HARVARD MEDICAL SCHOOL
AND HARVARD SCHOOL OF DENTAL MEDICINE
INTERIM PROCEDURES FOR HANDLING
ALLEGATIONS OF DISCRIMINATION
INVOLVING FACULTY

I. STATEMENT OF POLICY

The Harvard Medical School and the Harvard School of Dental Medicine are firmly committed to maintaining an environment free from discrimination. It is the strong and consistent policy of HMS and HSDM to treat all members of the HMS/HSDM community with respect, to provide an environment conducive to learning and working, and to ensure equal access to rights, privileges and opportunities without regard to race, color, sex, sexual orientation, gender identity, religion, creed, age, national or ethnic origin, veteran status, disability unrelated to job requirements, genetic information, military service, or any other legally protected basis. Discrimination on the basis of these characteristics is unlawful and intolerable.

Nothing in this Policy shall be construed to abridge academic freedom and inquiry, principles of free speech or the HMS/HSDM educational mission.

This policy and the procedures described below are applicable to allegations brought against HMS/HSDM faculty (meaning any person possessing an academic appointment in the Faculty of Medicine). Allegations brought against other members of the HMS/HSDM community are addressed by other established procedures. The Ombudsperson, Chief Human Resources Officer, Dean for Faculty and Research Integrity, Dean for Faculty Affairs, Dean for Students (HMS), and the Associate Dean for Dental Education are equipped to advise a complainant as to what avenues of redress may be available. The Standing Committee on Rights and Responsibilities has been charged with implementing the procedures for faculty that follow.

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 the complainant and respondent.

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1 Allegations of sexual or gender-based harassment brought against HMS/HSDM faculty will be addressed pursuant to the Harvard University Sexual and Gender-Based Harassment Policy and the HMS/HSDM Procedures for Handling Complaints Involving Faculty Pursuant to the Harvard University Sexual and Gender-Based Harassment Policy.
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. The complainant and respondent 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 complainant or others in the HMS/HSDM community, to comply with legal obligations of the University, or where, in the judgment of the Dean, certain disclosure would be in the best interest of the parties or the University.

- Retaliation against an individual for raising an allegation of discrimination, for cooperating in an investigation of such a compliant, or for opposing discriminatory 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

Any member of the HMS or HSDM community who believes he/she has been discriminated against by an HMS/HSDM faculty member, or who believes that another member of the community has been discriminated against by an HMS/HSDM faculty member, may request information or advice; seek informal resolution; or file a formal complaint. If a Complainant or a third party filing on behalf of a complainant (the “Reporter”) brings a complaint forward initially but later decides not to pursue the matter, then HMS or HSDM will assess the severity of the alleged conduct or the potential risk of a hostile environment for others in the community and will determine whether to close the complaint or whether to proceed with an investigation.

It should be noted that the processes described below may not be appropriate in every circumstance. Therefore, the processes should be considered flexible and modified as appropriate to the situation.

In its sole discretion, HMS or HSDM may take such interim measures as it considers necessary to protect the complainant, respondent, or others affiliated with the 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 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,² the Chief Human Resources Officer, the Dean for Faculty Affairs, the Dean for Students (HMS), 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 as well as provide information about the steps involved in pursuing an informal resolution or filing a formal complaint. They also 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, the Dean for Faculty Affairs, the Dean for Faculty and Research Integrity, the Dean for Students (HMS), the Associate Dean for Dental Education or their designees. The request should identify the Respondent (if possible) and describe the allegations with specificity. 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

² 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. While information shared with the Ombudsperson by any individual ordinarily will not be disclosed without that individual’s permission, exceptions will be made if the Ombudsperson believes there is an imminent threat to safety.
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 may be consulted or assist with this process.

When the allegations, if true, might constitute criminal conduct, the party against whom they are brought is hereby advised to seek legal counsel before making any written or oral statements. Those facing allegations 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 and initiate a formal complaint under the procedures set forth below.

Ordinarily, the informal resolution process will be concluded within two to three weeks of the date of the request.

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 by a Complainant or 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 will promptly 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.

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 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 are not permitted to speak for individuals in any appearances before individuals charged with responsibility under these procedures.

(d) Both the Complainant and the Respondent may bring a Personal Advisor to interviews with the investigative team. A Personal Advisor may be an attorney or an Officer of the school but 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 like 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) The investigative team will prepare a written report of its findings, conclusions, and recommendations and 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 in consideration of the comments and responses of the parties.

(g) Throughout the process, the investigative team will endeavor to inform the parties of the status of the complaint.

(h) 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.
(i) The SCRR will then 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 SCCR’s recommendation will be provided to both parties for comment. The SCCR will consider such comments and may choose to alter its recommendations as a result. The comments will be appended to the SCCR’s recommendations.

(j) The Dean will receive the investigative report and the SCCR’s recommendations. The Dean will review the matter, in consultation with others at his/her discretion. The decision of the Dean on the matter will be final and binding.

E. PENALTIES AND CORRECTIVE ACTION

Penalties and corrective actions may be imposed for violations of this policy. These 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.