

DISCRIMINATION AND MISTREATMENT POLICY

University of Louisville
Department of Neurological Surgery

Divisions of Neurosurgery & Physical Medicine and Rehabilitation
&
Kentucky Spinal Cord Injury Research Center

Vision Statement

To empower all members of our community to become exemplary leaders, engaged citizens, and lifelong learners.

Mission Statement

In line with the Cardinal Principals, and under the tenets of making the University of Louisville a great place to work, learn, and invest, the Department of Neurological Surgery and Kentucky Spinal Cord Injury Research Center- Diversity, Equity & Inclusion (DEI) Committee is committed to improving transparency of our intent, conduct, and communication. Promoting a sense of accountability, integrity, respect, and trust are essential values that foster a safe environment where all members of our community can thrive and be successful.

Use of a Safe Reporter Advocate (SRA)

The SRAs are members of the UofL community available to support those individuals who experience mistreatment and unethical behavior by documenting and ensuring those events are communicated to leadership. This is a *voluntary option* that all members of our community can use.

The University of Louisville's Department of Neurological Surgery (Divisions of Neurosurgery, Physical Medicine and Rehabilitation and the Kentucky Spinal Cord Injury Research Center) and all affiliate members are committed to ensuring an environment that is respectful of diversity of opinion, race, gender, gender identity, gender expression, religion, sexual orientation, age, disability and socioeconomic status. Mutual respect and collegiality among faculty, staff, fellows, residents and students is essential to maintaining an environment conducive to learning. All members of the UofL community are expected to adhere to the Code of Conduct.

The purpose of this policy is to define mistreatment and to provide mechanisms by which anyone can report mistreatments that have occurred against them or others without fear of retaliation.

Definition of Mistreatment: Mistreatment arises when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process or work environment. Exclusion when deliberate and/or repetitive also interferes with a student's opportunity to learn and a faculty or staff's ability to work. Disrespectful behaviors, including abuse, harassment, and discrimination, are inherently destructive to student/teacher/faculty/staff relationships.

- **Abuse** is to treat in a harmful, injurious, or offensive way; to pressure into performing personal services, such as shopping or babysitting (especially if an evaluative or potentially evaluative relationship exists); to attack in words; to speak insultingly, harshly, and unjustly to or about a person; and to revile by name calling or speaking unkindly to or about an individual in a contentious manner. Abuse is further defined to be particularly unnecessary or avoidable acts or words of a negative nature inflicted by one person on another person or persons. This includes, but is not limited to, verbal (swearing, humiliation), emotional (intentional neglect, a hostile environment), behavioral (creating a hostile environment), sexual (physical or verbal advances, discomforting attempts at "humor"), and physical harassment or assault (threats, harm).
- **Harassment** is verbal or physical conduct that creates an intimidating, hostile work or learning environment in which submission to such conduct is a condition of continuing one's professional training. Sexual harassment has mandated procedures and protections. Please see Appendix D for information on Title IX.
- **Discrimination** is those behaviors, actions, interactions, and policies that have an adverse effect because of disparate treatment, disparate impact, or the creation of a hostile or intimidating work or learning environment due to race, gender, religion, sexual orientation, age, disability and socioeconomic status or other identities.
- **Microaggression** is defined as brief, everyday exchanges that send denigrating messages to certain individuals because of their group membership. Microaggression can be divided into three groups: micro-assaults, micro-insults and micro-invalidations.
- **Retaliation** is an action that might deter a reasonable person from participating in activity protected by antidiscrimination and/or whistleblower laws. Protected activity includes: complaining about discriminatory or harassing behavior; disclosing/reporting violations of law, rule or procedure or fraud, waste or abuse; and participating in discrimination or whistleblower proceedings (such as an investigation or lawsuit). Retaliatory actions are not limited to formal personnel actions such as termination, demotion, non-promotion, or non-selection. Retaliatory actions are broadly defined to harassing behavior, significant changes to job duties or working conditions, and even threats to take personnel actions.
- **Other Concerns:** While not considered mistreatment, situations that may be considered poor judgment need to be avoided. These include but are not limited to ascribing job duties outside of the defined scope of work, inappropriate comments about the individual's appearance (clothes, hair, make-up), the use of foul language, or asking someone to perform personal favors such as babysitting, household chores, or miscellaneous errands even while not directly supervising the individual.

In all considerations, the circumstances surrounding the alleged mistreatment must be taken into consideration. Please take note of specifics by university position (i.e. faculty, staff, student, resident, fellow, etc.)

I. **Procedures for Reporting Alleged Mistreatment**

Anyone experiencing mistreatment within the Department of Neurological Surgery (Divisions of Neurosurgery, Physical Medicine and Rehabilitation and the Kentucky Spinal Cord Injury

Research Center) and *all affiliate members* can report through one or more of the following avenues:

a. Safe Reporting Advocates (SRA): The following individuals have volunteered to be safe advocates for anyone experiencing mistreatment. All individuals have had training and access to resources to help with next steps (see below).

i. External SRAs:

1. V. Faye Jones, MD, PhD, MSPH- Senior Associate Vice President for Diversity and Equity & Associate Vice President for Health Affairs/Diversity Initiatives
vfjone01@louisville.edu
2. Ryan Simpson- Program Director HSC Office of Diversity and Inclusion
ryan.simpson.1@louisville.edu; 502-852-0709
3. Abraham Gage, MBA- Systems and Business Intelligence VP
abraham.gage@louisville.edu

ii. Internal SRAs from Neurological Surgery:

1. Lauren Ellis, MBA- Director of Clinical Operations
lauren.ellis@uoflhealth.org
2. Ellyce Patton, MBA- Executive Director
ellyce.patton@uoflhealth.org
3. Nelleke van Wouwe, PhD – Associate Professor
nelleke.vanwouwe@louisville.edu

iii. Internal SRAs from the Division of PM&R:

1. Camilo Castillo, MD, MBA- Director Spinal Cord Injury Medicine & Fellowship Program
camilo.castillo@uoflhealth.org

iv. Internal SRAs from KSCIRC located at the Medical Dental Research Building:

1. Dena Howland, PhD- Associate Professor
dena.howland@louisville.edu

v. Internal SRAs from KSCIRC located at Frazier Rehab:

1. Manpreet Chopra, MS- Senior Research Scientist
manpreet.chopra@louisville.edu

b. For sexual assault or harassment, the reporter can report directly to the Title IX office or can confidentially go to the PEACC Center:

- i. Title IX complaints against students: Dr. Angela Taylor (502-852-5787)
angela.taylor@louisville.edu

- ii. Title IX complaints against UofL employees: Donna Ernst (502-852-6538 donna.ernst@louisville.edu)
 - iii. UofL PEACC Center- <https://louisville.edu/peacc>
 - iv. Faculty can also use the Office of the Executive Vice President and University Provost. Further information in Appendix E or policy on Dispute Resolution and Grievance for instructions: <https://louisville.edu/provost/what-we-do/grievance>
 - v. Incidents may also be reported to the University of Louisville Office of Compliance Hotline at 1-877-852-1167 or online via the [Compliance website](#) directly to the *third-party vendor*. This can be done anonymously. See Appendix F for more information.
 - vi. Staff can also call 502-852-6258 and the operator will forward the call to the appropriate HR Representative.
 - vii. The University of Louisville Ombuds Office- (<https://louisville.edu/ombuds/about>).
 - viii. Graduate students can also report mistreatment using the UofL Academic Mistreatment Policy which does include the option of an online form (<https://catalog.louisville.edu/professional/medical-bulletin/ethical-professional-requirements/mistreatment/>)
- c. Directly to the alleged offender’s immediate supervisor.
At this time the supervisor may opt to bring in an SRA to help facilitate.

II. Safe Reporting Advocate (SRA) Procedures

- a. Contact an SRA.
- b. After discussing a mistreatment event, SRA will complete a Mistreatment Event Description Form (Appendix A). The reporter’s name(s) will only be included with consent.
- c. Within 7 business days the event form will be submitted to the alleged offender’s direct supervisor appropriate internal leader/s by the SRA:
 - i. Division of Neurosurgery
 - Joseph Neimat, MD, MS
 - Chairman of Department of Neurological Surgery
 - ii. Division of Physical Medicine and Rehabilitation (PM&R)
 - 1. Joseph Neimat, MD, MS
 - Chairman of Department of Neurological Surgery
 - 2. Darryl Kaelin, MD
 - Chief Division of PM&R
 - iii. Kentucky Spinal Cord Injury Research Center (KSCIRC)
 - 1. Joseph Neimat, MD, MS
 - Chairman of Department of Neurological Surgery
 - 2. Maxwell Boakye, MD PhD

Interim Director of KSCIRC

-Translational Research (Frazier Rehabilitation Institute)

1. Joseph Neimat, MD, MS
Chairman of Department of Neurological Surgery
2. Maxwell Boakye, MD PhD
Interim Director of KSCIRC
3. Charles Hubschner, PhD
Interim co-Director KSCIRC

iv. Affiliate faculty and staff- Chair of the appropriate department must be included in the initial notification.

1. Department of Anatomical Sciences and Neurobiology
<https://louisville.edu/medicine/departments/anatomy/facultylist>
2. Department of Physiology
<https://louisville.edu/medicine/departments/physiology/faculty>
3. Department of Orthopedic Surgery <https://uoflortho.com>
4. Department of Pediatrics
<https://louisville.edu/medicine/departments/pediatrics/department-of-pediatrics-directory>
5. Department of Surgery <https://louisvillesurgery.com/faculty.aspx>
6. Department of Mechanical Engineering
<https://engineering.louisville.edu/academics/faculty/>
7. Department of Biomedical Engineering.
<https://engineering.louisville.edu/academics/faculty/>
8. Department of Health and Sport Science
<http://cehddirectory.louisville.edu>
9. Department of Physical Therapy- Bellarmine University
<https://www.bellarmino.edu/health-professions/graduate/doctor-of-physical-therapy/facultyandstaff/>
10. School of Physical Therapy – Spalding University
<https://spalding.edu/doctor-of-physical-therapy/>

v. For reports in which the Department Chair is involved the Dean of the College of Medicine must be included.

vi. For reports in which the KSCIRC Director is involved the Executive Vice President for Research and Innovation must be included.

d. The event form may also be submitted to select UofL entities:

- i. In cases where there is risk of physical harm the University of Louisville Police must be notified.
- ii. Mistreatment involving students:
 1. Undergraduate Students- Dean of Students (dos@louisville.edu), or see the Response Guide for Difficult Student Situations for specific

