

METROPOLITAN STATE UNIVERSITY OF DENVER  
UNIVERSITY OMBUDS OFFICE ANNUAL REPORT

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**2015**

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# **Metropolitan State University of Denver**

## **University Ombuds Office**

### **2015 Annual Report**

#### **INTRODUCTION**

The third annual report (hereinafter “Report”), issued from the University Ombuds Office (hereinafter “UOO”)<sup>1</sup> of Metropolitan State University of Denver (hereinafter “the University”), covers the time frame from January 01, 2015, through December 31, 2015.

This report presents data, including the number of cases opened and the nature of issues brought to the UOO along with information identifying trends and other concerns. The UOO understands that the Administration may be privy to information not available to the UOO. Therefore, it is the Administration’s choice to act, or not to act on the information presented here.

It should be noted that this report is not a report that asserts facts or presents data on complaints regarding known incidents, but rather, it is a summary of the issues and concerns brought to and explored by the UOO and its visitors.

This report is presented to the University community without prior review by any office or person in authority therein, consistent with the UOO and the International Ombudsman Association’s (hereinafter “IOA”)<sup>2</sup> principles of independence and impartiality.

#### **TERMINOLOGY**

The term “Ombudsman” is intended to be gender neutral, and is utilized as a “term of art” within the profession. Some institutions refer to the person holding this position as “Ombudsman,” “Ombudsperson,” “Ombuds,” or “Ombuds Officer.” All are acceptable and are widely used within the profession of ombudstry.

People who come to consult with the UOO are referred to as “Visitors” and those that the UOO may work with in connection with a Visitor’s contact, are “Respondents.”

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<sup>1</sup> The UOO means the office itself, the Ombuds Officer and/or any person employed within the office either as associate/assistant Ombuds, in an administrative capacity as well as those either volunteering or acting as interns within the office.

<sup>2</sup> The International Ombudsman Association is the preeminent service organization of Organizational Ombudsman internationally. Its Standards of Practice, Code of Ethics and Best Practices can be reviewed at <https://www.ombudsassociation.org>

## **THE SHORT HISTORY OF THE ORGANIZATIONAL OMBUDSMAN AT MSU DENVER**

The UOO officially opened its doors on March 01, 2013 and is located in room 306, Central Classrooms Building.

In May 2013, the MSU Denver UOO Charter (hereinafter “Charter”) was produced, reviewed and signed by Dr. Stephen Jordan, President of the University. The Charter specifies the jurisdiction and operational boundaries of the UOO (attached as Addendum “A”).<sup>3</sup>

The UOO is an “Organizational” Ombudsman Office that adheres to the IOA Standards of Practice, Code of Ethics and Best Practices (hereinafter “Standards”). The Standards are incorporated into this report by reference and are attached as Addendums B, C and D. The Standards are described as the “four corners” of best practices (infra).

In its three years and three months of existence, the UOO has adhered to these Standards with the full and unqualified support of the Administration of the University. As such, the independence and impartiality of the UOO is actively in play every day, allowing the UOO’s constituency (faculty, staff, student employees and interns, students<sup>4</sup> and external visitors [those external to the University but doing business with the University]), to benefit from this informal and confidential resource, without interference or inhibition. These “Four Corners” of the UOO practice are described as follows:

### Independence

The UOO works outside of the normal lines of authority of the University, thus, it is not aligned with and is functionally independent from any and all of the University’s offices. For administrative matters, the UOO reports to Dr. Myron Anderson, Associate to the President for Diversity and has direct and full access to President Jordan. The UOO has, and exercises sole discretion over the cases it accepts and the manner in which it acts regarding these cases, whether the issue(s) are individual or systemic in nature. Because of the UOO’s strict adherence to both confidentiality (infra) and independence, the UOO is not a mandatory reporter on any matter. Additionally, contacting the UOO by any means will not and does not place the University on legal notice on any matter.

### Neutrality and Impartiality

The UOO makes every effort to maintain neutrality and impartiality by acting through the lens of fairness and equity. The UOO also maintains objectivity by listening, developing options, clarifying and explaining processes as well as rules and regulations, reality checking and/or facilitating communications with visitors or respondents. Its mission is not to be an advocate, except where it advocates for fairness and equitably administered processes. The UOO does not

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<sup>3</sup> The Charter may be viewed on the MSU Denver UOO website at [www.msudenver.edu/ombuds](http://www.msudenver.edu/ombuds)

<sup>4</sup> In 2014, Dr. Myron Anderson, the UOO, Dr. Laura Roth and Lisa Nelson of Student Engagement and Wellness met and agreed that the UOO could and should engage students but only where faculty, staff, including student employees and interns, as well as external visitors initiate the contact with the UOO.

give legal advice nor does the UOO engage in counseling. It is the role of the UOO to be an early warning system for the University in its ability to hear issues that may not be surfacing through other sources. Thus, one of its principal roles is to speak truth to power.

#### Informality

The UOO is strictly informal. It does not investigate<sup>5</sup>, arbitrate, adjudicate or otherwise participate in any internal or external formal process. Utilizing the services of the UOO is not a necessary first step to initiate any formal processes internally or externally. Therefore, the UOO process is strictly voluntary.

#### Confidentiality

The University supports the UOO's confidentiality, reasoning that the University's staff and faculty deserves and should have available to them a safe and secure place to voice and address their concerns. Safety of the Visitor is the ultimate concern of the UOO.

Although no statutory privilege exists, the IOA, the University administration and the UOO assert (see Charter), that the UOO owns a privilege of confidentiality and will not waive this privilege for any reason, except for threats of imminent harm and only where the UOO cannot address the threat by other appropriate means at that time.

The UOO will refuse to testify in any formal hearing unless ordered by a court of competent jurisdiction and only after aggressively resisting such an order. The UOO will pursue such resistance through access to independent legal counsel.

With the single exception to confidentiality stated immediately above, the UOO will not divulge the identity of any Visitor or Respondent, nor any information shared with the UOO without their express permission, and even then at the sole discretion of the UOO. Contacting the UOO does not place MSU Denver on legal notice on any issue. The UOO does not keep records for the University and destroys its notes (if any) immediately upon conclusion of a case. The UOO is not a mandatory reporter on any issue including Title VII, IX or the Clery Act. The UOO records trends and demographic information but deletes any identifying information.

### **THE PROCESS<sup>6</sup>**

- Makes available to all Visitors and Respondents, a safe, non-judgmental and welcoming venue to surface their issues.
- The Visitor first contacts the UOO by phone, e-mail, fax, letter, or in person.
- An initial appointment is typically scheduled for 1.5 hours.
- At the appointment, Visitors are introduced to the workings of the UOO wherein the Visitors are given an overview of the four corners of the UOO as outlined above, thus creating realistic expectations of what the UOO will and will not do.

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<sup>5</sup> The UOO does engage in “informal fact-finding” in order to ascertain the bigger picture.

<sup>6</sup> The process applies to visitors, respondents and others that may come into contact with the UOO during the course of a case.

- Meetings may take place on or off campus, in another area of campus, or by utilizing platforms such as “Skype”, “GoToMeeting” or other platform.
- Visitors ask questions to clarify the UOO’s role.
- Once a Visitor states there are no more questions they affirm their understanding of the role.
- Visitors explain their issues and concerns to the UOO.
- The UOO helps Visitors hone in and clarify the issues in order to better identify potential solutions that the Visitors will choose from.
- The UOO may do any or all of the following;
  - Ask for clarifications from other sources or resources, thus conducting informal fact-finding, including review of records and interviewing others
  - Clarify policies or processes
  - Reality check and/or challenge the visitor
  - Conflict coaching
  - Role plays
  - Take the Visitor through conflict diagnostics routine
  - Just listen
  - Encourage the Visitors to seek an “interest” based solution
  - Make referrals
- Allow the Visitor time to think about the best solution or approach for them.
- The Visitors choose a path forward from the options identified which may include doing nothing, entering into a formal process, having the UOO do shuttle diplomacy or direct intervention. It is strictly the Visitor’s choice as to what path they want to take.
- Visitors may come to the UOO for a single appointment or choose to work with the UOO over a period of time.
- The UOO can terminate contact with any Visitor at any time if there is a perception that sessions are becoming counseling, the UOO believes that the Visitor is improperly using the office or there is a developing conflict of interest.
- The UOO will follow up with Visitor(s) when requested.
- Typically, once a visitor leaves the office and there is no further contact after two weeks, the UOO closes the case and shreds documents.

## **OUTREACH**

From January 01, 2015, through December 31, 2015, the UOO reached out to the University, offering 18 presentations to the UOO constituency, (approximately 200 attendees). In these presentations, the UOO explained the function and limitations of its role in the context of the “four-corners” of the Standards noted above, the UOO constituency and how to contact the UOO. In general, the presentations were well received and generated questions.

Additionally, the UOO participated in New Employee Orientations, delivered presentations on appropriate communication techniques, bullying, conflict dynamics and diagnostics, methods for responding to e-mails (BIFF method), identifying assumptions and attributions and how these affect conflict. Included were a number of presentations on how to have conversations with others and in particular, difficult conversations. The UOO also conducted follow-up sessions to the 2014

Professional Development presentation relating to the role of assumptions and fundamental attribution bias and its role in conflict.

The UOO began mentoring a number of staff and assisted them with management, communication and conflict coaching and engagement concerns.

The UOO produced a smaller version of its brochure with contact information and “Tips for Resolving Conflicts.”

### **OTHER ACTIVITIES OF THE UOO**

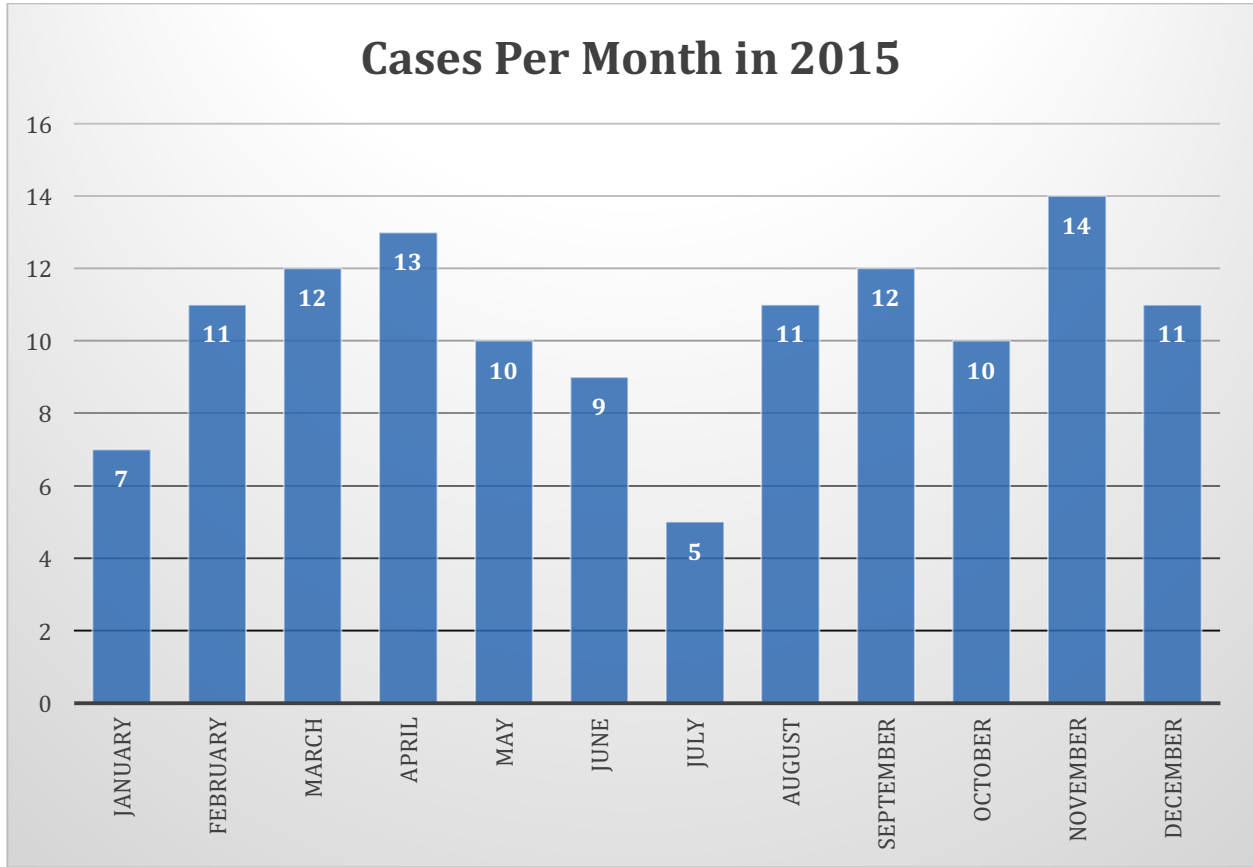
The UOO continued to serve on two committees for the Board of Certification of IOA, namely as a member of the Eligibility Committee charged with reviewing the credentials and practice of those applying for the designation of Certified Organizational Ombudsman Practitioner (hereafter “CO-OP<sup>SM</sup>”) and as Chair of the Recertification Committee, charged with reviewing applications for recertification and approving all educational Professional Development Hours for the Board of Certification. Additionally, the UOO continues to be a member of the American Bar Association’s Ombuds Committee.

During 2015, the UOO continued to serve as an ex officio member of the Bullying Policy Committee, producing a policy that defines, identifies and specifically prohibits abrasive (bullying and mobbing) behaviors.

The UOO attended trainings relating to Title IX and the Ombudsman role and Abrasive Behaviors (bullying and mobbing). Specifically, the UOO attended the *Boss Whispering Institute* certification program in Canon Beach, Oregon, which addressed unique approaches to those exhibiting abrasive (bullying) behaviors. The 2015 IOA Annual Conference was held in Atlanta and offered four days of relevant trainings for Ombuds applicable to our work in mediation, facilitation and negotiation, as well as Federal Law and human resource topics.

Finally, the UOO participated in a Thesis review and reviewed three peer-review articles being prepared for publication and supervised an intern during her final steps for earning her Master of Science in Dispute Resolution at the Werner Institute, School of Law at Creighton University.

**CASELOAD**



In 2015, there were 125 cases opened having a case duration range from one day to 250 days.



