



DUE PROCESS AND GRIEVANCE PROCEDURES Postdoctoral Psychology Residency Training Program

University Health Services-Mental Health (MHS) is committed to maintaining a postdoctoral psychology residency training program that facilitates learning and professional growth. Fundamental to a successful training experience is the provision of ongoing feedback to postdoctoral residents (“postdocs”) that facilitates professional and personal growth. We place a high premium on creating a work environment that is professionally stimulating, open to change, and sufficiently flexible to accommodate individual needs and requirements.

We expect that postdocs will enter the program with valuable skills that still need further development and that they will experience challenges that need to be addressed, either through an informal or formal process. It is a goal of the postdoc program to provide opportunities for postdocs to acknowledge and address these areas of concern. In the majority of cases, areas of concern are restricted to developmental problems and can be resolved through means agreed upon in an informal setting. In some cases, a more formal process is needed to outline specific steps to be taken. Both options will be described in this document.

We encourage informal conflict resolution whenever possible, particularly when the issue of concern is one that does not warrant disciplinary action. However, due process and grievance procedures are necessary to ensure that specific evaluative and appeal procedures are applied consistently and objectively to all postdocs. This document defines professional behavior expectations and also describes due process and grievance procedures. In cases where state or federal laws have been violated, the dictates of the law precede these due process and grievance procedures.

PROFESSIONAL BEHAVIOR REQUIREMENTS

Postdocs are expected to adhere to the highest standards of professional behavior and ethics. Postdocs should demonstrate proper behavior and ethical standards and actions in all professional settings. Postdocs are expected to adhere to the ethical standards of the American Psychological Association. Failure to meet these standards and/or any of the educational and professional behavior requirements specified below will lead to review and may result in remedial or disciplinary action.

University of Wisconsin System Administrative Code: UWS 14, 17, and 18

All postdocs are subject to the rules and regulations, procedural rights, and protections contained in UWS 14, 17 and 18 of the University of Wisconsin System Administrative Code that governs postdoc academic and nonacademic disciplinary procedures and conduct on university land, and to all other applicable state and federal law. Violation of UWS 14, 17 or 18 may result in disciplinary action by the university, and may include disciplinary probation, suspension or, expulsion.

PROFESSIONAL BEHAVIOR

In addition to the requirements of UWS 14, 17, and 18, as well as the ethical standards of the American Psychological Association, postdocs must practice professional behavior. Unprofessional behavior may violate any or all of these codes and standards subjecting the postdoc to discipline and/or program action. Any such behavior will be considered in the evaluation of postdocs and may be grounds for remediation, suspension, or dismissal.

Preamble. In conferring the certificate of postdoc completion, MHS certifies that the postdoc is competent to pursue a career as a psychologist. In addition to certifying competency in psychological knowledge and skills, the certificate of completion means that the postdoc has demonstrated intellectual honesty, exemplary moral and ethical character, a responsible, civil attitude towards clients and fellow health care workers, and a strong sense of personal integrity. The purpose of defining professional behavior is to create a basic framework to assist postdocs in learning to make ethical decisions in the academic and clinical environments.

The following are professional behavior guidelines and responsibilities for postdocs. Each expectation includes examples of violations of professional behavior standards that could lead to review. Violations of these standards will be addressed in accord with level of severity.

Interpersonal Relationships

Postdocs shall communicate with and treat supervisors, fellow postdocs, clients, staff, and the public in a professional manner. This includes addressing them in a collegial manner and respecting individual rights to hold opinions that differ from their own.

Examples of violations are:

- interfering or causing disruption with other postdocs, clients, or staff
- dating a client or otherwise exploiting the therapeutic relationship
- making inappropriate or demeaning references to a client's social identities, intelligence, or mental status
- failing to respect the rights of clients, fellow postdocs, staff, and others
- supporting harassment and discrimination
- using disrespectful language in communication with clients, fellow postdocs, staff or anyone else in clinical or professional settings.

Honesty, Integrity and Confidentiality

The therapeutic relationship is dependent on the client's assurance that the psychologist or postdoc will not divulge sensitive information to others. Thus, client mental health records and all conversations between postdocs and clients are considered confidential and shall not be disclosed or made available to any person not directly involved in the client's care. In the pursuit and achievement of all academic and professional matters, postdocs shall act fairly and honestly.

