

**THE UNIVERSITY OF CONNECTICUT & UCONN HEALTH  
OFFICE OF INSTITUTIONAL EQUITY (OIE)  
COMPLAINT PROCEDURES**

These procedures, effective for all reports made to the Office of Institutional Equity (OIE)<sup>1</sup> on or after August 1, 2016, govern OIE’s investigation process when a University of Connecticut or UConn Health employee or other individual associated with the University or UConn Health is alleged to have violated any University or UConn Health policy within OIE’s jurisdiction.<sup>2</sup>

Individuals wanting to report alleged violations of University Policies, as defined below, are encouraged to contact OIE as soon as possible following an incident to allow for internal resolution of their complaints, and to connect employees and students with appropriate resources.

These procedures govern OIE’s investigations of alleged violations of University Policy. Suspected crimes or any behavior that poses an imminent risk to any person or the University community should be reported immediately to law enforcement.

OIE will make appropriate arrangements to ensure that individuals with disabilities and individuals with limited English proficiency are provided auxiliary aids and services or language assistance services, respectively, if needed to participate in this complaint process. Such arrangements may include, but are not limited to, providing qualified interpreters or assuring a barrier-free location for the proceedings.

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<sup>1</sup> OIE maintains office locations on both the Storrs campus and UConn Health.

<sup>2</sup> Hereinafter, all references to “University” include UConn Storrs campus, UConn regional campuses, and UConn Health. Also, these procedures apply when an employee, contractor, vendor, visitor, patient, resident, guest or other third party affiliated with the University is alleged to have violated any University policy falling under OIE’s jurisdiction, including but not limited to the following policies: *Policy Against Discrimination, Harassment, and Related Interpersonal Violence*; *Policy Statement: People with Disabilities*; *Non-Retaliation Policy*; *Policy Statement: Affirmative Action and Equal Employment Opportunity*; *UConn Health Affirmative Action, Non-discrimination and Equal Opportunity (2002-44)*; *UConn Health Persons with Disabilities (2002-46)*; and *UConn Health Non-Retaliation (2002-40)* (individually, “University Policy”; collectively, “University Policies”).

In addition to these procedures, individuals are strongly encouraged to read the relevant University Policies in their entirety. Capitalized terms used within these procedures are given the same meaning as defined in the *Policy Against Discrimination, Harassment, and Related Interpersonal Violence*.

These procedures do not govern reports in which a UConn **student** is alleged to have violated any University Policy (see [www.community.uconn.edu](http://www.community.uconn.edu)).

## **I. UNIVERSITY POLICIES UNDER OIE’S JURISDICTION**

- A. As set forth in the University Policies, the University prohibits unlawful discrimination in education, employment, and the provision of services on the basis of legally protected characteristics (race, color, ethnicity, religious creed, age, sex, marital status, national origin, ancestry, sexual orientation, genetic information, pregnancy, physical or mental disability [including learning disabilities, intellectual disabilities, and past or present history of mental illness], veteran’s status, prior conviction of a crime, workplace hazards to reproductive systems, gender identity or expression, and membership in any other protected classes as set forth in state and federal law). More specifically, the University prohibits discrimination, as well as discriminatory harassment, sexual assault, sexual exploitation, intimate partner violence, stalking, sexual or gender-based harassment, complicity in the commission of any act prohibited by the *Policy Against Discrimination, Harassment, and Related Interpersonal Violence*, and retaliation against a person for the good faith reporting of any of these forms of misconduct or participation in any investigation or proceeding related to any of these forms of misconduct under University Policies (“Prohibited Conduct”).
- B. In accordance with University Policies, all parties who participate in the good-faith reporting, filing, investigation, and/or proceedings related to reports of discrimination or discriminatory harassment under these procedures shall be free from retaliation on the basis of their participation in this process.