**DEMOGRAPHIC INFORMATION**

**VISITORS BY ETHNICITY (total of 142 visitors for 125 cases)**

White, Non-Hispanic – 78

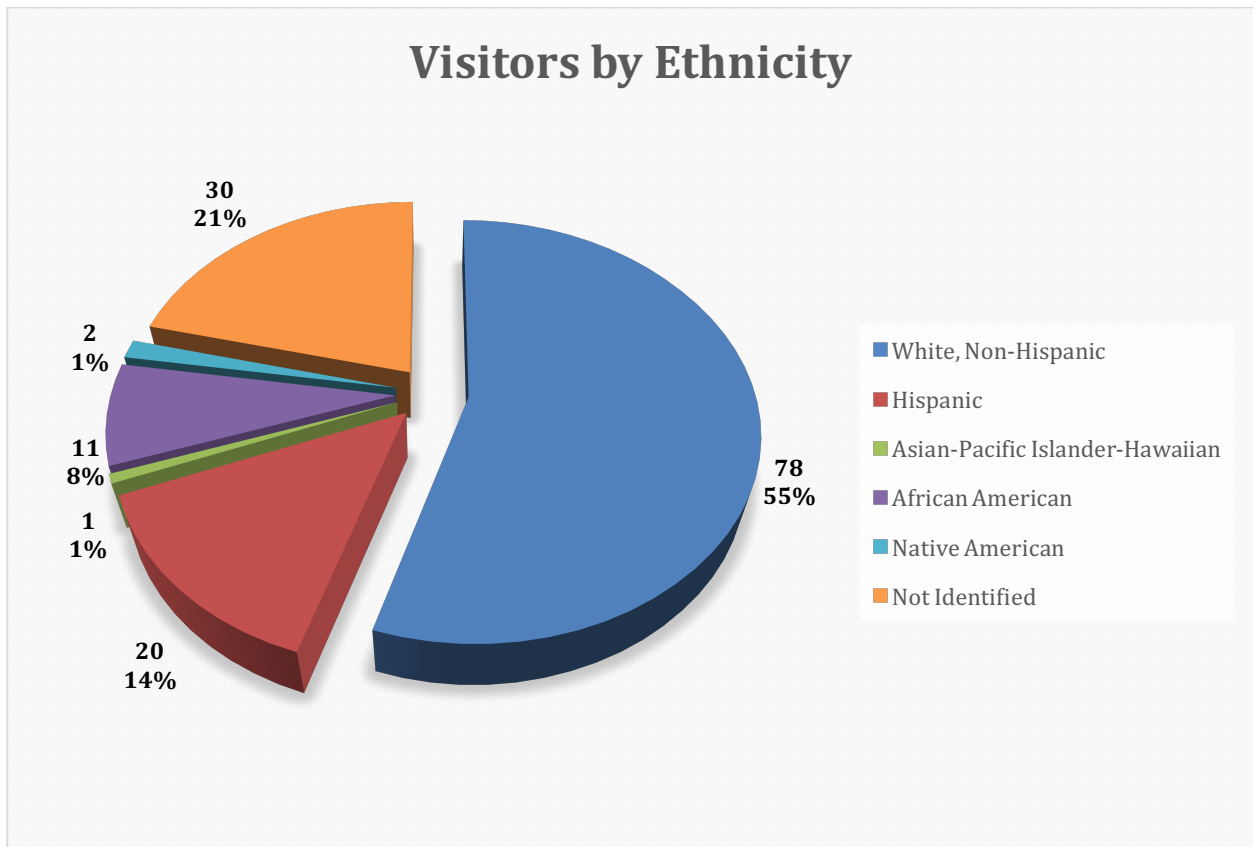
Hispanic – 20

Asian-Pacific Islander-Hawaiian – 01

African American – 11

Native American – 02

Not Identified - 30



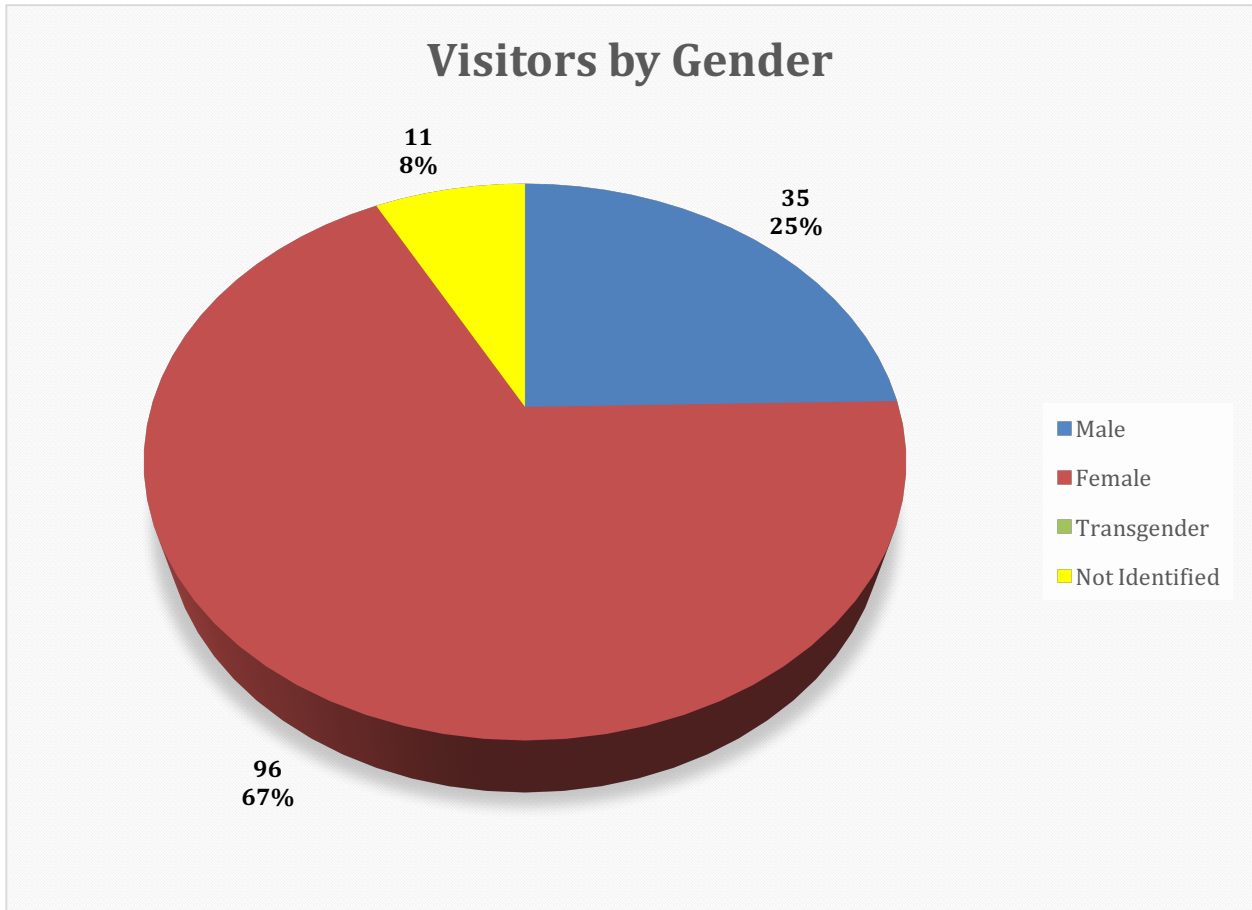
VISITORS BY GENDER (total of 142)

Male – 35 (24.65%)

Female – 96 (67.60%)

Transgender – 00

Not Identified – 11 (7.75%)



It should be noted here that Visitors self identified gender preference, this was not assumed by the UOO.

### VISITOR CLASSIFICATION (total of 142)

Staff – 77

- Classified – 06
- Administrator – 63
- Student-Employee or Intern – 08

Faculty – 53

- Tenured - 24
- Tenure-Track - 14
- Other Categories - 15

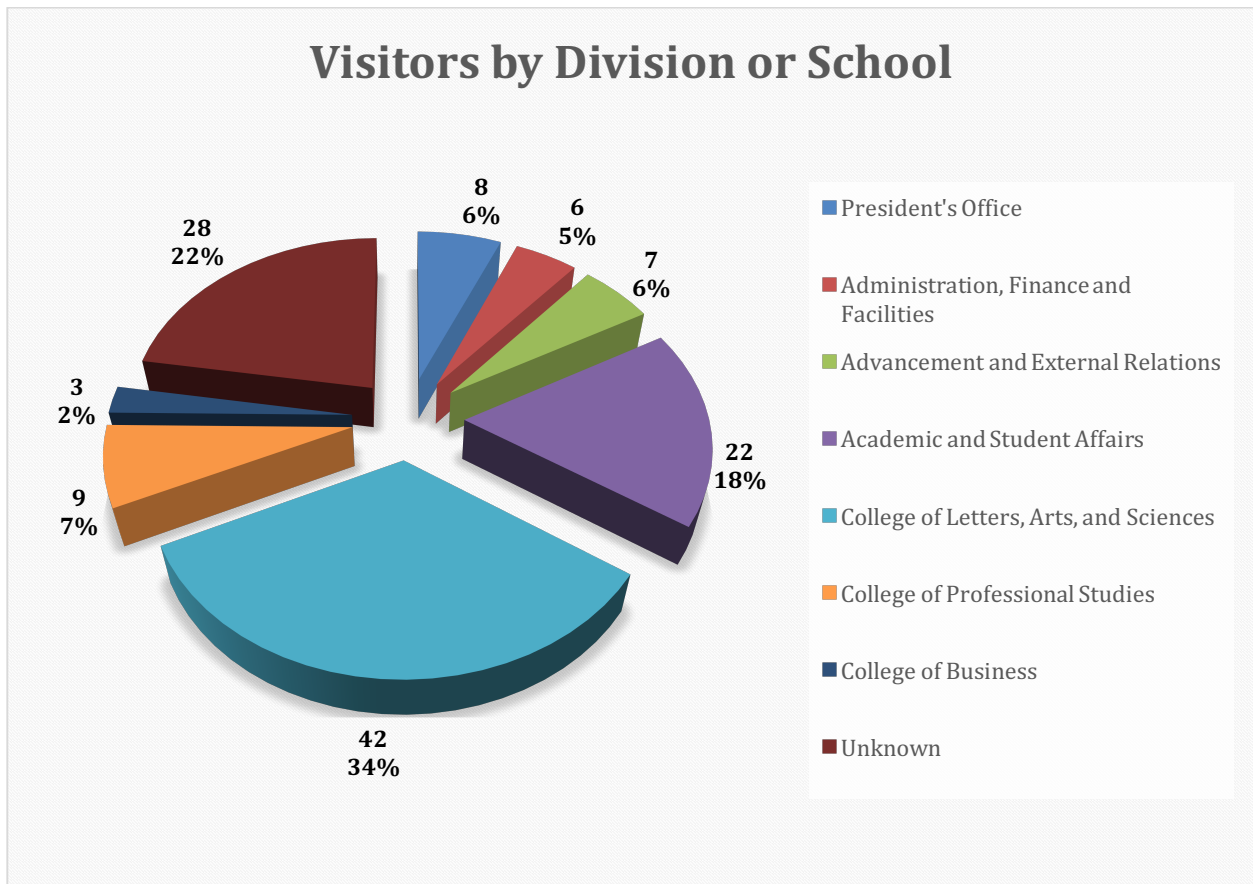
Externals – 06

Not Identified - 06



CASES OPENED BY DIVISION OR SCHOOL (total of 125)

- President's Office – 08
- Administration, Finance and Facilities– 06
- Advancement and External Relations – 07
- Academic and Student Affairs – 22
- College of Letters, Arts and Sciences – 42
- College of Professional Studies – 09
- College of Business – 03
- Unknown – 28



## **ISSUES PRESENTED AND RECORDED**

The UOO records issues utilizing the IOA Uniform Reporting Categories (hereinafter “URC”) that lists nine broad categories and over 80 sub-categories (attached as Addendum “E”).

Generally, Visitors present multiple issues to the UOO. In 2014, because Visitors wanted to talk about so many issues, the UOO began asking Visitors to narrow their issues to the top three to four issues they wanted to address, without bypassing any of their concerns. In doing so, the number of issues presented to the UOO in 2014 dropped down from the 2013 numbers. For 2015, there were fewer cases opened but an increase in the issues presented. In 2015, Visitors identified a total of 833 issues, up from 716 issues in 2014. **The 2014 figures are shown in parentheses.**

### **I. Compensation and Benefits (08 - .96%)**

a. Compensation	05 (08)
b. Payroll	01 (00)
c. Benefits	02 (01)
d. Retirement, Pension	00 (00)
e. Other	00 (00)

The issues and concerns raised in this category represent less than 1.0 % of the overall complaints and concerns shared with the UOO. Again, most related to pay disparity where the visitor complained that they were working jobs having the same titles and job descriptions yet they were being paid less than their peers for doing the same work. An important note here is that gender was never raised as an issue. Also mentioned in these cases, was the mystery of how salary ranges are determined. The UOO heard this issue raised by a fairly large number of staff outside of the UOO process. There seems to be a perception that the process itself is some sort of secret, and is therefore unfair and not in line with market salaries. To the UOO’s knowledge, the process itself has never been explained to the University Community.

### **II. Evaluative Relationships (294 – (38.407%))**

a. Priorities, Values, Beliefs	03 (08)
b. Respect, Treatment	56 (35)
c. Trust, Integrity	23 (23)
d. Reputation	03 (07)
e. Communication	33 (27)
f. Bullying, Mobbing	26 (27)
g. Diversity Related	08 (08)
h. Retaliation	22 (18)
i. Physical Violence	01 (01)
j. Assignments/Schedules	22 (27)
k. Feedback	05 (05)
l. Consultation	10 (02)
m. Performance Appraisal	17 (14)
n. Department Climate	21 (40)
o. Supervisory Effectiveness	10 (10)

p. Insubordination	02 (00)
q. Discipline	07 (00)
r. Equity of Treatment	25 (23)
s. Other	00 (00)

This category continues to have the majority of issues. Complaints in this category increased somewhat and mostly in subcategory (b) *Respect/Treatment* (19.05%), where Visitors felt that supervisors disrespected them. This subcategory is closely related to issues raised in Categories 3 and 8 and will be discussed later in this report. Additionally, issues relating to *Communication* (11.25%) increased slightly and *Bullying/Mobbing* (8.84%) remained basically unchanged from the previous year. What is troubling is that subcategories (b), (d), (e), (f), (g), (h), (i), (k), (m), (p) and (r) could collectively be viewed as abrasive behaviors. Thus 202 (68.71%) of the issues, would seem to relate to supervisory personnel acting inappropriately from the Visitors perspective.

Visitors indicated, in very general terms, that there was less cooperation and collegiality with their departments. Three specific departments were mentioned more than others. Specifically, descriptors were rudeness, incivility, expressing lack of concern or caring. Some of this was described as not listening, being blown off, lack of respectful behavior at meetings, belittling others (both experienced and witnessed). Some visitors described that they felt supervisors were intentionally marginalizing them and utilizing veiled threats to “shut people up.”

In this category, the UOO heard that these complaints involved Chairs, Directors and AVP levels. Three specific supervisors were repeatedly identified as delivering subtle threats or comments, such as “I can no longer trust you and maybe you would be happier in another job someplace else.” Visitors described these events as seemingly precipitated after the Visitor disagreed with the supervisor, offered a different perspective on the issue or offered a different solution to solving the problem. Supervisory comments were often delivered to the Visitor in private with the supervisor advising the Visitor that they would be happy to give them a recommendation if they applied for other jobs outside of the University. Several reported what they considered threats delivered in a backhanded fashion, such as reminding people that they had bought a house, a car, or some like commitment and that disagreeing with this supervisor would have consequences potentially affecting the visitor’s livelihood or ability to meet these commitments.

