A. **EFFECTIVE DATE:**
   April 6, 2020

B. **PURPOSE:**
   To establish a formal conflict resolution process between the Medical Staff and the Medical Board on issues related to adopting a rule, regulation, or policy or an amendment to the same.

C. **POLICY:**
   Whenever there is a disagreement between the organized Medical Staff and the Medical Board on issues including, but not limited to, proposals to adopt a rule, regulation, or policy, or an amendment thereto, but admitting no immediate resolution, three (3) individuals from each party will participate in a conflict resolution process.

D. **SCOPE:**
   Medical Staff at-large and the Medical Board

E. **DEFINITIONS:**
   A “disagreement” between the Medical Staff and the Medical Board exists when a document containing at least 30 signatures of the voting members of the organized medical staff, outlining the concern or conflict, is submitted to the President of the Medical Staff.

F. **MATERIAL(S) NEEDED:**
   None

G. **PROCEDURE:**
   Representing the Medical Staff: The President of the Medical Staff, Vice President/Secretary of the Medical Staff and an individual champion of the concern, appointed by the President of the Medical Staff

   Representing the Medical Board: Three (3) members appointed ad hoc excluding the President and Vice President/Secretary of the Medical Staff, who sit on the Medical Board but in this case represent the Medical Staff and are recused from pertinent discussions at the Medical Board once the issue is deemed to require conflict resolution.

   The formal conflict resolution process will begin with a meeting of the representatives of the Medical Staff and Medical Board meeting within thirty (30) days of identification of the conflict.

   If the Medical Staff and Medical Board are unable to agree upon a resolution to the conflict within thirty (30) days of meeting, the Medical Staff and Medical Board shall enter into mediation facilitated by an outside party or the UConn Health Ombuds.
The Medical Staff and Medical Board shall agree upon the selection of an outside party or the UConn Health Ombuds to act as mediator.

The Medical Staff and Medical Board shall make best efforts to collaborate together and with the third party mediator to resolve the conflict. Any resolution arrived at shall be subject to the approvals of the Medical Staff and Medical Board.

If, after ninety (90) days from the initial meeting between the Medical Staff, the Medical Board, and the third party mediator, the conflict cannot be resolved, the Medical Staff shall have the authority to act on the issue that gave rise to the conflict. An affirmative 2/3 majority vote of the Active Medical Staff is required to confirm the position of the Medical Staff, settling the conflict, otherwise the conflict is settled in favor of the Medical Board.

H. ATTACHMENTS:
None

I. REFERENCES:
TJC Medical Staff Standard—MS 01.01.01, EP 10

J. SEARCH WORDS:
Conflict resolution

K. ENFORCEMENT:
Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.

L. STAKEHOLDER APPROVALS:
On File

M. COMMITTEE APPROVALS:
Approved by Medical Board on February 11, 2020

N. FINAL APPROVAL:

1. Andrew Agwunobi, MD (Signed) _________________________ 06/01/2020
   Andrew Agwunobi, MD, MBA                            Date
   UConn Health Chief Executive Officer

2. Anne D. Horbtauck  (Signed) __________________________ 05/29/2020
   Anne D. Horbatuck, RN, BSN, MBA                     Date
   Clinical Policy Committee Co-Chair

3. Scott Allen, MD (Signed) _____________________________ 06/01/2020
   Scott Allen, MD                                       Date
   Clinical Policy Committee Co-Chair

4. Caryl Ryan, (Signed) ________________________________ 05/29/2020
   Caryl Ryan, MS, RN                                    Date
   VP Quality and Patient Service & Chief Nursing Officer
O. REVISION HISTORY:
   Approved: June 1, 2020