

## **DUE PROCESS AND GRIEVANCE POLICY AND PROCEDURES**

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This document describes the due processes policy that applies to the Psychology Postdoctoral Fellow (referred to as Fellow) at the University of Arkansas for Medical Sciences (UAMS)/Arkansas Children's Hospital (ACH). When a Fellow is identified as performing at a level of competency judged to be "unsatisfactory" (about the Standards established by the American Psychological Association), the Pediatric Psychology Fellowship Training Committee (comprised of the psychology faculty involved in the Training Program) may select from several courses of action.

### **Behavior of Concern**

Behaviors that might warrant action include but are not limited to:

- Violation of the ethical standards for Psychologists as established by the American Psychological Association, in either the provision of clinical services or research activities;
- Incompetence in the performing of typical psychological services in this setting and/or inability to attain competence during the fellowship;
- Failure to meet the minimum standards for patient contact, administrative requirements or didactic training;
- Behavior(s) judged to be currently unsuitable and which hampers the Fellow's professional performance;
- Receiving a 1 on a performance evaluation.

### **Fellow Performance Problems**

Performance problems may arise because of educational or academic deficiencies, psychological adjustment problems and/or inappropriate emotional responses, inappropriate management of personal stress, inadequate level of self-directed professional development, inappropriate use of and/or response to supervision, etc. Behaviors typically become identified as performance problems when they include one or more of the following characteristics:

- The behavior is not merely a reflection of a knowledge or skill deficit that can be rectified by academic or didactic training or supervision.
- The quality of services delivered by the Fellow is sufficiently negatively affected.
- The behavior has the potential for ethical or legal ramifications if not addressed.
- The behavior shows a persistent insensitivity to diversity considerations related to race, ethnicity, gender, sexual orientation, age, disability status, SES, etc.
- The Fellow's emotional difficulties interfere with his or her capacity to perform competently.
- The Fellow's interpersonal style interferes with his or her intra-professional and interdisciplinary relationships with peers, coworkers, supervisors, and/or subordinates.
- The Fellow does not acknowledge, understand, or address the concern when it is identified.
- The Fellow's behavior does not change as a function of feedback, remediation efforts, and/or time.
- A disproportionate amount of attention by training personnel is required.
- The Fellow's behavior negatively impacts the public view of the training program or institution.

### **Guiding Principles to Ensure Due Process**

The following principles serve to ensure that decisions made by the training program about Fellows are not arbitrary or personally based. These principles ensure that the Fellow is provided ongoing and meaningful feedback, opportunities for remediation, and information about appeals procedures:

- Presenting Fellows with written documentation of the program's expectations related to professional and personal functioning.

- Stipulating the procedures for evaluation, including when and how evaluations will be conducted. Such evaluations should occur at meaningful intervals.
- Articulating the various procedures and actions involved in making decisions regarding problem behaviors.
- Communicating with Fellows early and often about how to address problem behaviors.
- Instituting a remediation plan for identified inadequacies, including the competency domain(s) in which performance is not adequate, target behaviors, expectations for acceptable performance, steps for remediation, supervisors' responsibilities, time frame for expected remediation, and consequences of not rectifying the inadequacies.
- Provide a written procedure to the Fellow that describes how the Fellow may appeal the program's action.
- Ensuring that Fellows have sufficient time to respond to any action taken by the program.
- Using input from multiple professional sources when making decisions or recommendations regarding the Fellow's performance.
- Documenting, in writing and to all relevant parties, the action taken by the program and its rationale.

### **Supervisory Actions and Steps to Hearing and Notifications**

If performance problems are noted by a Fellow's supervisor(s), the following procedures will be initiated:

- The Fellow's supervisor(s) will meet with the Training Director to discuss the problem and determine what action needs to be taken.
- The Training Director will schedule a formal review hearing of the Fellow's progress and all performance problems with the Training Committee.
- The Fellow will be notified, in writing, that such a review hearing is occurring and will have the opportunity to provide an oral or written statement. The Fellow will be notified that that he or she will have the results of the review in three weeks or less.
- The Training Committee will meet and review all of the Fellow's work to date, including the identified problems.
- In discussing the problem and the Fellow's response, the Training Director and Committee may adopt one or more of the following methods or may take any other appropriate action:
  - Take no further action and inform all parties of this decision.
  - Issue a *Verbal Warning* to the fellow. A Verbal Warning emphasizes the need to engage in recommended amelioration strategies to address the performance problem. No record of this action is kept.
  - Issue a *Performance Notice* (1st written warning). A Performance Notice formally indicates that the training faculty is aware of and concerned with the Fellow's performance and that the problem has been brought to the attention of the Fellow. It also indicates that the faculty will work with the fellow to specify the steps necessary to rectify the performance problems, and that the behaviors are not significant enough to warrant serious action. Remediation strategies as described below should be implemented following the issuance of a Performance Notice. A signed copy of the Remediation Plan will be kept in the Fellow's file, as will a copy of the Performance Notice.
  - Issue a *Probation Notice* (1st written warning). A Probation Notice indicates that the training faculty will actively and systematically monitor for a specific length of time the degree to which the Fellow addresses, changes, and/or otherwise improves the problem behavior. The Fellow must be provided with a written statement that includes a description of the actual problem behaviors, the specific recommendations for rectifying the problem, the time frame for the probation during which the problem is expected to be ameliorated, and the procedures designed to ascertain whether the problem has been appropriately

- rectified. Additional remediation strategies must be implemented at this time. A copy of the Probation Notice and the revised Remediation Plan will be kept in the Fellow's file.
- The Training Director, Associate Training Directors and Section Chief of Psychology will then meet with the Fellow to review the action taken within three weeks of when the Fellow was notified of the review process. If placed on probation, the fellow may choose to accept the conditions or may challenge the decision. The procedures for challenging the decision are presented below (see below Procedures for Appeal by a Fellow).
  - Once the Performance Notice or Probation Notice is issued by the Training Director, it is expected that the Fellow's performance will be reviewed no later than the next formal evaluation period or, in the case of probation, no later than the time limits identified in the probation statement. If the problem has been rectified to the satisfaction of the faculty, the Fellow and other appropriate individuals will be informed and no further action will be taken.
  - If it is determined that the conditions for revoking the probation status have not been met, the Training Director may take any of the following actions:
    - Continue the probation for a specific time period, with written notice to the Fellow of ongoing steps that must be taken to ameliorate the problem in the specified time frame.
    - Issue a written **Suspension Notice** (2nd written warning). This indicates that the Fellow is not allowed to continue engaging in specified professional activities until there is evidence that the behavior in question has improved.
    - Issue a written **Warning Notice** (2nd written warning). This indicates that if the problem behavior does not change, the Fellow will not meet criteria for fellowship completion.
    - Issue a written **Termination Notice**. This indicates that the Fellow will be terminated from the fellowship program as of the date specified in the notice.

When the aforementioned interventions do not, after a reasonable period, rectify the problem, or when the Fellow seems unable or unwilling to alter his or her behavior, the Training Director and Committee may take more formal action, including such actions as:

- Giving the fellow a limited endorsement, including the specification of competency domains and practice settings in which he or she is competent to practice. This information will be conveyed to all relevant state psychology licensing boards.
- Communicating to the Fellow that he or she has not completed the training program, with the possibility of continuing for an additional specified period beyond the training year.
- Terminating the Fellow from the training program. This includes issuing a Termination Notice by UAMS Human Resources policies (<https://hr.uams.edu/employee-relations/employee-relations-information/>). This information will be communicated to all relevant state psychology licensing boards.

### **Remediation Strategies**

When performance problems have been identified and documented as discussed above, the training faculty, in conjunction with the Fellow, will formulate and implement strategies for remediation of such problems. These strategies will be appropriately documented and implemented in ways that are consistent with due process procedures. Such strategies may include, but will not be limited to, the following:

- Increasing supervision time, either with the same or other supervisors.
- Changing the format, emphasis, and/or focus of supervision.
- Strongly recommending personal therapy. Referrals will be provided.
- Reducing the Fellow's clinical or other workload or modifying his or her schedule in other ways.
- Requiring specific academic coursework, didactics, or independent study.
- Recommending, when appropriate, a leave of absence and/or a second fellowship.
- Recommending and assisting in implementing a career change for the Fellow.