**III. Peer and Colleague Relationships (171- 20.528%)**

a. Priorities, Values & Beliefs	03 (10)
b. Respect/Treatment	49 (32)
c. Trust/Integrity	25 (22)
d. Reputation	10 (03)
e. Communication	33 (31)
f. Bullying/Mobbing	25 (32)
g. Diversity Related	12 (19)
h. Retaliation	13 (06)
i. Physical Violence	00 (07)
j. Other	01 (00)

Here again subcategory (b) *Respect/Treatment* was identified by Visitors. There were slightly fewer complaints against individuals being described as “bullying.” However, and as opined relating to Category II, subcategories (b), (d), (e), (f), (g), and (h) within this category could be termed abrasive behaviors. Thus, 142 of the issues reported (83%) are arguably abrasive behaviors.

Although no bullying policy has yet to be formulated, the UOO believes that the University community was beginning to educate itself, as well as being educated through various conversations, as to how bullying is defined. Thus, Visitors seemed more open and reflective in their consideration of these allegations. Still, the complaints were illustrative of a continuing problem within the University community. Visitors continued to describe repetitive abrasive behaviors of incivility, as disrespect from coworkers. Some saw this coming from “tribal” affiliations (“they are friends with our supervisor and so they feel they can say and do things that hurt or scare me”). In this context, some visitors felt these behaviors were retaliatory and were approved by a supervisor, i.e., the colleague was acting as a surrogate for the supervisor.

Last year, there were a number of complaints relating to fears of physical violence. There was good news in this regard, as the UOO did not receive any issues relating to physical violence for the reporting year of 2015.

**IV. Career Progression and Development (58 – 7.0%)**

a. Job Application/Selection	03 (05)
b. Job Classification	02 (07)
c. Involuntary transfer/change assignment	06 (04)
d. Tenure/Position Security	08 (03)
e. Career Progression	12 (03)
f. Rotation/Duration of assignment	03 (02)
g. Resignation	05 (00)
h. Termination/Non-Renewal	09 (05)
i. Re-employment of Former or Retired Staff	01 (05)
j. Position Elimination	02 (03)
k. Career Development, Coaching, and Mentoring	04 (08)
l. Other	03 (00)

Again, for 2015, there were a number of visitors raising concerns about working outside of their job descriptions. Visitors felt they were working additional hours, performing duties that were not a part of their job descriptions and were given added responsibilities to their jobs that were unreasonable and made performance of those duties from their perspective, nearly impossible. Visitors felt these demands were unfair to them and created unreasonable expectations that resulted in a hostile work environment.

Additionally, these Visitors felt that if they work outside their job descriptions then there ought to be consideration given, relating to additional compensation. This also tied into compensation issues and annual review issues, wherein Visitors felt it unfair to be evaluated for work not within their official job descriptions or in the alternative, the additional duties were not considered in the evaluation process.

The UOO questioned several supervisors relating to evaluations as well as bringing up issues never-before revealed to the Visitor and received a rather common reply of “I can do what I want and they must do what I need them to do.” The UOO asked these supervisors about management training and some advised that they had no experience managing others and some thought management training would be beneficial.

Human Resources took the position, collectively paraphrased, “well that is the way it is, supervisors can add, take away job duties as they see fit” and further stated that “there is little or no training or oversight in this regard”. The UOO notes that a year or two prior, Human Resources did have a management-training program where evaluation processes and job descriptions were addressed, but that training was abandoned (the UOO participated in this program in 2013).

#### V. Legal, Regulatory and Compliance (57 – 6.84%)

a. Criminal Activity	04 (03)
b. Business and Financial Practices	04 (00)
c. Harassment	25 (05)
d. Discrimination	14 (02)
e. Disability-Temporary or Permanent Reasonable Accommodation	08 (02)
f. Accessibility	00 (00)
g. Intellectual/Property Rights	01 (00)
h. Privacy/Security of Info	00 (00)
i. Property Damage	00 (00)
j. Other	01 (00)

The subcategories of *Harassment* and *Discrimination* saw a sharp increase of complaints to 25 (from 5) and 14 (from 2). Here again, the UOO heard Visitors complain about what can only be termed as abrasive behaviors (these subcategories combined represented 69.64% of the total in this category). According to Visitors, a significant number of these complaints were attributed to two academic departments and two administrative departments.

There was also an increase in the number of complaints relating to disability and accommodation issues. Some of these related to childcare, childbirth and workers’ compensation issues, where Visitors felt requests for reasonable accommodations were being unfairly denied. There was a second issue in this regard and that relates to flex time. What was described here, were situations where Visitors advised that others were getting flextime benefits possibly as a result of friendships or power dynamics and without formal requests, but in some Visitors cases, they were required to justify these requests to an extreme and were typically denied. Supervisors that the UOO had been given permission to talk with stated that they had substantial latitude relating to flex time. In checking with Human Resources, the UOO learned that there is no written policy relating to flex time and was advised that this was left to the individual supervisors to approve or disapprove. The use of flex time in their departments was based on needs of that department. These comments are addressed here because many Visitors presented these issues to the UOO as harassment and discrimination issues rather than simple policy issues that might surface in Category VI.



**VI. Safety, Health and Physical Environment (68 – 8.2%)**

a. Safety	19 (22)
b. Physical Working Conditions	01 (20)
c. Ergonomics	00 (00)
d. Cleanliness	00 (15)
e. Security	01 (01)
f. Telework/Flexplace	01 (02)
g. Safety Equipment	00 (00)
h. Environmental Policies	00 (12)
i. Work Related Stress	46 (30)
j. Other	00 (00)

Overall, issues in this category dropped from 102 to 68 for this reporting period.

In the subcategory of *Safety*, the complaints continue to fall from 2013 and 2014. Still, it is concerning that these complaints exist at all. A majority of these complaints came from two administrative departments and related **not** to physical harm but rather, to threats to livelihood that were made against those who disagreed and did not “rubber stamp” supervisory decisions. Here again, what was described to the UOO by Visitors seemed to be abrasive behaviors in the form of threats and intimidation. Visitors stated that in meetings, and where the expectation would be that issues would be discussed collaboratively and openly, there was direct suppression of ideas followed by open intimidation of those with alternative ideas.

To compound this, there were high numbers of Visitors who described profound *work related stress* and associated symptoms of inability to sleep, anger, frustration, crying, physical illness and simply hating to come to work. Most of them were looking for jobs elsewhere. Some described their work at MSU Denver as an exercise in futility, given supervisory attitudes. All were given referrals to the health center, C-SEAP or to private providers of their choice. In this subcategory, the 46 issues raised represent 36.8% of the total visitors seen by the UOO in 2015.

**VII. Services and Administrative Issues (54 – 6.48%)**

a. Quality of Services	16 (12)
b. Responsiveness/Timeliness	12 (11)
c. Administrative Decisions/Application of Rules	18 (15)
d. Behavior of Service Provider	08 (09)
e. Other	00 (00)

The category did not change from the previous year, thus this portion of the report reads very much like the report of 2014. Most of these complaints related to “*Quality of Services*,” “*Responsiveness/Timeliness*,” “*Behavior of the Service Provider*” and “*Administrative Decisions/Application of Rules*,” and surfaced generally from parents of students or from former students. They expressed disappointment regarding interactions with University student service departments. They felt that staff did not make an attempt to hear their concerns and as such, were

not respected. Visitors felt that rather than address questions and concerns they were passed around from persons in different departments. They felt University staff was curt, and rude, often expressing frustration and confusion. As it was last year, Visitors complained they were given conflicting answers and when decisions were made about their issues, the rationale or rule was not explained clearly. Again, there were issues of management and staff not returning calls when promised. These complaints related to tuition, insurance, credits needed to graduate and transfer credits.

### VIII. Organizational, Strategic, and Mission Related (84 – 10.08%)

a. Strategic/Mission Related	03 (01)
b. Leadership and Management	15 (11)
c. Use of Positional Power & Authority	26 (04)
d. Communication	12 (04)
e. Restructuring and Location	03 (03)
f. Organizational Climate	17 (04)
g. Change Management	06 (02)
h. Priority Setting/Funding	01 (02)
i. Data, Methodology and Interpretation of results	00 (01)
j. Interdepartmental/Inter-organization Work/Territory	01 (02)
k. Other	00 (00)

The issues in this category increased from 4.7% in 2014 to 10.08% of the total issues presented. The largest increase was in subcategory (c) Use of Positional Power and authority, which represented 31% of the total for the category and the most obvious increase in complaints from 2014. In the subcategories of *Leadership and Management*, *Use of Positional Power and Authority*, *Communication*, *Organizational Climate*, Visitors felt that leadership isolated themselves from subordinates, did not communicate clearly or in a timely fashion, if and when they did communicate. Visitors felt these supervisors excluded input, were often rude, insensitive and uncaring. Here, four departments seemed to have the largest share of these complaints (two academic and two administrative). In two departments these communications were, more often than not, described as threats and intimidation. Some described these as more serious types of abrasive behaviors. A significant number of Visitors felt that supervisory personnel acted outside of or misused their power and authority of their positions in ignoring rules, or what the UOO terms as common respect and decency. Some of this surfaced during reviews, where Visitors had no prior knowledge of issues or did have knowledge but were told that corrective actions must take place, but the supervisors renege on time frames for the corrective action. Others presented “my way or the highway” scenarios (see category II, III, and V comments). Visitor comments often included, “...have these people ever supervised anyone?” “Who taught them to treat (supervise) people like this?” “Does the University train supervisors to supervise?” “Do you think (this or that VP or the President) knows these people treat their employees like this?”

### IX. Values, Ethics and Standards (39 – 4.68%)

a. Standards of Conduct	31 (24)
b. Values and Culture	04 (05)
c. Scientific Conduct/Integrity	01 (01)
d. Policies and Procedures Not Covered in Broad Categories 1-8	03 (00)
e. Other	00 (00)

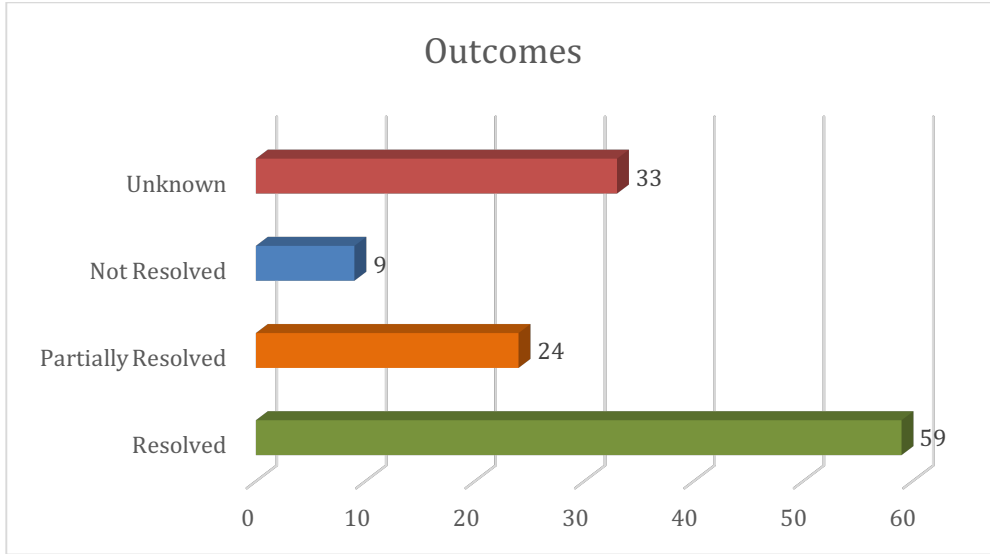
In the subcategories of *Standards of Conduct*, the issues raised continued to focus on fear or abrasive behaviors relating to repeated disrespect, harassment and threats by some Managers and Chairs. This correlates closely with findings in categories II, III, V, VI, and VIII. Last year the UOO received comments about behaviors of Chairs and Managers like “how they can get away with acting like that!” Other comments from Visitors included “they ought to know better!” or “these people need to be sent to school to learn how to manage people.” Add to this, that some Visitors alleged that senior management had been made aware of these behaviors and had chosen, from the perspective of the Visitor, to do nothing about it, leaving Visitors with perceptions that senior management not only approved of this behavior, but moreover, encouraged it. The UOO in doing “informal fact-finding”, found that in two administrative departments, these allegations were likely true. These comments were specifically related to abrasive behaviors such as bullying, (leading) mobbing efforts and incivility.

## **OUTCOMES**

The UOO does not approach conflict and concerns either from “agreement focused” or “rights-based” models. It is not the goal of the UOO to push its Visitors or Respondents to agree but rather to assist them in understanding their own position(s) (what motivates it) and the position of others involved in the dispute. Thus the UOO focuses on “interest based” outcomes where those involved in the conflict identify options and solutions that are most satisfactory to them and work through those issues, so that options and solutions are not only realistic and obtainable, but also consistent with the policies and procedures of the University. Self-determination is key to the work of the UOO.

“Resolved” means that Visitor(s) reported that the chosen options to address the concern or issue either was satisfactory, worked out between the parties, or the Visitor’s unilateral solution simply solved the problem. “Partial resolution” means that the situation improved from the perspective of the Visitor but was not completely resolved.

The UOO does not always know the outcomes of cases. It is often the case that a Visitor contacts the UOO and after a phone conversation or meeting, there is no further contact with the Visitor.



Resolved – 59 (70)

Partially Resolved – 24 (25)

Not Resolved – 09 (06)

Unknown – 33 (47)

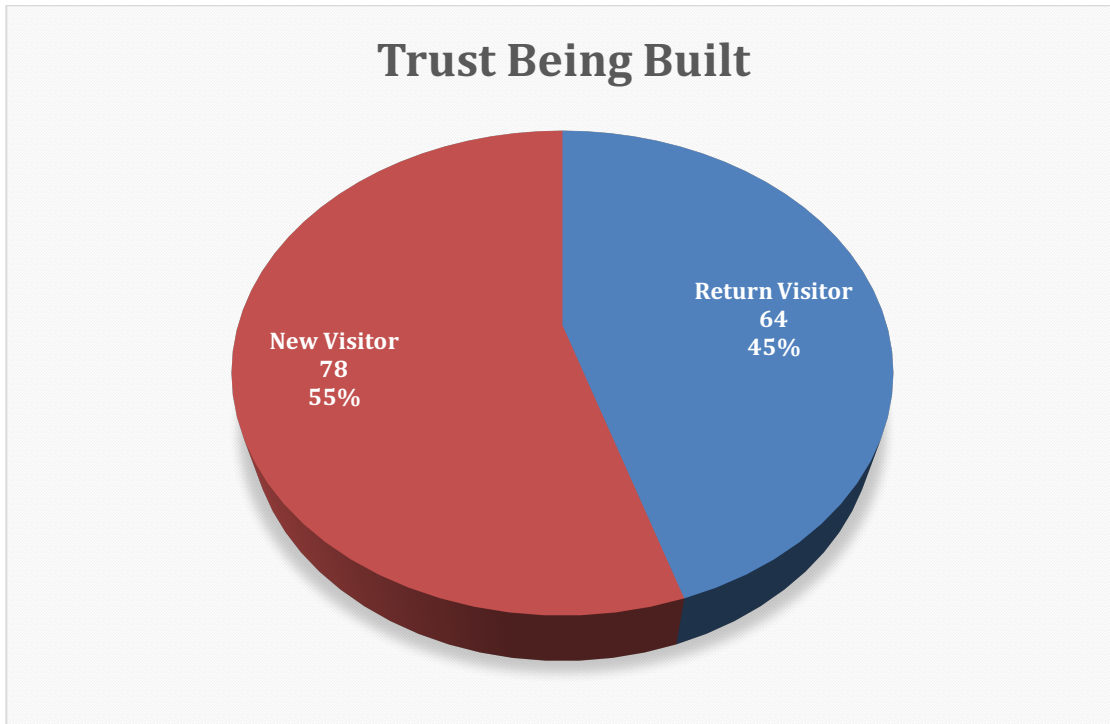
TOTAL 125 (142)

**TRUST BEING BUILT AND MAINTAINED**

142 Visitors came to the UOO in 2015. Of these, 78 were new visitors (54.93%) and 64 (45.07%) were return Visitors. The UOO believes that the number of returning Visitors is evidence that for those who have previously come to the UOO, they found the experience to be worthwhile and helpful in addressing their issues and concerns.

