

Grievance Policy and Procedures

1. Purpose and Scope

This policy describes how trainees in University of Arizona College of Medicine Tucson (UACOM-T) ACGME-accredited and non-standard training (NST) programs may submit grievances and how those grievances are reviewed at the program and institutional levels. “Trainee” includes residents, fellows, and NST trainees. Programs must inform trainees of this process and address grievances fairly while minimizing potential conflicts of interest.

2. Matters Addressed Through Other Processes

Discrimination or harassment. Trainees with concerns about potentially discriminatory or harassing conduct are encouraged to contact the University’s Office of Institutional Equity (OIE) at equity@arizona.edu or 520-621-9449. A discrimination or harassment concern submitted through this grievance process will be directed to OIE.

Program actions. Concerns about disciplinary or non-disciplinary actions taken by a program are addressed under the Procedures for Disciplinary and Non-disciplinary Action.

Witnessed unprofessional conduct. Trainees may report witnessed unprofessional conduct confidentially to the University of Arizona College of Medicine Tucson Professionalism Program.

3. Grievance Procedure

3.1 Program review

1. Trainees are encouraged to first address concerns related to their training through informal, collegial discussion.
2. If informal efforts do not resolve the concern, the trainee may submit a written grievance to the program director. The grievance must include:
 - a. A description of the concern;
 - b. The policy or procedure that may have been violated, if applicable;
 - c. Any steps the trainee has taken to resolve the concern informally; and
 - d. The action requested to resolve the concern.
3. The program director will review the grievance and meet with the trainee at a mutually agreeable time within 14 calendar days of receiving it.
4. The program director will provide a written response within 30 calendar days after meeting with the trainee. This period allows the program director to review the circumstances and relevant facts before reaching a decision.

5. If the trainee believes the grievance remains unresolved after receiving the program director's response, the trainee may submit a written grievance to the Designated Institutional Official (DIO). The submission must include the original formal grievance, the program director's response, and an explanation of why that response is unsatisfactory.
6. If the trainee is uncomfortable submitting the grievance to the program director, the trainee may submit it directly to the DIO. The submission must include the information listed in item 2 and explain why the grievance cannot be presented to the program director.

3.2 Institutional review

1. For a grievance submitted directly to the DIO or referred after program review, the DIO or designee will meet with the trainee at a mutually agreeable time within 14 calendar days of receiving the written grievance.
2. After meeting with the trainee, the DIO will review the grievance, consult others as appropriate, and provide a written response within 30 calendar days after the meeting.
3. Every effort will be made to maintain confidentiality. Depending on the concern, review of a grievance may require disclosure to Banner Health Human Resources or OIE. The University prohibits retaliation against individuals who report suspected noncompliance, provide information, or participate in an investigation or review.
4. The DIO's decision is final and is not subject to further internal review under this policy.
5. For grievances alleging noncompliance with ACGME requirements that are not adequately addressed at the program or institutional level, trainees may file a "non-compliance report" with the ACGME at <https://www.acgme.org/residents-and-fellows/non-compliance-reports/>.

Revision History

Updated December 2022

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Appendix A. ACGME Requirements Referenced by This Policy

A.1 Institutional Requirements (Reformatted, 2025)

3.2.d.1. The Sponsoring Institution must oversee mechanisms by which residents/fellows can report inadequate supervision and accountability in a protected manner that is free from reprisal. (Core)

4.5. The Sponsoring Institution must have a policy that outlines the procedures for submitting and processing resident/fellow grievances at the program and institutional level and that minimizes conflicts of interest. (Core)

A.2 Common Residency/Fellowship/One-Year Fellowship Program Requirements (July, 2026)

2.6.g./2.5.g. The program director must provide a learning and working environment in which residents/fellows have the opportunity to raise concerns, report mistreatment, and provide feedback in a confidential manner as appropriate, without fear of intimidation or retaliation.

2.6.h./2.5.h. The program director must ensure the program's compliance with the Sponsoring Institution's policies and procedures related to grievances and due process.