

**HARVARD MEDICAL SCHOOL  
AND HARVARD SCHOOL OF DENTAL MEDICINE  
FACULTY GRIEVANCE PROCEDURES**

These procedures are applicable to allegations brought against HMS/HSDM faculty (meaning any person possessing an academic appointment in the Harvard Faculty of Medicine) pursuant to the Anti-Discrimination Policy, the Abusive and/or Intimidating Behavior Policy, and/or the Unprofessional Relationship and Abuse of Authority Policy. At the discretion of the Dean of the Faculty of Medicine, these procedures also may be used for the investigation and resolution of other grievances.

Allegations brought against other members of the HMS/HSDM community are addressed by other established procedures.

The Ombudsperson, Chief Human Resources Officer, Director of Human Resources at HSDM, Dean for Faculty and Research Integrity, Dean for Faculty Affairs, Dean for Students (HMS), HSDM Vice Dean, Associate Dean for Dental Education and Dean for Basic Science and Graduate Education are equipped to advise those considering bringing a complaint as to avenues of redress. The Standing Committee on Rights and Responsibilities (SCRR) is charged with implementation of the following procedures for faculty.

**II. GENERAL PRINCIPLES**

- All persons charged with responsibility under these procedures will discharge their obligations with fairness, objectivity and rigor.
- All activities under these procedures will be conducted with regard for the legitimate privacy and reputational interests of all involved parties. It is expected that complaints and other activities under these procedures will be confidential and will be shared only with those with a legitimate need to know in order to complete the investigation and take appropriate remedial action if warranted. The parties also are expected to observe this expectation. However, HMS/HSDM may disclose otherwise confidential information where necessary to protect the health, safety or well-being of the parties or others in the HMS/HSDM community, to comply with legal obligations of the University, or where, in the judgment of the Dean of the Faculty of Medicine, certain disclosures would be in the best interest of the parties or the University.
- Retaliation against an individual for raising an allegation, for cooperating in an investigation of such a complaint, or for opposing prohibited practices is

prohibited. Submitting a complaint that is not in good faith or providing false or misleading information in any investigation of complaints is also prohibited.

### **III. PROCEDURES**

It should be noted that the processes described below may not be appropriate in every circumstance. Therefore, the processes should be considered flexible and may be modified as appropriate, in the discretion of the SCRR or its designee.

In its sole discretion, HMS/HSDM may take such interim measures as it considers necessary to protect a complainant, respondent, or others involved in this process.

#### **A. JURISDICTION**

These procedures apply when the subject of the complaint (the “Respondent”) has an appointment in the Faculty of Medicine. If the Respondent has an HMS or HSDM appointment but is employed by or associated with an HMS/HSDM affiliated institution (and not employed by HMS/HSDM) and/or has a primary appointment at another Harvard School, and the alleged conduct took place outside HMS/HSDM, then these procedures ordinarily will not apply and HMS/HSDM will refer the matter to the relevant affiliated institution or Harvard School for investigation under any procedures of the affiliated institution or other Harvard School that may be applicable. However, where the alleged conduct either took place at HMS/HSDM or could create a hostile environment at HMS/HSDM, or in other limited circumstances to be individually determined by HMS/HSDM, HMS/HSDM may conduct joint proceedings with the affiliated institution or other Harvard School or may address the matter, in whole or in part, under these procedures. In all cases, HMS/HSDM may, at any point after a complaint has been raised, take temporary or permanent action with respect to the Respondent’s appointment status at HMS/HSDM. If the Respondent held an HMS or HSDM appointment at the time of the alleged incident giving rise to the complaint, but no longer holds such an appointment, then the Dean of the Faculty of Medicine or his or her designee shall determine whether and in what manner the complaint should be handled.