A number of “new” Visitors indicated that the UOO’s outreach to the University community has been both effective and successful in getting the word out about services offered by the UOO. The UOO found that others who had previously visited the office referred many of the “new” Visitors, to the UOO.

The UOO believes that the numbers indicate that there is widespread trust of the UOO as a safe venue in which to talk about issues and concerns and that identities and information are held in strict confidence. In short, the UOO believes these numbers indicate that the office operates at a high level of professionalism as advertised in its Charter.



**TRENDS AND CONCERNS**

There are nine broad categories in the URC with over 80 subcategories. In 2013, there were 1,160 issues brought to the UOO. In 2014, 716 issues were brought to the attention of the UOO, or about 4.8 issues per case (148) and 3.7 issues per Visitor (192). In 2015, the UOO fielded 833 issues, or 6.64 issues per case (125) and 5.9 issues per Visitor (142). There were fewer cases during this year and fewer Visitors. This was likely due to the UOO being closed for a little over a month during the year. As it has been in past years, only a small number of Visitors came to the UOO presenting a single issue.

**ABRASIVE BEHAVIORS: INCIVILITY, BULLYING, MOBBING AND MORE**

Since 2007, a number of researchers and practitioners (psychologists, sociologists, social workers, conflict resolution practitioners, organizational behaviorists) have been using a broad-based term “Abrasive Behaviors” to describe and cover a wide range of unwanted behaviors, from disrespect, incivility, bullying and mobbing (see infra). In 2014, I explained that researcher and author Laura Crawshaw, (*Taming of the Abrasive Manager* in 2007<sup>7</sup>), simply declined to name individuals “bullies” because in her view, calling someone a “bully” implies that a person “wants” to hurt someone and that they intentionally set out to do just that. Secondly, Dr. Crawshaw believes that using such a term is simply unprofessional. The UOO simply believes that labels sometimes influence others far too much in a negative way and in doing so, may cut off possible avenues of resolution. Therefore, many in the Ombudsman profession are using this softer term “abrasive

<sup>7</sup> *Taming the Abrasive Manager: How to End Unnecessary Roughness in the Workplace*, Laura Crawshaw, Jossey-Bass, San Francisco, 2007, p. 21

behaviors”, not to avoid labeling a behavior, but rather to avoid assuming intentions and creating a monster when there may not be one. Further, the UOO has observed that utilizing the more inflammatory terminology tends to do just that, inflame. It is critical to the UOO operation to allow the Visitor to self-identify their issue without influencing their thought process. The UOO believes this has worked well, in that there is more reflection and consideration as to what bullying and mobbing are. In short, if the Visitor describes the event and names it, it is so reported here.

Abrasive behavioral issues were widespread across staff and faculty. Looking at the URC liberally, 629 issues or 75.51% of the total could be considered abrasive behaviors and were often described as such. Crawshaw identifies five basic characteristics of abrasive personalities: over-control, threats, public humiliation, condescension, and overreaction (2007:35f). Although few Visitors described the behaviors in these categories, their descriptions of the behaviors would fit easily into one or more of Crawshaw’s five categories.

Visitors identifying that they were bullied or mobbed were very specific in their descriptions of the behavior. Incivility (which might be more descriptive of Crawshaw’s five points), was described almost consistently amongst UOO Visitors. Another definition of the more specific act of bullying comes from Einarsen *et al* as) “... repeated actions and practices that are directed against one or more workers; that are unwanted by the victim; that may be carried out deliberately or unconsciously, but clearly cause humiliation, offence, and distress; and that may interfere with work performance and/or cause an unpleasant working environment.”<sup>8</sup> Hence, what people (victim/target) typically describe as repeated and persistent exposures to negative and aggressive (abrasive) behaviors, are generally psychological in nature. There are further distinctions relating to personal bullying versus institutional bullying, as well as subjective (private or perceived) versus objective (witnessed) bullying behaviors. Bullying may also be a group event (mobbing),<sup>9</sup> wherein a group of individuals band together to isolate another individual to force submission and more often, force a resignation. It is often done with the tacit approval of management. There were few Visitors that described mobbing behaviors and all of these came out of two departments, one academic and the other administrative.

As it was in last year’s report, it is important to note that Visitors described a wide variety of abrasive behaviors and utilized a wide variety of terminology. Terms and examples were used often and interchangeably, meaning most Visitors did not have in their minds, a clear definition of abrasive behavior. As conversations progressed, Visitors began to become specific in describing specific abrasive behaviors. Some continued to identify outside sources as influencing their identification of specific abrasive behaviors. As in the previous years, these outside influences were reading articles, or seeing news reports specifically about bullying. As in previous reporting,

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<sup>8</sup> Bullying and Harassment in the Workplace: Developments in Theory, Research and Practice, 2nd Edition, Editors; Stale Einarsen, Helge Hoel, Dieter Zapf and Cary L. Cooper, CRC Press, New York, 2011, p. 9

<sup>9</sup> See Mobbing: Causes, Consequences and Solutions, Maureen Duffy and Len Sperry, Oxford University Press, New York, 2012, p. 42 (“...a malicious attempt to force a person out of the workplace through unjustified allegations, humiliation, general harassment, emotional abuse and/or terror... [quoting Davenport]” and/or “...the collective expression of the eliminative impulse in formal organizations... [quoting Westhues].”

some confided having had the experience of being bullied or mobbed in elementary, middle, high school or in other workplace settings. All spoke not from academic perspectives, but from experiential perspectives. All those describing these behaviors, described them as being directed at them, or witnessed by them. In the latter group, all asserted that they were negatively affected by these actions. Many were now looking for work outside of the University due to feeling their situation was no longer tolerable. Most felt the administration was either not interested in dealing with these situations or simply did not care.

What did change in this reporting period, was that many Visitors examined and reflected on the abrasive behaviors before actually labeling those behaviors. A number came to the conclusion that they may have been the victims of thoughtlessness, incivility or bad management technique but were not bullied. A few came to the conclusion through discussion and reflection that they simply had demanding bosses and sought better ways to communicate with them and be more effective in their work. Some of this reflection is likely to have been generated through the open discussion of potential policies surrounding abrasive behaviors.

For those Visitors who persisted in labeling behaviors as bullying, these descriptions of abrasive behaviors were unchanged from the 2014 reporting. Visitors continued to describe abrasive behaviors as “repetitive” events, using terms such as mean-spirited, unfair, unkind, aggressive, embarrassing, humiliating, hurtful, frightening, betrayal, sabotage, unwanted, silence, intolerance, unthinking, uncaring, constant public criticism, deflating, exclusion, marginalization, denial of work, hate, overworked, locked-out, undervalued, devalued, fearful, rude, isolating and hostile. Visitors often described their own departments as having a climate of fear and intimidation. For 2015, four departments came to the spotlight more often than others. These behaviors were again described as taking place in open meetings, in particular, where there was a sense of “mobbing.” As stated above, mobbing was described clearly in one academic and one administrative department. Many others were described as “invisible incivility,” meaning many of these behaviors were experienced in private.

One issue that is often overlooked in situations where there are those engaging in abrasive behaviors, is the effect on witnesses and the work force itself. Although the UOO does not have specific numbers, many Visitors shared that they were quitting or looking to leave the University. There was some indication of high turnover rates in certain departments, but this could not be verified through Human Resources information such as exit interview information. The UOO was advised by Visitors who had resigned and Human Resource management, that exit interviews were not offered or were not being consistently recorded.

#### EVALUATIONS AND CORRECTIVE ACTIONS (YEARLY EVALUATIONS INCLUDING 360's AND STUDENT EVALUATIONS OF FACULTY)

A number of Visitors brought issues to the UOO regarding evaluations. A number of these Visitors told the UOO that evaluations were unfair because they were being “dinged” for performance issues that they had never previously been made aware of. When questioned in this regard, Visitors asserted that the supervisor had never addressed the issues with them at any point in time.

This issue came up a number of times in one specific administrative department where the alleged offending supervisor first pointed out a number of discrepancies relating to performance, then suggested to the Visitors that *they (the employee/visitor) did not need to be there or maybe this job was not the best fit for them*. From this point in time onward, Visitors stated that the Supervisor would react in two different ways where communication was necessary. The first being that the supervisor became increasingly non-communicative and distant and openly hostile to any discussion with the Visitors. From the Visitors' perspective this behavior created an immediate hostile work environment. Secondly, the Visitors (generally) were not given an opportunity to correct deficiencies, or to even understand them prior to their evaluation. Thus this approach to evaluations seemed inappropriate and unfair. Moreover, the UOO learned that Human Resources seemed to have supported this approach.

Another issue that came up under this topic, was the 360 evaluations and confidentiality of those evaluations. It seems, according to Visitors, that although employees are told that these evaluations were confidential, it was often the case that the evaluator was confronted by the one evaluated, because of the comments made by that evaluator to others, thus breaking confidentiality. This seemed to be related to smaller departments within the University.

Faculty brought a number of issues surrounding the weight given to student evaluations in the tenure process. It seemed that faculty felt that they might receive one or two negative evaluations from students along with a large number of positive (or neutral comments) and were penalized unfairly for these few negative comments. The UOO had the opportunity to read these evaluations (furnished by the Visitor) and was able to verify that there might be only a small percentage of negative comments, a much larger number of neutral comments and a fair number of comments praising the educator on a job well done. In conducting informal fact-finding, the UOO asked administrators if students were interviewed (in all three categories) and found that the only students interviewed, if they were, were those writing negative comments. There seemed to be an unfairness as to process. Visitors asserted that the students writing negative comments did not participate in class, do assignments, were disruptive and felt that they deserved better marks than received. From the perspective of the Visitors, the marks given were fair based on the efforts (or the lack thereof) of the students, yet they were penalized on their evaluation, which, for them was unfair. The students therefore, seemed to be using these evaluations in a retaliatory fashion. Whether there were other issues under consideration by supervisory personnel, or if appeals were filed, were not confirmed.

## UNWRITTEN PROCESSES

Classified Staff have reasonably clear processes in matters of discipline and termination. Administrative *At Will* employees do not perceive this to be true for their class. A number of Visitors reported concerns regarding differing approaches to *Progressive Discipline*<sup>10</sup>. What is

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<sup>10</sup> Human Resource Management, 11<sup>th</sup> Edition, Robert L. Mathis and John H. Jackson, Thomson/Southwestern, Mason, USA, (2006) p.515f. Mathis and Jackson define “progressive discipline” simply as disciplinary measures that “...incorporate steps that become progressively more stringent and are designed to change the employee’s inappropriate behavior.”<sup>10</sup> Thus, there



important to note here, is that Human Resources management has repeatedly advised the UOO, that there is no policy, written or otherwise, regarding *Progressive Discipline*. The reason cited is that administrators of the University are *At Will* employees, meaning that any administrator may be terminated without cause at any time by their supervisor. Yet, many supervisors, employees, even in Human Resources, believe there is such a policy, which leads to a fair amount of confusion and uncertainty about process.

Again for this reporting period, Visitors stated that there seemed to be no clear written process regarding *Corrective Actions* that they could look at and review. The UOO reviewed a number of these *Corrective Actions* and noted that these documents often did not identify the offense nor did they note any prior discussion relating to the problem(s) with the employee (The UOO did not get into the issues themselves but rather approached this from a perspective of fairness and equity). When contacting the Human Resources director on different *Corrective Actions*, it was noted that there was a lack of consistency in direction. A number of supervisors confirmed the inconsistency in advice that was received from Human Resources. Some of these *Corrective Actions* neither identified the actual offense nor referenced warnings or prior reviews, in which these issues had already been addressed.

There are two issues here. First, if the University desires to retain talent, it would seem that its goal would be to advise the employee of deficiencies and assist him/her in changing inappropriate behaviors. Several employees were given very short periods within which to correct deficiencies, without the deficiency being identified or corrective steps being clearly delineated. Again, the complaints may have been fully legitimate as to performance. The UOO is only addressing process. The process ought to be consistent, reviewable (in writing) and fair for all.

The second issue is that, in order for the UOO, or any resource to be able to give employees accurate information, the processes ought to be in writing and accessible. Utilization of what seems to be an *Oral Tradition* ought not to be an acceptable practice. The perception is that managers and Human Resources make policies up as they go and that this practice creates an environment of inconsistency and lack of fairness. In the long run, this affects morale and causes the University to lose talent.

As stated in the UOO 2014 report, The UOO's concern is that these phantom and/or ambiguous processes can only lead to inconsistent application of rules and regulations and real or perceived lack of equity and justice that might be a liability to the University. The UOO has discussed, and will continue to raise this issue as a matter of fairness and equity.

## **ELIMINATION OF POSITIONS (REORGANIZATION)**

In this section, the UOO is not addressing a reported systemic issue, but rather an issue of decision-making, its timing and effect on University morale.

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is a sequence of events that ensure that the nature and seriousness of the offense are clearly communicated to the employee, giving them a chance to correct the deficiencies.

Institutions reorganize all of the time. Most organizations give their employees advance notice of pending reorganizations and give them an opportunity to seek other employment within the organization, or begin a search process for outside employment.

The Visitors who came to the UOO stated they were told that their positions were being eliminated because of a decision to reorganize their work areas and as such were given a one-hour notice of this decision. These Visitors came to the UOO post termination, seeking to find a way to reverse this decision or at least a reconsideration relating to termination in order to give them a little time to find other employment. They felt, given their history with the University, their contributions to the University and their positive performance reviews, that this was grossly unfair and unjust. The UOO learned that the effect on the immediate organization (the Visitors work area) was that morale and trust in the administration's use of power were damaged.

It is the UOO's place to call out unfairness within processes. The UOO did discuss this issue at the highest levels as to why there was no warning or more sensitivity to the timing of the decision. The issue is surfaced here, not to admonish any decision-maker, as that is not the role of the UOO, but rather to implore those that might make such decisions in the future to employ a heightened sensitivity to employees so that they can have opportunities to find other employment either within or outside of the University. This is about communication as well as fairness that ought to be at the heart and soul of the University.

