

## CONNECTICUT VALLEY HOSPITAL OPERATIONAL PROCEDURE MANUAL

<b>SECTION II:</b>	ORGANIZATION FOCUSED FUNCTIONS
<b>CHAPTER 8:</b>	Management of Human Resources
<b>PROCEDURE 8.17:</b>	<b>Agency Compliance Code of Conduct</b>
<b>REVISED:</b>	04/17/01; Reviewed 06/06/18
<b>Governing Body Approval:</b>	01/15/15; 07/02/18( <i>electronic vote</i> )

**PURPOSE:** The purpose of this policy is to reaffirm the commitment of Connecticut Valley Hospital (CVH) to the compliance standards and ethics provisions that govern a public health care agency. The CVH Compliance Program seeks to ensure adherence to such standards and provisions by all CVH employees. DMHAS is committed to preventing any and all fraud, waste and abuse of federal programs, state programs, and/or private health plans. The Compliance Program Code of Conduct sets forth principles and expectations that will support honest and responsible practices in furtherance of the agency's mission to provide high quality care to its clients.

### **POLICY:**

Compliance Program: Code of Conduct

All CVH employees represent the agency in their respective roles. All will abide by the Code of Conduct. The basic principles of conduct are as follows:

**BE HONEST AND ETHICAL:** Employees represent CVH. All are expected to act in a professional manner showing respect to staff, clients and the public. They are expected to adhere to high ethical standards and not exhibit disruptive or uncooperative behavior as he or she acts on behalf of the DMHAS.

**COMMUNICATION:** CVH strives to communicate effectively and clearly always striving to understand and convey information appropriately.

**COMMUNITY:** CVH actively supports partnerships and networking in association with the private-non-profit community to enhance client care and deliver high quality services regardless of ability to pay.

**CONFLICT OF INTEREST:** Employees avoid conduct that either has or has the appearance of conflict of interest in all aspects of daily duties while employed by CVH.

**DIVERSITY:** CVH respects, recognizes and supports differences among individuals and demonstrates this through the agency.

**GOVERNMENT RELATIONS AND POLITICAL ACTIVITY:** CVH employee will not make representation on behalf of CVH without official authorization. Employees will not engage in partisan political activities while on state time nor use CVH resources for the purposes of influencing a political election.

**HARASSMENT:** CVH is dedicated to foster an environment that condemns all forms of discrimination or acts of intolerance including sexual harassment, intimidation and retaliation.

**HUMAN RESOURCES:** Employees are encouraged to achieve personal and professional growth and satisfaction in their own individual careers while in pursuit of the CVH mission.

**RESPECT AND PROTECT THE CONFIDENTIALITY OF CLIENT AND COWORKER INFORMATION:** Our clients rightfully expect that their private healthcare information be handled appropriately. Confidential information relating to CVH shall be protected in accordance with the requirements of HIPAA.

**SAFE WORK ENVIRONMENT:** CVH employees are responsible for complying with all workplace safety and health regulation and will report unsafe conditions, equipment or practices to appropriate individuals.

**SUPERVISORY STAFF:** is responsible for ensuring those whom they supervise are knowledgeable about their duties and obligations.

**WORK RULES:** All CVH employees will adhere to published work rules.

#### **A. Disruptive and Uncooperative Conduct**

*Definition:* An employee's conduct is disruptive or uncooperative if it disturbs the regular operation of the agency, affects the ability of others to get their jobs done or to perform competently, interferes with the employee's own ability to practice competently, creates a negative work environment or adversely affects the community's confidence in the agency's ability to provide quality client care. An employee's conduct or behavior may be disruptive and/or uncooperative whether or not it affects the quality of client care and may consist of one incident, a series of incidents or a pattern of behavior.

For purposes of this procedure, examples of disruptive and uncooperative conduct include, but are not limited to, the following:

1. Reluctance or refusal to respond to reasonable requests for assistance and return phone calls or pages.
2. Disrespectful language, including raising one's voice, yelling or shouting in a hostile manner and use of profanity, threatening or abusive language directed at others (e.g., belittling, berating, and/or threatening another individual).
3. Intimidating tactics, such as refusal to give verbal orders or to work with certain employees, demanding to work only with certain employees or practitioners or demonstrating an uncooperative, defiant approach to problems.
4. Inappropriately criticizing others in front of clients, families or other employees.
5. Bullying and demeaning behaviors including name calling, insults and verbal attacks.
6. Refusal to provide care to certain clients or to accept assignments or responsibilities when under an obligation to do so.

7. Racial, ethnic, gender-related or socioeconomic slurs.
8. Inappropriate medical record entries concerning the quality of care being provided by the agency or another individual.
9. Inappropriate physical contact with another individual that is unwelcome, threatening or intimidating.
10. Sexual comments, innuendos and harassment.
11. Physical attacks on clients, visitors or employees, such as pushing, hitting or throwing objects.
12. Threats of violence or retribution.

These behaviors undermine team effectiveness, contribute to poor client and employee satisfaction and can compromise the safety of clients by fostering medical errors and contributing to preventable adverse outcomes.

