

Policy: Physician & Licensed Practitioner Professional Behavior

Type: Administrative Policy

Applicable To: Monmouth Medical Center Southern Campus

Policy Owner: Medical Affairs

Effective Date: September 2023

Approved by: Medical Executive Committee

1. Policy Statement:

1. Human Resource policies address matters involving employees who fail to conduct themselves appropriately.
2. The following policy addresses matters that involve Physicians and Licensed Practitioners (LPs) with privileges or a scope of practice at the hospital who fail to conduct themselves appropriately.
3. Monmouth Medical Center Southern Campus intends to enforce this policy in a firm, fair, and equitable manner in keeping with the requirements of the Medical Staff Bylaws and the Medical Staff Rules and Regulations.
4. Medical Staff Leaders, the Chief Medical Officer, the Executive Committee, and/or the Board of Trustees, in collaboration with the MMC-SC Senior Management Team will address unprofessional behavior of Physicians and LPs with privileges or a scope of practice at Monmouth Medical Center Southern Campus. Unprofessional behavior will be investigated and addressed following the procedures outlined in this policy.
5. If the situation suggests there may be an underlying medical or psychological cause for the behavior, the Physician Health Policy will be invoked and followed.

Unprofessional conduct may include but is not limited to behavior such as the following:

1. Verbal or physical attacks that are personal, irrelevant, or beyond the bounds of fair professional conduct, leveled at other appointees to the Medical Staff, Non-Physician Providers, hospital personnel, patients or patients' families, or others within the hospital.
2. Impertinent and inappropriate verbal or written comments or illustrations in patient medical records or other official documents or public settings that impugn the quality of care in the hospital or attack particular physicians, associates, or hospital policies.
3. Criticism leveled at the recipient in such a way that it intimidates, undermines confidence, belittles, or implies stupidity or incompetence, criminal or immoral activity, or other untrue claims or allegations.
4. Refusal to participate in committee or departmental affairs in a professional and appropriate manner, consistent with the practitioner's privileges at Monmouth Medical Center Southern Campus.

DEFINITIONS:

A. Appropriate Professional Behavior:

- Criticism communicated in a reasonable manner and offered in good faith with the aim of improving patient care and safety
- Encouragement of clear communication

- Expressions of dissatisfaction with policies, hospital operations or staff behavior through appropriate grievance channels or other civil non-personal means of communication
- Use of a cooperative approach to problem resolution
- Constructive criticism conveyed in a respectful manner without blame or shame for adverse outcomes
- Active and respectful participation in medical staff and hospital meetings

B. Inappropriate or Unprofessional Behavior:

- Belittling or berating statements
- Name calling
- Use of profanity or disrespectful language
- Inappropriate comments written in the medical record
- Blatant failure to respond to patient care needs or staff requests
- Personal sarcasm or cynicism
- Deliberate lack of cooperation without good cause
- Deliberate refusal to return phone calls, pages or other messages concerning patient care
- Intentionally condescending language
- Intentionally degrading or demeaning comments about patients, families, other physicians, hospital personnel or the hospital

C. Egregious Behavior:

- Physically threatening language directed at anyone in the hospital
- Physical contact with another individual that is threatening or intimidating
- Throwing of instruments, charts or other objects
- Threats of violence or retribution
- Sexual harassment
- Other forms of harassment including persistent inappropriate behavior and repeated threats of litigation

2. Acronyms:

MMSC	Monmouth Medical Center, Southern Campus
LP	Licensed Practitioner
CMO	Chief Medical Officer
CEO	Chief Executive Officer

3. Related Documents:

Document Type	Document Name
1. Associated Procedures:	N/A
2. Resources:	N/A
3. Job Aids:	N/A
4. Regulatory references:	Joint Commission Comprehensive Accreditation Manual

Procedure: Physician and Licensed Practitioner Professional Behavior
Type: Administrative Procedure
Applicable To: Monmouth Medical Center Southern Campus (MMCSC)
Procedure owner: Medical Affairs
Effective date: September 2023
Approved by: Medical Executive Committee

1. Purpose Statement:

It is the policy of Monmouth Medical Center Southern Campus (MMCSC) to treat all individuals within its facilities with courtesy, respect, and dignity. To that end, the board requires that all individuals, employees, physicians, and other independent practitioners conduct themselves in a professional and cooperative manner in the hospital, and that all individuals honor Monmouth Medical Center Southern Campus's Code of Conduct. The purpose of this policy is to ensure optimum patient care by promoting appropriate behavior, (that which creates a safe, cooperative, and professional healthcare environment) and to prevent or eliminate unprofessional conduct (that which disrupts the operation of the hospital, creates an environment that inhibits good communication or adversely affects the confidence in the hospital's ability to provide quality patient care).

2. Acronyms:

MMCSC	Monmouth Medical Center Southern Campus
CEO	Chief Executive Officer
LP	Licensed Practitioner
CMO	Chief Medical Officer

3. Procedure:

Performed By (title/area)	Required Action Steps	Supplemental Guidance
<i>CMO</i>	<p>PROCEDURE:</p> <p>A. Documentation and Report</p> <p>Documentation of each incident of unprofessional conduct is critical, since it is usually a pattern of inappropriate conduct that leads to disciplinary action. Such documentation shall include the following:</p> <ul style="list-style-type: none"> • The date and time of the questionable behavior. • A statement of whether the behavior affected or involved a patient in any way, and, if so, information identifying the patient and describing the incident's impact on the patient or the patient's family. • The circumstances that precipitated the situation. • A factual and objective description of the questionable behavior. • The consequences, if any, of the unprofessional behavior as it relates to patient care, collegiality among members of the professional or allied Medical Staff at Monmouth Medical Center Southern Campus or hospital operations. 	