## **HUMAN RESOURCES AND THE EQUAL OPPORTUNITY OFFICE: TRUST AND CONFIDENTIALITY**

### **HUMAN RESOURCES**

In both 2013 and 2014, a number of concerns were raised about Human Resources ("HR") and this continues as a trend for 2015. The first relates to "confidentiality", wherein it is still reported that information shared with HR thought to be "confidential" was not kept as such. Several visitors reported that upon sharing information with a member of the HR staff, they returned to their offices only to learn that the supervisor(s) or co-worker(s) that the Visitor had concerns about, were already aware of the Visitor's contact with HR as well as the subject matter of the conversation between the Visitor and HR. Visitors reported that there was an immediate reaction which was perceived by them to be harassing and retaliatory in nature.

The second issue speaks to continued concerns about trust and a willingness to utilize HR services. While the UOO does not refer every Visitor or Respondent to HR, the option is often discussed. In 2014, the UOO suggested utilization of HR to 64 Visitors and 42 (approximately 67%) either resisted or declined to consider HR as an option outright. This trend continued in 2015 where the HR option was suggested to 71 Visitors with 52 (73.24%) resisting, or flatly declining to utilize HR services. Visitors simply stated that the office was in disarray, could not be trusted or had no real interest in helping employees.

## EQUAL OPPORTUNITY

In 2013, the UOO reported issues relating to trust of the Office of Equal Opportunity (“EO”) and the perception that EO lacked independence, to the extent that said office was housed in the Office of the President.

In 2014, the UOO reported there were concerns relating to how EO handled investigations. Specifically, there were allegations that complainants and respondent witnesses were not interviewed. Thus, Visitors believed the findings were based on incomplete information. There were also a number of reports of breaches in confidentiality by EO staff, where Visitors, while in the EO office area, overheard talk about cases (or at least what they thought to be case information). As reported in 2014, these concerns seemed to relate to “loose talk” rather than “intentional” breaches of confidentiality.

In addition to the above concerns, in 2015, a third issue came to light regarding the “openness and lack of privacy” concerns of the EO office area. Visitors stated that if they were over in that area (SSB President’s Office area), one could easily see who the EO staff would be talking to. This was of critical concern where a Visitor decided to go to EO only to find their antagonist waiting to be seen, visiting with staff or already in an office. Likely, this was pure coincidence but it is still seen as an issue of privacy and confidentiality.

There is good news on the EO side. First, fewer Visitors raised issues of EO being in the pocket of the President (in past reporting, this was the perception of Visitors because EO was located in the President’s offices). Secondly, in past years, a fair number of Visitors have declined to consider the EO option. While the UOO does not push Visitors to seek counsel from EO staff, it certainly will suggest the option where the issues that are presented might be better addressed through a formal process. In 2015, the UOO suggested to 69 Visitors that they might want to consider utilizing EO office personnel with only 16 (23.2%) of the Visitors stating that they would not consider using the EO office. This is a substantial improvement over previous years and good news. Those that indicated they would consider this option wanted to know more about the process and seemed more willing to seriously consider this option among others. The chief concern continued to be confidentiality and retaliation, if the Visitor chose to file a formal complaint.

Those that declined continued to cite reasons articulated in previous UOO annual reports, of distrust relating to confidentiality, lack of empathy, being judged before all the facts were explored, and the perception that the investigation was not conducted fairly or completely. On two occasions, Visitors reported that the EO staff expressed inappropriate doubt that a certain race could even experience discrimination. Overall, there appears to be an improved willingness to seek assistance from the staff in EO, despite some continuing complaints.

## CUSTOMER SERVICE AND ACCURACY OF INFORMATION

As it was last year, a number of parents, former students and a few students contacted the UOO relating to the lack of appropriate customer service when they contacted Financial Aid or the Registrar.

Visitors described their experiences when calling or making personal visits to these departments, to ask for explanations, clarifications or rationales for policy decisions or processes. What they experienced was a great deal of frustration when the designated employee could not answer the questions, could not get to the point by being too technical in the response, were rote or robotic in their response, rude, or simply passed them off to someone else. There were some complaints of leaving messages and calls not being returned. Like last year, several visitors described being transferred multiple times, including as a last resort, being transferred by a staff person to the UOO. Visitors also described staff being frustrated with them and becoming curt/disrespectful. All described a total lack of empathy for their issue. These issues involved registration issues such as transfer of credits and enrollment, insurance issues and financial aid questions. The UOO intervened directly in these matters and obtained explanations and clarifications for these Visitors. As is the case at times, not all the answers were to everyone's liking, but the Visitors seemed satisfied that they had some closure in this regard.

## SYSTEMIC CONFLICT AVOIDANCE

“Our “opponents” are our co-creators, for they have something to give which we have not. The basis of all cooperative activity is integrated diversity ... What people often mean by getting rid of conflict is getting rid of diversity and it is of the utmost importance that these should not be considered the same. We may wish to abolish conflict, but we cannot get rid of diversity. We must face life as it is and understand that diversity is its most essential feature ... Fear of difference is dread of life itself. It is possible to conceive conflict as not necessarily a wasteful outbreak of incompatibilities, but a normal process by which socially valuable differences register themselves for the enrichment of all concerned.”

-Mary Parker Follett<sup>11</sup>

Follett wrote this piece just after World War One as a champion for workplace justice. Because of advances in communication and travel, the idea of globalization, and the inherent diversity of globalization became increasingly important as cultures engaged more easily and borders disappeared.

The above quote is not designed to illustrate diversity as we may think of it today, in a cultural context such as race, color, ethnicity, religious preferences or sexual orientation, but rather, of something more basic, such as the the differences of opinion and viewpoint. Granted, when we speak of diversity, we tend to think of these factors just mentioned. Diversity is about our differing and diverse perspectives and opinions held by our staff and faculty in our various little sub-cultures of this institution;’ This is normal. Where we have differing viewpoints we have opponents that are, as Follett states, “our co-creators.”

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<sup>11</sup> Quote taken from *The Art of Waking People Up*, Kenneth Cloake and Joan Goldsmith, 2003, Jossey-Bass, San Francisco, 211

Conflict by definition is an incompatibility of perspectives. The UOO has noted a trend of conflict avoidance over the last three years. Avoidance presents in several ways. Too often, the UOO sees Visitors and Respondents that are so entrenched in their positions, and have asserted the position for so long that they cannot back down. In the Alternative Dispute Resolution world, we call this “entrapment.” This approach is a power move and often, in the view of the UOO, it is about acting out of, or on fear. A second type of avoidance is flight or simply refusing to engage conflict either in a timely fashion, or not at all. A third observation is that many Visitors and Respondents (self-reporting or report on others’ behaviors) are reactive rather than responsive thus they choose to fight. A subset of this observation is that more often than not, the UOO learns in the course of conversation that the Visitor or Respondent never understood the issue, or did not correctly identify the issue before them. Visitors simply cannot separate the person from the problem. Hence we waste the opportunity to overcome the incompatibilities and therefore the lose opportunities to be enriched by learning from these incompatibilities in our perspectives. The truth is that we humans are pretty much wired to be conflict avoidant.

When the UOO participates in the New Employee Orientation (“NEO”) process, and in other teaching relating to conflict around campus, one exercise that is conducted is very telling relating to the fear of conflict. Participants are asked what “one word” comes immediately to mind when they hear the word “conflict.” 90% or better of the participants almost immediately respond by focusing on the negative, using terms like fight, pain, run-away, fear, avoid, anger, scream, getting away, destroy, isolate, hurt, sick. In the world of Alternative Dispute Resolution (“ADR”) we refer to this as the *rational* approach to engaging (or not) conflict. In the alternative, when the UOO asks participants to respond to the word “conflict” using positive terminology, the response is not immediate and it takes people time to formulate a response. We in ADR call this the *irrational* response in engaging conflict. Humans respond to conflict by running away, by freezing up or fighting. None of these choices are productive and are profoundly destructive to organizations and individuals.

Again, this is not meant as criticism but illustrative of a basic problem. Follett opines that most of us simply do not see conflict as an opportunity to learn, to understand, to appreciate, to change, or even to apologize and forgive. We do not take advantage of our co-creators; those with whom we are incompatible, to learn from them. Where these incompatibilities are handled poorly or not at all, we see abrasive behaviors, festering anger and frustrations resulting in low morale and high turnover.

From the UOO’s perspective, this is the underlying problem within the University community and it is systemic reaches into almost every level of the University. We avoid conflict, we do not address it in time and we do not hear or see the real issue in order to act appropriately. Conflict requires a presence and a willingness to hear all perspectives, to understand and appreciate the differences and to actively participate in seeking a solution that is compatible to all.

### **LOOKING TO 2016**

The UOO hopes to tackle the following in 2016:

- Continue seeing visitors and respondents and assisting them in working through issues and concerns.

- Continue to keep awareness of the UOO role in the forefront of all divisions, department and internal organizations at the University.
- Strive to engage the University faculty and staff in an increased number of conflict management trainings.
- Attend various meetings around campus such as COA, Classified Council, Faculty Senate, and so on when possible.
- Ask to be allowed to sit in on more institutional committee meetings as an ex officio member, to increase awareness of campus issues and climate.
- Become more proactive in speaking truth to power,
- Work with Human Resources to develop a NEO-like process so that the UOO can make staffers aware of this service.
- Continue to serve and lead committees in IOA, The Association for Conflict Resolution (ACR), the American Bar Association (ABA) promoting the work of the Organizational Ombudsman.
- Host one of the quarterly Colorado Ombuds Group Meetings at the University.
- Hire an administrative assistant full time.
- Revisit making the UOO resource and services available to students.
- Continue to engage in professional development to maintain and improve conflict engagement skills.

## **SUMMARY AND CONCLUSION**

Abrasive behaviors among leadership and peer relationships in 2015, remain consistent with previous years reporting. There is some improvement however, in how Visitors are deliberating and labeling bullying and mobbing issues. However, abrasive behaviors pervade the reporting. Abrasive behaviors embrace a wide range of issues pertaining to methods of communication, trust, lack of respect, incivility and organizational environment, where power is perceived by the Visitors to be misused or abused. Allegations of these behaviors led to an increase in further allegations of harassment and retaliation. Supporting these assertions are increased work-related stressors, along with physical illnesses and fear for personal (career/life) safety.

Issues relating to HR and EO continue to be voiced where these processes are often rejected or utilized. EO however seems to be enjoying a renewed Visitor trust as more Visitors are willing to consider using the office. There continue to be issues relating to customer services in the student service and financial aid areas. Finally, supervisory and HR handling of evaluations (staff and Faculty), 360s and inconsistent or unwritten policy issues continue to be reported.

The UOO acknowledges every year that graduates and parents of graduates sing the praises of Metropolitan State University of Denver, their dedicated educators and staff as well as the quality of the education received. Faculty and staff talk with great pride of the mission they have in educating students, helping students succeed, growing the University in reputation and class. Despite its problems, and the issues reported, the UOO sees and hears people who want to stay in the University, who believe in the University and its mission and who are excited about their, and the University's future.

Conflict is inevitable, because there are incompatibilities between people, departments and divisions within our institution. All we need to do is recognize this, clarify our differences, be fearless in engaging one another so that we enrich and co-create time and again, ourselves and our institution.

Respectfully submitted,

G. Michael Kilpatrick, BSL, MS, MTh, CO-OP<sup>SM</sup>  
Director/University Ombuds Officer  
Metropolitan State University of Denver

# Metropolitan State University of Denver University Ombuds Office

## Charter Agreement

### I. Introduction

In 2010, Metropolitan State College of Denver conducted an "Employee Climate Survey" and concluded from this survey results the need for a full-time informal, confidential, neutral and independent office where employees, faculty and staff could talk about, and obtain direction regarding conflicts and concerns in the workplace. The goals identified were to offer a "safe" environment for those who wanted or needed the above services and to lower the number of formal complaints, grievances and lawsuits.

In March 2013, Metropolitan State University of Denver (hereinafter "University") established the University Ombuds Office, to provide confidential, impartial, independent and informal dispute resolution services to designated constituents of the University community.

### II. Terminology

Ombudsman, Ombuds, Ombudsperson and Ombuds Officer are terms of art and are used interchangeability. These terms are intended to be gender neutral. The University has chosen to use the title "University Ombuds Officer" ("UOO"). UOO describes the practitioner(s), the office itself, and any and all support staff. UOO will be used interchangeably as appropriate to context and sentence structure.

"Designated Constituents" are those that may utilize these services and are identified as all faculty, classified staff, administrators, student-employees and external individuals having business with the University. Students are excluded from this service as they have similar resources allocated to them.

"Visitors" is a term of art describing those designated constituents who seek assistance from the UOO, or those who the UOO contacts in relation to a case on which the UOO is working.

"Respondents" are those that may be contacted by the UOO in response to a concern, issue or conflict brought forth by the visitor.

"Facilitated Conversations" indicate a process that is similar to the "mediation" process but with a distinctive and important difference. The difference is that the mediation process generally produces a record as a part of that process. Because the UOO is not an "office of record," we use the term "facilitated conversation" to indicate that the process will not produce an "official record" although the parties involved may produce their own record that will not be a part of the UOO process.

The International Ombudsman Association (hereinafter "IOA") is the preeminent- international professional organization representing organizational ombudsmen.



"Certified Organizational Ombudsman Practitioner (hereinafter "CO-OP")" is the recognized designation of those Ombuds practitioners that have a level of experience and education coupled with having successfully passed both written and voice examinations.

### **III. Statement of Practice and Scope of Services**

The UOO shall be a safe and confidential place where visitors can seek guidance regarding disputes and concerns at any stage of a conflict or concern. The UOO shall provide informal dispute resolution services to its visitors. In addition, the Office will engage in facilitated conversation activities, conflict resolution interventions, and work proactively via presenting educational workshops/seminars focused on how to prevent and address interpersonal conflict.

The UOO shall confidentially hear and receive complaints, concerns and questions about alleged illegal acts, omissions, improprieties, and/or broader systemic problems. The UOO's response shall be tailored to the dynamics of the situation and/or the visitors concerns. The UOO will listen without judgment, make informal inquiries, identify and explore options with the visitor, clarify University policies and procedures, act as an information resource, make appropriate referrals, intervene and facilitate conversations through direct contact, shuttle diplomacy or other appropriate means independently, impartially and confidentially adhering strictly to IOA Code of Ethics, Standards of Practice and Best Practices (hereinafter collectively "Standards"), subject to State and Federal law.

The UOO will support self-determination of its visitors in assisting them in reaching resolutions of their choosing that are consistent with the ideals and objectives of the University. These services are meant to support and enhance existing processes but not replace any.

The UOO will serve as an information and communication resource and act as the University dispute resolution expert, serving as consultant, coach, facilitator and catalyst for institutional change, by providing upward feedback and trend reporting relating to issues, concerns, questions and conflicts brought to the attention of the UOO.

