 Broadlawns Medical Center DES MOINES, IOWA	Departmental Manual:	Medical Staff	
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SUBJECT:	Physician Code of Conduct		

POLICY:

The Broadlawns Medical Center Physicians believe in our Mission, Vision and Values. We protect and honor this active commitment by abiding by this Code of Conduct. In our professional practice and in personal spirit, we individually model behavior that reflects our values. We respect the law. We are alert and report any questionable conduct. Each day we work together to create a culture that reinforces doing the right thing.

By doing what is right, we show respect to each person, patient, peer, co-worker and student. Together we shape an environment free of harassment, discrimination, illegal drug use and other criminal behavior. We take this responsibility personally and expect it of others.

We recognize our obligation to report illegal or unethical conduct or suspected violations of the Code of Conduct. All reports are taken seriously and harassment or retaliation against anyone who acts in good faith reporting will not be tolerated. The Human Resources Department acts on reports to prevent and address such conduct.


We maintain a safe and respectful work environment free from overt or implied harassment. We support a workplace free of discrimination based on race, creed, color, gender, gender identity, sexual orientation, age, national origin, receipt of public assistance or any other classification protected by law.

PURPOSE:

1. To improve the care that is given to our patients.
2. To optimize communication and interpersonal relationships.
3. To reinforce an atmosphere of mutual respect for all who work at Broadlawns Medical Center.
4. To establish a process for reporting and addressing problematic behavior.
5. To minimize liability of the hospital and its employees.
6. To prevent conduct which:
 - a. Creates a hostile or intimidating environment
 - b. Disrupts the delivery of patient care
 - c. Interferes with an individual's ability to work safely

EXAMPLES OF BEHAVIORS WHICH MAY BE DISCIPLINED:

1. Profane or angry language or yelling.
2. Throwing objects.
3. Slamming doors, instruments or charts.
4. Disrespectful language.
5. Demeaning non-verbal behavior.
6. Criticism of healthcare professional in front of patients, staff or other providers.
7. Intimidating physical behavior, bullying or sexual harassment.
8. Failure to keep confidences.
9. Gossip or withholding of information aimed at undermining another health care provider.
10. Using others as scapegoats.
11. Harassment of other individuals.
12. Breach of confidentiality.
13. Falsification of records, including but not limited to falsification of time worked records or medical administration.
14. Possession or distribution of controlled substances.
15. Inappropriate solicitation.
16. Excessive absenteeism or tardiness.

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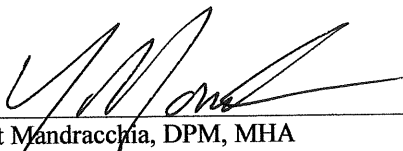
17. Violation of safety, health and tobacco policies.
18. Fighting or attempting bodily injury.
19. Destruction, theft or abuse of property.
20. Diverting medications.
21. Violation of Corporate Compliance Requirement.
22. Non-compliance of licensing, certification, required training or/ or personnel documentation.

CONFLICT RESOLUTION:

1. The optimal way to address inappropriate conduct is a face-to-face meeting between the parties involved using the following steps.
 - a. The person who was aggrieved is expected to address the issue with the other party in a timely manner and private setting
 - b. This meeting may be more productive after a “cooling off” period of a few hours or a few days so that the parties involved can gain perspective on the precipitating events and process breakdowns that may have been contributing factors
2. If facilitation of the discussion is needed, the Section Chief, Department Chair or Chief Medical officer may serve as facilitators. In cases involving Residents the Director of Medical Education may serve as facilitator.
3. Sincere apologies should be encouraged and every reasonable attempt should be made to defuse the situation without further invention.
4. If clinical care/hospital process deficiencies are discovered during this face-to-face meeting, these concerns need to be addressed by the department’s leadership for improvement.

ACTION FOR UNRESOLVED ISSUES:

1. If the complaint is found to have merit the following action should be taken:
 - a. A copy of the complaint and the review will be sent to the physician’s or resident’s immediate supervisor who will develop a plan for appropriate counseling and intervention.
2. Any action reported in accordance with the Broadlawn Medical Center Code of Conduct which requires review or follow-up is not considered to be disciplinary in and of itself.
3. Any necessary disciplinary action will be taken only after the Medical Executive Committee makes a determination that it is appropriate to take corrective action as defined in the Medical Staff Bylaws. Any necessary disciplinary action for resident physicians will be conducted pursuant to the Broadlawn Medical Center Consortium Policies.
4. To protect privacy, written reports containing individual’s names or departments will not be transmitted by email.
5. A summary of action taken will be maintained in the Medical Staff Office.
6. Semi-annual review of data trends will be conducted through the Medical Staff Office and reported to the Chief Medical Officer, Medical Executive Committee, Quality Council and to the Board of Trustees.



Vincent Mandracchia, DPM, MHA
 Chief Medical Officer

