

Policy Number: A44
Policy Title: A44 Policy - Professional Conduct Policy
Chapter Location: Leadership, Human Resources

Owner: VP – People Strategy	Date Created: 08/2009
Approver(s): Executive Team	Date Last Approved: 10/2024
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Policy Statement:

The safety and quality of care at Gillette depend on teamwork, communication and a collaborative work environment. This policy defines acceptable and unacceptable behaviors and outlines a process in which to address disruptive or unacceptable behaviors.

Purpose:

The purpose of this policy is to:

- Support a culture of civility, professionalism and mutual respect
- Support a culture of mutual accountability
- Promote friendly, collegial working relationships
- Promote communication and behavior that demonstrate a commitment to safety, quality, teamwork and respect
- Define a process for identifying and addressing problematic behavior

Scope:

This policy applies to everyone who works, volunteers or otherwise provides services at Gillette Children's. That includes, but is not limited to:

- Board Members
- President and Executives
- Vice Presidents, Directors, Managers and Supervisors
- Medical staff
- Clinical and nonclinical staff
- Licensed independent practitioners
- Residents and fellows
- Students
- Volunteers
- Consultants

Oversight: Executive Team

Definitions:

Communication: The act of giving, receiving, and sharing information. Communication includes non-verbal body language, spoken remarks and tone, and written electronic communication.

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Disruptive behavior – Any abusive conduct including sexual or other forms of harassment, or other verbal or non-verbal conduct that harms or intimidates.

Inappropriate behavior – Conduct that is unwarranted and is reasonably interpreted to be demeaning or offensive. Persistent, repeated inappropriate behavior can become disruptive.

Policy: Everyone at Gillette is responsible for ensuring a safe, professional and respectful environment. We hold ourselves and one another accountable for behaving appropriately and becoming part of the solution whenever possible. Expected and unacceptable behaviors are described as follows:

A) Expected Behaviors

Gillette staff should exhibit the following behaviors and comply with any other procedures found in ethical standards or in hospital and/or medical staff policy.

1) *Open Mindedness*

- a) Begin every encounter with compassion, generosity, and an open heart and mind.
- b) Actively model and encourage cooperation within one's own team and across Gillette.
- c) Strive to work with others by appreciating their perspective, background, style, etc.
- d) Model openness by seeking to learn from others and encourage others to do the same.

2) *Professional Communication*

- a) Model respectful and professional communication, both when speaking and when listening.
- b) Use the Situation / Background / Assessment / Recommendation (SBAR) and other models of communication, as appropriate.
- c) Communicate promptly, efficiently, and honestly, involving all appropriate people, and taking place in an appropriate environment.
- d) Be prepared; gathering and including all information needed for complete and thorough communication. Organize questions and comments in advance.
- e) Develop and deliver multi-mode communications that convey a clear understanding of the unique needs of different audiences.
- f) In virtual meetings that are collaborative or team-focused, participants are expected to have cameras on to support engagement, connection, and effective communication. In presentation-style or non-interactive meetings, camera use is optional.

3) *Timeliness*

- a) Respond promptly when paged or called
- b) Be on time and notify a team or department member about unexpected delays
- c) Arrange for appropriate coverage if you're unavailable
- d) Be mindful of scheduling, staffing and workload issues that affect others

4) *Professional Behavior*

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- a) Convey constructive criticism in a respectful and professional manner, without blame or shame.
- b) Disclose potential conflicts of interest.
- c) Avoid or prevent any behavior that demonstrates disrespect, intimidation, or disruption to the delivery of high-quality patient care and service.
- d) Strive to work harmoniously with others.
- e) Call out unacceptable behaviors and use appropriate channels to address issues.
- f) Step up to address difficult issues, saying what needs to be said respectfully.

B) Unacceptable behaviors

Unprofessional behavior in the course and scope of providing services at or for Gillette impairs or disrupts Gillette's ability to achieve intended outcomes. Unacceptable behavior encompasses any actions that others might reasonably consider disruptive, inappropriate, destructive, or abusive, regardless of intent.

- 1) Some behaviors are always unacceptable. They include:
 - a) Making physical threats, including physically threatening language directed at anyone.
 - b) Physical contact with another person that is threatening or intimidating.
 - c) Shouting, yelling, using profanity or foul language, or other verbal outbursts.
 - d) Throwing or slamming objects.
 - e) Making sexual innuendos or other types of sexual harassment.
 - f) Making slurs or jokes that refer to race, ethnicity, religion, sexual orientation, gender identity, physical ability, mental ability, body image, socioeconomic class, or other statuses.
 - g) Harassment including, but not limited to, persistent inappropriate behavior, and repeated threats.
 - h) Refusing to perform assigned tasks.
 - i) Retaliating against anyone who addresses or reports unacceptable behavior.
- 2) Other behaviors are considered inappropriate. Persistent inappropriate behavior can become disruptive and may be considered a form of harassment. These include, but are not limited to:
 - a) Making belittling or berating statements, insults, or verbal, behavioral, or environmental indignities that communicate hostile, derogatory, or negative slights or insults to the target person or group, also known as microaggressions.
 - b) Making crude or inappropriate comments, jokes, or innuendoes.
 - c) Acting in a rude or disrespectful manner.
 - d) Interrupting others if not necessary in the interests of patient care.
 - e) Accusing or blaming other people or departments rather than working together to seek solutions.
 - f) Exhibiting an uncooperative attitude, such as being reluctant to or refusing to answer questions, return calls, pages, or other messages.
 - g) Showing impatience with others
 - h) Making critical comments that are not constructive or respectful.