- instructions- (<https://louisville.edu/dos/facultystaff/difficult-student-guide>)
2. Graduate Students - Paul DeMarco Ph.D.- Associate Dean of the Graduate School (<https://louisville.edu/graduate/contact-us/meet-the-staff>)
 3. Medical Students- Office of Medical Student Affairs (<https://louisville.edu/medicine/studentaffairs/contact-us>)
 4. Director of the appropriate graduate student program:
 - a. Anatomical Sciences and Neurobiology- (<https://louisville.edu/medicine/departments/anatomy/about/contact>)
 - b. Biochemistry and Molecular Genetics- (https://louisville.edu/medicine/departments/biochemistry/our_people/2020-departmental-directory)
 - c. Microbiology and Immunology- (<https://louisville.edu/medicine/departments/microbiology/faculty>)
 - d. Pharmacology and Toxicology- (<https://louisville.edu/medicine/departments/pharmacology/contact>)
 - e. Physiology- Dale Schuschke, PhD, Director of Departmental Graduate Studies (daschu01@louisville.edu)
 - f. Interdisciplinary Program in Translational Neuroscience (<https://louisville.edu/translational-neuroscience>)
 - g. Bioinformatics- Eric Rouchka D.Sc.- Director of Graduate Studies (eric.rouchka@louisville.edu)
- iii. Mistreatment involving residents/fellows:
1. Office of Graduate Medical Education (gmeoffice@louisville.edu, 502-852-3134)
 2. Appropriate Program Director:
 - a. PM&R- Darryl Kaelin, MD- Residency Program Director
 - b. Neurosurgery- Haring Nauta, MD, PhD, FACS, FAANS- Residency Program Director
 - c. Spinal Cord Injury Medicine Fellowship- Camilo Castillo, MD, MBA- SCIMF Director
 - d. CAST Approved Spine Fellowship- Maxwell Boakye MD, MPH, MBA, FACS, FAANS
- iv. Mistreatment involving faculty:
1. University of Louisville- Office of the Executive Vice President and University Provost.
 2. College of Medicine- Ronald Paul, MD- Vice Dean for Faculty Affairs and Advancement (502-852-6266)

- v. Mistreatment involving staff- Human Resources contacts:
 - 1. Donna Ernst- Assistant Director
 - 2. Nick Hosh- Employee Relations Coordinator
 - 3. Angie Sparks- Employee Relations Coordinator
- e. It may be necessary for more than 1 SRA to be involved, depending on the complexity of the situation- before this occurs the reporter will be asked and consent to this action.

II. Procedures for the *Handling of Alleged Mistreatment using the SRA*

- 1. Within 48 hours (2 business days) the supervisor will respond to the SRA/s acknowledging receipt and outlining immediate steps of action.
- 2. Within 7 business days a meeting will be held with the reporter, SRA/s, and the supervisor to discuss the immediate and long-term steps of action, as well as their implementation.
 - *If there is a risk of violence, assault or retribution a safety plan will be proposed.
 - *If the reporter does not find the steps of action satisfactory, the case may be moved to the next level of supervision.
- 3. Within 14 business days all necessary outside reports will be made by the SRA/s and/or the supervisor.
- 4. The SRA will follow up with the affected party and offender's immediate supervisor within 30 business days for results on the initial plan of action. If the affected party does not find the resolution satisfactory then further action can be taken, and additional external entities contacted.
- 5. If a trainee is involved, the alleged offender will not be allowed to evaluate the trainee who experienced alleged mistreatment.

III. Documentation for the *Handling of Alleged Mistreatment using the SRA*

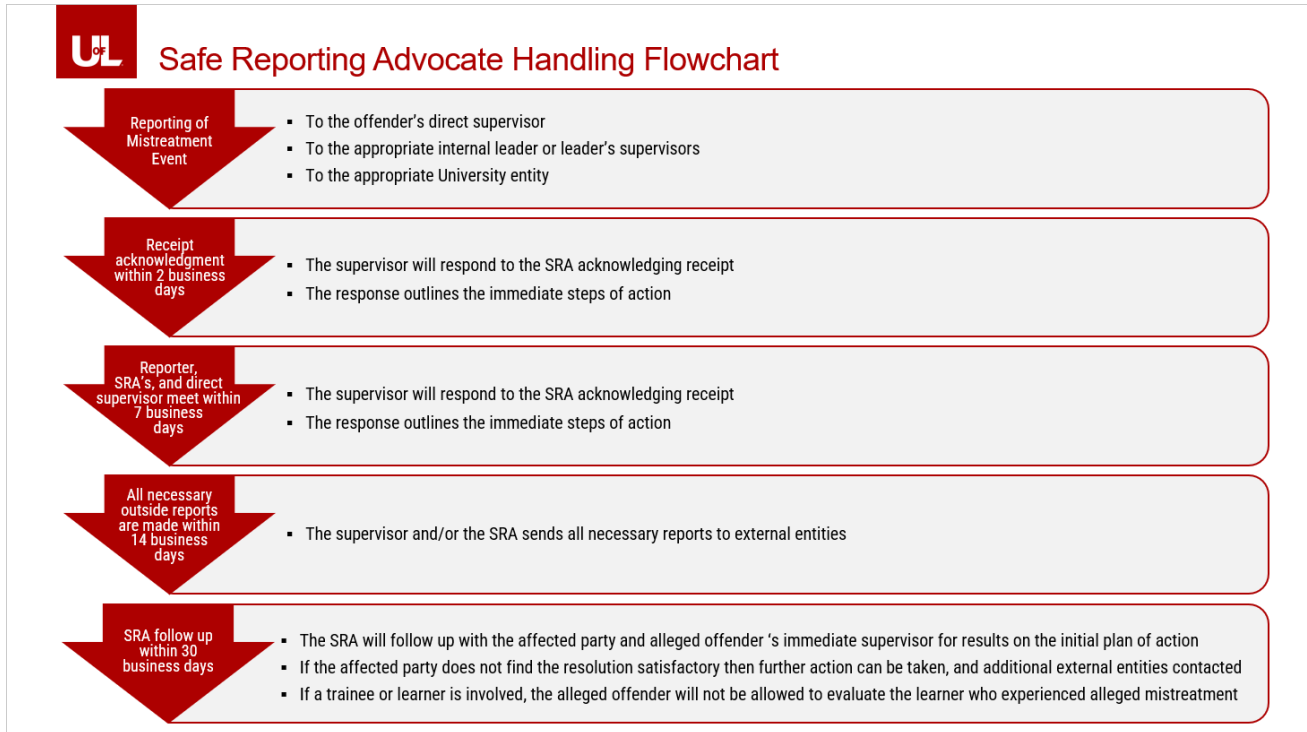
Documentation of Plan of Action and results will be kept. This plan will be disseminated to the following entities:

- A. For students, the Office of Student Affairs will receive a copy.
- B. For residents or fellows, the Office of Graduate Medical Education will receive a copy.
- C. For staff, Human Resources will receive a copy.
- D. For faculty, the Office of Faculty Affairs will receive a copy.

Appendix A: Mistreatment Event Description Form

Safe Reporting Advocate:	Date of Report:
Reporter's Name:	Alleged Perpetrator's Name:
Position Title:	Position Title:
Reporter's Supervisor:	Alleged Perpetrator's Supervisor:
Location (Hospital, Clinic, Building, Floor, Room, etc):	
Description of the Event:	
Witness/es (if applicable):	

Appendix C: Flowchart of events when using a Safe Reporting Advocate (SRA)



Appendix D: Title IX & the Clery Act

Title IX of the Education Amendments of 1972 is a law that prohibits discrimination on the basis of sex. It applies to educational institutions that receive financial assistance from the United States Department of Education and is enforced by the Office for Civil Rights.

- 1) Who is protected? Anyone in the United States who is involved in an educational program or activity that receives Federal financial assistance is protected by Title IX.
- 2) What locations are covered? Locations, events, or circumstances over which the University exercises substantial control. This includes any building(s) owned or controlled by a student organization that is officially recognized by the University.

Sexual Harassment is defined by Title IX as, conduct on the basis of sex that satisfies one or more of the following:

- An employee of the University conditioning the provision of an aid, benefit or service of the University on an individual's participation in unwelcome sexual conduct (often referred to as quid pro quo);
- Unwelcome conduct determined by a reasonable person to be so severe, pervasive and objectively offensive that it effectively denies a person equal access to the University's education program or activity; or
- Sexual Assault, Dating Violence, Domestic Violence or Stalking

Quid Pro Quo Harassment is defined by Title IX as, an employee of the university conditioning the provision of an aid, benefit, or service of the recipient on an individual's participation in unwelcome sexual conduct.

- This type of harassment occurs if a faculty or staff member conditions an educational decision or benefit on another faculty, staff member or student's submission to unwelcome sexual conduct. Whether the faculty, staff member or student resists and suffers the threatened harm or submits and avoids the threatened harm, they have been treated differently, or their ability to participate in or benefit from the university's program has been denied or limited, on the basis of sex in violation of the Title IX regulations.
- For example, when a benefit (including good grades, promotions, etc.), or avoiding a consequence (bad grades, demotion, etc.), explicitly or implicitly depends upon a person's agreeing to sexual advances or requests for dates/sexual favors, etc., quid pro quo harassment has occurred.

Mandatory Reporters to the Title IX office:

Title IX and the Clery Act (<https://clerycenter.org/policy/the-clery-act/>) require that "responsible employees" are mandated to report sexual or quid pro quo harassment to the Title IX office.

Responsible employees include (but not limited to): Faculty, any employee in a supervisory or management role, Department Chairs, Directors, Deans, Vice Presidents, Deans and Provosts. *This also includes all Safe Reporting Advocates.*

Non-mandatory Reporters to the Title IX office:

UofL PEACC Center- a division of Campus Health Services (<https://louisville.edu/peacc/about-us/history-of-peacc>) (Prevention, Education, and Advocacy on Campus and in the Community (PEACC) Program)

- They provide the only *confidential* advocacy and assistance to university students, staff, and faculty who are affected by sexual misconduct, dating or domestic violence, sexual harassment, or stalking. An advocate will listen and can assist in accessing medical care and arranging for medical evaluations, academic accommodations and housing accommodations, information regarding reimbursement for certain services related to the assault, referrals to counseling, and anonymous reporting to University Police and/or the Dean of Students Office.
- Location: Student Activities Center, W309H 2100 S. Floyd St

Appendix E: Faculty Grievance Policies

The University provides two mechanisms to faculty members for resolving disputes that cannot be resolved through *informal efforts*. Redbook, Chapter 4, Article 4.4 recognizes two types of disputes: each with distinct procedures.

Type 1:

A Type 1 dispute arises when a faculty member believes that decisions or actions taken by an administrator or others have caused material disadvantage to the faculty member. For this type of dispute, the faculty member must be able to demonstrate that he or she has experienced professional damage, loss of resources or significant changes in work assignment as a result of decisions or actions as specified below.