Examples of violations are:

- having possession of unauthorized copies of client records
- discussing or inappropriately addressing clients in public
- making an assertion (e.g., oral, written, or by gesture) that intentionally deceives or misleads
- failing to be truthful and forthright in all dealings with clients, the public, fellow postdocs, staff, and others with whom the postdoc interacts.

Professional Appearance

Postdocs shall maintain a physical appearance and personal hygiene that is conducive to developing effective relationships. Postdocs who do not appear well groomed and appropriately attired when interacting with a client are at risk for jeopardizing client respect and for creating a barrier to effective communication.

Examples of violations are:

- wearing wrinkled or dirty clothing
- continuing to have hygiene issues after the concern has been identified and discussed

Professional Responsibility and Judgment

Postdocs are expected to meet their clinical and educational responsibilities and competency expectations at all times. While personal issues can emerge that conflict or interfere with such obligations, every effort should be made by the postdoc to resolve the conflict in a professional manner by assuring that client care is not compromised and that appropriate members of the health care team and administration are notified in a timely fashion.

Examples of violations are:

- not contacting a supervisor or administrator for permission to take care of personal business that results in being late, leaving early, or otherwise interrupting clinical duties
- being under the influence of alcohol and/or other non-prescribed drugs while participating in clinical or other educational activities
- creating a public disturbance.

Definition of Problematic Behavior

Problematic behavior is defined broadly as an interference in professional functioning that is reflected in one or more of the following ways:

- an inability and/or unwillingness to acquire and integrate professional standards into one's repertoire of professional behavior
- an inability to acquire professional skills in order to reach an acceptable level of competency
- an inability to control personal stress, strong emotional reactions, and/or psychological dysfunction that interferes with professional functioning.

Professional judgment by supervisors or staff determines when a postdoc's behavior becomes problematic. Postdocs may exhibit behaviors, attitudes, or characteristics which may be concerning and require remediation, but are not unexpected or excessive parts of professional development for psychologists-in-training.

Problematic behavior typically becomes identified when one or more of the following conditions occur:

- the postdoc does not acknowledge, understand, or address the problem when it is identified
- the problem is not merely a reflection of a skill deficit which can be rectified by academic or didactic training
- the quality of services delivered by the postdoc is sufficiently negatively affected
- the problem is not restricted to one area of professional functioning
- a disproportionate amount of attention by training personnel is required
- the postdoc's behavior does not change as a function of feedback, remediation efforts, and/or time.

Intervention Alternatives

There are several alternatives that may be imposed to address problematic behavior.

Verbal Notification to the postdoc identifies the need to discontinue the inappropriate behavior. This informal resolution (no record is kept) of conflict is encouraged whenever possible.

All staff members can state a concern and have the right to have that concern addressed. Ideally, the staff member who has a concern will be able to resolve it informally in direct conversation with the postdoc. In some cases, it may be either more appropriate or more effective to share the concern with a supervisor who can assist in resolving the conflict.

Some examples:

- If there is a concern/complaint about the clinical work of a postdoc, the postdoc's clinical

supervisor is the person most likely to address it with the postdoc, and then discuss methods for addressing the concern. The supervisor can consult with the Director of Training as needed about possible further action.

- If a support staff has a concern about a postdoc, the Postdoc Coordinator is responsible for addressing the issue with the postdoc. Ideally, informal resolution can be reached through discussion.

Written Notification to the postdoc formally acknowledges:

- the discrepancy between the postdoc's performance and MHS expectations.
- that the postdoc's supervisor, the Postdoc Coordinator, the Director of Training, and the Training Committee are aware of and concerned about the behavior
- that the concern has been brought to the attention of the postdoc
- that the postdoc's supervisor, the Postdoc Coordinator, the Director of Training, and/or the Training Committee will work with the postdoc to address the problem (e.g., remediation/probation)

A copy of the written notification will be kept in the postdoc's personnel file.

Remediation/Probation is a specific, time-limited, goal-defined, closely-supervised period of training designed to assess the ability of the postdoc to complete the training program and return the postdoc to a more fully functioning state.

