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<b>FACILITY:</b>	HSHS St. Vincent Hospital HSHS St. Mary's Hospital HSHS St. Nicholas Hospital HSHS St. Clare Hospital HSHS St. Clare Rural Healthcare Clinic	<b>MANUAL:</b> Medical Staff
<b>TITLE:</b>	<b>Code of Conduct - Behavioral</b>	<b>ORIGINATING DEPARTMENT:</b> Medical Staff Services
<b>SUPERSEDES:</b>	SVGB 100-03-048 SMGB A-1063 SNS --- SCO ---	<b>POLICY NUMBER:</b> MS-038

**I. POLICY:**

Colleagues, including Medical Staff members, Allied Health Professionals (AHPs), Resident/Intern/Students, hospital colleagues, contracted colleagues, and volunteers are expected to conduct themselves in a professional and cooperative manner and adhere to the hospital's values of Respect, Care, Competence and Joy, while in the hospital or while involved in hospital business.

**II. PURPOSE:**

1. To provide a safe, cooperative, and professional environment.
2. To prevent or eliminate conduct or behavior which:
  - disrupts the operation of the hospital
  - affects the ability of others to do their jobs
  - creates a "hostile work environment"
  - interferes with an individual's ability to practice competently
  - compromises or has the potential to compromise patient safety
3. To initiate a mechanism to resolve such issues.
4. To comply with Wisconsin and Federal statutes, the regulatory standards, and Hospital Sisters Health System (HSHS) policies.
5. To comply with the hospital's Board resolution regarding conduct within the hospital.

**III. DEFINITIONS:**

For purposes of this directive, examples of "inappropriate conduct, disruptive behavior, and/or sexual harassment" include, but are not limited to the following:

- Threatening, disrespectful, or abusive language
- Degrading or demeaning comments regarding patients, visitors, volunteers, Medical Staff members or AHPs, hospital colleagues, contracted colleagues, or the hospital and its partners
- Profanity or similarly offensive language while in the hospital and/or while speaking with colleagues
- Physical contact with another individual that is seen by the other individual as threatening, intimidating or inappropriate

Title: Code of Conduct - Behavioral

- Derogatory comments about the quality of care being provided by other physicians, the hospital and its partners, or colleagues
- Accessing, displaying or distributing obscene and/or objectionable material (including pornography)
- Racial or ethnic jokes
- Outbursts of uncontrolled anger
- Throwing or handling instruments, charts or other objects in a manner that could potentially cause harm to others
- Damaging or destroying hospital property
- Attacks (verbal or physical) or insults leveled at others, which are personal, irrelevant, or go beyond the bounds of professional conduct
- Impertinent and inappropriate comments (or illustrations) made in patient medical records or other documents, impugning the quality of care in the hospital, or attacking particular Medical Staff members, AHPs, hospital colleagues, contracted colleagues, volunteers, patients, visitors or hospital policies
- Non-constructive criticism addressed to its recipient in such a way as to intimidate, undermine confidence, belittle, or imply stupidity or incompetence
- Refusal to accept assignments, or to participate in committee or departmental affairs on anything but his or her own terms, or to do so in a disruptive manner
- Unwelcome sexual advances or deliberate and repeated unwelcome verbal or physical conduct of a sexual nature or any action in violation of hospital policy prohibiting sexual harassment
- Imposing requirements on others which have nothing to do with appropriate patient care or work responsibilities.

