
**UNIVERSITY OF ILLINOIS HOSPITAL AND CLINICS
MANAGEMENT POLICY AND PROCEDURE**

NO.: LD 4.13

APPROVAL DATE: November 20, 2013

EFFECTIVE DATE: November 20, 2013

SUBJECT: Code of Conduct

OBJECTIVE

To promote optimum behavior within the UI Hospital by creating an atmosphere where interdisciplinary team collaboration occurs. The Code of Conduct pertains to all employees. For purposes of this Code of Conduct, "employees" are defined as the entire UI Hospital workforce, which includes medical staff, staff, students, and volunteers, regardless of their employment status.

POLICY

Treating each other in an appropriate manner contributes to effective communication and maintenance of a safe, professional, and effective work environment. Our interactions directly impact patient perceptions of the institution, our engagement in their care, and their willingness to choose us as their preferred care provider. Inappropriate communication creates situations where errors are more likely to occur. All individuals have the right to be treated with respect, courtesy, and dignity. All practitioners and employees are expected to refrain from disruptive, abusive, or otherwise inappropriate behavior towards patients, employees, visitors, and other practitioners. UI Hospital strives to maintain a work environment free from intimidating, demeaning, abusive, or disruptive behavior. These behaviors undermine a healthy work environment that supports patient safety and teamwork. This policy will describe acceptable, disruptive, and inappropriate behavior and the actions to be taken when behavior does not meet our standard.

This process does not replace management or supervisory actions to intervene, coach, counsel, or discipline. All incidents will be reported via this process, regardless of whether other actions of a disciplinary nature have been taken or are anticipated.

In order to facilitate safe and appropriate care for patients and clarity of understanding among all employees and members of the healthcare team, all work-related communication with patients, visitors, customers, clients, and co-workers shall be restricted to the common language of English. The exception will be cases in which it is necessary to communicate with patients, visitors, customers, or clients for whom communication/translation in a language other than English is appropriate. Verbal communications shall be respectful in tone and content at all times and promote high standards of professionalism.

Leadership promotes a harmonious environment where all patients and employees treat each other with respect, dignity, and honesty. Effective communication can be promoted via rounding, team training, team huddles, debriefings, simulation, and role modeling.

Reporting will be done in a non-punitive environment so that behaviors can be addressed and improved. Retaliation against any person making a report in good faith or making a disclosure of information as it relates to disruptive behavior is prohibited.

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DEFINITIONS

Culture of Safety—Communication characterized as open and respectful among all members of the healthcare team in order to provide safe patient care. It is a culture that supports organizational commitment continually seeking to improve safety.

Acceptable behavior—Behavior that creates and fosters a positive, collaborative, supportive, safe environment among all employees. It promotes integrity, trustworthiness, and respect, which are the core principles of treating others with civility and decency. Acceptable behavior supports the mission of UI Hospital and requires open, respectful, and non-punitive communication throughout the organization.

Unacceptable/Disruptive Behavior—Behavior that interferes with effective communication among all members of the healthcare team and negatively impacts performance and favorable outcomes. Such behavior is not supportive of a culture of safety. Unacceptable/disruptive behavior may compromise safe, quality patient care, either directly or indirectly, as it affects the ability of individuals to perform within an emotionally safe and supportive environment.

As this behavior can take many forms, it is impossible to provide an exhaustive list of examples. All persons performing duties within UI Hospital are expected to support the Code of Conduct by reporting unacceptable or disruptive behavior through their chain of command.

Examples of unacceptable/disruptive behaviors include, but are not limited to:

- Abusive behavior of any kind, including both verbal and nonverbal, such as profanity, intimidation, or personal attacks leveled at others.
- Threats of violence, assault/battery, intentionally damaging property, inappropriate touching or gestures, or throwing objects, instruments, or equipment.
- Any activity that constitutes sexual harassment or sexual assault.
- Communication addressed to its recipient in such a way as to intimidate, undermine confidence, or belittle. Malicious gossiping is one example of this type of communication.
- Foul or offensive language.
- Inappropriate non-verbal communication, such as eye-rolling, body language, sighing, negative mood, etc.
- Intentional violations of hospital/university policies and procedures that support patient safety in the organization.
- Deliberate avoidance or refusal to perform assignments, functions, and/or duties and responsibilities that are a part of one's job expectation. For example, obstruction of or intentional delay in the care of a patient, unwarranted by the clinical circumstances.