The circumstances covered under this type of dispute are allegations of:

- Violation of a university rule or policy;
- Misapplication of a university rule or policy;
- Differential application of a university rule, policy, procedure or usual unit practice or custom;
- Discrimination or improper bias in the application of a university rule, policy or procedure; (improper bias may include inappropriate considerations in addition to the legally impermissible use of race, gender, sexual orientation, age, religion, national origin, or disability of an otherwise qualified individual);
- Denial of promotion resulting from improper process;
- Retaliation;
- Decisions based on misrepresentation of material facts;
- Decisions that are arbitrary or capricious as defined in guidelines approved by the Board of Trustees (January 26, 1987);
- Infringement of academic freedom as set forth in the AAUP Statement of Principles (1940), and described in Redbook Sec. 2.5.1.

This category does not cover

- Dissatisfaction with university rules, policies or procedures that apply to all faculty;
- Dissatisfaction with compensation, or university benefits;
- Dissatisfaction with annual performance reviews, unless the outcome is the result of circumstances covered in 4.4.4.A.1 and the unit appeals process has been exhausted;
- Disputes with individuals outside the university;
- Disputes resulting from participation in the conflict resolution process (including the F.G.O., Ombuds, Faculty Grievance Committee or its members);
- Procedures governed by state or federal law.
- The professional judgments of faculty or administrators.

Type 2:

A Type 2 dispute is used for a decision that results in the termination of an appointment.

The circumstances covered under this type of dispute are allegations of

- Denial of tenure resulting from improper process;
- Non-renewal of a probationary appointment resulting from improper process.
- Non-renewal of other faculty appointments resulting from improper process, except as described elsewhere in this document.

This category does not cover:

- Non-renewal of a term contract at the end of the contract, unless the outcome is a result of circumstances covered in 4.4.4.A.1.
- Termination for cause of an appointment with tenure, or of a special or probationary appointment before the end of a specified term. This is described by Article 4.5.3.
- Termination for financial exigency or bona fide discontinuance of a unit, department program or service of an appointment with tenure, or of a special or probationary appointment before the end of a specified term. This is described by Article 4.5.3.

Procedures for Type 1

For Type 1 disputes, the faculty member *must seek* informal remedies before filing a grievance. As a first step, the faculty member should seek direct communication with the respondent in the dispute to find a mutual understanding and resolution of the issue. However, if this informal discussion among the parties to the dispute is unsuccessful or if the faculty member would prefer assistance with informal dispute resolution, the procedures described in the following section must be used.

I. Ombuds Consultation

Within sixty (60) calendar days of the disputed condition or action or within sixty (60) calendar days of the date the faculty member reasonably should have learned of the condition or action, the faculty member must request an appointment with the Faculty/Staff Ombuds in writing.

- a. If the faculty member does not inform the Ombuds within the stated timeframes, the faculty member may not pursue or request a formal grievance hearing through the university's dispute resolution process related to the specific issue under dispute.
- b. Consultation with the Ombuds does not constitute notice of claims against the university.
- c. Following the consultation, the Ombuds has thirty (30) calendar days to advise the faculty member in writing of options for resolving the complaint. These options may include mediation services, facilitated discussion, referral to other offices on campus, etc.
- d. If the faculty member decides not to participate in any of the options proposed by the Ombuds within thirty (30) calendar days after the Ombuds written statement of options, the Ombuds will document the results of the resolution attempts and provide a copy to the faculty member, the Faculty Grievance Officer, and the Dean. The Executive Vice

President and Provost will also be notified if the Dean is a respondent. The faculty member may pursue a formal grievance process by filing a written statement with the Faculty Grievance Officer within thirty (30) calendar days from receipt of the Ombuds written statement of options.

- e. If the faculty member's preferred option(s) include mediation or some other form of facilitated discussion with the respondent, the Ombuds will contact the respondent(s) to inform him or her of the complaint and to discuss the preferred option for resolution.
 - i. If the complaint is resolved through informal means (such as mediation or some other form of facilitated discussion), the Ombuds will document the conclusions reached through this process and provide copies for each of the parties, the Dean of the faculty member's unit, and the Faculty Grievance Officer. If the respondent is a Dean, the Executive Vice President and Provost will also receive a copy.
 - ii. If the complaint is not resolved through informal means (such as mediation or some other form of facilitated discussion), the Ombuds will document the results of the resolution attempts. If the administrator or respondent has refused to participate in the process, then the Ombuds will document this and provide copies of all documents to for each of the parties, the Dean of the faculty member's unit, the Faculty Grievance Officer and the Executive Vice President and Provost (if the respondent is a Dean). If the complaint is not resolved to the faculty member's satisfaction, he or she may file a formal grievance.
- f. The faculty member may then decide to pursue a formal grievance process by filing a written statement with the Faculty Grievance Officer within thirty (30) calendar days from receipt of the Ombuds' written statement of options.
- g. The Ombuds will send a copy of all reports that result from informal complaint resolution to the University Archives and Records Center for permanent retention.

II. Filing a Type 1 Grievance

- a. When the informal process is not successful, the faculty member has thirty (30) calendar days from receipt of the Ombuds report to file a written complaint with the Faculty Grievance Officer. The written complaint shall contain the following information:
 - i. A brief narrative statement (no more than five pages) of the immediate circumstances leading to the complaint;
 - ii. The date(s) the alleged problem occurred;
 - iii. How the action allegedly violated an existing rule, policy, or procedure;
 - iv. A designation of the respondents (i.e., any person whose acts are alleged to meet the conditions of a Type 1 dispute upon which the complaint is based) and the specific actions that the respondent was alleged to have taken which resulted in the grievance;
 - v. Documentary evidence of the actions taken by the respondent leading to the grievance.

