

Policy and Procedure Manual

Diagnostic Services – Department of Radiology – Diagnostic Division

SUBJECT/TITLE: PROFESSIONAL BEHAVIOR

PURPOSE: To inform staff of their rights to be free from discrimination and abuse in the workplace. To provide guidelines for reporting and documenting unprofessional, disruptive, abusive or retaliatory behavior.

DEFINITION: None

POLICY:

Staff members have a right to expect a collegial working relationship between health care professionals to ensure effective performance and coordinated team approach to optimal patient care and safety.

PROCEDURE:

If an incident occurs, the following steps should be taken:

1. Report the violation to your immediate supervisor or to the Office of Hospital Human Resources.
2. If you decide to file a formal report, staff can report through the UIHC Office of Hospital Human Resources or through the Department of Radiology.
3. A professional conduct committee has been established for the Department of Radiology and any report of disruptive behavior may be made directly to any member of the committee or to the chairman of the department.
4. Please document the incident using forms attached to the HR policy HR-03.02, Professional Behavior Violation.
5. Form should be submitted within 72 hours to persons described in step 3 or as outlined in HR-03.02.

The following action will be taken if the form is submitted to the Department of Radiology Professional Conduct Committee:

1. The chairman of the Professional Conduct Committee will be responsible for calling a meeting of the committee to investigate the report as necessary.
2. The Professional Conduct Committee will provide a written report with their recommendations to the chairman of the Department of Radiology and appropriate action will be taken.

3. If any individual who has initiated a report believes they are subject to actual or threatened retaliatory behavior, the preceding process should be followed. **No retaliatory conduct will be tolerated.**

The University of Iowa Hospitals and Clinics

PROFESSIONAL BEHAVIOR VIOLATION REPORT

Section I: To be completed by the complainant or the immediate supervisor within 72 hours (3 days) of the incident.

1. Date of Report: _____
2. Occurrence Date: _____ Time: _____ Location of Incident: _____
3. Complainant's Name: _____ Job Title: _____ Telephone: _____
4. Name of Accused: _____ Job Title: _____ Telephone: _____
5. Relationship of suspect to victim if known:
 Supervisor Co-worker Faculty Other

6. Victim's description of incident:

7. Circumstances that precipitated the behavior:

8. Effects of the behavior: _____

9. Witness(es) (name and title): _____

