

**Charleston Area Medical Center  
Office of Graduate Medical Education**

**Grievance Policy**

This grievance policy is established to provide a mechanism for graduate medical education residents and fellows to report and obtain resolution of certain disputes and complaints related to the educational or clinical work environment, including GME programs or personnel. This policy sets forth the process for initiating and adjudicating grievances covered by this policy.

**Alternative Policies for Resolution of Complaints**

This policy does not apply to actions arising out of the Academic Improvement Policy or the Misconduct Policy. The process for seeking due process review of appealable actions under those policies is set out in the Academic Improvement Policy and Misconduct Policy.

This policy also does not apply to concerns about discrimination, harassment, or retaliation. Any complaint of discrimination, harassment, or retaliation must be reported to the DIO and Human Resources or Title IX Coordinator, as applicable, and is not reviewed under this policy. Grievances alleging any form of discrimination, harassment, or retaliation will be investigated and adjudicated in accordance with applicable institutional and GME policies covering those types of prohibited conduct.

**Grievance Defined**

For purposes of this policy, a grievance is defined as any complaint or controversy related to the work environment, including GME programs or personnel, that alleges an actual or perceived violation of institutional or GME policies or procedures and affects the ability of a resident or fellow to carry out their duties. Grievances might be related to issues such as duty hours, schedules, resources, or behaviors by any member of the work environment.

**Procedures**

**Level 1 – Program Director:**

Except as otherwise provided in this policy, any resident or fellow with a grievance under this policy should promptly notify their Program Director when the issue or concern first arises. The resident or fellow and Program Director shall make a good faith effort to resolve complaints informally.

If the grievance is not resolved informally, the resident or fellow shall notify the Program Director in writing of (1) the nature of the grievance, (2) the aspects of the grievance not resolved through informal resolution, (2) all pertinent information and evidence related to the grievance, and (4) a statement of the relief requested (collectively, the “Grievance Details”). The Program Director shall meet with the resident or fellow, along with a third party from the GME or HR offices (DIO, ADIO, HRBP, or designee) (a “Third Party Official”), and attempt to reach a resolution. Within ten (10) days of this meeting, the Program Director shall notify the resident or fellow in writing of the resolution of the grievance and shall address both the issues raised and the relief requested. A copy of the Program Director’s notification shall be provided to the respective Department Chair and to the Designated Institutional Official (DIO).

If the nature of the grievance is with the PD, then the resident or fellow should skip to Level 2 for initiating a grievance under this policy.

### **Level 2 – Department Chair:**

If the Program Director's written resolution is not acceptable to the resident or fellow or if the grievance involves the Program Director, the resident or fellow with a grievance under this policy shall promptly notify the Department Chair. Where Level 1 applied, the ongoing grievance must be submitted to the Department Chair in writing within ten calendar days of the Program Director's notification of resolution under Level 1.

Where Level 1 applied, the resident or fellow's notification to the Department Chair shall be in writing and include a copy of the Program Director's resolution and all other information related to the grievance. Where this policy authorizes the resident or fellow to skip to Level 2, the resident or fellow's notification to the Department Chair must be in writing and include the Grievance Details described under Level 1.

The Department Chair shall meet with the resident or fellow to discuss the grievance and attempt to reach a resolution with a Third-Party Official present. Within ten calendar days of this meeting, the Department Chair shall send to the resident or fellow a written response to the issues and relief requested. A copy of this response shall be provided to the DIO.

If the nature of the grievance is with the Department Chair, then resident or fellow should skip to Level 3 for resolution of a grievance under this policy.

### **Level 3 – DIO or Designee:**

If the resident or fellow disagrees with the decision by the Program Director and/or Department Chair, the resident or fellow shall present a written statement to the DIO within ten (10) calendar days of the receipt of the Program Director's or Department Chair's decision, as applicable. The statement shall describe the nature of and basis for the ongoing grievance and include all information related to the grievance that was provided to the Program Director and/or Department Chair and copies of the decisions of the Program Director and/or the Department Chair.



Failure to submit the grievance in the ten-day period shall constitute waiver of the grievance process and the decision of the Program Director/Department Chair will be final.

Where Level 3 applies, the DIO shall review all written information and decide if further meetings or inquiry could be helpful to resolve the grievance. If the DIO has a conflict, this responsibility would fall to the Associate DIO; if both DIO and Associate DIO have a conflict, this responsibility would fall to the President of the IAM.

Within ten (10) calendar days of receipt of the resident or fellow’s written statement and supporting documentation under Level 3, the DIO or their designee shall provide a written determination of grievance outcome to the resident or fellow. This decision shall be final. All proceedings and decisions related to the grievance shall be conducted and reported, as applicable, in a confidential manner.

GMEC approved: 12/2025

Signatures:

GMEC Chair:	<div><div>DocuSigned by:</div><div></div><div>CE911BE74E22440...</div><div>Art Rubin, DO</div></div>	<div><div>12/9/2025</div><div>Date</div></div>
DIO:	<div><div>DocuSigned by:</div><div></div><div>D1119686F13144F...</div><div>Dink Jardine, MD</div></div>	<div><div>12/18/2025</div><div>Date</div></div>