

Policy

POLICY NO. E.87100.008
ORIGINATED 2/15
REVISED 12/18, 2/20
PAGE 1 OF 8

SUBJECT: Code of Conduct

APPLICATION: PIH Health Hospital – Whittier (PHH-W) and PIH Health Hospital – Downey (PHH-D) PIH Health Practitioners, excluding PIH Health Physicians (PHP).

PURPOSE: Establish a code of conduct for PIH Health Practitioners that values honesty, integrity and professionalism in order to foster a culture of safety and quality throughout PIH Health; to maintain a harmonious professional environment in which PIH Health Practitioners work cooperatively with others so as not to adversely affect patient care; to provide an environment that is free from discrimination, harassment, intimidation, and other disruptive or unprofessional conduct.

DEFINITIONS: PIH Health Practitioners includes all Members of the Medical Staff and Allied Health Practitioners/Professionals (“AHPs”) at either PIH Health Hospital – Whittier or PIH Health Hospital – Downey.

Medical Staff Governing Documents includes Medical Staff Bylaws, Medical Staff Rules and Regulations and policies at PIH Health Hospital – Whittier and PIH Health Hospital – Downey.

POLICY: It is the policy of PIH Health that all PIH Health Practitioners conduct themselves in a professional, respectful and cooperative manner at all times. This policy has been adopted and will be enforced in recognition of the position that disruptive or inappropriate practitioner conduct adversely affects the quality and function of patient care within PIH Health and will not be tolerated. PIH Health reserves the right to take the appropriate action to address disruptive conduct, including loss of privileges and removal from the Medical Staff.

PROCEDURE:

PIH Health Practitioners agree (by acknowledgment of the attached PIH Health Practitioner Code of Conduct at initial appointment and reappointment) to abide by this Code of Conduct during their terms of appointment.

1. General Expectations:
 - 1.1. PIH Health Practitioners shall treat all individuals with courtesy, respect, and dignity. PIH Health is committed to providing an environment that is free of harassment and

APPROVED
MEDICAL EXECUTIVE COMMITTEE

DATE 2/4/20



APPROVED
BOARD OF DIRECTORS

APR 20 2020



discrimination in any form. PIH Health Practitioners shall not exhibit disruptive, inappropriate, unprofessional, intimidating, or harassing conduct.

2. Appropriate Professional Conduct

- 2.1. Appropriate conduct fosters a culture of safety and the delivery of quality patient care. It requires working cooperatively, collaboratively, and professionally with PIH Health, its administration, its employees, and other PIH Health Practitioners to care for patients and contribute to the proper operation of PIH Health.

Examples of appropriate conduct expected of each PIH Health Practitioner include, but are not limited to, the following actions:

- 2.1.1. Complying with the law, this Code of Conduct policy, and the Medical Staff Governing Documents.
- 2.1.2. Exercising rights and responsibilities afforded by the Medical Staff Governing documents.
- 2.1.3. Advocating effectively, professionally, and respectfully on patient care matters.
- 2.1.4. Making and communicating recommendations and/or criticisms intended to improve care in a productive, professional, and reasonable manner.

3. Disruptive, Inappropriate, Unprofessional, Intimidating and/or Harassing Conduct (including Sexual Harassment)

- 3.1. Disruptive, inappropriate, unprofessional, intimidating, and harassing conduct adversely affects workplace morale, causes staff turnover, and contributes to poor patient satisfaction and potential adverse outcomes. Such conduct will not be tolerated, as it interferes with the ability of individuals at PIH Health Hospital – Whittier and PIH Health Hospital – Downey to carry out their responsibilities effectively and undermines patient confidence.

Examples of disruptive, inappropriate, unprofessional, intimidating, and harassing conduct include, but are not limited to, the following actions:

- 3.1.1. Use of profanity or condescending, disrespectful, offensive, and/or abusive language, including name calling and language that is vulgar, sexually suggestive or explicit, intimidating, or racially, ethnically or religiously slurring.
- 3.1.2. Use of belittling, berating, degrading, demeaning, discourteous, or obscene comments, orders, or gestures.
- 3.1.3. Unnecessarily shouting at any individual, including in response to any individual who expresses concerns or issues regarding the care of any patient.
- 3.1.4. Criticizing individuals in front of others. Criticism or concerns about any individual shall be addressed in private and in an appropriate manner including escalating concerns to an appropriate member of leadership.
- 3.1.5. Any threatening or intimidating behavior or comments toward others, physical or otherwise.
- 3.1.6. Physical assault or physical contact with another individual that is threatening or intimidating.



