

 <p><b>HAWAII HEALTH SYSTEMS</b> CORPORATION <i>"Touching Lives Everyday"</i></p> <p><b>Policies and Procedures</b></p>	<p>Department: Administration</p>	<p>Policy No.: <b>ADM 0032</b></p>
	<p>Issued by: Alice Hall, Interim PCEO</p>	<p>Revision No.: <b>NA</b></p>
<p>Subject: <b>Workplace Disruptive Behavior No-Tolerance</b></p>	<p>Approved by: <i>Carol VanCamp</i> HHSC Board of Directors By: Carol VanCamp Its: Secretary/Treasurer</p>	<p>Effective Date: August 12, 2010</p>
		<p>Supersedes Policy: NA</p>
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1. Purpose

HHSC believes that a safe and secure workplace and an environment free from disruptive behavior are fundamental to employee effectiveness. HHSC expects all employees, contractors, independent practitioners, volunteers, visitors, students, and patients (including long term care residents) to share in establishing and maintaining such a workplace, which can result when all employees and others treat one another with respect and common courtesy.

HHSC also finds that disruptive behaviors can foster medical errors, contribute to poor patient satisfaction and preventable adverse outcomes, increase the cost of care and cause qualified clinicians, administrators and managers to seek new positions. Accordingly, HHSC seeks to promote a work environment free from workplace violence and abuse and other forms of disruptive behavior.

2. Policy

It is the policy of the Hawaii Health Systems Corporation (HHSC) to promote quality patient care and a safe workplace by providing a work environment and environment of care free from disruptive behaviors.

This policy provides advice for dealing with disruptive behavior towards 1) employees, 2) patients, 3) non-employees working on HHSC premises, 4) customers, and 5) the general public.

This policy also describes: 1) a strict no-tolerance policy regarding disruptive behavior and 2) methods of addressing disruptive behaviors. This policy supersedes all presently existing policies and procedures that address this subject. However, this policy does not supersede HR 004 "Workplace Violence/Abuse No-Tolerance" nor does it supersede any Medical Staff policies/bylaws.

If you have any questions or for more information regarding this policy, contact the Corporate Human Resources Office.

3. Introduction

To help promote a safe and secure workplace and to promote quality medical services, HHSC has implemented a no-tolerance policy with respect to disruptive behavior in the workplace. Disruptive behavior of fellow employees, contractors, independent practitioners, volunteers, visitors, students, and patients (including LTC residents), often foreshadows workplace violence and will not be tolerated by HHSC.

HHSC takes disruptive behavior seriously. Disruptive behavior is unacceptable and will result in disciplinary action up to and including termination. All employees, both management and non-management, are responsible for prevention of disruptive behavior and must follow the guidelines specified in this policy.

HHSC desires to have all individuals within its facilities be treated courteously, respectfully, and with dignity. To that end, the Corporate Board of Directors requires that all HHSC employees, physicians and other independent practitioners, contractors, volunteers, students, patients and visitors conduct themselves in a professional and cooperative manner within HHSC facilities and when performing services on behalf of any HHSC facility or clinical operations. All persons are expected to refrain from disruptive, abusive, or otherwise inappropriate conduct toward patients, employees, visitors, and others.

4. Definitions and Examples

Term	Definition	Pertinent Examples
Appropriate Conduct	Communication and actions that are professional, cooperative, responsible, courteous, and respectful, presented in a mature and collaborative manner while demonstrating HHSC's core values.	
Disruptive Behavior or Conduct	Anything a person (physician, employee, volunteer, patient, etc.) does that interferes with the orderly conduct of the business or operations of an HHSC facility, including safety, patient care and every aspect of facility operations.	<p>Disruptive behavior or conduct can take many forms. Although not an exhaustive list, the following may constitute disruptive conduct depending upon the circumstances: raised voice, profanity, name-calling, throwing things, abusive treatment of patients or employees, disruption of meetings, repeated violations of policies or rules, or behavior that disparages or undermines confidence in HHSC or any of its facilities or operations, or the staff of any facility or operation. It can also include such behavior as:</p> <ul style="list-style-type: none"> <li>➤ Attacks (verbal or physical) leveled at others which are personal, irrelevant, or go beyond the bounds of fair professional comment.</li> <li>➤ Impertinent and inappropriate comments written or illustrations drawn in patient medical records or other official documents, impugning the quality of care in the</li> </ul>

		<p>Hospital, or attacking particular employees or Hospital policy.</p> <ul style="list-style-type: none"> <li>➤ Non-constructive criticism, addressed to its recipient in such a way as to intimidate, undermine confidence, belittle, or to impute stupidity or incompetence.</li> <li>➤ Refusal to accept medical staff assignments or to participate in committee or departmental affairs on anything but his or her own terms, or to do so in a disruptive manner.</li> <li>➤ Imposing idiosyncratic requirements on the Hospital staff which have little impact on improved patient care but serve only to burden employees with "special" techniques and procedures.</li> </ul>
Harassment	<p>Verbal or physical conduct that denigrates or shows hostility or aversion toward an individual and that has the purpose or effect of:</p> <ul style="list-style-type: none"> <li>➤ Creating a disruptive, hostile, or offensive work environment;</li> <li>➤ Unreasonably interfering with an individual's work performance; or</li> <li>➤ Otherwise adversely affecting an individual's employment.</li> </ul>	See Examples of Verbal Harassment, below.
Verbal Abuse and/or Verbal Harassment	Attacking another person in words, orally, or in writing.	<p>Examples of Verbal Harassment/Abuse:</p> <ul style="list-style-type: none"> <li>➤ Threats</li> <li>➤ Sexual comments</li> <li>➤ Foul language directed at another person</li> <li>➤ Threatening notes</li> <li>➤ Name calling</li> </ul>

