

UTHSCSA Graduate Medical Education Policies

<p>Section 7 Policy 7.6</p>	<p>Health and Wellness Disruptive Behavior by Residents and Fellows</p>	<p>Effective: Revised:</p>	<p>February 2008</p> <p>Responsibility: Associate Dean for Graduate Medical Education</p>
<p><b>Disruptive Behavior by Residents and Fellows</b></p>			
<p>Purpose</p>	<p>To ensure that every resident and fellow (hereafter called “resident”) conduct him/herself in a professional, cooperative and appropriate manner and to encourage the prompt identification and resolution of alleged disruptive behavior by all involved or affected persons through informal, collaborative efforts at counseling and rehabilitation.</p> <p>In addition, this policy provides a formal process for the further investigation and resolution of disruptive resident behavior that has not been appropriately modified by prior informal efforts.</p> <p>Finally, this policy provides guidelines for the appropriate discipline of residents who have failed to appropriately modify their behavior after the informal efforts and formal processes described in this policy have been applied.</p>		
<p>Policy</p>	<p>It is the policy of the University of Texas Health Science Center at San Antonio (UTHSCSA) that every resident shall conduct him/herself in a professional, cooperative and appropriate manner, and shall not engage in disruptive behavior. It is expected that residents treat all staff and patients with courtesy and respect, and show respect for patient autonomy.</p> <p>Residents are expected to:</p> <ul style="list-style-type: none"> <li>• Accept and incorporate feedback in a thoughtful and non-defensive manner</li> <li>• Address dissatisfaction through appropriate channels</li> <li>• Cooperate and communicate with all hospital and university staff displaying regard for their dignity</li> <li>• Be truthful in all written and verbal communications</li> </ul> <p>Disruptive behavior includes, but is not limited to:</p> <ul style="list-style-type: none"> <li>• Conduct that interferes with the provision of quality patient care and/or education</li> <li>• Shouting or using vulgar, profane or abusive language</li> <li>• Making disparaging comments (either written or verbal) or displaying behavior which is unprofessional, intimidating, or belittling</li> </ul>		

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	<p>of faculty, colleagues or staff</p> <ul style="list-style-type: none"> <li>• Physical assault</li> <li>• Making threats of violence or financial harm towards patient or staff</li> <li>• Inappropriate conduct that reflects in a negative way on the hospital or university</li> </ul> <p>(Some behaviors which may be disruptive are <b>unlawful</b> as well, and are addressed separately within UTHSCSA regulations [see UTHSCSA Handbook of Operating Procedures <a href="http://www.uthscsa.edu/hop2000/">http://www.uthscsa.edu/hop2000/</a> and <a href="http://www.uthscsa.edu/compliance/INDEX.html">http://www.uthscsa.edu/compliance/INDEX.html</a> regarding discrimination, sexual harassment, retaliation, and general grievances]. These unlawful behaviors include but are not limited to the following:</p> <ul style="list-style-type: none"> <li>• Conduct that constitutes sexual harassment</li> <li>• Making racial, ethnic, or religious slurs</li> <li>• Making or threatening reprisals for reporting disruptive behavior)</li> </ul>
<p>Procedure</p>	<p>Residents identified as demonstrating disruptive behavior may be at risk for the following actions:</p> <ul style="list-style-type: none"> <li>• Verbal warning</li> <li>• Written warning</li> <li>• Administrative status</li> <li>• Probation</li> <li>• Non-renewal of contract</li> <li>• Termination</li> </ul> <p>A decision to place a resident/fellow on probation, elect non-renewal of contract, or termination is subject to the UTHSCSA GME policy as outlined in GME Policy 2.1.10.</p> <ol style="list-style-type: none"> <li>1. Any written or verbal report of alleged disruptive resident behavior should be sent to the appropriate program director, who shall initiate an investigation as he/she deems appropriate to identify or rule out the existence of disruptive behavior. (Issues not resolved at the program director level will be forwarded to the Associate Dean for Graduate Medical Education and/or DIO (or his/her designee) for further action.)</li> <li>2. During the investigation, the program director will meet with the resident to review the alleged behavior and the requirements of</li> </ol>

	<p>this policy. Both the program director and the resident/fellow may be accompanied at this meeting by other staff that the program director or resident feel are necessary to explain the disruptive behavior. The program director may also meet with the person(s) toward whom the disruptive behavior was directed.</p> <p>3. a) If the program director determines that the resident has not engaged in disruptive behavior, he/she will advise the resident and the person to whom the allegedly disruptive behavior was directed of such determination, and will prepare a written report to be filed in the program's quality improvement file, with a copy given to the resident.</p> <p>b) If the program director determines that the resident has engaged in disruptive behavior, he/she will meet with the resident to counsel him/her concerning compliance with this policy and assist in identifying methods for structuring professional and working relationships and resolving problems without disruptive behavior. It is the intent of this policy to allow the program director latitude to develop a plan for resolution that is deemed appropriate with the goal to achieve a modification of the resident's behavior. Because disruptive behavior occurs in varying degrees, any corrective action should be commensurate with the nature and severity of the disruptive behavior. Repeated instance of disruptive behavior may be considered cumulatively and action taken accordingly.</p> <p>Classification of severity will follow these guidelines:</p> <ul style="list-style-type: none"><li>• Level I: Including but not limited to verbal abuse that is directed at-large, but could be reasonably perceived by a witness to be disruptive behavior as defined above.</li><li>• Level II: Including but not limited to verbal or nonverbal abuse such as unwarranted yelling, swearing, or cursing; threatening, humiliating, or otherwise inappropriate comments or gestures directed at a person or persons, or physical violence or abuse directed in anger at an inanimate object, substance abuse off the work premises or during non-duty hours that affects performance during duty hours</li><li>• Level III: Including but not limited to physical violence or other physical abuse involving physical contact, substance abuse on the work premises or during duty hours, or retaliation toward complainants</li></ul> <p>4. Following the meeting(s) with the resident, the program director may, at his or her discretion, arrange for and participate in a meeting between the resident and the person(s) toward whom the disruptive behavior was directed. In determining whether to arrange such a meeting, the program director is to consider the wishes of the person(s) who reported the disruptive behavior. If</p>
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	<p>no such meeting is arranged, the program director shall individually meet with the person(s) toward whom the disruptive behavior was directed to advise of the resolution of the matter.</p> <p>5. Following the meeting(s) with the resident and the person(s) toward whom the disruptive behavior was directed, the program director will prepare a written summary of the reported behavior and document the following:</p> <ul style="list-style-type: none"><li>a. The date and time of the questionable behavior</li><li>b. The circumstances that precipitated the behavior</li><li>c. A factual, objective description of the behavior</li><li>d. The dates, times and participants in any meetings with the resident, staff, etc. regarding the behavior</li><li>e. Acknowledgement of receipt by resident attestation and signature</li></ul> <p>6. The program director will also develop a plan for monitoring future compliance with or violation of this policy, and will document findings of these reviews in writing to the resident's file, with copies given to the resident.</p> <p>Residents who have received a written warning and have not demonstrated substantial improvements as previously outlined and communicated, or incur repeat offenses, shall be subject to higher levels of discipline at the discretion of the program director. If the further discipline involves probation, non-renewal of contract or termination, the resident/fellow retains the right to appeal according UTHSCSA GME Policy 2.1.10.</p>
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