

BEHAVIORAL CODE OF CONDUCT

The Washington University Department of Surgery is committed to a culture of mutual respect and safety. This Code amplifies the University's Code of Conduct and the School of Medicine's Policy Against Abusive Conduct, and reflects the Department's dedication to a positive working and learning environment in which every member of the Department, as well as those with whom we work in hospitals and other settings, are treated with professionalism and respect.

The Department is also committed to providing patient care of the highest quality, which requires that surgical teams operate cohesively in an atmosphere of cooperation and respect. Inappropriate behavior can disrupt the proper functioning of the surgical team and can create an environment in which members of the team are afraid to ask questions or make comments concerning appropriate patient care, to the detriment of the patient.

The Department considers a collegial environment that reflects mutual respect and professional behaviors essential to accomplishing its tripartite missions – patient care, research and teaching. A respectful, productive work environment is beneficial for each individual department member as well as the broader department community. Demonstration of productive, professional behaviors outlined in this Code of Conduct is necessary for career advancement within the Department of Surgery.

For all of these reasons, the Department has established this Code to address and prevent instances of inappropriate behavior.

I. Purposes

- To optimize the effectiveness and reliability of the healthcare and departmental teams.
- To enhance communication and interpersonal relations among all individuals involved in patient care, research and education.
- To improve the quality of patient care and safety.
- To reinforce an atmosphere of mutual respect for all who interact with or are associated with the Department.
- To promote conduct that:
 - Maximizes each individual's ability to practice or work safely.
 - Discourages the evolution of hostile or intimidating work environment.
 - Minimizes the disruption of the delivery of patient care, research or educational activities.

II. Scope

This Behavioral Code of Conduct applies to all Washington University Department of Surgery employees, regardless of where they work (i.e., Barnes-Jewish Hospital, St. Louis Children's Hospital, Barnes-Jewish West County Hospital, Shriner's Hospital, Veteran's Administration Hospital or other off-site locations). This Code complements the codes of conduct and other related policies at Washington University and its School of Medicine and affiliate hospitals and off-site locations.

III. Standards of Behavior

A. Leadership Expectations:

Department of Surgery faculty and administrative leaders will be expected to set an example of professional conduct and to model the behaviors expected of all faculty and staff members in the Department.

B. Expected Behaviors:

- Communication will take place in a timely fashion, involving the appropriate person(s), in an appropriate setting.
- Communications, including spoken remarks, written documents, and e-mails, will be honest and direct and conducted in a professional, constructive, respectful and efficient manner.
- Telephone communications will be respectful and professional.
- Cooperation and availability are expected of faculty, fellows, residents and staff whenever serving in a professional capacity. When individuals are paged, they will respond promptly and appropriately.
- Recognition that a variety of experience levels exists, and that tolerance for those who are learning is expected.
- Punctual for meetings and case starts

C. Examples of Unacceptable Behaviors:

- Shouting, screaming or yelling
- Threatening or violent behavior
- Profane or disrespectful language
- Criticism of performance and/or competency delivered in an inappropriate location (i.e., not in private) and/or not aimed at performance improvement
- Inappropriate arguments with patients, family, staff, and other physicians
- Sexual comments or innuendo
- Inappropriate touching, sexual or otherwise
- Racial, ethnic or discriminatory jokes/slurs
- Slamming or throwing objects in anger or disgust
- Hostile, condemning, or demeaning communications
- Other behavior demonstrating disrespect, dishonesty, intimidation, or disruption to the work environment
- Repeated failure to respond to call or pages
- Retaliation against any person who reports or addresses unacceptable behavior

D. Expected Action if Unacceptable Behavior Occurs:

In situations where unacceptable behaviors occur, the Department expects the faculty member, staff member or resident/fellow to recognize their unacceptable behavior and apologize to all parties involved. In addition, the faculty member, staff member or resident/fellow is expected to take remedial measures, on his/her own initiative, as necessary to prevent the recurrence of such unacceptable behavior.

IV. Procedure

Given the close working relationship among employees of the Department, Barnes-Jewish Hospital and St. Louis Children's Hospital, unprofessional behavior by a member of the Department may affect employees of one or more of those entities. Hospital employees may choose to report complaints or concerns regarding unprofessional behavior by a member of the Department to hospital administration, in which case the hospital will report the matter to the Department. In such circumstances, the matter will initially be addressed under the policies of the hospital. If the hospital cannot resolve the matter through informal means, the appropriate Department of Surgery Division/Section Chief will then determine the best approach for addressing the issue.

Complaints or concerns by a Department employee (or by a hospital employee who would prefer the matter to be addressed by the Department in the first instance) regarding unprofessional behavior by a Department member may be directed to a variety of resources: a supervisor or manager, WUSM Human Resources, the Executive Director, the Residency Program Director, the Faculty Ombudsperson (*See Section VII.*), the relevant Division/Section Chief or the Department Chair. The recipient of such a complaint or concern must promptly report it to the appropriate Division or Section Chief, who will then determine how to address the situation based on the particular circumstances involved. If the complaint is regarding a Division Chief it will be reported to the Department Chairman.

In recognition of the fact that situations involving improper conduct within the Department can involve a variety of circumstances and various degrees of severity, the Division/Section Chief must retain flexibility in determining how best to address the problem in each particular situation. The Chief may determine that the assistance of WUSM Human Resources or the Department's Faculty Ombudsperson would be helpful in reviewing and addressing the matter. In most instances, efforts should be made to encourage discussion between the individuals involved, with the assistance of a facilitator if appropriate. If that approach is not feasible or is unsuccessful, the Division/Section Chief or the Chairman will determine what other means are necessary to review and address the matter.

V. Remedial and Disciplinary Action

In addressing concerns of unprofessional conduct by Department members, the primary objective is to restore a collegial and safe environment for working, learning and patient care. If necessary to prevent harm to patients, students, staff or faculty, the Department may determine that an administrative suspension is warranted pending review of the matter, consistent with the Washington University Administrative Suspension Policy for faculty members.

Remedial measures are determined based on the severity of the behaviors. These measures may include, for example, sincere apologies and/or therapy/counseling. Disciplinary measures may also be warranted, including for example oral or written warnings or reprimands, reduction of compensation, reduction or loss of privileges or benefits (e.g., research/travel funding, endowed professorship), suspension, denial or delay of promotion, demotion, non-renewal of appointment or termination.

At the conclusion of the matter, the Department Chair or designate (e.g., Division/Section Chief, Executive Director) will prepare a written report summarizing the complaint or concern, the Department's review, and the outcome of the matter. The University also has reporting obligations to the National Practitioner Data Bank and must respond truthfully to credentialing questionnaires.

VI. Prohibition on Retaliation

Retaliation against any individual who reports or addresses concerns under this Code is prohibited and will not be tolerated. Allegations of retaliation will be promptly reviewed by the Division/Section Chief and the Department Chair.

VII. Faculty Ombudsperson

The Department Chair will appoint a faculty member to serve as the Department's Faculty Ombudsperson. The Faculty Ombudsperson will serve as a model of professional behavior, serve as a resource to faculty and residents, and, at the discretion of the Division/Section Chief, complete fact finding and facilitate resolution.

EFFECTIVE DATE: August 20, 2007, revised February 23, 2012