### **IV. The Standards**

The UOO shall practice in strict adherence to the Standards of the IOA, subject to State and Federal law. The Standards are incorporated by reference into this Charter.

The tenets of the Standards are described as follows:

#### **A. Independence**

The UOO administratively reports to the Associate to the President for Diversity, on behalf of the President, and shall function outside of the formal lines of authority and is intended to be independent in its structure, function and appearance. More specifically, in the legitimate performance of his/her duties, The UOO shall be free from interference, retaliation, or control from others outside the Ombuds Program. This independence shall be affected primarily through formal organizational recognition and reporting structure as

well as the UOO's informality and impartiality. The UOO has sole discretion over how, when and to what degree it will respond regarding any individual or systemic matter.

In order to fulfill its function, the UOO shall oversee an allocated budget to operate the Office of the University Ombuds. The University shall provide adequate staffing and office space that is accessible, welcoming, comfortable and located in a place that offers visitors the highest degree of privacy and safety.

#### B. Confidentiality

The UOO holds the confidentiality of its visitors sacrosanct. Confidentiality is the cornerstone of the UOO practice and absolutely necessary in offering a "safe" venue for its visitors. As such, the UOO will not confirm or disclose the identity, communications or information without its visitor's expressed permission. The UOO shall have sole discretion over the manner, of how, when and to whom the disclosure is affected. Confidentiality will be respected even if non-disclosure may prevent resolutions of the issue(s). The UOO may, at their discretion, disclose confidential information if there is an imminent risk of serious physical harm and there is no other avenue or mechanism for reporting the matter.

The UOO asserts, and the University acknowledges and supports, that the UOO holds and owns a privilege of confidentiality with respect to the identity of any visitor(s) and any information brought to the UOO in any manner.

#### C. Neutrality and Impartiality

The UOO shall remain neutral and impartial in their activities. As such, the UOO will not take sides nor advocate for any party, group or organization. The UOO shall impartially consider the interests and concerns of all the parties involved in the situation or dispute with the aim of facilitating communication and assisting the parties in reaching mutually acceptable agreement(s) that are fair, equitable and consistent with the mission and policies of the University.

The UOO does not make decisions for visitors. The UOO shall not have any power to order any person to do, or refrain from doing any activity. The UOO shall not have power to change any policies of the University.

The UOO shall avoid any appearance, or involvement in matters where there may be a conflict of interest. A conflict of interest occurs where the UOO's private interests, real or perceived, supersede or compete with the UOO's dedication to their neutral, impartial and independent role. Where a conflict of interest exists, or is perceived to exist, the UOO will take immediate steps to disclose or avoid the conflict.

#### D. Informality

The UOO shall not keep records for the University. The UOO shall not formally investigate, arbitrate, adjudicate or in any way participate, in any internal or external formal process. Even if a visitor has initiated a formal process, and gives the UOO permission to

participate in the process, the UOO shall not do so. The UOO shall not sit or participate in any committee as a decision maker but may participate in a committees' function as "ex officio" only.

## V. Authority and Limits of the UOO

The authority of the UOO derives from the University administration as manifested by the endorsement of the University President.

### A. Authority

#### 1. Initiating Informal Inquiries

The UOO shall be entitled to inquire informally about any issue concerning the University even if there has not been any specific complaint.

#### 2. Access to Information

The UOO may request access to information located in files and offices within the University that is related to visitor(s) concerns. Where the UOO makes a request for information contained within files and offices of the University, the request shall be honored with reasonable promptness so long as such records would be otherwise disclosable under open records and other confidentiality laws or policies. Confidentiality shall be honored and extended to this information.

#### 3. Declining or Ending Involvement in Cases

The UOO may decline to look into any matter, or withdraw from any matter, where the UOO believes involvement, or continued involvement, would be inappropriate for any reason.

#### 4. Discussions with Visitors and Others

The UOO has authority to discuss any range of options available to the visitor, including both informal and formal processes.

#### 5. Access to Legal Counsel

The UOO shall work closely with the University's General Counsel regarding general matters relating to University policies, regulations and processes or where an external entity has made a demand for documents or testimony from the UOO as part of a formal process.

On occasion, and in the judgment of the UOO, the UOO may require outside expert advice and counsel in order to fulfill the UOO required functions in adherence to IOA Standards. When such circumstances arise, the UOO will work with the General Counsel to secure appropriate independent representation.

## B. Limitations

### 1. Receiving Legal Notice for the University

Communications with the UOO, by any means, shall not constitute notice to the University. This includes allegations that may be perceived as violations of laws, regulations or policies, issues covered by whistleblower policy, or incidents subject to reporting under the Clery Act. The UOO asserts that the UOO is not a "campus security authority" as defined under the Clery Act. The UOO shall educate and bring awareness to its visitors of the numerous alternative-reporting channels inside or outside of the University.

The University has not authorized the UOO to receive notice of claims against the University on any matter, including reports of sexual harassment and unlawful discrimination. Visitors will be made aware that the information related to those claims will not be reported to the University unless requested by the visitor subject to section IV (B) of the Charter Agreement with the exception of threat of imminent serious physical harm. The UOO will endeavor to advise all visitors of all reporting avenues that are available within and outside of the University to report claims and to place the University on "notice" of said claim(s).

### 2. Putting the University on Notice

If any visitor(s) would like to put the University on notice regarding a specific situation, or wishes the information to be provided to the University, the UOO will provide to the visitor, information relating to those available formal processes so that the visitor(s) may put the University on notice themselves. The UOO shall have no authority to order or direct any visitor(s) to make such a report.

### 3. Formal Processes and Investigations

The UOO shall not conduct, nor participate in, any formal investigations, or other formal process of any kind and originating from any source, including investigations of outside agencies, or lawsuits and shall resist any directive or order to do so.

### 4. Record Keeping

The UOO shall not keep records for the University, and shall not create or maintain documents or records for the University about individual matters. Notes that may be taken during the course of a case, or documents that are received by the UOO during the life of a specific case, shall be kept in a secure location and manner, and shall be destroyed immediately by the UOO once the UOO concludes its involvement with a case. The University agrees that it shall make no effort to obtain records from the UOO.

5. Advocacy of the Parties

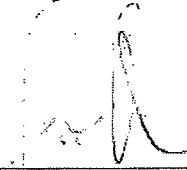
The UOO shall not act as an advocate for any party to a dispute, nor shall the UOO act as a representative to any person or party of the University as a whole.

6. Adjudication of Issues

The UOO shall not have authority to adjudicate, impose remedies, sanctions, or to force change in University policies.

**VI. Retaliation for using the UOO**

Designated constituents shall have the right and power to consult with the UOO without retaliation. The University's policy on retaliation will protect the visitors when using the UOO.



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Stephen M. Jordan, Ph.D.  
President  
Metropolitan State University of Denver

# IOA STANDARDS OF PRACTICE

## PREAMBLE

Standards of Practice are based upon and derived from the ethical principles stated in the IOA Code of Ethics.

An Ombudsman office should have an organizational Charter or Terms of Reference, approved by senior management, articulating the principles of the Ombudsman Office and their consistency with the IOA Standards of Practice.

## STANDARDS OF PRACTICE

### INDEPENDENCE

The Ombudsman Office and the Ombudsman are independent from other organizational entities.

The Ombudsman holds no other position within the organization which might compromise independence.

The Ombudsman exercises sole discretion over whether or how to act regarding an individual's concern, a trend or concerns of multiple individuals over time. The Ombudsman may also initiate action on a concern identified through the Ombudsman's direct observation.

The Ombudsman has access to all information and all individuals in the organization, as permitted by law.

The Ombudsman has authority to select Ombudsman Office staff and manage Ombudsman Office budget and operations.

### NEUTRALITY AND IMPARTIALITY

The Ombudsman is neutral, impartial, and unaligned.

The Ombudsman strives for impartiality, fairness and objectivity in the treatment of people and the consideration of issues. The Ombudsman advocates for fair and consistently administered processes and does not advocate on behalf of any individual within the organization.

The Ombudsman is a designated neutral reporting to the highest possible level of the organization and operating independent of ordinary line and staff structure. The Ombudsman should not report to nor be structurally affiliated with any compliance function of the organization.

The Ombudsman serves in no additional role within the organization which would compromise the Ombudsman's neutrality. The Ombudsman should not be aligned with formal or informal associations within the organization in a way that might create actual or perceived conflicts of interest for the Ombudsman. The Ombudsman has no personal interest or stake in, and incur no gain or loss from, the outcome of an issue.

The Ombudsman has a responsibility to consider the legitimate concerns and interests of all individuals affected by the matter under consideration.

The Ombudsman helps develop a range of responsible options to resolve problems and facilitate discussion to identify the best options.

### CONFIDENTIALITY

The Ombudsman holds all communications with those seeking assistance in strict confidence and takes all reasonable steps to safeguard confidentiality, including that the Ombudsman does not reveal, and must not be required to reveal, the identity of any individual contacting the Ombudsman Office, nor does the Ombudsman disclose information provided in confidence that could lead to the identification of any individual contacting the Ombudsman Office, without that individual's express permission. The Ombudsman takes specific action related to an individual's issue only with the individual's consent and only to the extent permitted, and even then at the sole discretion of the Ombudsman, unless such action can be taken in a way that safeguards the individual's confidentiality. The only exception to this privilege of confidentiality is where there appears to be imminent risk of serious harm to an individual. Where there is no other reasonable option. Whether this risk exists is a determination to be made by the Ombudsman.

Communications between the Ombudsman and others (made while the Ombudsman is serving in that capacity) are considered privileged. The privilege belongs to the Ombudsman and the Ombudsman Office, rather than to any party to an issue. Others cannot waive this privilege.

The Ombudsman does not testify in any formal process inside the organization and resists testifying in any formal process outside of the organization regarding a matter involving the Ombudsman or confidential information communicated to the Ombudsman, even if given permission or requested to do so. The Ombudsman may provide general, non-confidential information about the Ombudsman Office or the Ombudsman profession.

When the Ombudsman pursues an issue systemically (e.g., provides feedback on trends, issues, policies and practices) the Ombudsman does so in a way that safeguards the confidentiality of individuals.

The Ombudsman keeps no records containing identifying information on behalf of the organization.

The Ombudsman maintains information (e.g., notes, phone messages, appointment calendars) in a secure location and manner, protected from inspection by other organizational management, and has a consistent and standard practice for the destruction of such information.

The Ombudsman prepares any data and/or reports in a manner that protects confidentiality.

Communications made to the Ombudsman are not notice to the organization. The Ombudsman neither acts as agent for, nor accepts notice on behalf of, the organization. The Ombudsman does not serve in a position or role that is designated by the organization as a place to receive notice on behalf of the organization. However, the Ombudsman may direct individuals to the appropriate place where formal notice can be made.

### INFORMALITY AND OTHER STANDARDS

The Ombudsman functions on an informal basis by such means as: listening, providing and receiving information, identifying and reframing issues, developing alternative options, and – with permission and at Ombudsman discretion – engaging in informal third-party intervention. When possible, the Ombudsman helps individuals find new ways to solve problems themselves.

The Ombudsman as an informal and off-the-record resource pursues resolution of concerns and looks into procedural irregularities and/or broader systemic problems.

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When the Ombudsman pursues an issue systemically (e.g., provides feedback on trends, issues, policies and practices) the Ombudsman does so in a way that safeguards the confidentiality of individuals.

The Ombudsman keeps no records containing identifying information on behalf of the organization.

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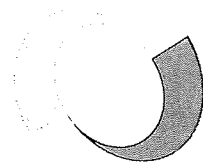
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The Ombudsman as an informal and off-the-record resource pursues resolution of concerns and looks into procedural irregularities and/or broader systemic problems.



INTERNATIONAL  
**OMBUDSMAN**  
ASSOCIATION

## IOA CODE OF ETHICS

### PREAMBLE

The IOA is dedicated to excellence in the practice of Ombudsman work. The IOA Code of Ethics provides a common set of professional ethical principles to which members adhere in their organizational Ombudsman practice.

Based on the traditions and values of Ombudsman practice, the Code of Ethics reflects a commitment to promote ethical conduct in the performance of the Ombudsman role and to maintain the integrity of the Ombudsman profession.

The Ombudsman shall be truthful and act with integrity, shall foster respect for all members of the organization he or she serves, and shall promote procedural fairness in the content and administration of those organizations' practices, processes, and policies.

### ETHICAL PRINCIPLES

#### INDEPENDENCE

The Ombudsman is independent in structure, function, and appearance to the highest degree possible within the organization.

#### NEUTRALITY AND IMPARTIALITY

The Ombudsman, as a designated neutral, remains unaligned and impartial. The Ombudsman does not engage in any situation which could create a conflict of interest.

#### CONFIDENTIALITY

The Ombudsman holds all communications with those seeking assistance in strict confidence, and does not disclose confidential communications unless given permission to do so. The only exception to this privilege of confidentiality is where there appears to be imminent risk of serious harm.

#### INFORMALITY

The Ombudsman, as an informal resource, does not participate in any formal adjudicative or administrative procedure related to concerns brought to his/her attention.



# IOA Best Practices

## A Supplement to IOA's Standards of Practice<sup>1</sup>

*Version 3, October 13, 2009*

The Best Practices guide is intended to provide guidance to Organizational Ombudsmen<sup>2</sup> in practicing according to IOA Standards of Practice to the highest level of professionalism possible. Any questions or suggested revisions are welcome and should be sent to the Chair of the Professional Ethics, Standards, and Best Practices Committee.

### PREAMBLE

The IOA Standards of Practice are based upon and derived from the ethical principles stated in the IOA Code of Ethics.

Each Ombudsman Office should have an organizational Charter or Terms of Reference, approved by senior management, articulating the principles of the Ombudsman function in that organization and their consistency with the IOA Standards of Practice.

Before implementing an Ombudsman program, an organization should educate all affected constituencies about the nature and scope of the program, including the role of the Ombudsman within the organization and the Standards of Practice that will govern the activities of the office.

Each entity that establishes an organizational Ombudsman Office should make certain that the office has a Charter that ensures that the Ombudsman will function according to the Standards of Practices and the core values of independence, impartiality/neutrality, confidentiality, and informality. These Standards of Practice will govern the way in which the Ombudsman receives complaints, works to resolve issues, and makes recommendations for the general improvement of the organization. The Charter should also specify the Ombudsman's scope of practice, limitations on Ombudsman authority, and qualifications to be an Ombudsman.

IOA asserts that communications with an ombudsman are confidential and strives to protect confidentiality for all protected communications.

One basis for protecting confidentiality is a claim of privilege. The law on this issue is still evolving and the determination of whether such a privilege is applicable is made by courts on a case-by-case basis since there is no statute creating such a privilege. In addition, ombudsman offices have been able to protect the confidentiality of communications where program materials

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<sup>1</sup> IOA Standards of Practice are indicated by text boxes; recommended Best Practices follow each text box. IOA Code of Ethics, Standards of Practice, and Best Practices are designed to guide "Organizational Ombudsmen" as distinguished from "Classical", "Advocate", "Executive" or other types of Ombudsmen.

