I. Description

Provide a code of conduct describing disruptive and inappropriate behavior for all employees, staff and faculty (collectively, “health care team members”).

II. Rationale

The University of North Carolina Health Care System (UNC HCS) is committed to supporting a culture that values integrity, honesty and fair dealing among all health care team members, and promoting a caring environment for patients, visitors, and health care team members. Teamwork and good communication promote a culture of patient safety. Disruptive behavior that intimidates others and affects morale or staff turnover can be harmful to patient care and satisfaction as well as employee satisfaction and safety. All health care team members at every level of the organization will support the Disruptive and Inappropriate Behavior Policy through their interactions with patients, visitors, and each other.

Toward these goals, UNC HCS strives to maintain a workplace that is free from harassment and intimidation. This includes behavior that could be perceived by a reasonable person as inappropriate or harassing, or that does not endeavor to meet the highest standards of professionalism. While this kind of conduct is not pervasive in our facilities, no hospital or clinic is immune. Awareness and cooperation at all levels of UNC HCS is necessary to implement this policy effectively and maintain a safe working environment.

III. Purpose of the Disruptive and Inappropriate Behavior Policy

The Purpose of the Disruptive and Inappropriate Behavior Policy is to:

- clarify the expectations of all health care team members during interactions with any individual at UNC HCS;
• encourage the prompt identification, investigation and resolution of alleged disruptive and inappropriate behavior;

• encourage identification of concerns about the well-being of a health care team member whose conduct is in question, including referral to the UNC HCS or UNC-CH Employee Assistance Program, as appropriate, or the North Carolina Physician’s Health Program; and

• support this code of conduct and appropriate interactions with patients, visitors, and health care team members on and off UNC HCS properties while engaging in UNC HCS work and activities.

IV. Policy

A. We Care About and Are Committed To

1. Our Patients and Their Families – Delivering quality health care and outstanding service is fundamental to everything we do.

2. Our Team – Attracting and retaining the best team members is of paramount importance to UNC HCS. We will do this by becoming the health care employer of choice and by providing an environment that:

   a. Pursues the highest level of safety and quality;
   b. Focuses on treating patients and colleagues with courtesy, honesty, respect and dignity;
   c. Recognizes people for their achievements and capabilities;
   d. Is professionally satisfying;
   e. Encourages the open exchange of views; and
   f. Does not tolerate offensive and disruptive behavior.

3. Our Community – Dedicating ourselves to finding ways to improve the health of all North Carolinians is central to our leading, teaching and caring.

B. Acceptable Behavior

Acceptable behavior is behavior that is respectful, civil, reasonable, and appropriate in a professional context and that results in quality patient outcomes and a safe environment for patients, visitors and health care team members. Examples of acceptable behavior include, but are not limited to:

1. Engaging in clear, open, and honest communication that is positive and solution-oriented;

2. Promoting cooperation and the sharing of ideas and information to enhance team participation and success;

3. Actively listening to the perspectives of others and seeking to resolve conflicts promptly;

4. Offering constructive criticism in good faith to improve education, research, patient care, service and operations;

5. Demonstrating sensitivity to diverse backgrounds (e.g., race, ethnicity, religion, gender, sexual orientation, age, physical appearance or socioeconomic or educational status); and

6. Respecting and maintaining privacy and confidentiality of all individuals.

C. Disruptive and Inappropriate Behavior

Disruptive and inappropriate behavior may be written, verbal or physical. Examples of disruptive and inappropriate behavior may include but are not limited to:
1. Disruptive and Inappropriate Written or Verbal Behavior
   a. using profane, disrespectful, insulting, demeaning, condescending or abusive language;
   b. shaming others for negative outcomes;
   c. making demeaning comments or intimidating remarks, or speaking in in a condescending tone;
   d. having inappropriate arguments with patients, family members, or health care team members;
   e. having overly familiar conversations that violate professional boundaries with patients, family members, or health care team members;
   f. making negative comments about health care team members (verbally or in chart notes);
   g. passing severe judgment or censuring colleagues or health care team members in front of patients, visitors or other health care team members;
   h. having outbursts of anger;
   i. communicating in a manner that others would describe as bullying;
   j. making insensitive comments about a patient’s or other health care team member’s medical condition, appearance, situation, and the like;
   k. making threats;
   l. making jokes or non-clinical comments about race, ethnicity, religion, gender, sexual orientation, age, physical appearance, socioeconomic status, or educational status;
   m. ignoring potentially harmful situations or failing to report them appropriately;
   n. creating rigid or inflexible barriers to requests for assistance/cooperation; and
   o. refusing to answer questions or perform assigned tasks.