## **II. GENERAL PROVISIONS**

- A. Who May File a Complaint & Scope of Procedures
  - i. Reports of Prohibited Conduct may be filed by Students, Employees, Patients or Third Parties.
    - 1. “Complainant” means the individual who presents as the victim of any Prohibited Conduct under University Policies, regardless of whether that person makes a report or seeks action under University Policies.
    - 2. “Respondent” means the individual who has been accused of violating University Policy.
  - ii. These procedures apply to reports of Prohibited Conduct made against the following:
    - 1. University and UConn Health Employees, including graduate students when the action complained of was taken in the graduate student’s employment capacity (for example, as a Graduate Assistant, Teaching Assistant or Research Assistant, Resident and/or Fellow); or
    - 2. Third Parties when: (a) the conduct occurred on campus or other property owned or controlled by the University; (b) the conduct occurred in the context of a University employment or education program or activity, including, but not limited to, University-

sponsored study abroad, research, on-line, or internship programs; or (c) the conduct occurred outside the context of a University employment or education program or activity, but has continuing adverse effects on or creates a hostile environment for Students, Employees or Third Parties while on campus or other property owned or controlled by the University or in any University employment or education program or activity.

#### B. Support Persons

Complainants, Respondents, and witnesses shall have the right to have one (1) support person accompany them to any meeting with OIE related to a report or investigation under these procedures. An individual who is reasonably likely to participate as a witness in the investigation may not serve as a support person during any substantive interview. It is within OIE's discretion whether to reschedule a meeting due to a support person's unavailability.

#### C. Right to File External Complaint

- i. Complainants shall be advised of their right to file an external complaint with the applicable local, state and/or federal agency that enforces laws concerning non-discrimination and anti-harassment in employment or education such as the Connecticut Commission on Human Rights and Opportunities (CHRO), the Equal Employment Opportunity Commission (EEOC), U.S. Department of Labor, Wage and Hour Division, and the Office for Civil Rights (OCR). *See* Appendix I for agency contact information.
- ii. When an external complaint has been filed, OIE and the Office of Faculty and Staff Labor Relations (Labor Relations) will review the complaint and determine on a case-by-case basis whether OIE will conduct its own, internal investigation or, if OIE has already commenced an investigation, whether such investigation will be discontinued in light of the external filing.

#### D. OIE Files

OIE will create and maintain a file related to each report of Prohibited Conduct as described herein. The University is committed to protecting the privacy of all individuals involved in the investigation and resolution of a report. OIE will take reasonable efforts to protect the privacy of participants, in accordance with applicable state and federal law, while balancing the need to gather information to assess the report and to take steps to eliminate the discrimination, harassment or retaliation; prevent its recurrence; and remedy its effects.

#### E. Informal Resolution

Nothing in these procedures precludes an individual from seeking to discuss or resolve concerns independently with the University's

Ombudsperson. The Ombuds Office serves as a neutral resource that provides confidential and informal assistance to employees (including graduate students) on the Storrs and Regional campuses.

<http://ombuds.uconn.edu/>

### **III. WHERE AND HOW TO REPORT PROHIBITED CONDUCT**

A. A report of Prohibited Conduct may be made in written or verbal form to OIE:

Storrs Campus, Wood Hall - Unit 4175, 241 Glenbrook Road, Storrs, CT 06269;  
Phone: 860-486-2943; Email: [equity.uconn.edu](mailto:equity.uconn.edu); Fax: 860-486-6771.

UConn Health, at 16 Munson Road, 4<sup>th</sup> Floor, Farmington, CT 06030; Phone:  
860-679-3563; Email: [equity.uconn.edu](mailto:equity.uconn.edu); Fax: 860-679-3805.

B. The following information should be included in reports/complaints (to the extent known): the identities of the Complainant(s) and Respondent(s), the approximate date of the incident(s), a description of the concerning behavior, and, if applicable, the protected characteristic(s) alleged to be the basis of the discrimination or harassment.

C. A Dean, Department Head, Director or Supervisor who knows or should have known about an incident of Prohibited Conduct must comply with that Employee's Reporting Responsibilities as set forth in Section VI ("Employee Reporting Responsibilities") of the *Policy Against Discrimination, Harassment, and Related Interpersonal Violence*.

### **IV. JURISDICTIONAL REVIEW & ASSESSMENT OF MERITS**

A. OIE will review any report made to its office to determine whether OIE has jurisdiction to investigate. If not, OIE will advise the reporting person and will not investigate the report further. However, OIE may, in its discretion, refer the report to other appropriate University offices for further review.