## **PROCEDURE:**

### **B. Compliance Program: Code of Conduct**

**ABIDE BY THE CODE OF CONDUCT:** Employees who are uncertain about what the law requires should seek guidance from their Supervisor, Division/Department Director, HR Professional, Facility Compliance Officer and/or the DMHAS Compliance Officer. You should report any information about an activity that may be illegal, unethical or a breach of professional conduct to your Supervisor, Division/Department Director, HR Professional, Facility Compliance Officer and/or the DMHAS Compliance Officer. DMHAS will make every effort to maintain, within the limits of the law, the confidentiality of the identity of an individual who reports misconduct.

### **C. Implementation and Awareness**

1. The DMHAS shall communicate expectations and promote continuing awareness of, and adherence to, the Code of Conduct on the part of all employees.
2. All managers and supervisors are expected to model desirable and professional behaviors in interactions and communications with clients, employees and visitors.
3. The Agency recognizes that a number of systemic factors unique to the health care cultural environment create challenges for inter-professional communication and the development of trust among team members and is committed to assisting employees in dealing with these challenges, including:
  - a. differences in the authority, autonomy, roles and values of professionals, para-professionals and support employees in the healthcare team;
  - b. embedded medical hierarchies;
  - c. Changes in employees assignments;
  - d. Stresses of dealing with highly charged emotional situations;

4. The Agency is committed to addressing individual factors that may create additional challenges including employees' lack of interpersonal, coping or conflict management skills.
5. CVH provides opportunities for skills-based training and coaching for managers and supervisors in relationship-building and collaborative practice, including skills for giving feedback on unprofessional behavior, and conflict resolution.
6. All new employees are provided training in effective communication, conflict resolution, team building, giving feedback, boundaries and ethics during agency orientation.
7. CVH provides skill-based training to individuals and work teams, including effective communication, conflict resolution, interdisciplinary team building, giving feedback, boundaries and ethics, as requested.

**D. Reporting:**

1. All employees are encouraged to attempt to resolve interpersonal conflicts that arise in the normal course of work when they occur. If this is not possible, or the employee is uncomfortable doing so due to the nature of the behavior, an immediate report should be made to the employee's supervisor.
2. An employee who witnesses disruptive or uncooperative conduct shall promptly report the incident to his/her immediate supervisor. The report should specify:
  - a. the date and time of the questionable behavior;
  - b. a factual description of the questionable behavior;
  - c. the name of any client or client's family member who was involved in the incident, including any client or family member who witnessed the incident;
  - d. the circumstances which precipitated the incident;
  - e. the names of other witnesses to the incident;
  - f. consequences, if any, of the inappropriate conduct as it relates to client care, personnel, or agency operations; and
  - g. any actions taken to intervene in, or remedy, the incident.
3. In the event that the allegation of disruptive or uncooperative behavior involves the supervisor, the conduct should be reported to the supervisor's immediate supervisor or manager.
4. A client or visitor who witnesses an employee exhibiting disruptive or uncooperative conduct and reports the matter to an employee should be encouraged to personally document the incident in writing. If the client or visitor chooses not to provide a written report, the employee who hears of the incident is obligated to report it in accordance with this procedure.
5. Employees shall respond to clients and/or their families who are involved in or witness intimidating and/or disruptive behavior by empathizing with their concerns, thanking them for sharing their concerns and apologizing.

6. If the reported conduct impacts the safety or welfare of a client or another person in the agency or violates CVH Work Rule, further reporting is done in accordance with the procedure for *Reporting of Alleged Violation of DMHAS Work Rules*.

**E. Investigation and Corrective Action:**

1. If the reported incident impacts the safety and welfare of a client or another person in the agency, is identified as a pattern of behavior or violates CVH Work Rule, investigation and recommendation for corrective action is coordinated through DMHAS Labor Relations.
2. If the reported incident is not a CVH Work Rule violation and does not impact the safety or welfare of a client or other person in the agency, the supervisor shall interview the complainant, the employee alleged of disruptive or uncooperative conduct and if possible any witnesses. Based on the results of these interviews, the supervisor shall do one or more of the follow:
  - a. determine that no further action is warranted;
  - b. initiate constructive feedback;
  - c. consider referral for additional education for individual(s) or work group;
  - d. offer referral(s) to the Employee Wellness Program;
  - e. consider mediation session with employees to reach mutually acceptable resolution;
  - f. request employee to apologize to the complainant;
  - g. consider need to counsel the employee;
  - h. refer to DMHAS Labor Relations; or
  - i. refer to the oversight body of the Medical Staff to initiate corrective action pursuant to the Medical Staff By-Laws.
3. All interventions will be taken within the context of the Agency's commitment to the health and well-being of all employees and clients with adequate resources to support individuals whose behavior is caused or influenced by physical or mental health issues.
4. Retaliation against the complainant, or witnesses involved in an investigation, by the subject of the complaint, co-workers or supervisors will not be tolerated under any circumstances.

Failure to follow these principles of conduct may result in disciplinary action up to, and including, termination from State service.