- 3.1.7. Throwing instruments, charts, or other objects, or damaging PIH Health property.
- 3.1.8. Disrupting meetings, including inappropriate or unprofessional comments or behaviors at meetings.
- 3.1.9. Engaging in behavior that intimidates, harasses, or discriminates based on age, race, gender, color, religion, national origin, disability, marital status, sexual orientation, status with respect to public assistance, or other characteristics protected under federal, state, or local law.
- 3.1.10. Engaging in sexual harassment, including physical, verbal, or visual conduct of a sexual nature.
- 3.1.11. Other forms of harassment, including persistent inappropriate behavior or threats of litigation.
- 3.1.12. Recording any inappropriate comments or statements in medical records, including criticisms of any individual at PIH Health.
- 3.1.13. Being impaired by the use of alcohol, prescription medications, or illegal or unauthorized substances while in the performance of professional responsibilities.
- 3.1.14. Knowingly disseminating information that is false, misleading, or deceptive regarding PIH Health or individuals associated with PIH Health.
- 3.1.15. Communicating concerns or grievances regarding any aspect of patient care by individuals at PIH Health to the media or in any other public venue. Medical Staff members and AHPs shall use established internal mechanisms to address such concerns or grievances.
- 3.1.16. Encouraging a patient or the family of a patient to sue PIH Health or another individual at PIH Health.
- 3.1.17. Soliciting patient or patients' family members' participation in supporting the PIH Health Practitioner's point of view regarding a concern or grievance.
- 3.1.18. Violating patient confidentiality or the confidentiality of the discussions or deliberations of any PIH Health proceeding, Medical Staff meeting, or Medical Staff committee meeting. Medical Staff members and AHPs shall not repeat information shared in an executive session or peer review session of any PIH Health proceeding, Medical Staff meeting, or Medical Staff committee meeting, outside of the session.
- 3.1.19. Willful refusal to comply with the requirements set forth in the Medical Staff Governing Documents, including this Code of Conduct.
- 3.1.20. Retaliating against individuals who in good faith report a suspected violation of this Code of Conduct, or participate in the review of such report.

4. Suspected Violations

- 4.1. Suspected violations of the Code of Conduct must be reported and will be addressed in accordance with the Code of Conduct Violation Policy E.87100.001.

5. Responsibilities

- 5.1. All PIH Health Practitioners have an ongoing responsibility to abide by this Code of Conduct Policy E.87100.008 and the Code of Conduct Violation Policy E.87100.001.



- 5.2. At PIH Health hospitals, the Medical Executive Committees and the Boards of Directors are responsible for:
- 5.2.1. Reviewing and approving any changes to this Code of Conduct
 - 5.2.2. Monitoring compliance with this Code of Conduct Policy
 - 5.2.3. Ensuring that all practitioners at the hospital(s) understand and abide by this Code of Conduct and the Code of Conduct Violation Policy



PIH Health Practitioners agree to abide by the Code of Conduct during their exercise of any clinical privileges or Service Authorization and terms of appointment.

I. General Expectations

PIH Health Practitioners shall treat all individuals with courtesy, respect, and dignity. PIH Health is committed to providing an environment that is free of harassment and discrimination in any form. PIH Health Practitioners shall not exhibit disruptive, inappropriate, unprofessional, intimidating, or harassing conduct.

II. Appropriate Professional Conduct

Appropriate conduct fosters a culture of safety and the delivery of quality patient care. It requires working cooperatively, collaboratively, and professionally with PIH Health, its administration, its employees, and other PIH Health Practitioners to care for patients and contribute to the proper operation of PIH Health.

Examples of appropriate conduct expected of each PIH Health Practitioner include, but are not limited to, the following actions:

1. Complying with the law, this Code of Conduct policy, and the Medical Staff Governing Documents.
2. Exercising rights and responsibilities afforded by the Medical Staff Governing documents.
3. Advocating effectively, professionally, and respectfully on patient care matters.
4. Making and communicating recommendations and/or criticisms intended to improve care in a productive, professional, and reasonable manner.

III. Disruptive, Inappropriate, Unprofessional, Intimidating and/or Harassing Conduct (including Sexual Harassment)

Disruptive, inappropriate, unprofessional, intimidating, and harassing conduct adversely affects workplace morale, causes staff turnover, and contributes to poor patient satisfaction and potential adverse outcomes. Such conduct will not be tolerated, as it interferes with the ability of individuals at PIH Health Hospital – Whittier and PIH Health Hospital – Downey to carry out their responsibilities effectively and undermines patient confidence.

