TITLE: DISRUPTIVE OR UNPROFESSIONAL BEHAVIOR BY MEMBERS OF THE MEDICAL-DENTAL STAFF

PURPOSE: To establish a systematic process to address disruptive or unprofessional behavior exhibited by members of the University Health System Medical-Dental Staff. This policy originated on xx/xx/2016. [Key Words: Disruptive, Disrespectful, Unprofessional]

POLICY STATEMENT:

The University Health System (Health System) promotes a safe and high quality environment for patients, staff, and members of the Medical-Dental Staff by treating one another with professional courtesy and respect.

POLICY SCOPE:

The Medical-Dental Staff expects that each member behaves in a professional and respectful manner at all times.

POLICY ELABORATION:

I. REPORTING

Any patient, visitor, staff or member of the Medical-Dental Staff may report disrespectful, disruptive or unprofessional behavior. The report should be made by submitting an Electronic Risk Assessment Form (eRAF), and, if necessary, escalating the concern to the next level of leadership for immediate review by the President of the Medical-Dental Staff and the Health System Chief Medical Officer, or their designees. In the case of patients and visitors, staff must submit the eRAF on behalf of the patient or visitor. The eRAF should include as much of the following information as possible:

A. Date(s) and time(s) of the behavior
B. Objective description of the event and behavior
C. Name(s) and positions of any individual(s) involved
D. Name and positions of any witness(es)
E. Any adverse effect on patient care, staff, or Health System operations
F. Any action taken at time of the disruptive or unprofessional behavior

II. INVESTIGATION

Upon receipt of a report that a member of the Medical-Dental Staff has engaged in disrespectful, disruptive or unprofessional behavior, the Professional Staff Services office will facilitate an investigation into the allegation. This investigation will be conducted in consultation with the Health System Chief Medical Officer, President of the Medical-Dental Staff, non-faculty leadership, Legal Services and/or respective clinical department chair, as appropriate. Should the allegation be substantiated, the Chief Medical Officer and the President of the Medical-Dental Staff will determine the appropriate action to be taken.

III. DISCIPLINE

A. Substantiated Incident

1. The first substantiated incident of disruptive or unprofessional behavior will include counseling the staff member and written documentation from the staff member’s immediate supervisor, detailing the actions taken to address the behavior and to prevent future occurrence.

   In most cases, the staff member’s clinical department chair or non-faculty leadership serves as the immediate supervisor.

   If the incident involves a clinical department chair, non-faculty clinical leader, or other senior level position, the
notification will be communicated to the next higher level supervisor for their review and appropriate action.

2. A second substantiated offense will additionally require the Medical-Dental Staff member to be reported to the Medical Executive Committee supervisor for their review and appropriate action.

3. Upon finding a third substantiated incident, Section III.A.1. applies and a summary suspension as per the Health System Bylaws will be imposed. Additionally, the staff member must appear before the Medical Executive Committee, which may take additional action.

B. Egregious Behavior

Egregious behavior includes, but is not limited to, sexual harassment, assault, or theft. A finding of egregious behavior will result in summary suspension of the staff member, per the Health System Bylaws. The Medical-Dental Staff member will be removed from clinical duty and have appropriate badge and information service access deactivated. The Medical Executive Committee will be notified and may take additional action.

IV. GENERAL CONSIDERATIONS

A. Any employee, house staff member, attending physician, or other personnel that knowingly and intentionally provides false or misleading information will be subject to disciplinary action.

B. Strict confidentiality of the complainant and the allegation will be maintained at all times, subject to the needs of the investigation.

C. Any form of retaliation by a member of the Medical-Dental Staff will not be tolerated and may result in the immediate
termination of Health System privileges and/or any contract between the Health System and the staff member.

D. An eRAF is a confidential internal investigative and quality improvement tool and it should not be distributed other than for official reporting and management.

REFERENCES/BIBLIOGRAPHY:

University Health System Medical-Dental Staff Bylaws

OFFICE OF PRIMARY RESPONSIBILITY:

Executive Vice President/Chief Medical Officer