Remediation/probation may include:

- increasing the amount of supervision, either with the same or other supervisors
- changing the format, emphasis, and/or focus of supervision
- recommending personal therapy
- adjusting the postdoc's clinical or other workload
- requiring specific academic or didactic training
- requiring a leave of absence.

Consideration of a formalized remediation/probation plan should include

- a behavioral description of the problem
- specific behaviors targeted for remediation
- methods (e.g., personal counseling, self-structured behavior change, additional supervision, or other appropriate means) to reach these goals
- specific outcome measures to assess expected behavior patterns, goals, and/or competence
- criteria for ending the probationary status
- dates to reevaluate the postdoc's progress and competence
- consequences of failing to accomplish remediation (e.g., privileges may be revoked, postdoc may be terminated for unsuccessful completion of the remediation/probation plan)
- a summary of the options available to the postdoc.

The postdoc will meet regularly with the postdoc supervisor to receive feedback and monitor the formalized remediation/probation process. The postdoc, postdoc supervisor, and Director of Training may also meet to discuss and review the postdoc's progress. This process should allow the postdoc opportunity to communicate and respond to the information presented. If the Director of Training feels that client care or other considerations (e.g., staff morale) are significantly compromised, then the postdoc may be temporarily suspended while due process procedures are undertaken.

Several possible outcomes may emerge from the remediation/probation process:

- Continuation in the program. The identified concern(s) no longer present a significant problem and the postdoc is no longer on remediation/probation
- Continued remediation/probation: The postdoc has made progress in addressing the identified concern(s), but has not yet attained the expected degree of competence/level of improvement in

one or more problem areas. An updated remediation/probation plan is prepared, with dates set for continued re-evaluation

- Limiting clinical work to those areas that the postdoc is deemed competent to perform
- Suspension
- Administrative leave
- Dismissal from the program. The postdoc has failed to attain the identified goals and there is no expectation that the postdoc can reasonably attain them in the near future.

All documentation about the remediation/probation process remains in the postdoc's file along with written confirmation of the results following the remediation/probationary period.

Definitions

Suspension is a temporary discontinuation of a postdoc's direct service activities. Direct service activities will be suspended for a specified period as determined by the Director of Training and/or the MHS Director. Due process procedures may be implemented during the suspension period. At the end of the suspension period, the Director of Training and/or the MHS Director will assess the postdoc's capacity for effective functioning and determine when direct services can be resumed.

Administrative Leave is the temporary withdrawal of all postdoc responsibilities and privileges. The Director of Training will inform the postdoc of the effects the administrative leave will have on the postdoc's stipend and accrual of benefits.

Dismissal from the postdoc residency is the permanent withdrawal of all responsibilities and privileges. Dismissal can occur when specific interventions do not, after a reasonable time period, rectify the problem and the postdoc seems unable or unwilling to alter behavior.

Administrative leave or dismissal can be invoked when there is:

- a severe violation of the APA Code of Ethics
- imminent physical or psychological harm to a client
- the postdoc is unable to complete remediation/probation terms
- the postdoc is unable to complete the postdoc residency due to physical, mental, or emotional concerns.

Suspension, administrative leave, and/or dismissal requires MHS Director approval.

POSTDOC DUE PROCESS PROCEDURES

Cases involving educational, behavioral, or professional problems

If at any time a postdoc is identified as having educational, behavioral, or professional problems, then a series of steps may be initiated to facilitate resolution of the problem. If repeated attempts to address the problem have not been successful, then it may be necessary to initiate a process of probation or dismissal from the postdoc program. These due process procedures have been developed to protect postdoc rights and the integrity of the postdoc program.

1. When a determination is made that an educational, behavioral, or professional problem exists, the postdoc supervisor will notify the postdoc about the problem. The postdoc and the postdoc's supervisor will then discuss the problem and outline alternatives to rectify the problem. This interactional process should allow for ample communication and opportunities for the postdoc to respond to the information presented. An informal resolution will then be developed to address the problem.

2. If the problem persists without appropriate resolution (or, the postdoc receives a rating on a quarterly evaluation that competency expectations are not consistently being met, for example), the postdoc supervisor and Director of Training meet to formally develop a course of action to address the

problem.