#### **B. REQUEST FOR INFORMATION AND ADVICE**

Individuals who seek information and advice may choose to contact the Ombudsperson,<sup>1</sup> the

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<sup>1</sup> Note that the role of the Ombudsperson is to provide assistance in a neutral capacity and not to act as an advocate for any individual or point of view. The Ombudsperson does advocate for fair processes, healthy work in academic work environments and productive communication. While information shared with the Ombudsperson by any individual ordinarily will not be disclosed

Chief Human Resources Officer, the Director of Human Resources at HSDM, the Dean for Basic Science and Graduate Education, the Dean for Faculty Affairs, the Dean for Students (HMS), the HSDM Vice Dean, the Director for Student Affairs (HSDM) or the Dean for Faculty and Research Integrity. Those individuals can share resources available at HMS/HSDM and elsewhere that provide counseling and support and can also provide information about the steps involved in pursuing an informal resolution or filing a formal complaint. Those individuals may also consult with the faculty member's Department Chair with respect to ways to resolve the situation. In addition, they may discuss whether any interim measures are appropriate at this stage.

### C. REQUEST FOR INFORMAL RESOLUTION

Individuals may make a request, either orally or in writing, for informal resolution to the Chief Human Resources Officer (HMS), the Director of Human Resources at HSDM, the Dean for Basic Science and Graduate Education, the Dean for Faculty Affairs, the Dean for Faculty and Research Integrity, the Dean for Students (HMS), the HSDM Vice Dean, the Associate Dean for Dental Education or their designees. The request should identify the party against whom the allegations are brought (if possible) and describe the allegations with specificity. Upon receipt of the request, the receiving official will discuss with the Chair of the Standing Committee on Rights and Responsibilities (SCRR) to determine whether informal resolution is appropriate. Upon a determination that informal resolution is appropriate, the SCRR Chair will designate an individual to consult further with the person initiating the request, notify the Respondent, and work with the parties to gather additional relevant information as necessary from the parties and others, as indicated. The designated individual will attempt to aid the parties in finding a mutually acceptable resolution. The Ombudsperson and the Respondent's Department Chair may be consulted about or assist with this process.

When the allegations, if true, might constitute criminal conduct, the Respondent is hereby advised to seek legal counsel before making any written or oral statements. Respondents may wish to obtain legal advice about how this process could affect any case in which they are or may become involved.

A matter will be deemed satisfactorily resolved when both parties expressly agree to an outcome that is also acceptable to the Chair of the SCRR.

At any point prior to such an express agreement, the person who initiated the process may withdraw the request for informal resolution.

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without that individual's permission, exceptions will be made if the Ombudsperson believes there is an imminent threat to safety.

## **D. PROCEDURES FOR FORMAL COMPLAINTS**

### **1. *Initiation and Screening of a Formal Complaint***

(a) A formal complaint is initiated when a full written and signed statement of the complaint is submitted to the Chief Human Resources Officer, the Dean for Faculty Affairs, the Dean for Faculty and Research Integrity or their designees. A formal complaint must be in writing and signed and dated either by a Complainant or by someone raising a complaint on another person's behalf (a "Reporter"). It should state the name of the Respondent (if known) and describe with reasonable specificity the incident(s) of alleged discrimination, including the date and place of such incident(s). The complaint must be in the Complainant or Reporter's own words, and may not be authored by others, including family members, advisors, or attorneys. Attached to the complaint should be a list of any sources of information (for example, witnesses, correspondence, records, and the like) that the Complainant or Reporter believes may be relevant to the investigation. However, a complaint should not be delayed if such sources of information are unknown or unavailable. Prompt submission of complaints is encouraged.

(b) The Chief Human Resources Officer, Dean for Faculty and Research Integrity, or Dean for Faculty Affairs promptly will provide the complaint to the Chair of the SCRR, who, in consultation with other members of the committee or others at the University, as appropriate, may dismiss it without further process or review if the complaint on its face is frivolous, insubstantial, not credible, clearly without merit, or outside the scope of these procedures. A complaint also may be dismissed without further investigation if the issues it raises already have been considered by the University in another forum or through another process.

### **2. *Investigative Team***

(a) If the complaint is not dismissed, then the Chair of the SCRR will designate an investigative team, ordinarily comprised of an SCRR committee member and SCRR staff member. At his or her discretion, the SCRR Chair may elect to designate as part of the investigative team a member of the senior faculty of the University who is not serving on the SCRR. The SCRR Chair will notify the Complainant and Respondent in writing of the decision to begin an investigation and the composition of the investigative team.

