



Origination 7/23/2024  
Last Approved 11/6/2025  
Effective 11/6/2025  
Last Revised 11/6/2025  
Next Review 11/6/2026

Owner Jennifer Lee:  
Director  
Area Medical  
Education  
Applicability Gundersen

## Psychology Fellow Grievance Procedures

### Applicable To

All Psychology Postdoctoral fellows of Gundersen Lutheran Administrative Services, Inc., independently and as agent for Gundersen Lutheran Medical Center, Inc., Gundersen Clinic, Ltd., Gundersen Lutheran Medical Foundation, Inc., Memorial Hospital of Boscobel Inc., Tri-County Memorial Hospital Inc., St. Joseph's Health Services Inc., Palmer Lutheran Health Center, Moundview Memorial Hospital & Clinics, Inc., and Saint Elizabeth's Hospital of Wabasha, Inc. (hereinafter referred to collectively as "Gundersen").

### Purpose Statement

This policy covers all Fellow complaints and grievances except those arising from or relating to suspensions, terminations, and other corrective actions referred to in the Gundersen's Policy on Resident and Fellow Disciplinary Process

### Definitions

- A. **"Training Director"** means the Program Director of the Fellowship training program or an authorized representative thereof.
- B. **"VP"** means Vice President of Medical Education of the residency/fellowship programs.
- C. **"HR Partner"** means Human Resource Partner.

### Procedures

**PROCEDURE FOR GRIEVANCES:** Fellows with complaints and grievances about Gundersen Medical Foundation's Post Graduate Medical Education Program are encouraged to resolve them pursuant to the following three- step process.

- A. **Informal Resolution: Psychology Postdoctoral Fellowship Training Director.** To the maximum extent possible, Fellows are encouraged to resolve complaints and grievances through informal discussions with their Training Director and/or the specific supervisor. Based upon past experience, Gundersen has found that most such concerns can be addressed fairly and expeditiously at this level, without need for further involvement by the Director of Medical Education or the Hearing Committee. The Training Director may involve the training program's supervisors in hearing the trainee's complaints and in making efforts to resolve the issue(s) prior to involving the Vice President of Medical Education.
- B. **Informal Review: Vice President of Medical Education.** If a Fellow's complaint or grievance cannot be resolved to the Fellow's satisfaction through informal discussions with the Training Director, or if the complaint or grievance involves issues that cannot be resolved at that level, the Fellow should contact the Vice President of Medical Education. The Vice President of Medical Education will make every effort to fairly resolve the problem to the satisfaction of the Fellow and, where appropriate, the Training Director. If the Vice President of Medical Education is unable to resolve the matter, the Director or the Director's designee will refer the matter to the Hearing Committee established under subparagraph C.
- C. **Formal Hearing Process.**
1. **Hearing Committee.** The Hearing Committee shall be comprised of the following persons or their designees: the Vice President of Medical Education, Program Director from a different residency/fellowship program, and HR Partner. The Vice President of Medical Education shall serve as Chair of the Hearing Committee. The General Counsel of Gundersen shall serve as an ex officio member of and legal advisor to the Hearing Committee.
  2. **Hearing Procedure.** Subject to the following conditions, the hearing shall be conducted informally in accordance with procedures determined by the Chair of the Hearing Committee:
    - a. The Hearing Committee shall not be bound by common law or statutory rules of evidence. The Chair of the Hearing Committee may admit testimony and evidence having reasonably probative value, and may exclude immaterial, irrelevant, or unduly repetitious testimony.
    - b. A Fellow will be afforded an opportunity to present oral and written evidence, and to question witnesses.
    - c. A Program Director or representative of Gundersen/Gundersen Medical Foundation will be afforded an opportunity to present oral and written evidence, and to cross-examine the Fellow and other witnesses.
  3. **Hearing Committee's Decision.** At the conclusion of the hearing, the Hearing Committee will meet in closed session to deliberate upon the evidence, to evaluate the options for resolving the Fellow's complaint or grievance, and to make a decision. The Hearing Committee's decision shall be final, and shall be communicated orally and in writing to the Fellow, the Training Director, and Gundersen.
  4. **PROCEDURE: APPOINTMENT OF OMBUDSMAN.** A Fellow who desires adjudication of a complaint or grievance on an anonymous basis without

disclosing the Fellow's identity may elect to do so pursuant to the following procedure:

- a. Appointment of Ombudsman. A request for appointment of an ombudsman may be submitted to the Fellow's Training Director, the Vice President of Medical Education, or HR Partner of Gundersen, whichever may be appropriate taking into account the nature and circumstances of the Fellow's concerns.
  - b. Confidentiality. The Fellow's request for appointment of an Ombudsman shall remain confidential and shall not be disclosed to any person other than the appointed ombudsman. Upon appointment, the ombudsman shall meet with the Fellow, ascertain the nature of the Fellow's concerns, and determine whether the ombudsman can adequately advocate the Fellow's position. Throughout representation of the Fellow, the ombudsman shall use best efforts to preserve the confidentiality of the Fellow's identity. If the ombudsman is unable to adequately advocate the Fellow's position, the Fellow may request appointment of a replacement ombudsman.
  - c. Procedures. Except as otherwise provided herein, the ombudsman shall represent and advocate the Fellow's interests using the procedure set forth in subparagraph 2 above.
- D. For complaints and grievances responsibilities of the fellow is outlined above but must involve the following:
1. To initiate the grievance process at the lowest level of administrative oversight possible.
  2. To communicate clearly, orally and/or in writing, their concerns in terms of specific actions/behaviors as it relates to the training process.
  3. To respond within the deadlines indicated in the policy.
- E. For complaints and grievances the fellow's rights are outlined above but must involve the following:
1. To have any grievance regarding the training process addressed through increasing levels of administrative oversight until resolution is achieved.
  2. To have access to any information, written or oral, that is submitted regarding their grievance and to be able to question the source of that information directly.
  3. To have access to means of communication with all levels of administrative oversight.  
At any point in the process, to have access to an ombudsman to address a grievance anonymously.

# Responsibilities

**The Administrative Director of Medical Education:** is responsible for the development and oversight of this policy. The Vice President of Medical Education may need to step in to review the PD decisions, dismissal, or termination of appointment recommendations, and designate a review committee to review findings.

# References

Association of Psychology Postdoctoral and Internship Centers (APPIC)

## Approval Signatures

Step Description	Approver	Date
Policy Review Committee	Sarah Melde: Director	11/6/2025
	Jennifer Lee: Director	11/4/2025

---

## Applicability

Gundersen

COPY