



2024 PolicySourceTM
Hospital and Critical
Access Hospital

Policy
SourceTM

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- Those items with a paper clip icon  are not P&Ps themselves but supplementary materials or attachments for a particular P&P. Not every P&P has such attachments, but that does not prohibit someone using *PolicySource* to create their own ancillary materials for any of their own P&Ps.



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APPLICABILITY	
<input checked="" type="checkbox"/> Critical Access Hospital	<input checked="" type="checkbox"/> Hospital
<input checked="" type="checkbox"/> REQUIRES WRITTEN DOCUMENTATION	

Code of Conduct Policy

[Logo]	TITLE Code of Conduct Policy		IDENTIFICATION NUMBER [Number]
ORGANIZATION(S) [Organization name]	LEVEL <input type="checkbox"/> System <input type="checkbox"/> Organization <input type="checkbox"/> Division <input type="checkbox"/> Department	CATEGORY <input type="checkbox"/> Clinical <input type="checkbox"/> Management <input type="checkbox"/> Regulatory	POSTING DATE [MM/DD/YYYY] EFFECTIVE DATE [MM/DD/YYYY]
REVIEW CYCLE <input type="checkbox"/> 1 year <input type="checkbox"/> 3 years LAST REVIEW DATE: [MM/DD/YYYY]		REPLACES TITLE: Code of Conduct Policy EFFECTIVE DATE(S): [MM/DD/YYYY]	

POLICY STATEMENT

All individuals will conduct themselves in a manner consistent with acceptable behavior. There is zero tolerance of disruptive and/or inappropriate behavior, and all allegations are investigated and appropriate actions taken.

PURPOSE

To set expectations for behavior that foster a culture of safety to create a work environment that encourages respectful, constructive relationships among health care professionals, patients, and staff members.

SCOPE

Applies to anyone who provides care, treatment, and services on behalf of the hospital, including but not limited to employees, medical staff, contracted staff, and volunteers.

DEFINITIONS

Acceptable behavior – Behavior that enables others to perform their duties and fulfill their responsibilities effectively and that results in respectful and constructive communication. Examples include but are not limited to the following:

- Communicating in a calm, respectful, and professional manner
- Addressing disagreements using facts presented in a calm, professional manner, without personal attacks
- Responding to requests and concerns in a timely and appropriate manner
- Interacting with others in a manner that respects the individual’s culture and beliefs
- Meeting expectations included in the conditions of employment
- Working within the established chain of command, both departmentally and hospitalwide
- Adhering to the established dress code and grooming standards
- Willingness to perform duties requested by the department or hospital

Disruptive and/or inappropriate behavior – Conduct by staff members working in the hospital that intimidates others to the extent that quality and safety could be compromised. These behaviors, as determined by the hospital, may be verbal or nonverbal, may involve the use of rude language, may be threatening, or may involve physical contact.

RESPONSIBILITIES

The staff supervisor is responsible for determining the appropriate level of immediate corrective action.

APPLICABILITY

- Critical Access Hospital Hospital
- REQUIRES WRITTEN DOCUMENTATION**

The Human Resources department is responsible for the following:

- Approving decisions regarding suspension or termination
- Providing education and training on this policy

The staff supervisor and Human Resources department are responsible for the following:

- Investigating allegations of disruptive and/or inappropriate behavior
- Determining an appropriate plan of action

Hospital leaders are responsible for the following:

- Protecting those who report disruptive and/or inappropriate behavior from retaliatory action
- Overseeing this policy, including analyzing trends in disruptive and/or inappropriate behavior and identifying opportunities for improvement

All employees, physicians, contracted employees, volunteers, and any other individuals who provide care, treatment, and services on behalf of the hospital are responsible for the following:

- Reporting disruptive and/or inappropriate behavior to an immediate supervisor
- Understanding and applying this code of conduct

PROCEDURES

1. Inform members of the medical staff about this policy as part of their initial appointment process.
2. Include information about this policy in the initial orientation and training for all hospital staff members and volunteers.
3. Provide information on this policy to outside agencies or organizations that provide contract staff members, students, or others who provide care, treatment, and services on behalf of the hospital.
4. Share information about this policy with any individuals providing care, treatment, and services on behalf of the hospital at the time the policy takes effect.
5. Report any events of disruptive and/or inappropriate behavior to the immediate supervisor using the standardized Incident Report.
6. Include in the Incident Report the following details:
 - Name of the person reporting the event
 - Witnessed behavior and/or comments
 - Date and time of the event
 - Facts associated with the event
 - Names of person(s) involved in the event
 - Names of person(s) who witnessed the event
 - Consequences of the event
 - Immediate actions taken to remedy the situation
7. Investigate the event as soon as possible by interviewing the individual demonstrating the behavior, the individual affected by the behavior, and any witnesses to the behavior. This is done by the supervisor as soon as possible, no later than seven days after the report is filed.
8. Determine whether the individual's behavior is disruptive to normal business and/or is hazardous to patients, visitors, or others. If so, do the following:
 - Immediately suspend the individual.
 - Remove the individual from hospital property.
9. Determine the appropriate level of corrective action to be taken, if any.
10. Provide counseling to the involved parties on completion of the investigation.
11. Develop and document a plan for monitoring progress to change behavior.

12. Engage in established progressive disciplinary actions if the individual's behavior fails to improve.

REFERENCES

Joint Commission Standard LD.03.01.01, EP 4. Leaders develop a code of conduct that defines acceptable behavior and behaviors that undermine a culture of safety.

The Joint Commission. Behaviors that undermine a culture of safety. *Joint Commission Sentinel Event Alert*. 2008 Jul 9;(40):1-3.

Corrective Action Policy (ID Code 517)

Harassment Policy (ID Code 512)

Sexual Harassment Policy (ID Code 514)

Workplace Violence Policy (ID Code 513)

ATTACHMENT

Incident Report

APPROVAL

NAME AND CREDENTIALS [Name and Credentials]	NAME AND CREDENTIALS [Name and Credentials]
TITLE [Title]	TITLE [Title]
SIGNATURE	DATE [MM/DD/YYYY]
SIGNATURE	DATE [MM/DD/YYYY]