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Procedure:

Resolution Process:

1. The optimal way to address inappropriate or unprofessional conduct concerns is with a face-to-face discussion or other direct communication between the parties involved. It should take place in a timely, safe and respectful manner in an appropriate (private) setting. Both parties are expected to be mindful of supporting a culture of mutual accountability. Sincere apologies are encouraged when appropriate, and every reasonable attempt should be made to defuse the situation without further intervention.
2. If direct communication is not an option, or it is the repeat of previously addressed behavior you are aware of or experienced, or due to the nature of the behavior or concern urgent attention is needed (such as those listed under always unacceptable), bring concerns immediately to your director, manager, or other leader who is empowered to address these concerns. The leader will attempt to resolve the issue and may work with their HR partner depending on the nature of the concern.
3. If the issue is not resolved after a reasonable attempt by the parties involved, help is available through other options:
 - a) Refer to and follow procedures in Gillette's *Employee Concern* policy (Policy E05) or contact Human Resources or the executive who oversees the area.
 - b) Submit a Professional Conduct Report in RL Solutions under the Professional Conduct tile. Within three business days, Human Resources will send an acknowledgement of the concern to the person who submitted it and will forward the concern to the appropriate person for follow-up. Employees can submit reports anonymously, however, because it is necessary to gather information when addressing concerns, it is important to understand that concerns reported anonymously are difficult to investigate and therefore may not be actionable.

Everyone involved in addressing a concern will treat information respectfully. Depending on the situation, the most appropriate person to initiate review and resolution of an issue might be the applicable executive, vice president, director, manager, supervisor, Human Resources representative, Quality Improvement Specialist, Volunteer Coordinator, medical staff leader, agency personnel, school/student contacts, or others. Only people with a legitimate need to know will receive information regarding the follow-up and resolution.

When appropriate, Gillette will follow the Constructive Discipline/Performance Improvement policy (Policy HR-E04). Issues involving medical staff will be referred to the Provider Professionalism and Health Committee. Gillette will follow procedures in the Volunteer Services Handbook and contact agency and student representatives as appropriate.

Protection against retaliation and false accusations:

It is Gillette's policy to resolve concerns fairly, efficiently and without fear of retaliation.

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Gillette recognizes that false accusations can have serious effects on innocent people. Accordingly, accusations that are knowingly false may be grounds for discipline up to and including termination.

Gillette will not retaliate against anyone who brings a concern forward in good faith. Retaliation is a violation of this policy and must be reported immediately. Anyone found to have retaliated against an employee who brings up a concern or participates in an investigation will be subject to appropriate disciplinary action, up to and including immediate termination.

Related Documents:

A-44 Process Flowchart

HR-E05 – Employee Concern Policy

HR-E04 – Performance Improvement/Constructive Discipline Policy

<https://gillettechildrens.sharepoint.com/sites/HR/SitePages/Behavior-Code-of-Conduct--Occurrence-Report.aspx>

References:

1. The Joint Commission; "Sentinel Event Alert Issue 40: Behaviors that undermine a culture of safety;" July 9, 2008.
2. Webb LE, Dmochowski RR, Moore IN, Pichert JW, Catron TF, Troyer M, Martinez W, Cooper WO, Hickson GB. Using Coworker Observations to Promote Accountability for Disrespectful and Unsafe Behaviors by Physicians and Advanced Practice Professionals. *Jt Comm J Qual Patient Saf.* 2016 Apr;42(4):149-64. doi: 10.1016/s1553-7250(16)42019-2. PMID: 27025575.
3. Cooper WO, Spain DA, Guillaumondegui O, et al. Association of Coworker Reports About Unprofessional Behavior by Surgeons With Surgical Complications in Their Patients. *JAMA Surg.* 2019;154(9):828–834. doi:10.1001/jamasurg.2019.1738
4. Katz D, Blasius K, Isaak R, *et al*, Exposure to incivility hinders clinical performance in a simulated operative crisis. *BMJ Quality & Safety* 2019; **28**:750-757.
5. Cooper WO, Lorenzi NM, Davidson HA, Baldwin CA, Feinberg DM, Hopkins J, Spell NO, Uthe CJ, Hickson GB, (2021). Supporting the pursuit of professionalism during a crisis. *BMJ Leader*: leader-2021-000458 Online first 2021 Aug 12.

THIS POLICY SUPERSEDES ANY PREVIOUS GILLETTE POLICIES OR PRACTICES.