- A record of any action taken to remedy the situation, including the date, time, place, action, and name(s) of those witnessing or intervening.

Any Physician, LP, employee, patient, or visitor should report potentially unprofessional conduct in writing to the Chief Medical Officer or another Monmouth Medical Center Southern Campus administrator (for example, Nursing Supervisor or Vice President of Patient Care Services). If the latter, the report will be forwarded to the Chief Medical Officer. The Chief Medical Officer, in cooperation with the Medical Staff President or his/her designate and the appropriate member(s) of MMC-SC's Senior Management Team, will investigate the report. The investigators may dismiss any unfounded report. A confirmed report will be addressed as follows:

B. A Single Incident

1. A single confirmed incident warrants a discussion with the offending individual. The Chief Medical Officer and/or the President of the Medical Staff or his/her designate, along with appropriate members of MMC-SC's Senior Management Team shall initiate such a discussion and emphasize that such conduct is inappropriate and must cease. This conversation will be documented in writing, which will be retained in the offending individual's quality file as a permanent part of the record. The investigator(s) will provide the individual with a copy of this policy and inform the individual that the Medical Staff and Board of Trustees require compliance. The approach during such an initial intervention should be collegial and helpful to the individual and the hospital.
2. It shall be made clear to the offending individual that attempts to confront, intimidate, or otherwise retaliate against the individual(s) who reported the behavior in question are a violation of this policy and constitutes grounds for further disciplinary action.
3. The Chief Medical Officer will keep copies of all reports, correspondence, and outcomes. The involved physician may submit a rebuttal to the charge. The rebuttal will also be made in writing, which will be retained in the physician's quality file as a permanent part of the record.

C. Recurrent Incidents

If reports are received of an existing or developing pattern of unprofessional behavior, the Chief Medical Officer, the President of the Medical Staff or his/her designate, along with appropriate members of MMC-SC's Senior Management Team shall approach the matter as follows, as long as it does not appear that the offending behavior is severe or presents an imminent danger to the Hospital or others:

1. The President/ CEO will receive notification about the behavior and that it represents a recurrence.
2. As with the single confirmed incident, the team will meet with the practitioner and provide him/her with a copy of this policy. The practitioner will be informed that the Medical Staff, Hospital Management and Board of Trustees require compliance with this policy, and that failure to abide by the terms of this policy may be grounds for summary suspension.
3. They will inform the offending individual that if the unprofessional behavior recurs, a mandatory meeting with the Chief Medical Officer, President/CEO of the Hospital and the Medical Staff Officers will be held, and that Summary Suspension may occur if behavior continues.
4. They shall document all meetings in writing, including a follow-up letter to the offending individual. The letter will document the content of the discussion and any specific actions the offending individual has agreed to perform. This documentation of steps taken will be retained in the offending individual's quality file as a permanent part of the record.
5. The involved practitioner may submit a rebuttal to the charge. The rebuttal will also be made in writing, which will be retained in the practitioner's quality file as permanent part of the record.

D. Continued Unprofessional Behavior

If, in spite of these interventions the behavior(s) in question continues, the Chief Medical Officer, the President/CEO and the Medical Staff Officers will hold a mandatory meeting with the offending individual.

1. They will inform the individual that a single recurrence of the offending behavior shall result in loss of medical staff membership and privileges.

	<p>This meeting is not a discussion, but rather constitutes the physician's final warning.</p> <ol style="list-style-type: none"> 2. The offender will receive a follow-up letter that reiterates the final warning. 3. All reports, correspondence, recommendations and outcome will be filed in the individual's quality file as a permanent part of the record. 4. The involved physician may submit a rebuttal to the charge, which will be retained in the physician's peer review file as a permanent part of the record. 5. If, after this final meeting, the offending behavior recurs, the individual's clinical privileges shall be summarily suspended. If the practitioner is a physician, this will be done in compliance with the Medical Staff Bylaws. If a Licensed Practitioner, suspension will be in accordance with the Non-Physician Provider Policy. <p>E. Egregious Behavior</p> <p>A single egregious incident, such as but not limited to physical or sexual harassment; assault or battery; a felony conviction; a fraudulent act; stealing; damaging hospital property; sexual imposition on a patient or patient's family; will result in Summary Suspension of clinical privileges. If the practitioner is a physician, this will be done in compliance with the Medical Staff Bylaws. If a Non-Physician Provider, suspension will be in accordance with the Licensed Practitioner Policy.</p> <ol style="list-style-type: none"> 1. Should the suspension be upheld following due process, the individual will be ineligible to reapply for privileges at Monmouth Medical Center Southern Campus. 	
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4. Related Documents:

Document Type	Document Name
Policy	Physician & Licensed Practitioner Professional Behavior
Job aids	N/A
Patient and family education materials	N/A
Resources	N/A
Forms	N/A
Regulatory references	Joint Commission Comprehensive Accreditation Manual for