

KINGSTON GENERAL HOSPITAL

ADMINISTRATIVE POLICY MANUAL

Subject: Code of Behaviour

Number: 12-320

Prepared/Reviewed by: People Services and Organizational Effectiveness,
Medical Administration

Page: 1 of 4

Original Issue: 2008.09

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Issued by: President & Chief Executive Officer

Introduction

The Code of Behaviour (the “code”) describes the fundamental principles that guide our behaviour in the workplace that support the commitment to the mission, aim and guiding principles of Kingston General Hospital. Hospital staff is expected to fully comply with the code by conducting themselves in a professional and appropriate manner. The code identifies the behaviours expected of all staff, including appointed credentialed, and helps us create a healthy, both physical and psychological and productive work environment that contributes to Outstanding Care, Always. The principle is to treat everyone the way you would like to be treated. Each of us needs to take ownership and accountability for our behaviours.

Policy

The code applies to all staff including those who are employed, credentialed, appointed or affiliated with KGH (physicians, residents and other appointed credentialed, employees learners, volunteers, contractors and employees of contractors, and other individuals working on the hospital premises). The term manager includes Executive, Directors, Managers, Supervisors and Department Heads, and Physicians giving direction to employees. It includes any hospital staff member who is operationally accountable for any other member of hospital staff.

The resolution process contained in this policy is not intended to be used in conjunction with or as an alternative to other resolution processes such as, but not limited to, those processes in place for managing inappropriate behaviour of physicians or other credentialed staff (Physician Behaviour Policy #11-009), and processes identified in the Workplace Anti-Harassment and Discrimination Policy #12-300.

The Code of Behaviour – “Be Real”:

Hospital staff share the responsibility for creating and maintaining a positive environment for themselves, patients and their guests, by promoting and demonstrating the following behaviours:

Definitions

Respect – We treat all others with respect and dignity at all times. Respect means consideration, politeness and courtesy in what we say and write and in our actions. Even when we may disagree with the ideas or beliefs of another person, we strive to understand and accept the differences in perspective. We use the power of our words and actions to demonstrate our commitment to the hospital’s guiding principles and the KGH Way.

Equality – Everyone in our hospital is equally valued no matter what their position in our organization. We strive to create a climate of understanding and mutual respect for the dignity and worth of each person so they feel part of our organization. Diversity is valued (i.e. differences in race, nationality or ethnic origin, color, religion, age, gender, sexual orientation, marital status, family status or disability). We promote equality and the acceptance of people from diverse backgrounds, communities and cultures.

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Accountability – We are each accountable for demonstrating appropriate and professional behaviour. We take responsibility, are prepared to answer for own actions, and act with integrity and honesty. We build trust and teamwork by doing the right thing and resolving problems in which we have played a role.

Leadership – We lead by example. No matter what our role in the hospital, each of us takes the lead in modeling respectful behaviour even when those around us may not be doing the same. We have the courage to ask to be treated fairly ourselves, to stand up for others and to bring incidents of disrespectful behaviour to management's attention.

The following is a non-exhaustive list of inappropriate words, actions and inactions that are examples of disruptive behaviours.

- Profane, disrespectful, insulting, demeaning or abusive language
- Shaming others for negative outcomes
- Demeaning comments or intimidation
- Arguments with patients, family members, staff or other care providers
- Outbursts of anger
- Behaviour that others would describe as bullying
- Throwing or breaking things
- Use or threat of unwarranted physical force with patients, family members, staff or other care providers
- Working in an uncollaborative or uncooperative way with others
- Creating rigid or inflexible barriers to reasonable requests for assistance/cooperation

Procedure

Commitment to the Code

Hospital staff is expected to act upon alleged violations of the code in accordance with the resolution process. The hospital is committed to protecting those individuals who file a complaint in good faith; even if the findings are that the complaint is not substantiated. Any instances of reprisals for filing a complaint must be reported to People Services & Organizational Effectiveness (PSOE) or Medical Administration immediately.