Examples of disruptive, inappropriate, unprofessional, intimidating, and harassing conduct include, but are not limited to, the following actions:

1. Use of profanity or condescending, disrespectful, offensive, and/or abusive language, including name calling and language that is vulgar, sexually suggestive or explicit, intimidating, or racially, ethnically or religiously slurring.
2. Use of belittling, berating, degrading, demeaning, discourteous, or obscene comments, orders, or gestures.
3. Unnecessarily shouting at any individual, including in response to any individual who expresses concerns or issues regarding the care of any patient.
4. Criticizing individuals in front of others. Criticism or concerns about any individual shall be addressed in private and in an appropriate manner including escalating concerns to an appropriate member of leadership.
5. Any threatening or intimidating behavior or comments toward others, physical or otherwise.
6. Physical assault or physical contact with another individual that is threatening or intimidating.
7. Throwing instruments, charts, or other objects, or damaging PIH Health property.
8. Disrupting meetings, including inappropriate or unprofessional comments or behaviors at meetings.
9. Engaging in behavior that intimidates, harasses, or discriminates based on age, race, gender, color, religion, national origin, disability, marital status, sexual orientation, status with respect to public assistance, or other characteristics protected under federal, state, or local law.
10. Engaging in sexual harassment, including physical, verbal, or visual conduct of a sexual nature.
11. Other forms of harassment, including persistent inappropriate behavior or threats of litigation.
12. Recording any inappropriate comments or statements in medical records, including criticisms of any individual at PIH Health.



- 13. Being impaired by the use of alcohol, prescription medications, or illegal or unauthorized substances while in the performance of professional responsibilities.
- 14. Knowingly disseminating information that is false, misleading, or deceptive regarding PIH Health or individuals associated with PIH Health.
- 15. Communicating concerns or grievances regarding any aspect of patient care by individuals at PIH Health to the media or in any other public venue. Medical Staff members and AHPs shall use established internal mechanisms to address such concerns or grievances.
- 16. Encouraging a patient or the family of a patient to sue PIH Health or another individual at PIH Health.
- 17. Soliciting patient or patients' family members' participation in supporting the PIH Health Practitioner's point of view regarding a concern or grievance.
- 18. Violating patient confidentiality or the confidentiality of the discussions or deliberations of any PIH Health proceeding, Medical Staff meeting, or Medical Staff committee meeting. Medical Staff members and AHPs shall not repeat information shared in an executive session or peer review session of any PIH Health proceeding, Medical Staff meeting, or Medical Staff committee meeting, outside of the session.
- 19. Willful refusal to comply with the requirements set forth in the Medical Staff Governing Documents, including this Code of Conduct.
- 20. Retaliating against individuals who in good faith report a suspected violation of this Code of Conduct, or participate in the review of such report.

IV. Suspected Violations

Suspected violations of the Code of Conduct must be reported and will be addressed in accordance with the Code of Conduct Violation Policy E.87100.001.

V. Responsibilities

All PIH Health Practitioners have an ongoing responsibility to abide by this Code of Conduct Policy E.87100.008 and the Code of Conduct Violation Policy E.87100.001.

At PIH Health hospitals, the Medical Executive Committees and the Boards of Directors are responsible for:

- 1. Reviewing and approving any changes to this Code of Conduct
- 2. Monitoring compliance with this Code of Conduct Policy
- 3. Ensuring that all practitioners at the hospital(s) understand and abide by this Code of Conduct and the Code of Conduct Violation Policy

VI. Acknowledgement

By signing below, you are acknowledging that you have read this Code of Conduct and agree to abide by its requirements.

NAME (Print) _____ DATE _____

SIGNATURE _____



Policy Approvals

Policy Name: Code of Conduct

Entity: PHH-W Department: Medical Staff Services

Originator of Policy:
Bob Schroeder, CPMSM Medical Staff Services 13742
Name Department Extension

Committee Approvals:
Medical Executive Committee-Whittier February 4, 2020
Committee Date

Committee Date

Committee Date

Committee Date

Signatures:
Robert Schroeder, CPMSM [Signature] 2/27/20
Name Signature Date
Lucinda Place, RN [Signature] 2/15/20
Name Signature Date
Carol Salas, [Signature] 3/5/2020
Chief Human Resources Officer Name Signature Date
James R West [Signature] 4-20-20
Name Signature Date



Policy Approvals

Policy Name: Code of Conduct

Entity: PHH-D **Department:** Medical Staff Services

Originator of Policy:
Lori Lakey, CPCS Medical Staff Services 25144
Name Department Extension

Committee Approvals:
Medical Executive Committee 3/12/20
Committee Date
Committee Date
Committee Date
Committee Date

Signatures:
Lori Lakey, CPCS Lori Lakey 2/26/20
Name Signature Date
Lucinda Place, RN [Signature] 2/26/20
Name Signature Date
Carol Salas [Signature] 3/5/2020
Name Signature Date
Richard Trogman, COO [Signature] 2/26/20
Name Signature Date
James R. West [Signature] 4-20-20
Name Signature Date