## **Procedures for Appeal by a Fellow**

Fellows who wish to contest supervisory actions and decisions must submit a written challenge to the Training Director within 10 days of receipt of the faculty decision. Failure to submit a written challenge within 10 days will be taken as assent to the supervisory actions and decisions. Once a written challenge is received, the following steps will occur:

- The Section Chief of Psychology will convene a Review Panel consisting of the Training Director and/or Associate Training Director, two faculty members selected by the Section Chief of Psychology, two faculty members selected by the Fellow, and a non-Psychology UAMS or ACH Administrator.
- A review hearing will be conducted, chaired by the Section Chief of Psychology, in which evidence is heard from the supervisor(s), who have the right to be present at the hearing.
- The Fellow will retain the right to be present at the hearing, to hear all facts, and to dispute or explain his or her behavior.
- Within 15 days of the completion of the review hearing, the Review Panel will file a written report, including any recommendations for further action. Decisions made by the Review Panel will be made by majority vote of the five panel members. The Fellow will be informed of the recommendations by the Section Chief of Psychology and through receipt of a copy of the panel report.
- If the Review Panel finds in favor of the Fellow, no further action against the fellow will be taken. The Section Chief of Psychology will consult with the faculty supervisor(s) concerning the decision.
- If the Review Panel finds in favor of the supervisor(s), the original supervisory action will be implemented.
- The Review Panel may, at its discretion, find neither in favor of the supervisor nor the Fellow. It may instead modify the original supervisory action or issue and implement its own action. In this instance, the Section Chief of Psychology will consult with both the supervisor(s) and the trainee concerning the decision.

## **Fellow Grievances**

Our guiding philosophy is that most problems are best resolved through direct interaction between the Fellow and supervisor or other staff member as part of the ongoing working relationship. Fellows are encouraged to first discuss any problems or concerns with the supervisor or staff member involved. In turn, supervisors and staff members are expected to be receptive to complaints, attempt to develop a solution with the Fellow, and to seek appropriate consultation. If these discussions do not produce a satisfactory resolution of the concern, an informal or formal grievance may be filed.

A grievance is defined as an expression of dissatisfaction regarding an aspect of the Fellow's treatment by a supervisor or the organization. Grievances shall be used as a due process by those who believe that a rule, procedure or policy has been applied in an unfair or inequitable manner or that there has been unfair or improper treatment by a person or persons.

**Informal mediation:** Either party may request the Training Director to act as a mediator, or to help in selecting a mediator who is agreeable to both the Fellow and the supervisor or staff member. Such mediation may facilitate a satisfactory resolution through continued discussion. Alternatively, mediation may result in recommended changes to the training environment.

**Formal grievance:** If informal measures are not successful, or in the event of a serious grievance, the Fellow may initiate a formal grievance process by sending a written request for intervention to the Training Director.

- The Training Director will notify the Section Chief of Psychology of the grievance and call a meeting of the Pediatric Psychology Fellowship Training Committee to review the complaint. The Fellow

and supervisor or staff member will be notified of the date that such a review will occur, and will be given allowed the Committee with any relevant information regarding the grievance.

- Based upon a review of the grievance and any relevant information, the Pediatric Psychology Fellowship Training Committee will determine the course of action that best promotes the Fellow's training experience. This may include recommended changes within the placement itself, a change in supervisory assignment, a change in rotation placement, or other training modifications.
- The fellow will be informed in writing of the Training Committee's decision, and asked to indicate whether they accept or dispute the decision within three weeks of the filing of the grievance. If the Fellow accepts the decision, the recommendations will be implemented. If the Fellow disagrees with the decision, he or she may appeal to the Section Chief of Psychology and a non-Psychology UAMS or ACH Administrator. The Section Chief of Psychology and the non-Psychology UAMS or ACH Administrator will render the appeal decision, which will be communicated to all involved parties, and to the Training Committee.

If a formal grievance involves any member of the Training Committee (including the Training Director), that member will recuse himself or herself from participating in the review of the grievance due to a conflict of interest. A grievance regarding the Training Director may be submitted directly to the Section Chief of Psychology or non-Psychology UAMS or ACH Administrator for review and resolution. Any findings resulting from a review of a Fellow grievance that involves unethical, inappropriate, or unlawful faculty or staff behavior will be submitted to the Chair of Pediatrics for appropriate personnel action.

These procedures are not intended to prevent a Fellow from pursuing a grievance under any other mechanisms available to UAMS employees, including EEO, or under the mechanisms of any relevant professional organization, including APA or APPIC. Fellows are also advised that they may pursue any complaint regarding unethical or unlawful conduct on the part of psychologists licensed in the State of Arkansas by contacting the Arkansas Psychology Board.

### **Informal Resolution of Concerns**

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If a Fellow has any type of concern during their training year, expectations are that the Fellow will first attempt to address the situation directly with the affected individual or individuals. For instance, a Fellow may have concerns about the way they are treated, how supervision is being conducted, ethical or safety concerns, or other issues. If speaking directly with the individual is for some reason not appropriate, the Fellow should first consult with the Training Director or designated faculty mentor. If that is also not deemed a viable option, the fellow should then speak with the Section Chief of Psychology. The Fellow may also utilize their year-long supervisor for guidance and support, but this supervisor will not act in a formal capacity to resolve the issue.