<sup>2</sup> The term Ombudsman is used to communicate to the widest possible community and is not intended to discourage others from using alternatives. IOA respectfully acknowledges that many practitioners use alternative forms of this word.

adequately state that people who use the office agree to abide by expressed confidentiality principles or where statutes dealing with alternative dispute resolution or mediation are applicable to ombudsman communications.

**STANDARDS OF PRACTICE**

**INDEPENDENCE**

1.1 The Ombudsman Office and the Ombudsman are independent from other organizational entities.

The director of the Ombudsman Office should report directly to the highest level of the organization (such as board of directors, CEO, agency head, etc.) in a manner independent of ordinary line and staff functions.

The director of the Ombudsman Office should have terms of employment that indicate that his or her stature in the organization is not subordinate to senior officials.

The Ombudsman should be able to function independently from control, limitation, or interference imposed by any official in the entity.

The Ombudsman should be protected from retaliation (such as of elimination of the office or the Ombudsman, or reduction of the Ombudsman budget or other resources) by any person who may be the subject of a complaint or inquiry.

The Ombudsman should have a set and renewable term, or should be removable only for neglect of duty, misconduct, or medical incapacity, and only by means of a fair process and procedure.

The Ombudsman should obtain assurance from the organization at the outset, and apart from any particular dispute, of access to outside legal counsel at his or her own discretion.

The expense of outside counsel should be covered by the organization and included in the overall budget for the Ombudsman Office. The Ombudsman should have an understanding with the organization that the Ombudsman is not required to inform the organization when it communicates with or accesses outside counsel.

The purpose of outside legal counsel should be to enhance the Ombudsman's ability to practice according to the Standards of Practice. The Ombudsman should consider how outside counsel may assist in a variety of situations, including when the entity and the Ombudsman need to strategize how best to handle a discovery request made of the Ombudsman, or when the Ombudsman and the entity could benefit from consultation with outside counsel regarding how best to establish and operate the office so as to ensure the integrity of function, and to protect the Ombudsman.

1.2 The Ombudsman holds no other position within the organization which might compromise independence.

See Sections 2.3 and 2.4.

1.3 The Ombudsman exercises sole discretion over whether or how to act regarding an individual's concern, a trend or concerns of multiple individuals over time. The Ombudsman may also initiate action on a concern identified through the Ombudsman's direct observation.

The Ombudsman should bring to the attention of the appropriate office those policies, programs, procedures or practices which may be problematic for the organization or which negatively affect people's health, safety or rights.

The Ombudsman should issue periodic reports summarizing activities, problem areas identified, and recommendations for systemic change. Ombudsman Office materials (websites, brochures, etc.) should state that all such reporting is conducted in a manner that protects the identity of individuals and does not place the organization on notice.

1.4 The Ombudsman has access to all information and all individuals in the organization, as permitted by law.

1.5 The Ombudsman has authority to select Ombudsman Office staff and manage Ombudsman Office budget and operations.

The Ombudsman Office must be provided with sufficient resources to operate an independent and effective program. These resources include adequate space, equipment, staffing, staff development, and the production and distribution of informational materials.

The independence of the Ombudsman Office may be supported by having the selection and evaluation of the Ombudsman, as well as the establishment of an appropriate level of funding, be determined by or in consultation with committees representative of various institutional constituencies.

**NEUTRALITY AND IMPARTIALITY**

2.1 The Ombudsman is neutral, impartial, and unaligned.

See Section 1.2.

2.2 The Ombudsman strives for impartiality, fairness and objectivity in the treatment of people and the consideration of issues. The Ombudsman advocates for fair and equitably administered processes and does not advocate on behalf of any individual within the organization.

All members of the specified community served by the Ombudsman may voluntarily seek services from the Ombudsman Office and will be treated with respect and dignity. The Ombudsman should assure access impartially, including to people with disabilities, people who

need language interpreters, or people whose work hours require flexibility in scheduling appointment times.

The organization should assure that all specified members of the organization have the right to consult with the Ombudsman, and retaliation for exercising that right will not be tolerated.

2.3 The Ombudsman is a designated neutral reporting to the highest possible level of the organization and operating independently of ordinary line and staff structures. The Ombudsman should not report to nor be structurally affiliated with any compliance function of the organization.

The Ombudsman should have direct access to the board of directors (or other oversight body as appropriate). See Sections 1.1 and 1.2.

While the Ombudsman should be an internal position, it should not report to, nor have the appearance of reporting to, any compliance office or function or the organization.

The Charter or Terms of Reference for the Ombudsman Office should state specifically that the Ombudsman does not serve as an agent of notice for the organization.

2.4 The Ombudsman serves in no additional role within the organization which would compromise the Ombudsman's neutrality. The Ombudsman should not be aligned with any formal or informal associations within the organization in a way that might create actual or perceived conflicts of interest for the Ombudsman. The Ombudsman should have no personal interest or stake in, and incur no gain or loss from, the outcome of an issue.

See Sections 1.2, 4.4, and 4.5.

Except in the administrative capacity as manager of the Ombudsman Office, the Ombudsman should not participate in formal management functions or serve in any other role that poses an actual conflict of interest or creates the perception of one. For example, an Ombudsman ought not conduct formal investigations; serve in a position or role that is designated by the organization as a place to receive notice on behalf of the organization; serve as a voting member on a search committee (other than for Ombudsman staff); handle formal appeals of management actions; keep case records on behalf of the organization; or be charged in any way to make, change, enforce or set aside a law, rule or management decision.

If possible, the Ombudsman should hold only one position in the organization.

If the Ombudsman does hold another role within the organization, the different roles should be structured so that they are as separate and distinct as possible. The Ombudsman should not provide Ombudsman services to people whom the Ombudsman -- in the other role -- serves, manages, reports to, teaches, advises, or evaluates, in order to avoid partiality or perceptions of conflict of interest. The Ombudsman should provide Ombudsman services in a location that is different from the location in which the Ombudsman, in the other role, works, teaches, counsels, etc., to clarify the distinctions between roles, and to assure confidentiality and off-the-record

informality of the Ombudsman communications. The Ombudsman's support staff (people who take messages or receive visitors, for example) for the Ombudsman role should be separate and distinct from the support staff in any other role. The Ombudsman should continually call attention to the role in which he or she is acting at any given time, and repeatedly educate members of the organization about the principles in the Ombudsman Office's Charter. The Ombudsman should attempt to provide alternatives for people and situations in which the Ombudsman cannot serve as Ombudsman due to actual or perceived conflicts of interest.

2.5 The Ombudsman has a responsibility to consider the legitimate concerns and interests of all individuals affected by the matter under consideration.

2.6 The Ombudsman helps develop a range of responsible options to resolve problems and facilitate discussion to identify the best options.

An Ombudsman should help the visitor explore and assess an appropriate range of options, from the very informal to the most formal. Formal options may include ways to put management on notice of an issue, referrals to rights-based elements of the organization's conflict resolution system, or the provision of information about the possibility of seeking external resources or assistance. The Ombudsman should never provide legal advice.

When the Ombudsman works with the visitor to address issues that may involve formal alternatives (under laws, policies, rules, or regulations), the Ombudsman should make clear to the visitor that an informal approach does not automatically exclude the visitor's later participation in more formal options, but that the visitor should keep in mind possible time limits and their potential impact on the visitor's formal options. See Section 4.4.

The impartiality of the Ombudsman Office may be supported by consultation with various organizational constituencies regarding the Ombudsman Office's effectiveness.

## **CONFIDENTIALITY**

3.1 The Ombudsman holds all communications with those seeking assistance in strict confidence and takes all reasonable steps to safeguard confidentiality, including the following: The Ombudsman does not reveal, and must not be required to reveal, the identity of any individual contacting the Ombudsman Office, nor does the Ombudsman reveal information provided in confidence that could lead to the identification of any individual contacting the Ombudsman Office, without that individual's express permission, given in the course of informal discussions with the Ombudsman; the Ombudsman takes specific action related to an individual's issue only with the individual's express permission and only to the extent permitted, and even then at the sole discretion of the Ombudsman, unless such action can be taken in a way that safeguards the identity of the individual contacting the Ombudsman Office. The only exception to this privilege of confidentiality is where there appears to be imminent risk of serious harm, and where there is no other reasonable option. Whether this risk exists is a determination to be made by the Ombudsman.

The Ombudsman publicizes the confidential nature of Ombudsman work.

The Ombudsman Office should be situated in an appropriate location to protect the privacy of visitors to the office.

When an individual gives the Ombudsman permission to reveal his or her identity, disclose information, or act on his or her concerns, such permission must be given at the time that the Ombudsman is engaged in the informal conflict resolution process, not as part of a formal process.

The Ombudsman Office Charter for each organization should specify what types of events rise to the level of “imminent risk of serious harm.” The Ombudsman may negotiate with the organization to be exempt, based on Ombudsman confidentiality, from some mandates that require reporting by other employees. Best practice is to interpret “imminent risk of serious harm” as narrowly as possible – for example, imminent risk to human life.

3.2 Communications between the Ombudsman and others (made while the Ombudsman is serving in that capacity) are considered privileged. The privilege belongs to the Ombudsman and the Ombudsman Office, rather than to any party to an issue. Others cannot waive this privilege.

The confidentiality privilege is critical to making the Ombudsman Office a place where people can raise any issue, including an alleged violation of statute, regulation, rule, policy, or ethical standard.

IOA asserts that communications made to the Ombudsman do not constitute “notice” to the organization. No one, including the employing entity, should consider the Ombudsman Office to be agent of notice (that is, an office that receives formal notice on behalf of the organization) and no one, including the entity, should seek information about communications to the Ombudsman Office.

The nature and role of confidentiality should be explained to the visitor, who should understand that the Ombudsman claims the privilege for the office and that it is not the visitor’s privilege to waive. Whenever possible, this information should be communicated prior to discussing the concerns brought by the visitor.

Visitors should understand that as a condition for accepting and benefiting from the Ombudsman Office services, they have the obligation to support the Ombudsman claim of privilege and not to attempt to breach this claim.

The Ombudsman should emphasize in office materials and with the management of the organization:

- that the ability to have confidential communications that do not constitute “notice” to the organization is essential to the effective functioning of an Ombudsman Office and distinguishes the Ombudsman from formal reporting channels;

- that it is the “off-the-record” aspects of the office that lead people who use the Ombudsman to do so before taking any official or formal action;
- that the Ombudsman Office enables people to come forward with an issue when they might otherwise be afraid to do so or when they fear retaliation from managers or peers;
- that only by offering the security of confidentiality can the Ombudsman facilitate organizational responsibility and accountability, which are at the heart of provisions contained in the U.S. Sentencing Guidelines and the Sarbanes-Oxley Act that call for mechanisms of confidential reporting and/or guidance;
- that where issues cannot be confidentially raised, they may not be raised at all, thereby depriving the organization of an opportunity to address issues and rectify misconduct that has not yet surfaced through other channels.

3.3 The Ombudsman does not testify in any formal process inside the organization and resists testifying in any formal process outside of the organization regarding a visitor’s contact with or confidential information communicated to the Ombudsman, even if given permission or requested to do so. The Ombudsman may, however, provide general, non-confidential information about the Ombudsman Office or the Ombudsman profession.

The IOA Board has asked the IOA Standing Committee on Professional Ethics, Standards, and Best Practices to review the language and interpretation of 3.3. Please look for updates in the near future.

See Section 4 on informality.

3.4 If the Ombudsman pursues an issue systemically (e.g., provides feedback on trends, issues, policies and practices) the Ombudsman does so in a way that safeguards the identity of individuals.

Ombudsman materials should state that any Ombudsman reporting of trends, or communication of recommendations for systemic change, is done in a manner that protects the identity of individuals.

3.5 The Ombudsman keeps no records containing identifying information on behalf of the organization.

3.6 The Ombudsman maintains information (e.g., notes, phone messages, appointment calendars) in a secure location and manner, protected from inspection by others (including management), and has a consistent and standard practice for the destruction of such information.

The Ombudsman record-keeping systems and/or database should be independent of the organization’s technology system, with access allowed only to Ombudsman Office personnel. The Ombudsman Office should also be secure to protect private information and records. The office should develop and implement processes and procedures to regularly purge information that could identify individual visitors to the office. Records such as phone bills, which may indicate with whom the office has communicated, should be made available only to the

Ombudsman Office staff. The Ombudsman should take all reasonable steps to protect the confidentiality of any temporary notes or documents, such as locking file drawers and offices, and exercising extreme vigilance if any notes are carried from one place to another.

3.7 The Ombudsman prepares any data and/or reports in a manner that protects confidentiality.

3.8 Communications made to the Ombudsman are not notice to the organization. The Ombudsman neither acts as agent for, nor accepts notice on behalf of, the organization and shall not serve in a position or role that is designated by the organization as a place to receive notice on behalf of the organization. However, the Ombudsman may refer individuals to the appropriate place where formal notice can be made.

Except in the administrative capacity as manager of the Ombudsman Office, the Ombudsman is never an agent of notice (that is, an officer who receives notice for the organization), and communications to the Ombudsman Office never constitute notice to the organization.

If a visitor wishes to make a record, or put the organization “on notice,” the Ombudsman can provide information about how to do so.

Best practice is for the organization to receive allegations of wrongdoing directly from a complainant or witness, and not indirectly through the Ombudsman.

If the visitor is reluctant to make a formal report to the organization, the Ombudsman can work with the visitor to address the reasons the visitor resists reporting, or to work with the organization to make formal reporting channels more accessible.

If the visitor gives the Ombudsman permission to discuss a concern with a manager, and if the concern may involve some allegation of wrongdoing, the Ombudsman should pass on information only in general terms (without specifying names, dates, or events). If the Ombudsman does pass on allegations of wrongdoing, the Ombudsman should emphasize the he or she has not confirmed the accuracy of the allegations. It is not appropriate for the organization to take any adverse action on the basis of information reported informally through the Ombudsman. The Ombudsman may coach the manager on how to make reporting channels more accessible or how to gather information himself or herself.

An ombudsman may place the organization on “notice” when the ombudsman evaluates the circumstances and specifically elects to place the organization on notice by identifying an appropriate point of contact within the organization and communicating to that point of contact specific information which the ombudsman expressly intends to share for the purpose of placing the organization on notice of a specific concern or specific situation. If an ombudsman makes such an intentional notice communication, confidentiality is waived only with regard to the specific communication made with the point of contact for purposes of the notice communication. It is the conversation between the ombudsman and the appropriate point of contact within the organization that constitutes notice and not the conversation between the ombudsman and the visitor. Thus, under no circumstances, is the original communication to the ombudsman part of the notice communication.



All ombudsman offices should have a well-defined and generally available procedure detailing the limited circumstances and the processes under which the ombudsman may provide notice. If the ombudsman elects to place the organization on notice under the conditions above, the ombudsman should follow the protocol of the particular ombudsman office regarding this unusual action. The protocols should include specific steps so that is clear that the ombudsman made an intentional decision to make a notice disclosure.

