

TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER
Paul L. Foster School of Medicine
GRADUATE MEDICAL EDUCATION
Standard Policy and/or Procedure

TITLE: Disruptive Behavior

APPROVED: 3/13/2009

REVISED:

EFFECTIVE DATE: 7/1/2009

PURPOSE: To ensure physicians-in-training conduct themselves in a professional, cooperative and appropriate manner while providing services as a member of the medical staff. 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. To provide a formal procedure for the further investigation and resolution of disruptive behavior by graduate medical education trainees that has not been appropriately modified by prior informal efforts. To provide for appropriate discipline of graduate medical education trainees only after the informal efforts and formal procedures have been unsuccessful in causing the trainee to appropriately modify behavior in compliance with this policy.

POLICY STATEMENT: Physicians-in-training shall conduct themselves in a professional and cooperative manner and shall not engage in disruptive behavior which includes but is not limited to:

- conduct that interferes with the provision of quality patient care
- conduct that constitutes harassment
- making or threatening reprisals for reporting disruptive behavior
- shouting or using vulgar or profane or abusive language
- abusive behavior towards patients, medical students, other trainees, or staff
- physical assault
- intimidating behavior
- refusal to cooperate with other members of the healthcare team

PROCEDURE:

1. A written or oral report of alleged disruptive behavior by a trainee may be submitted or made to the trainee's Program Director who shall initiate an informal investigation as deemed appropriate to identify or rule out the existence of disruptive behavior.

2. During the investigation, the Program Director will meet with the trainee to review the alleged behavior and the requirements of this policy. For such a meeting, both the Program Director and the trainee may request that other individuals be in attendance who are felt to be necessary to explain the disruptive behavior. At the completion of the investigation, the Program Director will make a determination as to whether the trainee engaged in disruptive behavior.
 - If the Program Director determines that the trainee has not engaged in disruptive behavior, he/she will advise the trainee and the person(s) to whom the allegedly disruptive behavior was directed of such determination, and will prepare a written report to be filed in the trainee's personnel file with a copy to the Office of Graduate Medical Education.
 - If the Program Director determines that the trainee has engaged in disruptive behavior, he/she will meet with the trainee to counsel the trainee concerning compliance with this policy and assist the trainee in identifying methods for structuring professional and working relationships and resolving problems without disruptive behavior.
3. Following the meeting(s) with the trainee, the Program Director may, at his/her discretion, arrange for and participate in a meeting between the trainee 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 no such meeting is arranged, the Program Director will meet with the person(s) toward whom the disruptive behavior was directed, to advise of the resolution of the matter.
4. Following the meeting(s) with the trainee 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:
 - the date and time of the questionable behavior
 - if the behavior affected or involved a patient, and the patient's name and medical record number
 - the circumstances that precipitated the behavior
 - a factual, objective description of the behavior
 - the consequences of the behavior for patient care or hospital/clinic operations
 - the dates, times and participants in any meetings with the trainee, staff, etc. about the behavior

The summary will be filed in the trainee's personnel file and a copy provided to the Office of Graduate Medical Education.
5. 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 trainee's personnel file with a copy provided to the Office of Graduate Medical Education.
6. If a second report of alleged disruptive behavior is made concerning the same trainee, the Program Director will prepare a memorandum referring the matter to the Physician Health and Rehabilitation Committee. The committee will meet with the trainee and attempt to further assist the trainee in identifying methods for structuring professional and working relationships and resolving problems without disruptive behavior. At its discretion, the committee may consult with those person(s) who were the object(s) of the disruptive behavior. Referrals for counseling with required reports to the committee may also be part of this process. Finally, this committee

will send a written report to the Program Director. The committee report shall remain in the trainee's personnel file with a copy provided to the Office of Graduate Medical Education.