		<ul style="list-style-type: none"> <li>➤ Labeling of actions</li> <li>➤ Insulting gestures</li> <li>➤ Jokes or humor directed at an individual which would make a reasonable person feel uncomfortable</li> <li>➤ Taunting</li> <li>➤ Baiting or provocative remarks</li> </ul>
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5. No-Tolerance Policy

Disruptive behavior of any kind is not conducive to 1) a safe work environment, 2) employee job satisfaction, 3) promoting healing and quality medical care, or 4) workplace harmony and efficiency. **Disruptive behavior towards employees, volunteers, independent practitioners, visitors, contractors, and patients is unacceptable and will not be tolerated.** This policy is not intended as an additional basis for the imposition of discipline. It is intended to further define HHSC’s “No-Tolerance” position towards behaviors that disrupt facility operations and patient safety. Employees who violate this policy will be subject to appropriate disciplinary action in accordance with the collective bargaining agreement or HHSC Human Resources and Civil Service Systems Rules as applicable. Prevention of disruptive behavior is the joint responsibility of the employer and its employees.

6. Responsibility

It is the responsibility of all employees to be aware of how their behavior, physical and verbal, is affecting the people with whom they work. Eliminate behavior (including teasing and joking) that a reasonable person would find disruptive.

It is also the responsibility of all staff, physicians and other independent practitioners, contractors, volunteers, students, patients and visitors to maintain an environment that promotes healing and quality medical care and which is free from disruptive behavior.

All levels of management are responsible for enforcing company policies related to disruptive behaviors, and all employees are responsible for adhering to them. Any employee who has knowledge of disruptive behaviors must report it through his or her supervisor, Human Resources Director, or Facility Administrator.

Administrative Responsibility. The Corporate/Regional Human Resources Office and/or Regional CEO’s/Facility Administrator’s Office administer this policy to ensure that it is consistently applied throughout HHSC’s operations to provide a positive and productive work environment free from any form of harassment/abuse and disruptive behaviors.

7. Reporting and Documenting Disruptive Behavior

- A. Any employee, practitioner, patient, or visitor who observes behavior by staff, physicians and other independent practitioners, contractors, volunteers, students, patients and/or visitors that appears to disrupt the smooth operation of the Hospital or jeopardize patient care shall immediately report the incident verbally to the appropriate immediate supervisor, department head or chief of staff, with a follow up written report within the shift of the incident, if possible. If the immediate supervisor is unavailable, report to the nursing supervisor.
- B. Documentation of disruptive conduct is critical, as disciplinary action is frequently based on an observed pattern of conduct. The documentation shall include:
  - 1. The date and time of the questionable behavior;
  - 2. Whether the behavior was in the presence of a patient or affected or involved a patient in any way, and if so, the name of the patient;
  - 3. The circumstances which precipitated the situation;
  - 4. A description of the questionable behavior, limited to factual, objective language as much as possible;
  - 5. The perceived consequences, if any, of the disruptive behavior as it relates to patient care or personnel or hospital operations;
  - 6. The names of witnesses, if any; and
  - 7. Any action taken, including date, time, place, action, and name(s) of those intervening.
- C. The report shall be submitted to the appropriate immediate supervisor, department head or chief of staff.
- D. Reports of disruptive behavior will be investigated by the hospital management and/or the hospital medical staff, or their designees, as appropriate. Reports which are not founded may be dismissed, and the person initiating the report so apprised. Reports that are confirmed will be addressed as appropriate, consistent with no tolerance for confirmed instances of disruptive behavior, taking into consideration the circumstances and nature of the event(s) and the parties involved, as well as any prior incidents involving the same person(s).
- E. Regions and facilities, as well as medical staff organizations, may adopt policies consistent with this policy.

8. Applicability: This policy applies to Board members, employees, contractors, independent practitioners, volunteers, visitors, and patients.

9. Statutory Reference

HHSC's Disruptive Behavior No-Tolerance Policy complies with the following federal statutes:

1. Title VII, Civil Rights Act of 1964, as amended, 42 U.S.C. § 2000e, et seq.
2. Age Discrimination in Employment Act, as amended, 29 U.S.C., 621, et seq. (ADEA).
3. Americans with Disabilities Act of 1990, as amended, 42 U.S.C. § 12101, et seq. (ADA).
4. The Rehabilitation Act of 1973, as amended, 29 U.S.C. § 701, et seq. as applicable.