- vi. A statement of the informal steps taken to resolve the matter; and
 - vii. A statement of the remedy requested.
 - b. The FGO will review the documents provided by the grievant and request missing items. Once the FGO has received complete documentation from the grievant, the FGO has seven (7) calendar days to forward the information to the Chair of the Faculty Grievance Committee.
 - c. The chair of the Faculty Grievance Committee will then convene a panel of five committee members within thirty (30) calendar days to determine whether or not to accept jurisdiction for the alleged grievance and to clarify the specific issues or questions to be addressed by the hearing panel. Rules for convening the panel are found in Appendix A. The decision to accept jurisdiction will be based on the documentation filed by the faculty member, the respondent, and any additional documentary evidence the panel requests. The panel will decide not to hear a grievance if it determines that the complaint does not meet the standards for a Type 1 Dispute described in Section 4.4.4.A.1., or that it should be handled through a different university procedure.
 - d. If the Faculty Grievance Committee panel decides not to accept the complaint for a hearing, the panel chair will notify the Faculty Grievance Committee Chair in writing within seven (7) calendar days of their decision. The statement should document the reasons for the refusal to accept jurisdiction.
 - e. Within seven (7) calendar days of receiving the panel's decision to deny a hearing, the Chair of the Grievance Committee will provide written notification to all parties in the dispute, the FGO and the Executive Vice President and Provost. This decision is final and may not be appealed.
- III. Hearing for a Type 1 Grievance
- a. If the panel's decision is to accept jurisdiction for the complaint, the Chair of the Faculty Grievance Committee selects a new, three-person panel within fourteen (14) calendar days of receiving the decision to accept. The new panel is charged with conducting a hearing of the grievance.
 - b. The hearing panel must conduct a pre-hearing meeting with the grievant and respondent(s) within thirty (30) calendar days of receiving the grievance from the Chair of the Grievance Committee. At this meeting, the grievant and respondent must present a preliminary list of witnesses and any other documents not already in the record to be used as evidence during the hearing. A date for the hearing will be established at the pre-hearing. The date of the hearing must be no later than sixty (60) calendar days following the pre-hearing.
 - c. The parties to the dispute shall exchange a list of materials to be presented and a list of witnesses annotated to indicate the purpose and general content of anticipated testimony, and notification of whether the witness will be present at the hearing or will provide a written statement. This exchange will take place at least twenty (20) calendar days prior to the hearing. At least seven (7) calendar days before the hearing, parties must provide a final list of materials and witnesses. Nothing in this requirement, however, shall limit the parties to the grievance from being afforded full opportunity to

present written and oral evidence, to produce witnesses, and to cross-examine witnesses.

- d. Respondent(s) and witnesses who are not able to attend may supply written statements. Those witnesses may be questioned by the panel by telephone or other electronic means. The hearing panel may use, at their discretion, a mediator or meeting facilitator to conduct the hearing. Attorneys for the grievant or respondent may not be present during the hearing.

IV. Grievance Resolution

- a. The panel will have twenty-one (21) calendar days following the end of the hearing to prepare a written grievance resolution plan for the dispute that will recommend actions that any or all parties to the grievance must undertake in order to resolve the dispute. The recommendation of the panel shall be based on evidence presented in the hearing and communications to which the adversely affected party had the opportunity to respond. The plan will be distributed in writing to the parties, the respective deans of the faculty members' units, the FGO, and the Executive Vice President and Provost.
- b. The parties to the grievance have thirty (30) calendar days to respond in writing to the Grievance Committee's resolution plan.
 - i. If both the parties to the grievance agree or if either does not respond within thirty (30) calendar days to the proposed remedies, the conclusions are final contingent on agreement of the Dean or next highest level of administration if the dispute directly involves the Dean.
 - ii. If either party does not agree with the grievance resolution plan, then the plan is sent to the next level of authority who shall implement the plan.
- c. The final outcome is reported to the parties in the dispute. The Ombuds, FGO, the respective deans of the faculty members' units, and the Executive Vice President and Provost are also notified in writing to ensure adherence to the resolution plan.

V. Procedures for a Type One Grievance Appeal

- a. Either party to the grievance may appeal the proposed remedies in the grievance resolution plan, if:
 - i. the decision of the hearing panel was arbitrary or capricious as defined in guidelines approved by the Board of Trustees for the summary screening of all such claims of arbitrary or capricious action;
 - ii. they are based on material misrepresentation of the facts; or
 - iii. they were made in the absence of newly discovered evidence clearly not available at the original hearing.
- b. Written notice of appeal to the Executive Vice President and Provost must be made within twenty-one (21) calendar days of receipt of the plan. If the disagreement is with the Executive Vice President and Provost, the appeal will be made to the President with written notice within twenty-one (21) calendar days. If the disagreement is with the President, the appeal will be made to the Board of Trustees with written notice within twenty-one (21) calendar days.
- c. The written notice of appeal shall contain the following information:

- i. a brief narrative stating the basis of the disagreement with the proposed remedies;
 - ii. suggested amendments to the grievance resolution plan.
- d. The Executive Vice President and Provost (or President) will make a final determination on the grievance resolution plan within fifteen (15) calendar days. If the President is the respondent, then the Board of Trustees will decide at its next regular meeting.
- e. The final decision is reported to all parties in the dispute by certified mail. The Ombuds, FGO, the Chair of the Faculty Grievance Committee, the respective deans of the faculty members' units, and the Executive Vice President and Provost will also be notified in writing to ensure adherence to the decision. A copy of the decision will also be sent to the University Archives and Records Center for retention.
- f. There is no further appeal within the university for Type 1 disputes.

