

 جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY <b>POLICY AND PROCEDURES</b>		<b>Institutional Policy</b>
<b>Classification:</b> Institutional Culture	<b>Title:</b> Conflict Resolution in Residency Programs	
<b>Approval Authority:</b> Programs Administration Committee (PAC)	<b>Implementation Authority:</b> Vice Dean for Scientific Research and innovation	
<b>Effective Date:</b> April, 2025	<b>Supersedes:</b> New	
<b>Latest Revision:</b> New	<b>Code:</b>	
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### 1. Purpose

To promote a fair, transparent, timely, and consistent process for resolving conflicts among residents, faculty, and program staff within Imam Abdulrahman bin Faisal University (IAU) Residency Programs. This policy aims to safeguard the integrity of the learning environment, foster professional relationships, and uphold a culture of respect, psychological safety, and continuous improvement.

### 2. Scope

This policy applies to all residents, faculty and teaching staff members, administrative staff, affiliated clinical training sites that are involved in postgraduate residency programs under IAU.

### 3. Policy Statement

Conflicts are best addressed early, constructively, and at the lowest appropriate level. Informal resolution is encouraged as a first step. Formal escalation should occur when informal measures are exhausted or if the severity of the issue (e.g., harassment, safety concerns, power imbalance) necessitates higher-level intervention. All proceedings shall prioritize fairness, confidentiality, and the psychological safety of all involved.

### 4. Definitions

#### 4.1 Conflict:

Any disagreement, dispute, or misunderstanding that disrupts the educational or professional environment or affects interpersonal relationships among residents, faculty, or staff.

#### 4.2 Mediation:

A confidential, structured negotiation process facilitated by a neutral party aimed at reaching a mutually agreeable resolution.

#### 4.3 Conflict Resolution Panel: A standing panel chaired by the Vice Dean for Scientific Research and Innovation tasked with resolving complex or unresolved conflicts escalated beyond the PAC.



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- 4.4 **Formal Conflict:** A dispute that cannot be resolved informally or that poses significant risk to professional relationships or institutional standards.
- 4.5 **Psychological Safety:** An environment in which individuals feel safe to speak up, raise concerns, and admit errors without fear of humiliation or retaliation.
- 4.6 **Trainee Advocacy:** Support offered to residents to help them navigate complex processes and ensure their voice is heard.

### 5. Responsibilities

- 5.1 Residents and Staff: Expected to engage proactively in efforts to resolve conflicts informally and report unresolved issues promptly.
- 5.2 Program Directors: Serve as first-line mediators, document mediation efforts comprehensively, and escalate unresolved conflicts appropriately.
- 5.3 Programs Administration Committee (PAC): Conducts formal reviews of conflicts referred by Program Directors and issues resolutions where appropriate.
- 5.4 Conflict Resolution Panel: Reviews cases unresolved by PAC or involving significant institutional impact and provides final decisions.
- 5.5 PG Office: Maintains a secure and confidential Conflict Resolution Log, monitors compliance with this policy, and prepares anonymized conflict resolution reports for quality improvement purposes.
- 5.6 Resident Advocate: Available to support residents during the conflict resolution process and ensure their concerns are represented fairly, that can be the mentor assigned.
- 5.7 Psychological Safety: The institution maintains a zero-tolerance policy for retaliation. All individuals involved in reporting or resolving conflicts are entitled to a respectful, supportive, and psychologically safe environment.
- 5.8 Resident Advocate: Residents may request the support of a designated faculty advocate during any stage of the process to ensure fair representation, guidance, and confidentiality. That can be the assigned mentor or the person of choice within the establishment

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## 6. Procedures

In exceptional circumstances the process may be escalated to a higher level to address serious concerns about the psychological safety of the individual.

### 6.1 Informal Resolution

- 6.1.1 Individuals involved in a conflict must first attempt resolution through direct, respectful dialogue.
- 6.1.2 Informal efforts should occur promptly upon recognition of the conflict.