3. The postdoc is informed that the postdoc supervisor and Director of Training are meeting and has the opportunity to provide information related to the problematic behavior, attitude, or characteristics. At the discretion of the postdoc supervisor and Director of Training, the postdoc may be invited to attend the meeting and may be accompanied by an advisor/advocate. The advisor/advocate may not directly participate in the meeting without permission from the Director of Training. The postdoc will be given adequate time to prepare for the meeting and also may be informed of interventions (e.g., continue with postdoc residency activities, stop all postdoc residency activities) to be implemented prior to the meeting. The postdoc may also have the right to question any witnesses as indicated.

4. The meeting shall not be bound by common law or statutory rules of evidence and may admit information having reasonable probative value, but shall exclude immaterial, irrelevant, or unduly repetitious information, and shall give effect to recognized legal privileges.

5. All deliberations and actions of the postdoc supervisor and Director of Training shall be in closed session. Legal counsel or formal advocate for the postdoc supervisor and/or Director of Training may also be present during the closed session.

6. The postdoc supervisor and Director of Training make a decision that is shared with the postdoc.

Possible decisions include:

- Verbal notification
- Written notification
- Denial of specified privileges
- Imposition of terms and conditions on postdoc status
- Restitution
- Remediation/Probation or continued remediation/probation
- Suspension
- Administrative leave
- Dismissal.

7. The postdoc supervisor and Director of Training shall prepare written findings of fact and a written statement of their decision based upon the record of the meeting. If the decision of the postdoc supervisor and Director of Training is adverse to the postdoc, the decision must include notification that the postdoc may appeal the decision.

8. The decision of the postdoc supervisor and Director of Training shall be delivered in writing to the postdoc either by personal delivery, email, or by first class US mail. The postdoc shall receive the decision within 30 days of the initial meeting between the postdoc supervisor and Director of Training, or an alternative date as mutually agreed upon by both parties. For purposes of due process, days are calendar days excluding holidays.

9. A copy of the decision, signed and dated by the postdoc, postdoc supervisor, and Director of Training will be retained in the postdoc's personnel file.

Cases involving allegations of inappropriate or unprofessional behavior

There are behaviors that extend beyond "problematic behaviors" and are regarded as more serious violations that may require the filing of a grievance and activation of a formal review.

Such behaviors include, but are not limited to, the following:

- Sexual harassment
- Insubordinate behavior
- Exploitative or abusive behavior

- Behaviors not listed elsewhere in this document but which represent an infringement on the rights, privileges and responsibilities of trainees, professional, and support staff and/or other volunteers/employees or clients of UHS
- Removal of a client or patient's protected health information from UHS
- Violation of the APA Code of Ethics.

1. Allegations of inappropriate or unprofessional behavior made by faculty, staff, fellow postdocs, clients or members of the non-academic community must be presented in writing to the Director of Training. In the case when the Director of Training is the supervisor of the postdoc, a designee for the Director of Training will be appointed.

2. The Director of Training shall communicate the allegations to the postdoc and shall schedule a meeting to discuss the matter with the postdoc.

3. If a postdoc is charged with violating the APA Code of Ethics, the postdoc may be temporarily suspended from engaging in any and/or all clinical or direct services (e.g., supervision of practicum student). The Director of Training makes this decision in consultation with the MHS Director. The suspension is immediate upon verbal notification, with written notification (including reasons) received by the postdoc within one working day.

4. Following an investigation and review of all available information, the Director of Training shall decide if the allegations potentially warrant a formal review. If so, the Director of Training shall notify the postdoc, explain the findings, and inform the postdoc that the issue will be examined by an Ad Hoc Review Committee.

The Ad Hoc Review Committee, made up of three MHS staff members, will be formed within ten (10) working days from the date that the postdoc was informed of the formal review. The postdoc may designate one member of the Ad Hoc Review Committee from the MHS senior staff. The Director of Training, or designee, will designate the other two members. The Director of Training is prohibited from serving on the Ad Hoc Review Committee.

5. The Ad Hoc Review Committee shall review, monitor, and/or determine formal action as indicated. If formal action is required, the postdoc is informed of such action in writing and the postdoc then indicates in writing whether to accept or challenge the action. If the postdoc accepts the decision, implementation occurs. If the postdoc challenges the decision, appeal procedures are initiated. Dictates of the law will take precedence over any formal or informal processes at MHS.

