

# **COMPLAINT PROCEDURES**

## **Council on Podiatric Medical Education**

**CPME 925**

**May 2018**

### **Purpose of the Complaint Process**

The Council on Podiatric Medical Education (CPME) is concerned with the continued compliance of institutions and organizations (hereinafter referred to as institution) to which it has extended accreditation, approval, and recognition. The public, the podiatric medical profession, students, residents, fellows, educators, and others are thus assured of the integrity of the institutions that have been granted CPME accreditation, approval, or recognition. A fair and professional process for reviewing complaints directed toward accredited, approved, and recognized entities has been established in order to provide further assurances of the integrity of the policies and systems employed by sponsors of podiatric medical education and specialty boards in podiatric medicine.

The following provisions have been adopted by the Council for reviewing formal complaints against sponsors of approved fellowships, approved residency programs, approved providers of continuing education in podiatric medicine, accredited colleges of podiatric medicine, and recognized specialty boards.

### **Limitations on CPME Authority**

The Council cannot and will not act as a judicial board, mediator, or arbitrator in resolving disputes between or among individual parties. The Council will not, under any circumstances, intrude upon or interfere with the decisions of an institution to evaluate individual students, residents, fellows, or faculty or of a specialty board to examine or certify candidates. However, the Council may review published policies and the implementation of stated policies that affect such decisions.

Viable complaints are only those that relate to noncompliance with a CPME standard, requirement, or criterion and/or to a specific procedure that has not been followed. If a complaint is justified, the Council reserves the right to intervene to determine whether CPME standards, requirements, criteria, and procedures have been satisfied.

### **Who May File a Complaint**

A complaint may be submitted by any individual or entity affected by the action or policy of a college of podiatric medicine, sponsor of a fellowship, sponsor of a residency program, provider of continuing education in podiatric medicine, specialty board, or other entity within the purview of CPME or CPME itself. This may include students, residents, fellows, faculty, administrators, practitioners, patients, employees, or the public.

## **Before Filing a Complaint**

The complainant must verify that he or she:

- has sufficient information to provide a full written description of the complaint, including a summary of how the complaint relates to noncompliance with a standard, requirement, or criterion and/or to a specific procedure that has not been followed; and
- can demonstrate that efforts have been exhausted to resolve issues or problems by means of internal procedures available within the institution. A complaint will not be entertained if implementation of such internal procedures has not been attempted previously.

The Council discourages, but does not prohibit, the submission of complaints where the events of the subject matter occurred more than one year after exhaustion of internal procedures.

## **Confidentiality Requirements**

Anonymous complaints cannot be considered. If the complaint is serious enough to warrant investigation, each complainant must provide his/her name, mailing address, and telephone number to Council staff with the expectation of confidentiality.

The Council will exercise its best efforts to keep confidential the identity of each complainant who files a complaint, unless the person or entity representative has specified in writing that it is permissible to reveal his/her identity. If confidentiality is appropriate, all correspondence with the institution will maintain this confidentiality.

The Council will not maintain the confidentiality of any complainant who files a complaint involving a due process issue. Because the Council must identify such complainants to the institution, confidentiality is not appropriate. The complainant must provide written consent to have his/her confidentiality waived before the complaint process can move forward.

Where a complaint involves both potential noncompliance with a CPME standard, requirement, or criterion and/or a specific procedure that has not been followed and a due process issue, the complainant may submit separate complaints, as appropriate. The complainant must still waive confidentiality for any complaint related to a due process issue.

## **Procedure to File a Complaint**

The formal, written complaint must include the following:

- The full name(s) and signature(s) of the complainant(s).
- The mailing address(es) and telephone number(s) of the complainant(s).
- The names of all the parties involved (e.g., complainant, the institution, the CPME), their titles, and a brief description of how the parties are related to one another.

- Summary of the nature of the incident(s) and copies of any supporting documentation.
- Date(s) of the incident(s).
- The specific CPME standard(s), requirement(s), criterion(a), or procedure(s) impacted by the incident(s).
- A summary of efforts taken to resolve the incident(s) with the institution or CPME.
- A description of the status of any legal action related to the complaint.
- A statement waiving the confidentiality of the complainant(s). This waiver is optional for complaints related to the standards, requirements, criteria, or procedures of the Council. This waiver is required for complaints related to due process issues.

Complaints will be accepted by email, fax, or mail:

Email: [CPMEstaff@cpme.org](mailto:CPMEstaff@cpme.org)

Fax Number: 301-571-4903

Mailing Address: Council on Podiatric Medical Education  
9312 Old Georgetown Road  
Bethesda, MD 20814

**Note:** A fillable complaint form is available on the CPME website for ease of submission of complaints.

### **CPME Procedure for Reviewing a Complaint**

The Council will employ the following procedures in its review of written complaints:

1. Upon receipt of the complaint, Council staff will create a unique case file in which all records related to the complaint will be maintained.
2. Within 30 calendar days of receipt of the written complaint, the Council will complete its initial evaluation of the complaint and respond to the complainant. During this initial evaluation, the complaint will be reviewed by a Council staff member, who may consult with the CPME chair and/or the chair of the appropriate Council committee. The complaint also may be reviewed by legal counsel at the discretion of the CPME chair and CPME director.
  - If upon review, (a) the complaint is relevant and related to substantive issues pertaining to CPME standards, requirements, criteria, or procedures; (b) the complainant has exhausted the internal procedures available within the institution; and (c) Council staff does not require additional information from the complainant, Council staff will acknowledge receipt of the complaint and continue its review process.
  - If upon review, (a) the complaint is relevant and related to substantive issues pertaining to CPME standards, requirements, criteria, or procedures and (b) the

- complainant has exhausted the internal procedures available within the institution, , but additional information is required from the complainant, Council staff will contact the complainant to request this information. Upon receipt of the requested information, staff will continue the review process.
- Council staff may notify the complainant of its decision to terminate its review process, for reasons that may include the following:
    - The complaint does not address substantive issues pertaining to CPME standards, requirements, criteria, or procedures
    - The complainant did not exhaust the internal procedures available within the institution or organization
    - The complaint is incomplete due to the complainant's failure to submit requested follow-up information in a reasonable and timely manner
3. No later than 15 calendar days after the Council's decision to continue its review of the complaint, Council staff shall notify the chief executive officer of the institution of the complaint. The notice shall outline the nature and scope of the complaint and identify the specific CPME standards, requirements, criteria, and/or procedures in question. Where feasible, the notice will also include a copy of the complainant's letter, redacted as appropriate. The identity of the complainant shall be kept confidential pursuant to the policy described above.
  4. The institution must furnish a written response to Council staff within 30 calendar days of receiving the Council's initial notice confirming or denying, in whole or in part, the allegations of the complaint.
    - If an allegation is confirmed, the institution must inform Council staff of specific measures it has taken, or will soon implement, to ameliorate the source of noncompliance. The response also must include documentation of these efforts.
    - If the allegation is denied, the institution must respond with specificity and detail, furnishing supporting documentation and evidence, as appropriate.
  5. If the institution does not respond within 30 calendar days of receiving CPME's initial notice, Council staff shall submit a second notice. This second notice will include a warning that the Council can place the program on administrative probation if the institution fails to respond within 30 calendar days of receiving the second notice. (See the applicable CPME procedural publications for information about the administrative probation category.)
  6. If the institution has responded within the specified timeframe, Council staff shall review the response and may request additional follow-up documentation. The institution must furnish the requested follow-up information to Council staff within 15 calendar days of receiving the request. Upon receipt of the response, and any requested follow-up documentation, Council staff may, if appropriate, forward a copy of this documentation to the complainant. The complainant shall have 15 calendar days from receipt to submit a

written response back to the Council. The complainant also may elect to furnish additional information or withdraw the complaint.

7. The completed file for this complaint shall be forwarded to the appropriate Council committee. The committee will develop a recommendation for the Council's consideration. While the Council committee and/or the Council will consider the complaint during their normally scheduled meetings, the committee and/or the Council may elect to consider a complaint by conference call, if the need arises. Once the Council has considered the committee's recommendation, the Council shall formulate a plan of action, if necessary, and transmit the final disposition to the complainant and to the institution. The Council shall notify the involved parties of the final disposition no later than 21 days following its consideration of the committee's recommendation.

### **Possible CPME Actions**

While the ultimate result of the review of a complaint may be that the Council takes an adverse action against the institution, organization, or provider due to its failure to comply with the Council's standards, requirements, criteria, or procedures, other possible actions may be considered. The following list of actions represents those that may be possible:

- Take no further action and so notify the parties because: (1) the complaint is determined to be invalid or (2) the response of the institution is found to sufficiently address the allegations.
- Request additional information, from either party, needed to pursue the complaint further.
- Refer the complaint back to the appropriate Council committee for further review. Such review shall occur no later than the time of the next scheduled meeting of the committee.
- Make recommendations to the institution, suggesting or requiring changes in procedures, adherence to laws, or compliance with Council standards, requirements, criteria, or procedures.
- Conduct a focused on-site evaluation of the institution in order to assess the matter in further detail. For example, the Council may conduct its own fact-finding investigation in order to determine whether policies are consistent with applicable standards, requirements, criteria, and procedures.
- Other recommendations or actions that are deemed to be appropriate under the given circumstances.

### **General Guideline/Procedure for Filing Complaints against the Council**

Complaints against the Council shall be filed in accordance with the procedure outlined above. For example, complaints must be in writing, be specific, be accompanied by copies of relevant

documents, and be signed by the complainant. Where appropriate, the complainant must make a diligent effort to obtain witnesses and submit signed witness statements along with the complaint.

Council staff will seek to achieve an equitable, fair, and timely resolution of the matter. If staff negotiations are unsuccessful, the complaint will be referred to the Council's Executive Committee at its next regular meeting. The decision of the Executive Committee will be communicated to the complainant in writing within 30 calendar days of the Executive Committee's meeting.

In the case of a complaint specific to accreditation of a college of podiatric medicine, if the complainant is not satisfied with the resolution determined by the Executive Committee, the Council will provide the complainant with the name and address of the U.S. Department of Education's Accreditation and State Liaison and of any other agency that formally recognizes the Council. As a matter of policy, the Council maintains complete and accurate records of complaints, if any, against itself and makes those available for inspection on request at the CPME office.