



# GMDC

## Policy for Complaints Concerning GMDC's Policies, Procedures or Accreditation Standards

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## **Policy for Complaints Concerning GMDC's Policies, Procedures or Accreditation Standards**

### **I. Who Should Read this Policy?**

1. Faculty and students of medical education programmes
2. Grenada Medical and Dental Council (GMDC)'s Governing Body
3. GMDC Accreditation Secretariat
4. Impartial Reviewer
5. Individuals from the public
6. Related Regulatory Bodies/Organizations

### **II. Rationale**

GMDC recognizes the value of the information provided by faculty, students, individuals from the public and others, in determining whether the organization's performance is consistent with its accreditation standards, policies, and procedures. GMDC's interest is also in ensuring that the organization establishes and maintains grievance procedures and standards that are fair and just and that the procedures are applied appropriately and consistently for complaints.

The procedures for reviewing complaints highlighted hereunder provide GMDC with the autonomy to address possible violations of its accreditation standards, policies, and procedures or even violation of the organization's principles.

### **III. Statement of Policy**

The Grenada Medical and Dental Council ("GMDC") is committed to ensuring that every complaint will be reviewed in a timely, fair and equitable manner. Individuals and entities may submit a written complaint concerning GMDC's policies, procedures, or Accreditation Standards. Each complaint must be signed by the individual complainant or by an entity's authorized representative filing the complaint. GMDC will not consider anonymous complaints.

### **IV. Procedures**

A complaint must be submitted in writing to the Executive Director of the GMDC Accreditation Secretariat, indicating the nature of the complaint, outlining the facts, and providing documentation to support the complaint concerning published policies, procedures, or the Accreditation Standards. The Executive Director or impartial reviewer, and, if appropriate, in consultation with legal counsel, will review the complaint within thirty (30) calendar days of receipt in order to evaluate if there is evidence supporting the complaint. Note that if the complaint involves the Executive Director, he/she will not participate in the complaint review. In this instance, an impartial reviewer will be identified



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by the Governing Body to conduct the review in consultation with legal counsel and to submit a plan for corrective action or provide recommendations to the Governing Body.

Upon the initial review, the Executive Director or the impartial reviewer may determine that additional information or documentation is needed to complete the review. If so, the complainant must respond to the request within the stated period.

After the completion of the review, the Executive Director or impartial reviewer, will report to the Governing Body at its next scheduled meeting on the nature of the complaint, the policies, procedures, or standards identified in the complaint, and outline findings from the review. If the issues identified in the complaint have been substantiated, the Executive Director or impartial reviewer will outline a plan for corrective action or provide recommendations to the Governing Body for the area(s) of noncompliance.

Within thirty (30) calendar days of the meeting of the Governing Body, GMDC will issue a response to the complainant regarding the complaint, and its disposition, unless legal counsel advises GMDC to withhold the decision letter due to potential legal action. GMDC's disposition of the complaint is final and is not subject to appeal.

### **V. Related Documents**

1. Accreditation Standards
2. Accreditation Policies and Procedures Manual
3. Reconsideration Policy
4. Appeals Policy