

Augusta University  
House Staff Policies and Procedures

Policy	Source
HS 39.0 Conflict Resolution	Graduate Medical Education Office

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1.0 Purpose

To define the process to resolve conflicts that arise within the Graduate Medical Education (GME) training environment. This policy is designed for informal mediation of conflicts prior to entering the formal Grievance and Due Process (HS13.0) which focuses more on issues related to House Staff probation, non-renewal, and dismissal.

2.0 Affected Entities

The following policy applies to all House Staff in Training in addition to conflict resolution procedures specific to House Staff home program.

3.0 Definitions

Conflicts may arise in a variety of settings related to the GME environment including:

Task conflicts – disagreement about appropriate healthcare decisions: these should be resolved by the appropriate attending healthcare provider if possible,

Process conflicts – disagreement about logistical issues in delivery and decisions regarding healthcare: these should be resolved by the appropriate attending healthcare provider if possible,

Relationship conflicts – disagreements arising from differences in personalities or viewpoints.

4.0 Procedures

4.1 Houses Staff who feel that there has been academic or personal umbrage in the professional environment should raise the concern either verbally or in writing to stakeholders in the conflict. It is imperative that this communication is thorough and received by intended person(s). Therefore, a simple email may not suffice.

4.2 Initial conflict resolution shall be attempted informally between the affected stakeholders.

4.2.1 Conflicts arising between House Staff:

4.2.1.1 Initial resolution should ideally be between the conflicted parties.

4.2.1.2 Subsequent resolution may be potentially mediated by an upper level resident/fellow, primarily the chief resident.

4.2.1.3 If this fails, the program director and/or coordinator should mediate the conflict, possibly including the section chief or department chair.

4.2.1.4 If the conflict potentially involves a patient safety event or patient safety near miss, a SOS should be completed. All House Staff are educated regarding how to complete an SOS during orientation and/or Interdisciplinary Resident Core Curriculum (IRCC) sessions.

4.2.2 Conflicts arising between House Staff and a faculty member

4.2.2.1 Ideally initial resolution is by civil discussion with the faculty member if possible and felt to be appropriate by the House Staff.

4.2.2.2 Subsequent resolution mediation may include the program director and/or coordinator, frequently including the section chief or department chair.

4.2.2.3 At all times, the House Staff may contact the Ombudsperson and/or GME office and DIO for assistance if needed.

4.2.2.4 If the conflict potentially involves a patient safety event or patient safety near miss, a SOS should be completed.

4.2.3 Conflicts arising between House Staff and unaffiliated parties should be mediated by the program director and/or coordinator, possibly including the section chief or department chair.

4.3 The conflict resolution process should involve an objective review of the events leading to the disagreement and should allow a cooling-off period (if acute resolution is not required), possibly mediated by an uninvolved third party. If the informal process does not reach resolution, a scaled escalation should potentially involve the following internal succession:

4.3.1 Chief Resident

4.3.2 Program Coordinator

4.3.3 Faculty Mentor

4.3.4 Program Director

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4.3.3 Section Chief

4.3.4 Department Chair

Please note the House Staff has the option to involve who they feel is most appropriate for the situation, but ideally the above should be followed.

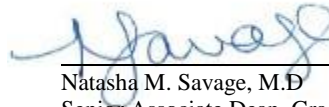
- 4.4 If the internal intervention does not reach resolution or at any time the House Staff needs external assistance, the process should be reported as needed to the following external parties at the House Staff's preference:
- 4.4.1 Ombudsperson (see HS12.0)
  - 4.4.2 GME office and DIO
  - 4.4.3 Office of Learner Diversity, Equity, and Inclusion
  - 4.4.4 Anonymous GME/DIO Grievance Portal
- 4.5 If involved, the GME office and DIO will provide a detailed report of the relevant points of the case, in non-judgmental and neutral fashion with recommendations.
- 4.6 If needed, the incident, at the discretion of the DIO with communication to the reporting House Staff, may be elevated to the Dean of MCG, associated hospital CMO, etc.
- 4.7 If appropriate, the incident may warrant elevation to the Grievance and Due Process Policy which focuses more on issues surrounding housestaff probation, non-renewal, and dismissal (HS13.0).
- 4.8 If a House Staff member believes internal procedures described above have not resulted in an acceptable process, reporting to ACGME is possible. <https://www.acgme.org/residents-and-fellows/report-an-issue/>



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3/21/22

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Date