B. If OIE has jurisdiction, it will then conduct an assessment of the merits of the allegations to determine whether the conduct at issue, if it occurred as alleged, would constitute a violation of University Policy. To make this determination, OIE's analysis is guided by state and federal law. If OIE determines that the conduct would not violate University Policy even if all the allegations are credited, OIE will advise the Complainant of its determination and will not undertake further investigation. OIE may notify other individuals (including the Respondent) or offices within the University of the reported allegations in order to mitigate the impacts of any potentially discriminatory conduct.

C. If, based on the allegations, OIE determines that the alleged conduct may violate University Policy, the investigation will proceed as described below.

## V. THE INVESTIGATION

- A. OIE will send a Notice of Investigation to the Complainant and Respondent when it determines that it will initiate an investigation. OIE may determine an investigation must proceed even in the absence or withdrawal of Complainant participation.
- B. Respondents will be informed of the allegations against them and given an opportunity to respond. Respondents also will be informed that they may enlist the assistance of their union representative, if applicable, for support throughout this process. As their support person (sec. II(b)), a Respondent's union representative may accompany the Respondent to any meetings with OIE.
- C. The standard of proof utilized in OIE's investigations is Preponderance of the Evidence ("more likely than not").
- D. OIE will invite the parties, as well as witnesses determined, in OIE's discretion, to have relevant information, to an interview with an OIE investigator. OIE also will obtain and review relevant documents or other evidence provided to or obtained by OIE.
- E. During the course of the investigation, OIE will provide the Complainant and Respondent with the opportunity to review their respective interview summaries and to provide any additional information. The Complainant and Respondent will have three (3) business days to provide any additional information to their interview summaries, and OIE will incorporate changes where appropriate.
- F. OIE strives to complete its investigation process within sixty (60) calendar days. This timeframe may be extended for good cause, which includes but is not limited to: investigations where additional time is necessary to ensure the integrity and completeness of the investigation; to comply with a request by external law enforcement for temporary delay to gather evidence for a criminal investigation; to accommodate the availability of parties and/or witnesses; to account for University breaks or vacations; to account for complexities of a case, including the number of witnesses and volume of information provided by the parties; or for other legitimate reasons. If OIE determines that the investigation may exceed sixty (60) calendar days, the investigator will advise both the Complainant and Respondent.
- G. OIE will notify the parties in writing at the conclusion of its investigation. OIE will also notify the Office of the President and/or the Executive Vice President of UConn Health, and any other individual or office that may need to know the information.

## **VI. WRITTEN RESPONSE TO OIE'S FINDINGS AND RECOMMENDATIONS REPORT**

- A. Both the Complainant and Respondent have the option to submit a written response to OIE's Findings and Recommendations report (either in addition to or in lieu of a request for review).
- B. All written responses will be added to and maintained with OIE's file pertaining to the outcome.

## **VII. REVIEW OF OIE'S FINDINGS**

### **A. Panel of Reviewers**

- i. OIE will appoint a standing pool of trained faculty, staff, and members of the administration to serve two-year terms on a Panel of Reviewers.
- ii. OIE will select the Chair of the Panel of Reviewers.
- iii. The Panel of Reviewers shall be given an orientation and training by OIE regarding the nature of the review process, OIE's procedures, prohibited forms of discrimination, harassment and retaliation, and other issues related to their roles.

### **B. Request for Review**

- i. Either party may request a review of OIE's findings by submitting a written request for review to the Chair of the Panel of Reviewers, in care of the OIE Associate Vice President, within fourteen (14) calendar days from written receipt of OIE's findings. Written receipt is presumed to be five (5) days after transmittal by U.S. mail and one (1) day if issued via email. A request for an extension of time beyond fourteen days may be granted at the discretion of OIE's Associate Vice President.
- ii. The grounds for review are limited to: (1) violations of these complaint procedures, which would have had a material effect on the outcome; and/or (2) additional evidence that was not available during the investigation, which would have had a material effect on the outcome. A party's request for review must identify at least one of the two grounds for review and provide sufficient detail to understand the basis for the request. Mere disagreement with OIE's findings is not sufficient grounds for review.
- iii. If the request for review is submitted within the timeframe set forth in sec. VII(B)(i), OIE will forward the request to the Chair of the Panel of Reviewers within two (2) business days of receipt.

### **C. Review Committee**

- i. The Chair of the Panel of Reviewers shall choose three members from the Panel of Reviewers to serve as a Review Committee. The Review Committee will first review the request to determine if at least one of the review grounds is identified. The Review Committee has the discretion to

deny a request if it is clear that neither of the two permissible grounds for review are identified. The Review Committee's decision to deny a request for failure to identify either of these two grounds is deemed final.

