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Page - 1 - of 3



ii. POLICY & PROCEDURE

Program/Department:

Administration Subject: Disruptive Conduct

I. PURPOSE

The purpose of this policy is to promote a culture of safety, quality and collaboration within the organization by establishing expectations for acceptable behavior and by defining and articulating the process for managing disruptive and inappropriate conduct

II. POLICY

It is the policy of Philhaven that all individuals working within its facilities are expected to treat others with respect, dignity and courtesy; to conduct themselves in a professional and cooperative manner; and to address conflicts in a constructive fashion. Disruptive and inappropriate conduct will not be tolerated and shall be addressed through the procedures identified below and applicable Human Resource and Medical Staff policies.

This policy is applicable to all employees, members of the medical staff, independent contractors and any other persons performing services for Philhaven.

III. DEFINITION OF DISRUPTIVE CONDUCT

“Disruptive conduct” shall generally mean behavior which: (i) violates accepted rules of civil behavior and etiquette; (ii) violates legal or ethical standards of conduct; (iii) disrupts the efficiency and orderly operation of the facility; (iv) interferes with patient care; or (iv) interferes with teamwork or the work of others.

Disruptive conduct can take many forms. Depending upon the context and unique facts and circumstances of each case, the following are non-exhaustive examples of disruptive conduct subject to this policy:

1. Using profane, loud, offensive, or abusive language;
2. Threatening or intimidating language or actions toward others, including inappropriate physical touching or contact;
3. Degrading, demeaning, sarcastic or belittling comments regarding other persons working in the facility, patients or families, or the quality of care provided by other professionals or the organization;

4. Failing to reasonably cooperate or be available for exchange of pertinent patient care information or resolution of issues, e.g., missing meetings, unreturned phone calls, untimely response to page;
5. Intentionally or repeatedly disrupting organizational meetings or activities;
6. Repeated, willful failure to abide by organizational, departmental or Medical Staff policies and procedures, including refusal to comply with required duties or assignments.

IV. PROCEDURE

1. Whenever possible, employees or members of the Medical Staff are encouraged to address disruptive conduct informally with the offending party in a constructive manner.
2. Anyone who observes or is subjected to disruptive conduct that is not amenable to informal resolution is encouraged to report the incident verbally to his/her immediate supervisor, or if the immediate supervisor is unavailable or is the offending party, to the next higher level of management. A complaint involving a member of the Medical Staff shall be reported to the Medical Director or Associate Medical Director.
3. The disruptive conduct shall be documented by the individual making the complaint as soon as possible after the verbal report is made. Documentation shall include the following elements:
 - a. Date and time of the questionable behavior
 - b. Objective, factual description of the questionable behavior
 - c. Circumstances that precipitated the situation
 - d. Consequences of the questionable behavior, if any, as it relates to patient care or Philhaven operations
 - e. Names of any witnesses
 - f. Any action taken to remedy the situation, including the name(s) of persons intervening
4. The person receiving the report shall complete a prompt investigation. The nature, scope and timing of the investigation will vary based upon the severity of the conduct and other relevant circumstances. The investigation may include interviews with the individual making the complaint, the offending party, and witnesses, as necessary.
5. When it is determined that the policy has been violated, the person who received the complaint and completed the investigation shall utilize the following processes to address

the disruptive behavior, depending upon the employment and Medical Staff status of the offending party;

- a. Employee (non-Medical Staff) - The "Performance Problems, Disciplinary and Corrective Action" process described in the Philhaven Employment Manual should be utilized.
 - b. Employed Medical Staff Member - The Medical Director or Associate Medical Director will consult with the Director of Human Resources to determine whether the disruptive conduct will be addressed through the Human Resources policy identified in (a) above; or be referred to the Medical Executive Committee for review and consideration of informal action or Corrective Action Proceedings under section 7.4 of the Medical Staff Bylaws; or via both processes. Summary restriction or suspension of Medical Staff membership or clinical privileges may also be undertaken pursuant to section 7.5 of the Bylaws.
 - c. Non-employed Medical Staff Member - The Medical Director or Associate Medical Director will refer the matter to the Medical Executive Committee for review and consideration of informal action or Corrective Action Proceedings under section 7.4 of the Medical Staff Bylaws. Summary restriction or suspension of Medical Staff membership or clinical privileges may also be undertaken pursuant to section 7.5 of the Bylaws.
6. An individual who reports alleged disruptive conduct shall be informed of the outcome of the investigation and whether disciplinary action was taken by the person to whom the report was made.
 7. Regardless of the outcome of the investigation, there shall be no retaliation against anyone who reports alleged disruptive conduct in good faith.

Approved by:
Program/Department Director

Date:

Approved by: *P. U. Jones*

Date: *2/3/09*