**IV. GUIDELINES/PROCEDURES:**

**A. MEDICAL STAFF MEMBERS & ALLIED HEALTH PROFESSIONALS**

1. Medical Staff members and Allied Health Professional colleagues are required to behave in a manner consistent with the Franciscan Formation Behaviors and the Standards of Conduct and Responsibility Program and to act in a professional, respectful manner as described in the Code of Conduct-Behavioral Policy at all times to enhance a spirit of cooperation and mutual respect and trust among members of the patient care team.
2. Address disagreements in a constructive, respectful manner away from patients or other noninvolved caregivers.
3. Providers are expected to cooperate with hospital leaders to achieve a resolution of an issue if it is determined the behavior has been disruptive or unprofessional.
4. In the spirit of early intervention, help to identify issues affecting the physical and mental health of fellow medical staff members or allied health members.
5. This directive outlines collegial steps (e.g., warnings and meetings with a practitioner) that can be taken in an attempt to resolve complaints about inappropriate conduct exhibited by practitioners. However, there may be a single incident of inappropriate conduct, or a continuation of conduct, that is so unacceptable as to make such collegial steps inappropriate and that requires immediate disciplinary action. Therefore, nothing in this policy precludes the elimination of any particular step in the policy in dealing with a complaint about inappropriate conduct.
6. Issues involving Medical Staff members or AHP colleagues who engage in disruptive behavior or sexual harassment are addressed in accordance with this directive, the Medical Staff Bylaws and associated medical staff policies.

**B. RESIDENTS/INTERN/STUDENTS**

1. Residents/Interns/Students are required to behave in a manner consistent with the Franciscan Formation Behaviors and the Standards of Conduct and Responsibility Program and to act in a professional, respectful manner as described in the Code of Conduct-Behavioral Policy at all times to enhance a spirit of cooperation and mutual respect and trust among members of the patient care team.
2. Address disagreements in a constructive, respectful manner away from patients or other noninvolved care givers.

Title: Code of Conduct - Behavioral

3. All concerns are addressed in accordance with the *Residents, Interns and Provider Student Qualifications, Conditions and Responsibilities* policy (MS-037) for complaint management and resolution process.

**C. ALL OTHER COLLEAGUES**

1. Employed, contractual and volunteer colleagues are required to behave in a manner consistent with the Franciscan Formation Behaviors and the Standards of Conduct and Responsibility Program policy in the Colleague Handbook.
2. Issues involving employed, contractual, and volunteer colleagues who engage in disruptive behavior or sexual harassment are addressed in accordance with the hospital's colleague policies.

**D. DOCUMENTATION AND REPORTING**

1. Documentation of inappropriate conduct/disruptive conduct/sexual harassment is critical. Documentation includes:
  - a. The date and time of the questionable conduct/behavior
  - b. If the conduct/behavior affected or involved a patient or visitor in any way, the name of the patient and/or visitor
  - c. Names of other witnesses to the incident
  - d. The circumstances which precipitated the situation
  - e. A description of the questionable conduct/behavior limited to factual, objective language as much as possible
  - f. The consequences, if any, of the disruptive conduct/behavior as it relates to patient care and hospital operations
  - g. Record of any action taken to remedy the situation including date, time, place, action, and name(s) of those intervening.

Any Medical Staff member, AHP, volunteer, hospital colleague, contracted colleague, patient, or visitor may report potentially inappropriate conduct, disruptive behavior, or sexual harassment. The individual reporting such conduct need not be a party to the conduct but may be an observer of such conduct/behavior.

2. Directing reports of inappropriate conduct, disruptive behavior or sexual harassment:
  - a. When the conduct/behavior is exhibited by an employed, contractual or volunteer colleague, reports are directed to a Human Resources Leader for review and follow-up in accordance with the hospital's Human Resources policies.
  - b. When the conduct/behavior is exhibited by a Medical Staff member or Allied Health Professional colleague, the report is submitted to the Director of Medical Staff Services for review and assessment. Follow-up is handled in accordance with this policy and the Medical Staff Bylaws and associated medical staff policies.

**E. EVALUATING REPORTS OF INAPPROPRIATE CONDUCT / DISRUPTIVE BEHAVIOR / SEXUAL HARASSMENT**

**1. Medical Staff Member or AHP Colleague:**

Once received, fact finding will occur by the director in the area where the incident allegedly occurred or by their designee. Initial attempts should be made to address the issue at the department level whenever possible. If this fact finding indicates a significant issue, the report may be escalated, when appropriate, to Medical Staff Services for follow

Title: Code of Conduct - Behavioral

up as outlined by the Credentials Policy, Medical Staff Bylaws and any other appropriate medical staff policies and procedures.

**2. All Other Colleagues:**

- a. Once received, the report is investigated by a Human Resources leader or designee in consultation with a member of the Executive Leadership Team. The hospital policies outlined in the Colleague Handbook and other related employment policies will serve as the guidelines.
- b. All reports are investigated.

**V. DISTRIBUTION:**

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