The following are responsible for the accuracy of the information contained in this document

Responsible University Officer:
Deborah L. Plummer, PhD
Vice Chancellor

Responsible Office:
Diversity and Inclusion Office

Contact: (508) 856-2179

Policy Statement

The Medical School is firmly committed to working to ensure that all employees, students and individuals who are authorized to conduct business with and/or on behalf of the Medical School are not harassed or discriminated against in any form. To that end, it is the policy of the Medical School to comply with all federal and state anti-discrimination laws and regulations, including those covering affirmative action: Executive Order 11246 Titles VI and VII of the Civil Rights Act of 1964, The Civil Rights Act of 1991, Sections 503 and 504 of the Rehabilitation Act of 1973, Americans with Disabilities Act of 1990, Age Discrimination Act of 1967, Equal Pay Act of 1963, the Genetic Information Nondiscrimination Act of 2008 (GINA), Veterans Assistance Act of 1972 and Commonwealth of Massachusetts Executive Orders 74 and 143 and Massachusetts Chapter 151B, as well as other applicable state and federal laws.

Reason for Policy

To provide a learning and working environment that is free of all forms of harassment and discrimination and is supportive of the right of all individuals to be treated with respect and dignity.

Entities Affected By This Policy

The policy and procedures for resolution apply to all employees, students and individuals who are authorized to conduct business with and/or perform other services on behalf of the University of Massachusetts Medical School who believe they may have been harassed or discriminated against on the basis of race, color, creed, religion, gender (including pregnancy, childbirth, or related medical conditions) age, sexual orientation, gender identity and expression, genetic information, national origin, covered veteran status, disability, ancestry or any other characteristic protected by law.
Scope

The Medical School has designated the Diversity and Inclusion Office (DIO) as having primary responsibility for receiving and investigating complaints of harassment and discrimination and acting upon them through both informal and formal processes.

Responsibilities

Complainant Responsibilities
A formal complaint should be filed as soon as possible following the occurrence(s) of the harassment or discrimination; prompt filing within ninety (90) days of the incident or the last occurrence is strongly encouraged. However, the Medical School retains the right to review a complaint of harassment or discrimination that is filed beyond the recommended time period.

DIO Responsibilities
A DIO staff person initiates the investigation of the complaint within ten (10) working days of receipt of the formal/written complaint or within a time frame after the informal complaint has been filed by the complainant. Documents relevant to the investigation are held in a confidential case file. Information is shared with all parties on a need-to-know basis during the investigation of the complaint.

The Vice Chancellor for Diversity and Inclusion and/or a DIO staff person will inform the party against whom the complaint is made that a harassment or discrimination complaint has been filed against him/her. The respective managers of the complainant and the accused will be informed on a need-to-know basis.

Upon completion of the investigation, DIO reviews the findings with all of the appropriate parties. Every effort is made to complete the review within forty-five (45) working days after the complaint is filed with the DIO. However, depending on the complexity of the case, the process may be extended at the discretion of the DIO.

If the DIO determines through its investigation that the allegations in the complaint are probable, it will recommend to the appropriate manager that disciplinary action be taken against the accused individual. Disciplinary action, which may include expulsion or discharge, will be appropriate to the offense and individuals involved. The complainant will be notified either verbally or in writing of the disposition of the investigation. The accused will be notified either verbally or in writing of the findings and, where/when appropriate, the recommended sanctions.

Procedures

If any individual(s) (complainant) believes he/she has been subject to harassment or discrimination, the individual should initiate a complaint immediately by calling or visiting the DIO to arrange an appointment as soon as possible. The longer the period of time between the incident and the initiation of a complaint, the more difficult it is to reconstruct what occurred. A complaint should be filed as soon as possible following the occurrence(s) of the harassment or discrimination; prompt filing within ninety (90) days of the last occurrence is strongly encouraged. However, the Medical School retains the
right to review a complaint of harassment or discrimination that is filed beyond the recommended time period.

The presence/involvement of legal counsel is not permitted at any time during the harassment or discrimination complaint procedures. If an individual is a member of a collective bargaining unit, they may have the support of a union representative. However, the representative is not a part of the proceedings, but they may be available for support. All parties involved in an investigation, including the union representative, are required to keep information related to the investigation confidential.