Procedures for Type 2:

Type 2 Disputes shall not be resolved through informal means.

I. Filing a Type 2 Grievance

- a. A faculty member wishing to file a complaint related to a Type 2 Dispute must send a written request for a hearing to the Faculty Grievance Officer within thirty (30) calendar days of receiving notification of non-renewal, or denial of tenure. The written complaint shall contain the following information:
 - i. A brief narrative statement (no more than five pages) of the immediate circumstances leading to the complaint;
 - ii. The date(s) of the alleged actions taken against the faculty member;
 - iii. How the action allegedly violated an existing rule, policy, procedure or established custom;
 - iv. Designation of the respondent(s) and the specific actions that each respondent was alleged to have taken which resulted in the grievance;
 - v. Documentary evidence of the actions taken against the faculty member; and
 - vi. A statement of the remedy requested.
- b. The FGO will review the documents provided by the grievant and request missing items. When Once the FGO has received complete documentation from the grievant, the FGO has seven (7) calendar days to forward the formal hearing request to the Chair of the Faculty Grievance Committee.
- c. The chair of the Faculty Grievance Committee will convene a panel of five committee members within thirty (30) calendar days to determine whether or not to accept jurisdiction for the complaint. This determination will be based on the written complaint and documentation filed by the faculty member and any additional documentary evidence the panel requests.
 - i. If a panel does not accept a complaint for a hearing
The panel chair will notify the Chair of the University Faculty Grievance Committee in writing within seven (7) calendar days of the decision. The

statement must clearly document the reason for the refusal to accept jurisdiction. This decision is final and may not be appealed

- ii. The panel will decide not to hear a grievance if it determines that the complaint does not meet the standards for a Type 2 Dispute described in Section 4.4.4.B., or that it should be handled through a different university procedure.
- iii. The Chair of the University Faculty Grievance Committee will notify all parties involved in writing within seven (7) calendar days of receiving the panel's statement. The statement must include the reason for the panel's denial to hear the complaint.
- iv. If a panel accepts a complaint for a hearing
The panel chair will notify the Chair of the University Faculty Grievance Committee in writing within seven (7) calendar days of the decision. The statement must clearly state the reason to accept jurisdiction and the rule or policy that they believe may have been violated. This decision is final and may not be appealed.
- v. The Chair of the University Faculty Grievance Committee will notify all parties involved in writing within seven (7) calendar days of receiving the panel's statement. The statement must clearly state the reason the panel accepted jurisdiction and the rule or policy that they believe may have been violated.
- vi. The Chair of the Faculty Grievance Committee will select a new, five-person panel within fourteen (14) calendar days of receiving the panel's statement. The new panel is charged with conducting a hearing for the grievance.

II. Hearing for a Type Two Grievance

- a. The hearing panel must conduct a pre-hearing meeting with the grievant and respondent(s) within thirty (30) calendar days of receiving the grievance from the Chair of the Grievance Committee. At this meeting, the grievant and respondent(s) must present a preliminary list of witnesses and evidence to be presented during the hearing. A date for the hearing will be established at the pre-hearing. The hearing date must be no later than sixty (60) calendar days following the pre-hearing. For Type 2 Disputes, a hearing officer may be appointed by the President at the request of a panel to assist with conduct of the hearings, however this is not required. A hearing officer conducts the meeting but does not decide the grievance, admissibility of evidence or other substantive issues related to the grievance.
- b. Attorneys are permitted as advisors, but are not required, to attend the hearings in a Type 2 Dispute. If the faculty member chooses not to be accompanied by an attorney at the hearing, the respondent(s) must also not be accompanied by counsel.
- c. The parties to the dispute shall exchange a list of materials to be presented and a list of witnesses annotated to indicate the purpose and general content of anticipated testimony, and notification of whether the witness will be present at the hearing or will provide a written statement. This exchange will take place at least twenty (20) calendar days prior to the hearing. At least seven (7) calendar days before the hearing, parties must provide a final list of materials and witnesses. Nothing in this requirement,

however, shall limit the parties to the grievance from being afforded full opportunity to present written and oral evidence, to produce witnesses, and to cross-examine witnesses.

- d. The panel will have fourteen (14) calendar days following the hearing to prepare a written recommendation either affirming the action or decision originally grieved or directing the respondent to reconsider the action or decision. The recommendation must indicate findings and supporting evidence. The panel's written recommendation is sent to the faculty member, the faculty member's Dean, any other respondents, the FGO and the Executive Vice President and Provost.
- e. The respondent(s) to the grievance will reply in writing to the Faculty Grievance Committee's recommendation within fourteen (14) calendar days. This statement either accepting or rejecting the recommendation from the Faculty Grievance Committee is distributed to all parties in the grievance, the Executive Vice President and Provost, the FGO and the Faculty Grievance Committee Chair.
- f. The Executive Vice President and Provost shall render a decision on the matter within twenty-one (21) calendar days of receipt of written notice from the Faculty Grievance Committee that the matter is ready for decision. If the Executive Vice President and Provost is a respondent to the grievance, the President shall render a decision on the matter within twenty-one (21) calendar days of receipt of written notice from the Faculty Grievance Committee that the matter is ready for decision. If the President is a respondent to the grievance, the Board of Trustees shall render a decision on the matter at its next regular meeting which is at least twenty-one (21) calendar days after its receipt of written notice from the Faculty Grievance Committee that the matter is ready for decision. The decision rendered pursuant to this section will be distributed to all parties to the grievance, the Dean, the FGO and the Faculty Grievance Committee Chair.

