

## ST. LOUIS CHILDREN'S HOSPITAL ORGANIZATIONAL POLICIES/PROCEDURES

### TITLE: Disruptive Behavior –Academic Medical Center (AMC)

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**SUBMITTED REVIEWED BY:** Charles Goldfarb, MD, Chair, SLCH Medical Executive  
Committee

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### PURPOSE AND OBJECTIVES

Barnes-Jewish Hospital, St. Louis Children's Hospital and Washington University School of Medicine (hereinafter collectively referred to as the Academic Medical Center, or "AMC") are committed to providing high quality patient care and to the health and welfare of AMC patients, staff, trainees and providers. The AMC also is committed to providing a positive environment for its patients, staff and health care providers. The AMC recognizes that intimidating, abusive and disruptive behavior has no role in a therapeutic health care environment and can adversely affect patient satisfaction, employee morale and patient outcomes. This policy was developed to create and maintain an environment that does not tolerate abuse and intimidation, that promotes patient safety through communication, teamwork and collaboration, that encourages reporting of disruptive behavior without fear of retribution and that insures fair and timely processes for all involved.

Each AMC member has policies specific to its employees including, but not limited to, codes of conduct and policies addressing abusive, harassing and discriminatory behavior. Additionally, each Hospital AMC member has Medical Staff bylaws that require members of the medical staff to conduct themselves in a professional manner and comply with Hospital policies that address potential disruptive behaviors. Therefore, this policy is adopted to supplement these policies as necessary, by setting forth expected standards of behavior, and by establishing the process for handling complaints between employees of Barnes-Jewish Hospital or St. Louis Children's Hospital and their respective medical staff members<sup>1</sup>.

### STANDARDS OF BEHAVIOR

Expected behavior with regards to patients and each other is that:

- Communication will take place in a timely fashion, involving the appropriate person(s), in an appropriate setting.
- Communications, including in-person and telephonic remarks, written documents and electronic communications, will be honest and direct and conducted in a professional, constructive, respectful and efficient manner.
- Cooperation and availability are expected of providers, trainees, and staff when on call. When individuals are paged they will respond promptly and appropriately to the patient(s) and other staff and providers.
- There will be understanding that a variety of experience levels exist in an AMC, and that tolerance for those who are learning is appropriate and expected.
- Disruptive and unacceptable behavior may include but is not limited to:
  - Threatening, intimidating behavior or words

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<sup>1</sup> WUSM employees may report instances of disruptive and unacceptable behavior under the WUSM Policy Against Abusive Conduct (<http://medschool.wustl.edu/students/conduct.htm>). In addition, complaints of harassment and employment discrimination on the basis of sex, age, race, national origin, religion or disability are specifically excluded from this Disruptive Behavior Policy and will be handled pursuant to each AMC member's institutional policy.

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- Obscenities/profanities
- Threatening or obscene gestures, jokes or cartoons
- Degrading a person or a group on the basis of a personal or cultural characteristic
- Taunting, jeering, mocking or humiliating another person
- Disruptive outbursts of anger such as screaming or yelling at or around others
- Throwing instruments, charts, or other objects
- Hostile, condemning, or demeaning communications
- Inappropriate criticizing of other caregivers in front of patients or other staff
- Comments that undermine a patient's trust in other caregivers or the hospital
- Comments that undermine a caregiver's self-confidence in caring for patients
- Failure to adequately address safety concerns or patient care needs expressed by another caregiver
- Intimidating behavior that has the effect of suppressing input by other members of the healthcare team
- Deliberate failure to adhere to organizational policies without adequate evidence to support the alternative chosen
- Retaliation against any member of the healthcare team who has reported an instance of violation of the code of conduct or who has participated in the investigation of such an incident, regardless of the perceived veracity of the report

Disruptive and unacceptable behavior must be distinguished from behavior which, even though unpleasant or disconcerting, is appropriate to the carrying out of certain instructional, advisory, or supervisory responsibilities. In the context of patient care, for example, clear and direct communication may be necessary in order to deliver safe, effective, appropriate, and timely clinical treatment.

## **POLICY**

In situations where disruptive or unacceptable behaviors occur, the AMC expects the medical staff member to recognize his/her unacceptable behavior and to apologize to all parties involved. In addition, the medical staff member is expected to take remedial measures, on his/her own initiative, to prevent the recurrence of such unacceptable behavior. Facilitation of such efforts is available through physician leadership.

If the issue cannot be resolved between the parties, the hospital employee should report the disruptive or unacceptable behavior to their supervisor, director or manager, who will forward the report to the SLCH HR Department who will work with the Washington University HR department, appropriate Department Chief and Chief Medical Officer.

Unresolved complaints or reports of disruptive or unacceptable behavior will be investigated promptly and thoroughly as directed by the appropriate Department Chief. In the event that the complaint is against a Department Chief, the investigation will be directed by the Dean of the Washington University School of Medicine.

Although all complaints will be handled as confidentially as possible, some information will necessarily be shared as part of the investigation and individuals with a need to know will be informed of the outcome. If the Department Chief (or Dean of the School of Medicine) confirms disruptive or unacceptable behavior by a member the medical staff at Barnes-Jewish Hospital or St. Louis Children's Hospital, remedial or disciplinary actions will be taken pursuant to Washington University School of Medicine policies or in accordance with the applicable Hospital medical staff bylaws. Remedial measures will be determined based on the severity of the behaviors. Measures may include, for example, sincere apologies and/or recommendations for therapy or counseling. Disciplinary measures may also be

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warranted, including, for example, verbal or written warnings or reprimands, reduction of compensation or benefits, suspension, denial or delay of promotion, demotion or non-renewal of appointment or termination. Disciplinary measures related to privileges or other medical staff issues may also be initiated by the Department Chief through the applicable hospital medical staff policies and procedures.

If a hospital employee does not in good faith believe that his or her complaint has been adequately investigated, then that employee may take the complaint to the appropriate Chief Medical Officer for further review (NOTE: for SLCH this will be a sub-committee of the MEC rather than the CMO). The Chief Medical Officer will consult with the Dean of the School of Medicine to determine further action and resolution. When deemed necessary by the Chief Medical Officer and the Dean of the School of Medicine, the complaint will be forwarded to the applicable Hospital's Medical Executive Committee for review pursuant to Hospital bylaws. Members of the medical staff found to have engaged in disruptive or unacceptable behavior may seek further review in accordance with applicable existing policies (e.g., Washington University Policy on Academic Freedom, Responsibility, and Tenure).

When disruptive or unacceptable behavior reflects a disorder, condition or other impairment that adversely affects or may adversely affect the quality of patient care, including substance abuse or any other physical, cognitive, mental, psychological, psychiatric, emotional and/or medical condition, disorder or impairment, then the AMC's "Impaired Provider Policy" may apply.

It is a violation of this policy to retaliate against individuals who report disruptive or unacceptable conduct or against those who assist or participate in any investigation of a complaint. Any such retaliation – or any encouragement of another to retaliate – is a violation of this policy, independent of whether the particular complaint is substantiated. At the same time, allegations of disruptive or unacceptable behavior must be made in good faith and not out of malice; knowingly making a false or frivolous allegation will not be tolerated.

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