Appeals Procedure

1. If a postdoc does not agree with a formal evaluation/decision made by a supervisor, the Director of Training, or an Ad Hoc Review Committee, the postdoc may appeal the decision to the MHS Director by submitting a letter of addendum or disagreement to the formal evaluation/decision.

In this letter, the postdoc may request an appeal based on:

- denial of due process in the evaluation/grievance procedure (e.g., evaluation criteria not presented prior to evaluation or opportunity to demonstrate proficiency not provided prior to evaluation)
- denial of opportunity to present data to refute criticisms in the evaluation/grievance process.

The appeal request must be submitted no later than five (5) working days after the decision/evaluation is finalized, must identify the specific aspect of the evaluation with which the postdoc disagrees and must suggest what form of modification is requested.

2. If an appeal is appropriately requested, the following steps will be taken:

- An Appeal Committee, made up of three staff members, will be formed within ten (10) working

days of receipt of the appeal. The postdoc may designate one member of the Appeal Committee from the MHS senior staff. The MHS Director, or designee, will designate the other two members, with recommendations from the Director of Training. The Director of Training and the MHS Director are prohibited from serving on the Appeal Committee.

- The MHS Director and Director of Training review the appeal procedures and make sure that no committee member has a conflict of interest in the case presented.

3. The postdoc and other involved parties (e.g., supervisor) will be notified when the appeal meeting will be held.

4. The postdoc and other involved parties (e.g., supervisor) may submit written statements, request a personal interview, or request that the Appeal Committee interview other individuals with relevant information, as deemed appropriate.

5. The Appeal Committee will meet within 30 working days of the receipt of the appeal and will present a written summary of the Committee's findings and any recommendations to the MHS Director.

6. The MHS Director will take action based on the Appeal Committee's findings. Possible outcomes may include:

- accept the original evaluation report and recommend a plan of remediation
- request that the supervisor write a new report to include specific changes
- rewrite the report or add an addendum to the original evaluation
- Recommend that probation or another remedial plan be implemented.

7. The MHS Director or Director of Training will communicate the recommendation in writing to the postdoc in a timely manner.

Final appeal to the UHS Director

1. If the postdoc is dissatisfied with the decision of the MHS Director, the postdoc can submit a written request for a second and final appeal to the UHS Director within five (5) working days of the MHS Director's written decision. A request for reconsideration should be considered only in cases in which the postdoc wishes to present new and/or additional facts.

2. In the request for an appeal, the postdoc should state the specific ground(s) of appeal which is/are limited to those listed in subsection 3 below. The burden of proof shall be on the postdoc to demonstrate that the decision was based to a significant degree on one or more of the conditions below:

- UHS or UW-Madison policies were incorrectly applied
- The decision is contrary to existing state or federal law
- Proper procedures were not followed
- Unfounded, arbitrary or irrelevant assumptions of fact regarding the postdoc's performance or behavior were made.

3. If an appeal is appropriately requested, the following steps will be taken:

- A Final Appeal Committee, made up of three MHS staff members, will be formed within ten (10) working days of receipt of the appeal. The postdoc may designate one member of the Final Appeal Committee from the MHS senior staff. The UHS Executive Director, or designee, will designate the other two members.
- The UHS Executive Director reviews the appeal procedures and make sure that no committee member has a conflict of interest in the case presented.

4. The postdoc may appear before the Final Appeal Committee to provide information consistent with subsection 2. An advisor/advocate may accompany the postdoc to the appeal meeting with the Final Appeal Committee but may not address the Committee directly without its permission.

- The meeting will be chaired by the UHS Executive Director or their designee
- This meeting of the Final Appeal Committee shall be the final opportunity for the postdoc to present new or additional facts
- All Final Appeal Committee deliberations and actions regarding postdoc appeals shall be held in closed session. Only members and ex officio members of the Final Appeal Committee may be present during the closed session, including any legal counsel
- The Final Appeal Committee may take any of the following actions on the appeal:
 - Reject the appeal
 - Reverse the decision based on one or more of the conditions for the appeal
 - Remand the matter for reconsideration by the MHS Director, Director of Training, and/or Ad Hoc Review Committee for appropriate corrective action under instructions from the Final Appeal Committee.

