENSION, DISCHARGE, DISCIPLINARY ACTIONS, NON-RENEWAL)**

A. SUSPENSION OR DISCHARGE :

If a resident is suspended or discharged from a training program, the procedures specified in Article IV, Section 7 of the Bylaws, Rules and Regulations of the University of Iowa Hospitals and Its Clinical Staff will be followed.

B. OTHER DEPARTMENTAL ACTIONS (OTHER THAN SUSPENSION OR DISCHARGE):

Other departmental actions include individual disciplinary actions by the Program or Department and formal remediation. The following review process shall be followed:

1. Departmental Committee Review:

The action will be reviewed by a Departmental Committee selected by the Program Director, if the resident requests such a review within 10 days of his or her becoming aware of the action, unless the resident has already been afforded an opportunity to present the information to such a Departmental Committee which prepared recommendations to the Program Director before the action and the resident has been informed of the Program Director's action in writing.

a. Composition of Departmental Committee: The Departmental Committee described above will be composed of the Program Director, Medical Director and Vice Chair for Education. Other program faculty and instructional faculty may be asked to join the Departmental Committee if necessary.

b. Departmental Committee Recommendations: After its review, the Departmental Committee will submit its recommendations to the Program Director. If the Departmental Committee recommends a change in the action, the Program Director will then reconsider the action, giving due consideration to the Departmental Committee's recommendation.

2. Program Director's Decision:

Following receipt of the Departmental Committee's recommendations, the resulting decision of the Program Director shall be provided by the Program Director to the resident and to the CEO/Director of the UIHC in writing and shall be final, unless the resident believes that the action could significantly threaten his or her intended career development (see Director's Review of Program Director's Decision, below). Actions will not be postponed while they are being reviewed, unless the Program Director in his/her discretion decides to do so.

3. Director's Review of Program Director's Decision:

If the resident submits a written request to the CEO/Director of UIHC within 10 days of receipt of the Program Director's written decision (described in II.B.2 of this policy) and the request includes the reasons for the belief that the action could significantly threaten the resident's intended career development, the CEO/Director will first determine if the alleged threat is significant and, if so, shall review the decision.

a. Advice to Director: The CEO/Director may seek the advice of the Department Administration, the Professional Practice

Subcommittee and/or an ad hoc committee as part of the review.

b. Notice and Final Decision:

- (1) Non-Renewals: If the action is dismissal prior to completion of the training program, the decision of the CEO/Director shall be given to the resident and Program Director in writing and is final.
- (2) All Other Actions: For all other actions, if the CEO/Director approves the Program Director's decision, the decision of the CEO/Director shall be given to the resident and the Program Director in writing and is final. If the CEO/Director recommends that the Program Director modify the decision, the Program Director will then reconsider the action, in consultation with the CEO/Director; the resulting decision of the Program Director, with CEO/Director approval, shall be provided to the resident and the CEO/Director in writing and is final.