Our training faculty strives to provide a supportive and open atmosphere that allows the resolution of any issues within this normal sequence. However, we recognize that the inherently unequal power in the supervisor/supervisee relationship may conceivably lead a Fellow to be reluctant to discuss some concerns with training faculty. Therefore, at any time during the training year, any Fellow who wishes to consult with someone outside of the program in an informal and confidential avenue for discussion and problem-solving.

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**SECTION: HUMAN RESOURCES**  
**AREA: EMPLOYEE RELATIONS**  
**SUBJECT: BASIC CODE OF CONDUCT**

### **PURPOSE**

This policy outlines the general guidelines for governing employee conduct and behavioral standards.

### **SCOPE**

This policy applies to all UAMS employees.

### **POLICY**

This code communicates general guidelines for appropriate conduct for all UAMS employees. Employees are expected to support UAMS' mission and core values while creating an inclusive and respectful work environment. The ability of UAMS to meet its mission will increasingly depend on, and be strengthened by, incorporating constructive diversity and inclusion in its employees and students.

The Office of Human Resources should be contacted with any questions related to this policy. Appropriate corrective measures should be taken in instances where there have been violations of this Code of Conduct. Such actions should be undertaken with care, objectivity, and full consideration for the rights and interests of the employees and UAMS.

### **PROCEDURE**

#### **Interpersonal Relations:**

1. Employees must refrain from using abusive, provocative, or profane language, and should avoid creating or being party to a disturbance or physical violence.
2. Employees should observe the principle of mutual respect in their contacts with patients, visitors and students, and in their working relationships with faculty and other employees.
3. Employees should treat others with fairness and impartiality.
4. Employees should not engage in horseplay, scuffling, running, throwing objects, or immoral or indecent behavior on the University premises.
5. Employees should not have other employees or guests visit them in their work areas for non- work related purposes.

## **Workplace Bullying:**

UAMS does not tolerate workplace bullying behavior, whether intentional or unintentional. Workplace bullying is behavior that creates an abusive work environment for an employee or employees. Bullying behavior is behavior in the workplace that a reasonable person would find hostile, offensive, and not related to an employer's legitimate business interests. Workplace bullying can include group bullying, peer-to-peer bullying, supervisor-to-subordinate bullying, and situations when a subordinate employee subjects a supervisory-level employee to bullying. These acts may occur as a single, severe incident or as repeated incidents, and may include, but are not necessarily limited to, the following:

1. Physical bullying includes pushing, shoving, kicking, poking, and/or tripping another, assault or threat of a physical assault, and damage to a person's work area, work product, or property.
2. Verbal bullying includes: (i) slandering, ridiculing, insulting or maligning a person or his or her family; (ii) persistent name calling that is hurtful, insulting, or humiliating; (iii) using a person as the butt of jokes; or (iv) abusive and offensive remarks.
3. Nonverbal bullying includes directing threatening gestures toward a person or invading personal space after being asked to move or step away.
4. Cyberbullying includes bullying an individual using any electronic format, including but not limited to, the Internet, interactive and digital technologies, or mobile phones.
5. Exclusion includes socially or physically isolating, excluding, or disregarding a person in work-related activities.

## **Social Media:**

1. UAMS expects employees to use good judgment when posting on social media sites. An employee's social media activity that violates this Basic Code of Conduct or other UAMS policies may subject the employee to disciplinary action in accordance with UAMS *Administrative Guide Policy 4.4.02, Employee Discipline* up to and including termination.

## **Physical Appearance and Presentation:**

1. Employees, in certain positions, must wear prescribed uniforms while on duty. Department directors or their designees are responsible for informing employees of specific requirements.
2. Employees are expected to come to work clean, neat, and wearing attire appropriate for the work environment. Employees should be mindful and not wear excessive fragrances or extreme hair color/styles.

3. Employees are expected to wear their identification badges while on duty. Badges are to be clearly visible and worn above the waist. Employees must remove their identification badges when not in an official work capacity.
4. Employees are expected to be fit for work, to report to work fit for duty, and to remain fit while on duty.
5. Employees must not report to work or be on the University premises if impaired by or under the influence of intoxicating liquor or controlled substances, or by giving the appearance of intoxication, including but not limited to smelling of alcohol.
6. Employees, when purporting to represent the University, must accurately and honestly represent themselves and their positions to patients, visitors, students, other employees, and the general public, and must not use another employee's identification badge.
7. Employees who are not on duty should not be on the University premises, except for valid reasons.

