


<b>Name of Policy:</b> <u>Residency Grievance Process</u> <b>Policy Number:</b> 3364-133-132 <b>Department:</b> Pharmacy <b>Approving Officer:</b> Senior Hospital Administrator <b>Responsible Agent:</b> Director of Pharmacy <b>Scope:</b> University of Toledo Medical Center	  <b>Effective Date:</b> 4/25/2022 <b>Initial Effective Date:</b> 5/1/2019
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy

**(A) Policy Statement**

Residents are provided a procedure to initiate grievances to allow for effective problem solving and resolution. All information will be handled in a confidential manner.

**(B) Purpose of Policy**

A grievance is defined as any dispute or controversy between the Resident and any of the Program supervisory personnel concerning the application of the Resident's Graduate Medical Education (GME) agreement, the policies and procedures of the program, and the policies, procedures, rules and regulations of the Hospitals or University.

**(C) Procedure**

1. If applicable, the Resident should resolve the grievance with the involved preceptor, peer, or Residency Program Director.
2. If the Resident is not satisfied with the resolution proposed in step 1, the grievance must be submitted by the Resident, in writing, to the Program Director briefly setting forth the complaints giving rise to the grievance. The Program Director, in consultation with the Director of Pharmacy if deemed appropriate, shall resolve the grievance within thirty (30) calendar days of its receipt. The proposed resolution will be in writing.
3. If the grievance pertains to any dispute or controversy between the Resident and the policies, procedures, rules and regulations of the Hospital or University, the Director of Pharmacy will be notified and will work in conjunction with the Program Director for resolution.
4. If the Resident is not satisfied with the resolution proposed in Step 3, the Resident may submit the grievance, in writing, to the Director of Pharmacy within five (5) days of receiving the Program Director's proposed resolution. The Director of Pharmacy shall respond, in writing, within thirty (30) calendar days of receipt of the grievance.

<b>Approved by:</b>  <u>/s/</u> _____ <u>04/25/2022</u> Lindsey Eitnrear, PharmD, BCPS, AAHIVP Director of Pharmacy Date  <u>/s/</u> _____ <u>04/25/2022</u> Russell Smith, PharmD, MBA, BCPS Senior Hospital Administrator Date  <i>Review/Revision Completed By:</i> Pharmacy	<b>Review/Revision Date:</b> 8/16 4/19 4/22          <b>Next Review Date:</b> 4/1/2025
<b>Policies Superseded by This Policy:</b>	