- (b) Either the Complainant or the Respondent may object for good cause, such as evidence of conflict of interest or bias, to the service of any person as a member of the investigative team. Such objection must be in writing, must fully state the reasons for the objection, and must be received by the Chair of the SCRR within seven days after the Complainant and Respondent are notified of the composition of the investigative team. The Chair of the SCRR may, if warranted in his/her discretion, remove and replace an investigative team member.

### ***3. Investigation***

- (a) The written statement of the complaint will be provided to the investigative team and to the Respondent, who will have ten business days in which to submit a written statement in response to the allegations. This statement must be in the Respondent's own words; Respondents may not submit statements authored by others, including family members, advisors, or attorneys. Attached to the statement should be a list of all sources of information (for example, witnesses, correspondence, records, and the like) that the Respondent believes may be relevant to the investigation. This response will be provided to the Complainant.
- (b) When a complaint involves allegations that, if true, also might constitute criminal conduct, Respondents are hereby advised to seek legal counsel before making any written or oral statements. While the investigation process is not a legal proceeding, Respondents might wish to obtain legal advice about how this process could affect any case in which they are or may become involved.
- (c) These are academic, not legal, procedures and formal rules of evidence do not apply. Any information that the investigative team deems relevant and trustworthy may be considered. Although Complainants and Respondents may seek legal advice, attorneys will not accompany individuals to appearances.
- (d) Both the Complainant and the Respondent may bring a Personal Advisor to interviews with the investigative team. Ordinarily a Personal Advisor should be an officer of the school. However, a Personal Advisor may not be related to anyone in the Complaint or have any other involvement in the process. Personal Advisors may view a redacted copy of the complaint or other documents provided to the parties, offer feedback on their advisee's written statements and provide general advice. During interviews, advisors may not speak for their advisees although they may ask to suspend the interview if they feel their advisee would benefit from a short break.

- (e) The investigative team will consider the written submissions of the Complainant and Respondent, and will meet with each of them. The investigative team may interview other individuals with relevant knowledge (which may include those identified by the parties), review documentary evidence, and take any other action to adduce and consider relevant information. When identifying potential witnesses, the parties should understand that the purpose of interviews is to gather and assess information about the incidents at issue in the complaint, not to solicit general information about a party's character.
- (f) After the collection of additional information is complete but prior to the conclusion of the investigation, the investigative team may request individual follow-up interviews with the Complainant and the Respondent to give each the opportunity to respond to the additional information.
- (g) The investigative team will prepare a written report of its findings, conclusions, and recommendations. The investigative team will provide its report to the Complainant and Respondent, who will have fourteen days to submit a written response. The investigative team may modify its draft findings or recommendations after considering the comments and responses of the parties.
- (h) Throughout the process, the investigative team will endeavor to inform the parties of the status of the complaint. The parties also may inquire about the status by contacting a member of the investigative team.
- (i) The report, along with the comments of the Complainant and the Respondent, will be delivered to the full Standing Committee on Rights and Responsibilities. The SCRR will consider the report and provide the parties with the opportunity to address the SCRR before making a recommendation as to sanctions.
- (j) The SCRR then will make a written recommendation to the Dean of the Faculty of Medicine with respect to the matter including penalties and corrective actions if necessary. The SCRR's recommendation will be provided to both parties for comment. The SCRR will consider such comments and may choose to alter its recommendations as a result. The comments will be appended to the SCRR's recommendations.
- (k) The Dean of the Faculty of Medicine will receive the investigative report and the SCRR's recommendations. The Dean of the Faculty of Medicine will review the

matter, in consultation with others at his/her discretion. The Dean of the Faculty of Medicine will make a final and binding decision.

#### **E. PENALTIES AND CORRECTIVE ACTION**

Penalties and corrective actions may be imposed at the conclusion of this process and will vary depending on the nature of the case. Penalties and corrective actions may include, but are not limited to, counseling, warning, reprimand, suspension, probation, monitoring, community service, and separation from the School. The Office of the Dean shall ensure that all penalties and corrective actions are implemented.