The postdoc shall be notified in writing of the Final Appeal Committee's action on the appeal, stating the reasons for the decision. The postdoc shall receive the Committee's decision within 30 days of the Committee's initial meeting, or an alternative date as mutually agreed upon by both parties.

GRIEVANCE PROCEDURES

A postdoc who feels that they have been treated unfairly by a member of UHS has the right to address their concerns and receive prompt action regarding their grievance. To ensure a prompt and fair hearing of any complaint, and to protect the rights of those involved, the following general grievance procedures will apply:

1. Those involved are encouraged to first directly discuss any problems or concerns with the person to whom the grievance is directed. Postdocs are also advised to consult with their supervisor, the Postdoc Coordinator, and/or the Director of Training, who are expected to be receptive to complaints, attempt to develop a solution with the postdoc, and to seek appropriate consultation as necessary.
2. If no agreement can be reached, the grievance should be brought to the Director of Training, who acts at the first level of adjudication and who will evaluate the grievance and try to negotiate a resolution. The Director of Training may alternatively decide to select a mediator who is agreeable to all parties involved in the grievance. Any grievance about the Director of Training may be brought to the MHS Director, who then serves as the first level of adjudication. If the Director of Training (or MHS Director) cannot negotiate an informal resolution satisfactory to both parties, either party may submit the issue in writing to the Director of Training, who then convenes an Ad Hoc Grievance Committee to review the grievance. The Ad Hoc Grievance Committee is charged with deciding on specific grievances and bringing this decision to the attention of the appropriate individual(s) or group(s).

The written grievance request must contain brief explanations of the challenge or grievance, describe the desired resolution being sought, and specify which policies, rules, regulations, professional standards, or statutes have allegedly been violated, misinterpreted, or misapplied.

The formal grievance process may also be initiated if a party believes any aspect of the training program is unfair, biased, unprofessional, or not consistent with other policies or procedures of UHS. The party is encouraged to consult formally or informally with APA, APPIC, or legal counsel about the problem, dissatisfaction, or grievance.

The Ad Hoc Grievance Committee includes the Director of Training, who chairs the committee, and two other MHS staff members. The postdoc may designate one member of the Committee from the senior staff. The MHS Director will chair the Ad Hoc Grievance Committee in a grievance against the Director of Training.

3. The Ad Hoc Grievance Committee will meet within 30 days of receipt of the grievance or an alternative date as mutually agreed upon by both parties. All parties will be notified of the meeting date and may present their side of the grievance in writing to the Committee. At the discretion of the Committee, involved parties may be given an opportunity to appear before the Committee and provide additional information.
4. After reviewing the grievance and any other relevant information, the Ad Hoc Grievance Committee will determine a resolution within 30 days of the meeting date. The Committee will maintain minutes of all its meetings and records of all testimony presented to it.
5. If the Ad Hoc Grievance Committee is not able to come to resolution, then the Committee may take any one or combination of the following actions:
 - refer the grievance to the next scheduled Training Committee meeting
 - call a special Training Committee meeting to consider the grievance
 - consult with legal counsel
 - consult with other professional organizations (e.g., APA, APPIC)
 - advise the Training Committee on particular areas of concern in the management of the grievance.

6. The Training Committee, upon request from the Ad Hoc Grievance Committee, will review and evaluate grievances not otherwise resolved. The decision of the Training Committee will be determined by majority vote.

7. All involved parties will be informed in writing of the Ad Hoc Grievance and/or Training Committee's decision.

8. All appeals are directed to the MHS Director. The MHS Director will then evaluate all information and render a decision within 30 days of receipt of written appeal, which will be communicated to all involved parties and the Training Committee.

10. These procedures are not intended to prevent a postdoc from pursuing a grievance under other mechanisms available to UHS or UW-Madison employees or under the mechanisms of any relevant professional organization (e.g., APA, APPIC). Postdocs are also advised that they may pursue any complaint of unethical or unlawful conduct on the part of health professionals licensed in Wisconsin by contacting the Department of Safety and Professional Services.

MHS Postdoc Date

Postdoc Coordinator Date

MHS Director of Training Date