TYPES OF COMPLAINTS

Informal Complaint
During the informal complaint process, a complainant shares his/her concern with a DIO staff member. The DIO staff member may suggest ways the complainant can resolve the issue(s) in an informal, non-adversarial approach that satisfies all concerned parties. DIO may refer complainant to other appropriate offices, i.e., Human Resources or the Employee Assistance Program. DIO may schedule follow-up meetings as needed to further assist the complainant.

When filing an informal complaint, the individual must provide the following information:
- the name of the complainant;
- the specific nature of actions/behaviors leading to the allegation of harassment or discrimination;
- the date(s) and time(s) of the occurrence(s) of harassment or discrimination;
- a detailed description of the occurrence(s) of the harassment or discrimination;
- the name(s) of the person(s) the complainant is accusing of the harassment or discrimination;
- the name(s) of other individual(s) who have knowledge of the occurrence(s) of the harassment or discrimination brought forth in the complaint; and
- the remedy or relief that is being sought.

Formal Complaint
If at any time the complainant considers the informal complaint procedure unsatisfactory, he/she may elect to forego the informal procedure and request that a formal complaint be initiated. Also, in some instances, the Vice Chancellor for Diversity and Inclusion may determine that the serious nature of the complaint requires that it be addressed as a formal matter.

When filing a formal complaint, the individual should put the information stated above in writing and submit it to DIO. Please use the Formal Complaint Form available on the DIO Web site or in the DIO.

The individual(s) accused by the complainant is/are provided a copy of the DIO written report of the complaint and given an opportunity to respond to the allegation(s). The appropriate managers are informed of the filing of a formal complaint on a need to know basis.

Retaliation

Retaliation against an individual for filing a complaint of harassment or discrimination, or against any individual for cooperating in an investigation of a complaint, is against the Medical School policy and it is against the law. If retaliation is found to have occurred, appropriate action(s) will be taken.

Definitions

Complainant: An individual who believes he/she has been subject to harassment or discrimination and who files a complaint of harassment or discrimination, either informal or formal, against another individual(s).

Accused: Any person who has a harassment or discrimination complaint brought against them.

Discrimination: Action on the basis of unlawful prejudice.
**Protected Classes:** The individual afforded legal protection because of their race, color, creed, religion, gender (including pregnancy, childbirth, or related medical conditions) age, sexual orientation, gender identity and expression, genetic information, national origin, covered veteran status, disability, ancestry or any other characteristic protected by law.

**Harassment:** Inappropriate and/or unlawful behavior directed toward a member of a protected class.

**Retaliation:** Conduct which is taken against a complainant because they have filed a complaint or conduct taken against an individual who has cooperated with the investigation of a complaint.

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**Approvals**

Deborah L. Plummer, PhD  Date
Vice Chancellor
Diversity and Inclusion

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**Appendices**

In support of this policy, the following appendices are included:

**STATE AND FEDERAL AGENCIES**

The Massachusetts Commission Against Discrimination (MCAD) located at One Ashburton Place, Boston, MA 02108 and 436 Dwight Street Springfield, MA 01103 is responsible for enforcing the Massachusetts discrimination and harassment laws. The U.S. Equal Employment Opportunity Commission (EEOC) is responsible for enforcing the federal law prohibiting protected class harassment. The EEOC is located at the JFK Federal Office Building, Government Center, Room 475, Boston, MA 02203. These agencies may be contacted at the above addresses. A complaint to the MCAD must be filed within 300 days of the occurrence or of the last incident. A complaint under federal law should be filed within 180 days. Under certain circumstances a federal complaint may be filed within 300 days of the incident or of the last occurrence.
FORMAL COMPLAINT FORM
(To be filed within ninety (90) days of the alleged occurrence)

1. Name of Complainant: ____________________________________________________________

2. Department: ____________________________________________________________________

3. Today’s Date: ___________________________________________________________________

4. Name of person(s) accused of the alleged occurrence:
______________________________________________________________________________

5. Department: ____________________________________________________________________

6. Date of alleged occurrence (Write the day, date, time and location):
______________________________________________________________________________
______________________________________________________________________________

7. Name of Person(s) who witnessed alleged occurrence:
______________________________________________________________________________
______________________________________________________________________________

8. Please write a detailed description of the occurrence:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

9. What remedy are you seeking?
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________