### 6.2 Mediation by Program Director

- 6.2.1 If informal resolution fails, the conflict must be reported to the Program Director within five (5) working days.
- 6.2.2 The Program Director will convene a mediation meeting within five (5) working days of receiving the report.
- 6.2.3 The mediation must include:
  - A written description of the concern.
  - A summary of informal resolution attempts.
  - A signed mediation outcome agreed upon by all involved parties.
  - If a party refuses mediation, this must be documented, and the case escalated.

### 6.3 Escalation to PAC

- 6.3.1 If mediation is unsuccessful, the Program Director refers the case to the PAC within three (3) working days of failed mediation.
- 6.3.2 PAC will:
  - Review all submitted documentation.
  - Interview all involved parties as needed.
  - Issue a resolution within 14 working days of receiving the referral.
  - Document the decision with clear rationale and any required actions.

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#### 6.4 Escalation to the Conflict Resolution Panel

6.4.1 Unresolved cases at the PAC level, or cases involving serious allegations (e.g., harassment, discrimination, professional misconduct), are escalated to the Dean of the College of Medicine who will formulate an institutional conflict resolution panel.

6.4.2 The Panel will:

- Conduct a comprehensive review, including interviews and document analysis.
- Issue a binding final resolution within ten (10) working days from escalation.
- Notify all parties in writing of the final decision and any remedial or disciplinary measures.

#### 6.5 Documentation and Confidentiality

6.5.1 All case records must be maintained in a secure, confidential Conflict Resolution Log.

6.5.2 Access to the Log is restricted to the PG Office leadership.

6.5.3 Affected parties have the right to request a review of the Panel's decision by the College Dean, under exceptional circumstances.

#### 6.6 Appeal:

Final decisions made by the Conflict Resolution Panel may be appealed under exceptional circumstances, such as new evidence or procedural error. Appeals must be submitted in writing to the Dean of the College of Medicine within five (14) working days of receiving the decision

### 7. Enforcement

7.1 Non-compliance with this policy may result in disciplinary measures in accordance with IAU regulations, including sanctions for failure to participate in conflict resolution processes.

7.2 Repeated or serious violations by residents, faculty, or staff will be reviewed by PAC for potential sanctions, including warnings, suspension from duties, or termination, depending on severity.

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7.3 The PG Office will conduct annual audits of conflict resolution records to ensure compliance and recommend systemic improvements to reduce future conflicts.

7.4 Non-compliance with this policy Emphasis will be placed on remediation, education, and system-level improvements, while serious or repeated breaches may warrant formal disciplinary measures.

### 8. Review of policy

The vice-dean of research and innovation Office, in collaboration with the Quality and Accreditation Unit, will review this policy every 2 years to ensure its continued effectiveness and alignment with institutional and national standards.

	 Dr. Ghada Al Yousef Vice Dean for Quality and Development
Date Signed:	Approved by:
	 Dr. Dalal A. Babsait Vice Dean for Scientific Research and Innovation
Date Signed:	Approved by:
	 Dr. Bassam H. Awary Dean for College of Medicine

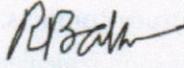
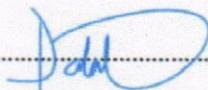
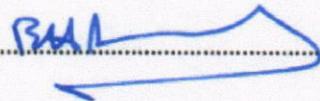


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<b>Prepared by:</b>  ..... <b>Dr. Radwa Bakr</b> Director of quality and Accreditation Unit	<b>Date Signed:</b>  <b>6 July 2025</b>
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<b>Approved by:</b>  ..... <b>Dr. Dalal A. Bubshait</b> Vice Dean for Scientific Research and Innovation	<b>Date Signed:</b>  <b>9 July 2025</b>
<b>Approved by:</b>  ..... <b>Dr. Bassam H. Awary</b> Dean for College of Medicine	<b>Date Signed:</b>  <b>10 July 2025</b>