

**HACKETTSTOWN REGIONAL MEDICAL CENTER  
ADMINISTRATIVE POLICIES  
DISRUPTIVE BEHAVIOR OF MEDICAL STAFF**

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**Effective Date: June 1996**  
**Cross Referenced: MSS003**  
**Reviewed Date:**  
**Revised Date: August 19, 2013**

**Policy No: AD043**  
**Origin: Medical Staff Office**  
**Authority: Chief Medical Officer**  
**Page: 1 of 2**

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**SCOPE**

All practitioners on the Medical/Dental staff at HRMC.

**PURPOSE**

The objective of this policy is to ensure optimum patient care by promoting a safe, cooperative, and professional healthcare environment, and to prevent or eliminate, to the extent possible, inappropriate behavior that:

- disrupts the operation of the hospital;
- affects the ability of others to do their jobs;
- creates a hostile work environment for hospital employees or other Medical Staff members;
- interferes with an individual's ability to practice competently; or
- adversely affects or impacts the community's confidence in the hospital's ability to provide quality patient care.

**DEFINITIONS**

Unacceptable, inappropriate conduct may include, but is not limited to, behavior such as the following:

- Attacks—verbal or physical—leveled at other appointees to the Medical Staff , hospital personnel, patients or patients' families that are personal, irrelevant, or beyond the bounds of appropriate, professional conduct;
- Impertinent and inappropriate comments or illustrations made in patient medical records or other official documents that impugn the quality of care in the hospital or attack particular physicians, nurses, or hospital policies;
- Behavior in committee, department, or other Medical Staff or hospital affairs that is rude, disrespectful, threatening, or otherwise unprofessional or inappropriate.

**POLICY**

It is the policy of Hackettstown Regional Medical Center that all individuals within its facilities be treated courteously, respectfully and with dignity. To achieve this goal, the hospital requires all staff, including physicians and other independent practitioners, to conduct themselves in a professional and cooperative manner in the hospital and not engage in disruptive behavior.

When a practitioner fails to conduct himself/herself appropriately, the matter shall be addressed in accordance with this policy.

Documentation of inappropriate or disruptive conduct is critical. Although there are types of behavior or performance that constitute a threat to the patient's safety or involve severe liability issues, it is ordinarily not a single incident that justifies disciplinary action, but rather a pattern of conduct or behavior.

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**PROCEDURE**

Disruptive behavior shall be documented by all individuals or members who witness such behavior. Documentation should include:

1. The date and time of the questionable behavior;
2. If the behavior affected or involved a patient in any way, the name of the patient;
3. The circumstances which precipitated the situation;
4. A description of the questionable behavior in factual, objective language;
5. The consequences, if any, of the disruptive behavior as it relates to patient care or hospital operation;
6. A record of any action taken to remedy the situation including the date, time, place, action and name(s) of those intervening.

All concerns about practitioner behavior should be submitted to the Administrative Director of Quality Management or a member of that department. The information will be logged and forwarded to the Medical Staff Office, who will distribute to the appropriate medical staff department chairperson for review.

See also Medical Staff Policy MSS003.