## **INFORMALITY AND OTHER STANDARDS**

4.1 The Ombudsman functions on an informal basis by such means as: listening, providing and receiving information, identifying and reframing issues, developing a range of responsible options, and – with permission and at Ombudsman discretion – engaging in informal third-party intervention. When possible, the Ombudsman helps people develop new ways to solve problems themselves.

The Ombudsman should work with the organization to encourage it to provide its constituents with a variety of effective formal (rights-based) and informal (confidential and interest-based) options for surfacing and resolving concerns. All options should be well established and clearly and regularly communicated to the entire organization.

As the visitor may wish to consult with additional resources and services, such as the employee assistance program, human resources, or the benefits office, the Ombudsman should describe resources that might be appropriate to the visitor’s presenting circumstances. See Section 2.6

The Ombudsman may consider issues, perceptions, interpretations, information, and concerns about inappropriate acts, omissions, or improprieties presented by individuals or groups.

Ombudsman functions include informal third-party intervention, such as shuttle diplomacy, facilitating communication, and informal mediation, which is voluntary and may or may not produce a written agreement.

Any documents or written agreements resulting from informal processes should not be maintained by or within the Ombudsman Office.

The Ombudsman uses a flexible approach with regard to concerns brought to the Ombudsman Office; options are tailored to individual circumstances.

4.2 The Ombudsman as an informal and off-the-record resource pursues resolution of concerns and looks into procedural irregularities and/or broader systemic problems when appropriate.

4.3 The Ombudsman does not make binding decisions, mandate policies, or formally adjudicate issues for the organization.

The Ombudsman should not participate in formal management functions. See Section 2.4.

4.4 The Ombudsman supplements, but does not replace, any formal channels. Use of the Ombudsman Office is voluntary, and is not a required step in any grievance process or organizational policy.

For most entities, it is the combination of informal services and formal grievance procedures, embodied in a conflict management system, that provides the appropriate range of options to allow for early identification and resolution of potential legal issues or concerns. The Ombudsman should give visitors information about the entity's formal procedures and remedies whenever appropriate. While a visitor may choose to explore informal options for a wide variety of reasons, the Ombudsman should remind the visitor to keep in mind possible time limits and their potential impact on the visitor's formal options. See Section 2.6.

The Ombudsman Charter or Terms of Reference should define the role, if any, of the Ombudsman in relation to employees and issues covered by collective bargaining agreements (CBAs). This role definition should also, where possible, be incorporated in CBAs, and should include a statement that although the CBA permits the Ombudsman to function in these defined ways, the Ombudsman nevertheless retains the authority to decline to be involved. (See Section 1.3.) The union and management may also enter into an ad hoc agreement permitting an Ombudsman to handle an issue.

4.5 The Ombudsman does not participate in any formal investigative or adjudicative procedures. Formal investigations should be conducted by others. When a formal investigation is requested, the Ombudsman refers individuals to the appropriate offices or individual

The Ombudsman may be requested or required to speak with public officials, in a private or public setting, about the functions of the Ombudsman Office, or about trends published in a written report. If so, the Ombudsman should still observe the confidentiality standards as stated in 3.1 and 3.3.

4.6 The Ombudsman identifies trends, issues and concerns about policies and procedures, including potential future issues and concerns, without breaching confidentiality or anonymity, and provides recommendations for responsibly addressing them.

The Ombudsman should be particularly careful to maintain neutrality when making recommendations for system change.

4.7 The Ombudsman acts in accordance with the IOA Code of Ethics and Standards of Practice, keeps professionally current by pursuing continuing education, and provides opportunities for staff to pursue professional training.

4.8 The Ombudsman endeavors to be worthy of the trust placed in the Ombudsman Office.

<sup>1</sup>See [www.ombudsassociation.org/standards/](http://www.ombudsassociation.org/standards/)  
October 13, 2009

### 1. Compensation & Benefits

Questions, concerns, issues or inquiries about the equity, appropriateness and competitiveness of employee compensation, benefits and other benefit programs.

- 1.a **Compensation** (rate of pay, salary amount, job salary classification/level)
- 1.b **Payroll** (administration of pay, check wrong or delayed)
- 1.c **Benefits** (decisions related to medical, dental, life, vacation/sick leave, education, worker's compensation insurance, etc.)
- 1.d **Retirement, Pension** (eligibility, calculation of amount, retirement pension benefits)
- 1.e **Other** (any other employee compensation or benefit not described by the above sub-categories)

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### 2. Evaluative Relationships

Questions, concerns, issues or inquiries arising between people in evaluative relationships (i.e. supervisor-employee, faculty-student.)

- 2.a **Priorities, Values, Beliefs** (differences about what should be considered important – or most important – often rooted in ethical or moral beliefs)
- 2.b **Respect/Treatment** (demonstrations of inappropriate regard for people, not listening, rudeness, crudeness, etc.)
- 2.c **Trust/Integrity** (suspicion that others are not being honest, whether or to what extent one wishes to be honest, etc.)
- 2.d **Reputation** (possible impact of rumors and/or gossip about professional or personal matters)
- 2.e **Communication** (quality and/or quantity of communication)
- 2.f **Bullying, Mobbing** (abusive, threatening, and/or coercive behaviors)
- 2.g **Diversity-Related** (comments or behaviors perceived to be insensitive, offensive, or intolerant on the basis of an identity-related difference such as race, gender, nationality, sexual orientation)
- 2.h **Retaliation** (punitive behaviors for previous actions or comments, whistleblower)
- 2.i **Physical Violence** (actual or threats of bodily harm to another)
- 2.j **Assignments/Schedules** (appropriateness or fairness of tasks, expected volume of work)
- 2.k **Feedback** (feedback or recognition given, or responses to feedback received)
- 2.l **Consultation** (requests for help in dealing with issues between two or more individuals they supervise/teach or with other unusual situations in evaluative relationships)

### 2.m Performance Appraisal/Grading

(job/academic performance in formal or informal evaluation)

- 2.n **Departmental Climate** (prevailing behaviors, norms, or attitudes within a department for which supervisors or faculty have responsibility.)
- 2.o **Supervisory Effectiveness** (management of department or classroom, failure to address issues)
- 2.p **Insubordination** (refusal to do what is asked)
- 2.q **Discipline** (appropriateness, timeliness, requirements, alternatives, or options for responding)
- 2.r **Equity of Treatment** (favoritism, one or more individuals receive preferential treatment)
- 2.s **Other** (any other evaluative relationship not described by the above sub-categories)

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### 3. Peer and Colleague Relationships

Questions, concerns, issues or inquiries involving peers or colleagues who do not have a supervisory-employee or student-professor relationship (e.g., two staff members within the same department or conflict involving members of a student organization.)

- 3.a **Priorities, Values, Beliefs** (differences about what should be considered important – or most important – often rooted in ethical or moral beliefs)
- 3.b **Respect/Treatment** (demonstrations of inappropriate regard for people, not listening, rudeness, crudeness, etc.)
- 3.c **Trust/Integrity** (suspicion that others are not being honest, whether or to what extent one wishes to be honest, etc.)
- 3.d **Reputation** (possible impact of rumors and/or gossip about professional or personal matters)
- 3.e **Communication** (quality and/or quantity of communication)
- 3.f **Bullying, Mobbing** (abusive, threatening, and/or coercive behaviors)
- 3.g **Diversity-Related** (comments or behaviors perceived to be insensitive, offensive, or intolerant on the basis of an identity-related difference such as race, gender, nationality, sexual orientation)
- 3.h **Retaliation** (punitive behaviors for previous actions or comments, whistleblower)
- 3.i **Physical Violence** (actual or threats of bodily harm to another)
- 3.j **Other** (any peer or colleague relationship not described by the above sub-categories)

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### 4. Career Progression and Development

Questions, concerns, issues or inquiries about administrative processes and decisions regarding entering and leaving a job, what it entails, (i.e., recruitment, nature and place of assignment, job security, and separation.)

- 4.a **Job Application/Selection and Recruitment Processes** (recruitment and selection processes, facilitation of job applications, short-listing and criteria for selection, dispute decisions linked to recruitment and selection)
- 4.b **Job Classification and Description** (change or disagreements over requirements of assignment, appropriate tasks)
- 4.c **Involuntary Transfer/Change of Assignment** (notice, selection and special dislocation rights/benefits, removal from prior duties, unrequested change of work tasks)
- 4.d **Tenure/Position Security/Ambiguity** (security of position or contract, provision of secure contractual categories)
- 4.e **Career Progression** (promotion, reappointment, or tenure)
- 4.f **Rotation and Duration of Assignment** (non-completion or over-extension of assignments specific settings/countries, lack of access or involuntary transfer to specific roles/assignments, requests for transfer to other places/duties/roles)
- 4.g **Resignation** (concerns about whether or how to voluntarily terminate employment or how such a decision might be communicated appropriately)
- 4.h **Termination/Non-Renewal** (end of contract, non-renewal of contract, disputed permanent separation from organization)
- 4.i **Re-employment of Former or Retired Staff** (loss of competitive advantages associated with re-hiring retired staff, favoritism)
- 4.j **Position Elimination** (elimination or abolition of an individual's position)
- 4.k **Career Development, Coaching, Mentoring** (classroom, on-the-job, and varied assignments as training and developmental opportunities)
- 4.l **Other** (any other issues linked to recruitment assignment, job security or separation not described by the above sub-categories)

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## 5. Legal, Regulatory, Financial and Compliance

Questions, concerns, issues or inquiries that may create a legal risk (financial, sanction etc.) for the organization or its members if not addressed, including issues related to waste, fraud or abuse.

- 5.a **Criminal Activity** (threats or crimes planned, observed, or experienced, fraud)
- 5.b **Business and Financial Practices** (inappropriate actions that abuse or waste organizational finances, facilities or equipment)
- 5.c **Harassment** (unwelcome physical, verbal, written, e-mail, audio, video psychological or sexual conduct that creates a hostile or intimidating environment)
- 5.d **Discrimination** (different treatment compared with others or exclusion from some benefit on the basis of, for example, gender, race, age, national origin, religion, etc.[being part of an Equal Employment Opportunity protected category – applies in the U.S.]
- 5.e **Disability, Temporary or Permanent, Reasonable Accommodation** (extra time on exams, provision of assistive technology, interpreters, or Braille materials including questions on policies, etc. for people with disabilities)
- 5.f **Accessibility** (removal of physical barriers, providing ramps, elevators, etc.)
- 5.g **Intellectual Property Rights** (e.g., copyright and patent infringement)
- 5.h **Privacy and Security of Information** (release or access to individual or organizational private or confidential information)
- 5.i **Property Damage** (personal property damage, liabilities)
- 5.j **Other** (any other legal, financial and compliance issue not described by the above sub-categories)  
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## 6. Safety, Health, and Physical Environment

Questions, concerns, issues or inquiries about Safety, Health and Infrastructure-related issues.

- 6.a **Safety** (physical safety, injury, medical evacuation, meeting federal and state requirements for training and equipment)
- 6.b **Physical Working/Living Conditions** (temperature, odors, noise, available space, lighting, etc)
- 6.c **Ergonomics** (proper set-up of workstation affecting physical functioning)
- 6.d **Cleanliness** (sanitary conditions and facilities to prevent the spread of disease)
- 6.e **Security** (adequate lighting in parking lots, metal detectors, guards, limited access to building by outsiders, anti-terrorists measures (not for classifying "compromise of classified or top secret" information)

- 6.f **Telework/Flexplace** (ability to work from home or other location because of business or personal need, e.g., in case of man-made or natural emergency)
- 6.g **Safety Equipment** (access to/use of safety equipment as well as access to or use of safety equipment, e.g., fire extinguisher)
- 6.h **Environmental Policies** (policies not being followed, being unfair ineffective, cumbersome)
- 6.i **Work Related Stress and Work-Life Balance** (Post-Traumatic Stress, Critical Incident Response, internal/external stress, e.g. divorce, shooting, caring for sick, injured)
- 6.j **Other** (any safety, health, or physical environment issue not described by the above sub-categories)  
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## 7. Services/Administrative Issues

Questions, concerns, issues or inquiries about services or administrative offices including from external parties.

- 7.a **Quality of Services** (how well services were provided, accuracy or thoroughness of information, competence, etc.)
- 7.b **Responsiveness/Timeliness** (time involved in getting a response or return call or about the time for a complete response to be provided)
- 7.c **Administrative Decisions and Interpretation/Application of Rules** (impact of non-disciplinary decisions, decisions about requests for administrative and academic services, e.g., exceptions to policy deadlines or limits, refund requests, appeals of library or parking fines, application for financial aid, etc.)
- 7.d **Behavior of Service Provider(s)** (how an administrator or staff member spoke to or dealt with a constituent, customer, or client, e.g., rude, inattentive, or impatient)
- 7.e **Other** (any services or administrative issue not described by the above sub-categories)  
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## 8. Organizational, Strategic, and Mission Related

Questions, concerns, issues or inquiries that relate to the whole or some part of an organization.

- 8.a **Strategic and Mission-Related/ Strategic and Technical Management** (principles, decisions and actions related to where and how the organization is moving)
- 8.b **Leadership and Management** (quality/capacity of management and/or management/leadership decisions, suggested training, reassignments and reorganizations)

- 8.c **Use of Positional Power/Authority** (lack or abuse of power provided by individual's position)
- 8.d **Communication** (content, style, timing, effect and amount of organizational and leader's communication, quality of communication about strategic issues)
- 8.e **Restructuring and Relocation** (issues related to broad scope planned or actual restructuring and/or relocation affecting the whole or major divisions of an organization, e.g. downsizing, off shoring, outsourcing)
- 8.f **Organizational Climate** (issues related to organizational morale and/or capacity for functioning)
- 8.g **Change Management** (making, responding to adapting to organizational changes, quality of leadership in facilitating organizational change)
- 8.h **Priority Setting and/or Funding** (disputes about setting organizational/departmental priorities and/or allocation of funding within programs)
- 8.i **Data, Methodology, Interpretation of Results** (scientific disputes about the conduct outcomes and interpretation of studies and resulting data for policy)
- 8.j **Interdepartmental/Interorganization Work/Territory** (disputes about which department/organization should be doing what/taking the lead)
- 8.k **Other** (any organizational issue not described by the above sub-categories)  
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## 9. Values, Ethics, and Standards

Questions, concerns, issues or inquiries about the fairness of organizational values, ethics, and/or standards, the application of related policies and/or procedures, or the need for creation or revision of policies, and/or standards.

- 9.a **Standards of Conduct** (fairness, applicability or lack of behavioral guidelines and/or Codes of Conduct, e.g., Academic Honesty, plagiarism, Code of Conduct, conflict of interest)
- 9.b **Values and Culture** (questions, concerns or issues about the values or culture of the organization)
- 9.c **Scientific Conduct/Integrity** (scientific or research misconduct or misdemeanors, e.g., authorship; falsification of results)
- 9.d **Policies and Procedures NOT Covered in Broad Categories 1 thru 8** (fairness or lack of policy or the application of the policy, policy not followed, or needs revision, e.g., appropriate dress, use of internet or cell phones)
- 9.e **Other** (Other policy, procedure, ethics or standards issues not described in the above sub-categories)  
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