III. Procedures for a Type 2 Grievance Appeal

- a. The grievant or any party directly involved may appeal the Executive Vice President and Provost's decision to the Chair, University Faculty Grievance Committee within fourteen (14) calendar days from the receipt of the final decision of the Executive Vice President and Provost. The reasons for appeal are:
 - i. The Executive Vice President and Provost's decision does not concur with the recommendation of the hearing panel; or
 - ii. The decision of the hearing panel was arbitrary or capricious as defined in guidelines approved by the Board of Trustees for the summary screening of all such claims of arbitrary or capricious action; or
 - iii. The final decision was based upon misrepresentation of material facts; or
 - iv. The final decision was made in the absence of newly discovered evidence clearly not available at the original hearing.
- b. Notice of any appeal must be delivered in writing to all parties within seven (7) calendar days of receipt of the Executive Vice President and Provost's written decision.
- c. The request for appeal shall contain the following information.

- i. All correspondence from the Faculty Grievance Committee and the Executive Vice President and Provost concerning decisions in the case.
 - ii. A one-page letter stating why the faculty member believes the Executive Vice President and Provost's decision is in error.
 - iii. Material submitted to the Faculty Grievance Committee during the grievance process will be submitted as supporting material.
 - iv. The Executive Vice President and Provost will submit a one-page letter stating the rationale for the decision.
- d. The Chair of the Faculty Grievance Committee will select and convene a five (5) member appeals panel to consider the appeal. The panel will include one representative of the grievant unit and of other parties directly involved in the original grievance. Panel members who participated on the original hearing panel may not serve on the appeals panel.
- e. An appeal shall be based on the record established in the original action, provided the appeals panel may secure additional information if needed. All parties will be given timely opportunity to review and comment on newly added information. The appeals panel shall decide if there are grounds for an appeal within fourteen (14) calendar days and shall conduct any hearing on an appeal with thirty (30) calendar days of the date it is filed. Reports of the appeals panel shall be made within fourteen (14) calendar days following a hearing or within forty-five (45) calendar days following the filing of an appeal if there is not a hearing to supplement the original record. The report of the appeals panel is made to the President and is distributed to all persons directly involved in the grievance, the Executive Vice President and Provost, the FGO and the Faculty Grievance Committee Chair.
- f. The President may accept and implement the remedy recommended by the appeals panel within thirty (30) calendar days.
- g. If the President believes a policy question is involved or additional consideration of the facts is warranted, the case may be remanded within twenty-one (21) calendar days to the Faculty Grievance Committee with a statement of the reasons therefore, and the Committee shall reconsider the appeal. The President shall also provide a copy of the statement to all persons involved and they shall have seven (7) calendar days to comment on the President's report. The Committee shall report its reconsideration to the President within twenty-one (21) working days of the remand.
- h. The President may disagree with the Committee's recommendation in whole or in part within thirty (30) calendar days and shall recommend a remedy in writing to the Faculty Grievance Committee Chair, to all persons directly involved in the grievance, the FGO, the Dean, and the Executive Vice President and Provost. The President's proposed remedy will be presented to the Board of Trustees for final action. The Board of Trustees shall have access to the record of the proceedings or a summary of the record prepared by the Faculty Grievance Committee Chair or the chair's designee.

- i. All parties directly involved in the matter shall have the right to attend any meeting of the President or President's representative with the Faculty Grievance Committee if that matter is discussed.

Appendix F: University Integrity and Compliance

The University of Louisville's Integrity and Compliance Office serves as a resource and provides guidance to administration, faculty, staff and units (departments, programs, committees, centers).

There are many external laws and regulations that apply to the university. To help the university be compliant with these requirements and university policies, the Integrity and Compliance Office provides support to university compliance programs and partners regarding:

- establishment of institutional-level policies and procedures;
- communication tools to aid in reporting compliance matters;
- investigation and response to compliance reports;
- review of new or recently revised compliance requirements;
- periodic compliance risk assessments;
- and other tools to help reduce or manage university risks.

Each compliance program of the university has designated compliance officials or subject matter experts to provide oversight and on-going assurance of adherence with external requirements and university policies and procedures.

Additional information for privacy may be obtained from the following sources:

- [HIPAA Privacy Guidance documents](#) (requires UofL login)
- The Privacy Office (Phone 502-852-3803 or Email [privacy\(@\)louisville.edu](mailto:privacy(@)louisville.edu))
- The [FAQs available on the website at the Office of Civil Rights](#)
- For researchers, HIPAA Privacy in [research documents available on the website at the National Institutes of Health](#)
- If you suspect an activity at UofL that violates HIPAA's provisions, please speak with your supervisor or contact the Privacy Office. You may also contact the UofL Compliance Hotline at 877-852-1167 or on ULink at <http://ulink.louisville.edu>. The UofL Compliance Hotline is operated by a third-party company, and your identity will be kept confidential if you desire.

The University of Louisville expects the highest ethical standards from everyone in our university community.

If you become aware of a situation that may jeopardize our ethical integrity, please report it to your supervisor or via the University's Compliance Hotline.

When in doubt, point it out on the Compliance Hotline.

[Submit an online report](#) or call 1-877-852-1167