- ii. If either of the two permissible grounds for review is identified, the role of the Review Committee is to determine whether OIE violated its complaint procedures and/or whether there exists new information that was not available during the investigation, and that such error/new information could have had a material effect on the outcome.
- iii. The proceedings of Review Committees are informal. Review Committees should exercise their discretion not to consider cumulative, repetitious or irrelevant evidence. In discharging their duties, Review Committees may interview the parties and review relevant records. The Review Committees also may interview the OIE investigator(s) with regard to procedural questions. A Review Committee is not obligated to do any or all of those things if the Review Committee deems it unnecessary under the circumstances.
- iv. Once the Review Committee has concluded its evaluation of all relevant evidence, it will make a recommendation to the President and/or the Executive Vice President of UConn Health, which may include accepting or rejecting one or all of OIE's findings, or any other actions deemed necessary or appropriate in the discretion of the Review Committee.
- v. The Review Committee shall make its recommendation in writing and provide it to the President and/or the Executive Vice President of UConn Health within twenty (20) calendar days of the Committee's receipt of the request for review. Extensions of time may be granted by the President and/or the Executive Vice President of UConn Health on the basis of good cause.

#### D. Presidential Action

The President or designee and/or the Executive Vice President of UConn Health or designee will notify the parties in writing of his or her response to the Review Committee's recommendation within ten (10) business days of receipt.

## APPENDIX I

### MOST COMMONLY USED CIVIL RIGHTS ENFORCEMENT AGENCIES

#### **Connecticut Commission on Human Rights and Opportunities (CHRO)\***

##### CAPITOL REGION OFFICE:

999 Asylum Avenue, Second Floor

Hartford, CT 06105

PHONE: (860) 566-7710

FAX: (860) 566-1997

TDD: (860) 566-7710

##### EASTERN REGION OFFICE

100 Broadway

Norwich, CT 06360

PHONE: (860) 886-5703

FAX: (860) 886-2550

TDD: (860) 886-5707

##### WEST CENTRAL REGION OFFICE

Rowland State Government Center

55 West Main Street, Suite 210

Waterbury, CT 06702-2004

PHONE: (203) 805-6530

FAX: (203) 805-6559

TDD: (203) 805-6579

##### SOUTHWEST REGION OFFICE

350 Fairfield Ave., Sixth Floor

Bridgeport, CT 06604

PHONE: (203) 579-6246

FAX: (203) 579-6950

TDD: (203) 579-6246

\*For information on which CHRO field office to utilize, please visit

[www.ct.gov/chro/cwp/view.asp?a=2523&Q=315790](http://www.ct.gov/chro/cwp/view.asp?a=2523&Q=315790).

#### **U.S. Equal Employment Opportunity Commission (EEOC)**

John F. Kennedy Federal Building

475 Government Center

Boston, MA 02203

PHONE: (800) 669-4000

FAX: (617) 565-3196

TTY: (800) 669-6820



**U.S. Department of Education  
Office for Civil Rights/Boston (OCR)**

U.S. Department of Education

Eighth Floor

5 Post Office Square

Boston, MA 02109-3921

PHONE: (617) 289-0111

FAX: (617) 289-0150

<http://www2.ed.gov/about/offices/list/ocr/index.html>

**U.S. Department of Labor, Wage and Hour Division**

HARTFORD DISTRICT OFFICE

135 High Street, Room 210

Hartford, CT 06103-1111

PHONE: (860) 240-4160; 1-866-4-USWAGE (1-866-487-9243)

TTY: 1-877-889-5627

<https://www.dol.gov/wecanhelp/howtofilecomplaint.htm>

NEW HAVEN AREA OFFICE

150 Court Street, Room 208

New Haven, CT 06510

PHONE: (203) 773-2249; 1-866-4-USWAGE (1-866-487-9243)

<https://www.dol.gov/wecanhelp/howtofilecomplaint.htm>

**U.S. Department of Health and Human Services**

HHH Building, Room 509F

200 Independence Avenue SW

Washington, D.C. 20201

PHONE: 1-800-868-1019

TDD: 800-537-7697

<http://www.hhs.gov/ocr/office/file/index.html>

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

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