#### **Job Duties and Functions:**

1. Employees must follow, within the definitions of the position description, all oral (other duties as assigned) and posted work assignments.
2. Employees must assure attention, care, respect, and regard in performance of all position responsibilities.
3. Employees must ensure compliance with all UAMS policies.

#### **Attendance:**

1. Employees must maintain regular and punctual attendance. Departments should follow their established Attendance Policy for reporting absenteeism from work.
2. Employees **must** obtain permission from their supervisor, in advance, when it becomes necessary to leave their work areas during working hours.
3. Employees are expected, whenever possible, to respond to work assignments outside of regularly scheduled hours as it may be necessary to provide essential staffing or support services.

#### **Maintaining Records:**

1. Employees must accurately record their working time, and employees may not record work time of other employees. If done inappropriately, this can be grounds for immediate dismissal.



2. Employees must not enter inaccurate or false information on any University or hospital records, including patient records, time records, employment applications or other personnel records. This can be grounds for immediate dismissal.

### **Health and Safety:**

1. Employees are not allowed to smoke on UAMS property. UAMS is a Smoke-Free Campus.
2. Employees are **strictly forbidden** from sleeping on the job, except for when in an **on-call status**. Employees must consult with their supervisor or designee in these instances.
3. Employees are expected to know and observe established fire and emergency procedures.
4. Employees should use only authorized University entrances and exits.
5. Employees must observe safe work practices and follow all published safety rules.

### **Property Access and Use Privileges:**

1. Employees are expected to use the Internet for business purposes only. Disciplinary action will be taken for any inappropriate use.
2. UAMS telephones, fax machines, and other telecommunication devices are intended for official UAMS business transactions and should not be used for personal reasons, except in cases of an urgent nature.
3. The use of personal cellular telephones and other electronic devices should be limited to where there is no interference with completion of job duties and responsibilities.
4. Employees must always use or operate University property and equipment in a safe and proper manner. Making equipment inoperative or failing to use safety devices can result in injuries to employees or others.
5. Employees should use UAMS property for authorized purposes only.
6. Employees should assist in keeping University equipment, buildings and grounds clean, orderly and in good condition, and should avoid creating or contributing to unsanitary or unsightly conditions.

### **Solicitations:**

1. Employees may engage in solicitation and/or distribution of printed or written material or posting and/or removal of notices or signs only when permitted or authorized in advance to do so.

2. Employees should refer to *Administrative Guide Policy 4.4.09, Ethical Conduct/Gift Policy*, regarding gratuities, gifts, or personal favors from vendors, patients or visitors.

### **Campus Police and Security Measures:**

1. Employees finding property on the University premises must deliver such property to the Campus Police Department ((501) 686-7777) where a lost and found service is provided.
2. Employees must make all packages, handbags, purses, tote bags, briefcases, shopping bags, or other containers being brought into or taken from the University buildings available for inspection upon request by supervisors or the Campus Police Department.
3. Employees **must not**, under any circumstances, bring unauthorized firearms or weapons of any kind onto the University premises.
4. Employees must not commit any criminal act on the University premises, or against patients, visitors, students, or fellow employees.
5. Employees are strictly forbidden from stealing, misappropriating, or removing from University premises any property belonging to patients, visitors, students, contractors, or other employees of the University. This includes the removal of any University property that has been discarded and sample products.

### **REFERENCE**

UAMS Administrative Guide Policy 3.1.03, Telephone Use Policy  
UAMS Administrative Guide Policy 11.4.01, Employee/Student Incident/Injury Reporting  
UAMS Administrative Guide Policy 11.4.15, Unsafe Equipment and Furniture  
UAMS Administrative Guide Policy 3.1.01, Smoking/Tobacco Use Policy  
UAMS Administrative Guide Policy 4.4.02, Employee Discipline  
UAMS Administrative Guide Policy 4.4.09, Ethical Conduct/Gift Policy  
UAMS Administrative Guide Policy 11.3.07, Workplace Violence Prevention Plan  
UAMS Administrative Guide Policy 2.1.42, HIPAA Sanctions Policy  
UAMS Administrative Guide Policy 2.1.08, Reporting of HIPAA Violations

Signature: \_\_\_\_\_



Date: December 10, 2019