2. Disruptive and Inappropriate Physical Behavior
   a. throwing or breaking things;
   b. refusing to comply with known and generally accepted practice standards such that the refusal inhibits staff or other care providers from delivering quality care;
   c. using or threatening unwarranted physical force with patients, family members, or other health care team members;
   d. repeated failure to respond to calls or requests for information or persistent lateness in responding to calls for assistance when on-call or expected to be available;
   e. failing to work cooperatively with others;
   f. making rude or lewd gestures; and
   g. inappropriately touching a patient, visitor, or other health care team member.

D. Duty to Report, and Procedure for Reporting, Disruptive and Inappropriate Behavior

UNC HCS has zero tolerance for disruptive and inappropriate and/or intimidating behavior, especially in instances involving assault and other criminal acts. All instances of disruptive and inappropriate behavior should be reported as set forth below. Health care team members should, if possible and appropriate, first try to resolve situations involving disruptive and inappropriate behavior informally. Nevertheless, disruptive and inappropriate behavior should always be reported, even if resolved informally.
1. Threats, assaults, or other criminal behavior that require immediate attention by law enforcement must be reported first to Hospitals Police at 919-966-3686, or to 911 for an emergency response.

2. Every individual may file a report of disruptive and inappropriate behavior in good faith without fear of reprisal, retaliation, retribution or intimidation.

3. Anonymous reports of disruptive and inappropriate behavior will be considered to the extent possible, but the response to anonymous reports may be limited when there is insufficient information to support an investigation.

4. Reports of disruptive and inappropriate behavior should be made through the chain of command, e.g., immediate Supervisor, Department Director, or Vice President, in writing, verbally, or through UNC HCS’s Compliance/Abusive Behavior Hotline. When a report is received by someone outside the Chain of Command, it shall be referred to UNC HCS’s Office of Internal Audit, Privacy and Compliance for review. The Office of Internal Audit, Privacy and Compliance will work with or refer the concern to the appropriate support functions in the Hospital, UNC HCS, School of Medicine, and/or the UNC-CH to make certain the incident is investigated or reviewed consistent with the policy for the affected entity.

5. Health care team members who intentionally falsely accuse other health care team members of disruptive and inappropriate behavior will be appropriately disciplined in accordance with the medical staff bylaws and/or other applicable policies.

6. Individuals should report disruptive and inappropriate behavior where they were involved in the questionable behavior. In such cases the individual may receive some consideration for their cooperation in the investigation, but they remain responsible and there may be repercussions for their behavior.

7. Any reports that are not tied to UNC HCS by location or operational responsibility will be referred to the appropriate entity.

E. Screening, Investigation and Review of Reports of Disruptive and Inappropriate Behavior

1. Each report of disruptive and inappropriate behavior shall be screened, investigated and documented by staff trained to discern the severity of the violation, the presence of mitigating factors, and the existence of risk of harm to patients. Where appropriate, notification of incidents will be made to the Human Resources and Legal Affairs functions of the Hospital, UNC HCS, the School of Medicine, and/or UNC-CH, for their input and guidance in the investigation and evaluation process.

2. The UNC HCS Compliance Steering Committee will monitor the implementation of this policy as well as policy violations, and will determine system factors that may be contributing to excessive conflict in the work environment.

3. Upon receipt of a report of disruptive and inappropriate behavior, the following screening measures will be taken:
   a. A member of Employee Relations, Human Resources, or the Office of Internal Audit, Privacy and Compliance will meet with the individual submitting the report to review the report and all available details, including names of others who may have knowledge of the incident.
   b. A member of Employee Relations, Human Resources, or the Office of Internal Audit, Privacy and Compliance will meet with all who have knowledge of the event.
c. A member of Employee Relations, Human Resources, or the Office of Internal Audit, Privacy and Compliance will review medical records or other documentation where relevant.

The Office of Internal Audit, Privacy and Compliance may work with or turn over the screening review to others as appropriate including, but not limited to, UNC HCS’s Legal Department or UNC Hospital Police.

4. If the information obtained during the screening fails to demonstrate the incident complained of took place, or if the reported behavior was not, in fact, disruptive and inappropriate behavior, the Chief Audit & Compliance Officer will find that there is no basis for an investigation. In this event, the report shall be retained in the Office of Internal Audit, Privacy and Compliance file for five (5) years, with a clear indication that the allegations in the report were unfounded, together with the substantiating information.