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- Inappropriate comments or illustrations made in patient medical records or other official documents, reflecting disparaging remarks about the quality of care in the medical center or attacking other practitioners, staff, or policies.

PROCEDURE

Managing Unacceptable/Disruptive Behavior

Behaviors that fall within the definition of "workplace violence" [see policies EC 3.13 and EC 3.14] will be managed via the Workplace Violence Policy algorithm. This will include the referral of all potential criminal activities to University of Illinois at Chicago police and the Office of Access and Equity. The investigation of non-criminal behaviors that involve potential sexual harassment or concerns of a sexual nature will be overseen by the Office of Access and Equity consistent with UIC campus policy.

Otherwise,

- I. Any patient, visitor, or employee who observes or is the recipient of unacceptable or disruptive behavior as defined in this policy should report the incident(s) or behavior(s). The report should be documented via the MIDAS occurrence reporting system, or the compliance hotline. All reports will be treated confidentially.
- II. The report will be forwarded to the responsible supervisor within the chain of command for follow-up in a similar fashion to any patient occurrence. The supervisor will confirm the validity of the report, and take appropriate actions as needed with the individual. All investigations and discussions shall remain confidential among the involved parties and shared on an as-needed basis. The Risk and Safety Department shall aggregate the data through the MIDAS system and prepare reports for hospital leadership and senior medical staff for their deliberation and actions as needed. This information will be shared regularly with the Executive Leadership Committee.
- III. Communication with the Executive Leadership Committee will be facilitated by the Compliance Office, including distribution and review of reports and trends, and development of recommendations in response to findings.
- IV. Actions taken against substantiated unacceptable/disruptive behavior will vary based on the level of severity and will be performed within the context of systems already established within the University, such as medical staff discipline and fair hearing procedures through the Departments of Human Resources. Flagrant violations of the Code of Conduct will be responded to immediately by the immediate supervisor. For the Medical Staff, corrective action will follow the processes as defined in the Medical Staff Bylaws.
- V. The following departments may be asked to consult on an as-needed basis:
 - A. Office of Access and Equity, Dispute Resolution Services including mediation services
 - B. University Health Service

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- C. Employee Assistance Services
 - D. Human Resources
 - E. University of Illinois at Chicago Police Department
- VI. Every person working at UI Hospital is expected to sign the Code of Conduct policy similar to the patient confidentiality or ethics act certification. This will be completed annually via the learning management system (LMS), or current staff/physicians training and for new hires during New Employee Orientation.

References

University of Illinois Hospital and Clinics
Hospital Management Policy and Procedure Manual
HR.1.05 Personal Appearance and Conduct
IM 4.17 HIPAA Sanctions
LD.1.03 University of Illinois Medical Center Code of Ethics
LD 1.06 Occurrence and Sentinel Event Reporting
LD 1.13 Resolution of Issues Relating to Patient Care Standards
LD 4.01 Standards of Conduct for Visits by Business Representatives, Vendors, and Contractors
RI 1.01 Patient Complaints and Grievances
EC 3.13 Violence Response and Prevention
EC 3.14 Preventing and Reporting Violence in the Workplace

University of Illinois Policies and Procedures,
University of Illinois Good Ethical Practice Handbook
University Code of Conduct at www.ethics.uillinois.edu/policies/code.cfm
HRPP 102 Nondiscrimination Statement
HRPP 101 Prohibiting Sexual Harassment Policy & Procedure

Policy Owner—William Chamberlin, MD, Chief Compliance Officer