

## Professionalism/Disruptive Behavior Policy

Marshall University Joan C. Edwards School of Medicine subscribes to and is supportive of standard E-9.045 of the American Medical Association's Code of Ethics: *"Personal conduct, whether verbal or physical, that affects or potentially may affect patient care negatively, constitutes **disruptive** behavior. This includes, but is not limited to, conduct by postgraduate trainees that interferes with one's ability to work with other members of the healthcare team."*

The School of Medicine strives to achieve the best quality of care for patients by Residents and Fellows in a manner which is compassionate, respectful, knowledgeable, ethical, and highly professional. It is emphasized that violations of proper professional conduct are regarded as matters of serious concern requiring an appropriate response by the trainees' program.

Conduct of the types outlined below which hinder the achievement of this goal are considered to violate the professionalism policy.

Examples: Descriptors, which are either suggestive or indicative of disruptive behavior, include those which may reflect an egregious one-time occurrence or be at a less overt level if recurrent such as the following:

- Troublesome
- Disturbing
- Unruly
- Disorderly
- Upsetting
- Inappropriate
- Harassing
- Intimidating
- Abusive
- Distracting
- Offensive
- Inducing a hostile work environment
- Impairing public confidence in the hospital or in the training program

- A. Reports to the Program Director concerning disruptive behavior are to be considered as having been made in confidence (whether from patients, family members, students, fellow Resident/Fellows or other staff). Care must be taken to protect from retaliation those who report such behavior.
- B. The Program Director will conduct an informal investigation to confirm or rule out whether a Resident/Fellow has exhibited disruptive behavior. If no basis is found for the allegation, both the complainant and Resident/Fellow shall be so notified in writing with a copy for the Program Director's file.

- C. If the investigation verifies that disruptive behavior has occurred, the Program Director in his/her judgment, and depending on the nature and severity of the behavior, will engage the Resident/Fellow in an informal process of review of the incident including: expectations as to appropriate behavior; guidance; mentoring; and follow-up monitoring. The Resident/Fellow will also be warned that a recurrence will lead to a formal intervention with possible consequences that include non-academic probation and/or dismissal depending upon the severity and/or frequency of the behavior. Documentation of all discussions, corrective measures and the trainee's response to them is essential. Ordinarily, a formal intervention will be regarded as falling within the category of academic remediation unless circumstances suggest otherwise.
- D. In all cases, the Program Director will have wide latitude to determine whether the departmental response will be at the **informal** (i.e., verification, guidance, and warning) level; or at the **formal** (resolution and possible Administrative Probation or dismissal) level. The Program Director at his/her discretion may call upon any faculty member(s) who can contribute to the understanding or further characterization of the disruptive behavior as well as to advise on any actions that may be taken.

All programs must ensure that this policy is made known and is readily available to all Residents/Fellows without exception during the annual Orientation period and periodically thereafter as deemed appropriate by the program. Because of its importance all postgraduate trainees will be requested to indicate in writing that they have read and have had an opportunity to ask questions about this policy upon entering training. Programs will maintain the signed document in each trainee's file.

Reporting: Extramural reporting of disruptive behavior will follow the Notification and Reporting Section of the Due Process Policy if criteria stipulated therein are met.

Policy established and effective February 27, 2007