5. If it is determined during the screening that disruptive and inappropriate behavior in violation of this policy may have taken place, the matter will be referred to the appropriate supervisor (i.e., the relevant UNC HCS VP, School of Medicine Department Chair or UNC Faculty Physicians’ President, or the Chief Medical Officer if it involves the behavior of a member of the Medical Staff of UNC Hospitals) for investigation. Investigatory procedures that are utilized for other Compliance Helpline reports may be utilized for investigations of disruptive and inappropriate behavior. The appropriate supervisor will cause investigations and actions to occur, will document the investigation as set forth below, and will inform the Office of Internal Audit and Compliance of the results and any final action taken.

6. If the behavior complained of poses an immediate threat to patient care or the safety of others, or if the outcome of a prior complaint has indicated as much, the matter will be referred to the UNC HCS Legal Department, Hospital Police, UNC-CH Human Resources, UNC-CH Legal Department, and the Chief Medical Officer for appropriate action. Appropriate actions may include, but are not limited to:

   a. conversations directly addressing the problem;
   b. detailed action plans;
   c. the use of mediators or conflict coaches;
   d. referral to the UNC HCS or UNC-CH Employee Assistance Programs, the North Carolina Physician’s Health Program, or other appropriate resources; and
   e. sanctions (discussed further below).

F. Confidentiality

The report investigation procedure and all related documents are intended to be confidential to the maximum extent possible. All parties to the process are expected to respect and maintain the confidentiality of the process and not divulge the details of the investigation unless required or permitted by law.

G. Documentation

Documentation of investigations into reports of disruptive and inappropriate behavior and their dispositions will be retained for five (5) years in the Office of Internal Audit, Privacy and Compliance, UNC HCS or UNC-CH Human Resources (as relevant), and UNC HCS or UNC-CH Legal Department (as relevant). Documentation of such investigations shall include:

1. The date and time of the disruptive and inappropriate behavior;
2. A statement of whether the disruptive and inappropriate behavior affected or involved a patient or patient safety in any way;
3. A description of the disruptive and inappropriate behavior;
4. The circumstances that precipitated the disruptive and inappropriate behavior;
5. The consequences, if any, of the disruptive and inappropriate behavior as it relates to patient care or operations; and
6. Actions taken in response to the disruptive and inappropriate behavior.

**H. Education**

1. All health care team members will receive annual education with documented competency on this policy.
2. The Office of Internal Audit and Compliance will report on observed trends in terms of violations of this policy to the UNC HCS Executive Council, UNC HCS Compliance Steering Committee, and UNC HCS Board Committee. A summary of the information will be reported to the Audit and Compliance Committee and to the Joint Conference Committee of the Board.
3. Progress of the implementation of this policy will be monitored through the use of a validated, reliable health care team members’ survey tool on at least an annual basis. Results will be shared with all health care team members, Departmental Leadership, the Medical Staff Executive Committee, and the Board of Directors.

**I. Sanctions**

Disruptive conduct and inappropriate workplace behavior may be grounds for sanctions, including but not limited to suspension; termination of a contract; termination, revocation, suspension (summary or otherwise), restriction or non-renewal of medical staff membership and/or privileges; or corrective action, up to and including termination of employment, for health care team members. Sanctions will be imposed in accordance with the medical staff bylaws and/or other applicable policies, as appropriate.

**J. Prohibition Against Retaliation**

Retaliation against anyone who reports disruptive and inappropriate behavior, or who participates in an investigation as a witness or in any other capacity, is prohibited and will not be tolerated.

**K. Patient Relations**

The Patient Relations Department should be notified any time a patient or visitor is involved in or witnesses disruptive and inappropriate behavior by a health care team member. The Patient Relations Department will take appropriate action, including hearing and empathizing with their concerns, thanking them for sharing their concerns, and apologizing.

**L. Related Policies**

1. Domestic Violence, HR 1003
2. Workplace Violence, HR 1012
3. Criminal Investigations, Admin 0039
4. Unlawful Harassment, HR 0204
5. Grievance Resolution, HR 1205
6. Corrective Actions, HR 1201
7. Employees Assistance Program, HR 0604
8. Social Media, Admin 0228
9. Electronic Mail (E-Mail), Admin 0065

M. Contacts for Questions or Reporting

UNC HCS Compliance Office (919) 966-8505
Compliance Helpline (800) 362-2921
Compliance Email Compliance@unch.unc.edu