Action taken by the hospital for violations will be determined based on the merits of each individual case. Appropriate action by the hospital may include remedial measures, discipline up to and including termination, suspension of privileges, denied or controlled access to the hospital, reporting to a professional college, or to an appropriate legal authority.

The Code is not intended to replace or interfere in any way with any individual's obligations found in professional codes and regulations.

Any complaint filed that ought to have been known to be frivolous or unsubstantiated may subject the individual to action by the hospital, including discipline up to and including termination of employment.

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Individual Accountability

It is the responsibility of each member of hospital staff to:

- 1) Read, understand and uphold the code.
- 2) Maintain behaviour that is consistent with the code.
- 3) Speak to other staff when their behaviour is inconsistent with the code. Inform the person directly involved in a professional confident manner consistent with the code.
- 4) Not disclose or discuss workplace conduct, or conflicts with or in the area of patients, their families, members of the public or guests.
- 5) Report repeated inappropriate behaviours to your direct manager.

In addition to the above, it is the responsibility of each manager to:

- 1) Make sure each staff member under their direction upholds the code.
- 2) Investigate reports of breaches of the code, and document, and initiate appropriate action in collaboration with People Services & Organizational Effectiveness (PSOE) and/or Medical Administration within appropriate time lines.
- 3) Contact People Services & Organizational Effectiveness (PSOE), via your HR Advisor, or Medical Administration when inappropriate behaviour persists and progressive discipline is required.

Resolution Process

The resolution process is primarily designed as an informal process that should be used by hospital staff who observe or experience inappropriate behaviour. Staff should feel empowered to deal with inappropriate behaviours and interpersonal conflict in a direct respectful manner.

Allegations of harassment or discrimination should be dealt with through the Anti-Harassment & Discrimination Policy #12-300, and inappropriate behaviour of physicians or other credentialed staff should be addressed by their Department Head and/or Medical Administration (see Physician Behaviour Policy #11-009). Under no circumstances will the resolution process of this policy be used in parallel or conjunction with the other existing processes or policies.

There are four stages in the resolution process. Individuals may choose to start the process at stage 1 or 2 depending on the individual circumstances of the issue. The individual who triggers the process is accountable for stage 1 and 2, while the manager is accountable for subsequent stages.

Stage 1 Individual Direct Intervention

When you experience or are party to inappropriate behaviour or interpersonal conflict, you are encouraged to speak directly to the person exhibiting the inappropriate behaviour using respectful actions and tones consistent with the code.

Stage 2 Seek Appropriate Assistance and Coaching

If the issue cannot be resolved, or if you are uncomfortable speaking with the person directly, seek the assistance of your direct manager. If the direct manager is the individual exhibiting inappropriate behaviour, you may choose to speak to either their manager or to an HR Advisor in People Services & Organizational Effectiveness (PSOE) or to the Director, Medical Affairs. They should help you design strategies to speak to the individual directly about the issue.

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Stage 3 Manager Response

If the issue remains unresolved, you are to report the issue to your direct manager. The direct manager initiates action within two working days of being notified of the inappropriate behaviour. It is expected that the direct manager will involve the manager of the person exhibiting the inappropriate behaviour; in the case of inappropriate behaviour exhibited by physicians or other credentialed staff, the Manager should engage the physician's Department Head and/or Medical Administration (see Physician Behaviour Policy #11-009). Managers will document all issues and interview any potential witnesses, if applicable. Collaboratively, the two managers will determine what needs to occur in order to resolve the issue. The managers are encouraged to seek advice from the applicable HR Advisor in PSOE. The direct manager of the person(s) behaving inappropriately is the accountable party for communication and follow-up.

Stage 4 Discipline

If the issue remains unresolved, the issue must be reported to the appropriate HR Advisor in PSOE by the managers noted above in step 3 to assess if a formal complaint will be filed and formal investigation required. The manager of the individual(s) violating the code will be accountable for determining appropriate action. If the staff member(s) is a contractor or vendor, action will be determined by an appropriate representative of hospital administration in consultation with PSOE.

Authorizing Signature

Leslee Thompson
President and Chief Executive Officer