# **Appendix B: Procedure for Behaviour at Work Concerns – Medical Staff**

QHC will follow a staged approach to dealing with issues and complaints related Behaviour at Work. This means a progressive approach to managing disruptive behaviour with the intention of remediation. Remedial support with respect to modifying behaviours by providing links to professional resources or the development of a health plan will be emphasized and offered.

The following flow chart outlines the process to respond to a complaint, ideally through direct communication between the two individuals involved. When the complaint cannot be resolved through direct communications, is persistent or more serious in nature, there are three levels to a formal complaint process as outlined in the flow chart.

# **Formal Complaint Levels**

**Level 1**: The kinds of behaviours that might require a Level 1 intervention are:

- Refusal to follow hospital policies or procedures that are not immediately critical to patient well-being
- Inappropriate language
- Threats
- Angry outburst (e.g., yelling)
- Waste of hospital resources

**Level 2:** Level 2 intervention is required for behaviour that is of moderate severity or when Stage One behaviour has been repeated despite intervention. This could include:

- Breaking or throwing things
- Sexualized behaviour in the workplace
- A persistent pattern of Stage One behaviour
- A persistent unwillingness to respond to concerns about his/her behaviour
- Lack of cooperation in the Stage One intervention process

**Level 3:** A Level 3 intervention is required for behaviour that has continued past stage two despite appropriate interventions and where one sees a persistent pattern of behaviour with increasing severity or a behaviour of such an egregious nature that there is concern about self harm or harm to others.

If the medical staff member does not want to participate in the QHC Behaviour at Work resolution process, the issue will be forwarded to the Medical Advisory Committee for action pursuant to the Professional Staff Bylaws.

At every stage, thorough documentation regarding the behaviour and activities pursuant to the reports will be created by the Department Chief and retained in Medical Affairs. At every stage, the medical staff member shall be offered the opportunity to bring a peer or other support with them to any meetings related to their behaviour at work.

### Process to Address Behaviour at Work Concerns Involving Professional Staff

### **Stage 1: Direct Communications**

Individual who has concerns attempts to resolve the issue by communicating directly with the physician, seeking input/support from the Manager/Chief if needed to help the team member feel more comfortable having the conversation.



### **Stage 2: Formal Complaint**

If issue remains unresolved, or when the individual is unable to communicate directly to the physician, a written complaint is submitted to the Manager or Chief outlining the nature of the incident.

### Level 1 formal complaint

Occurs for the first time and is low in severity

## Level 2 formal complaint

Egregious behaviour or persistent level 1 behaviour

### Level 3 formal complaint

Risk of harm to patients or staff, or persistent level 2 behavior

# Level 1 Response

### Department Chief:

- Confirms facts of report
- Meets with physician to discuss behaviour (by phone if necessary)
- In collaboration with physician, determines response to the complainant to help bring resolution to the concern
- Documents summary of discussion and follow-up, submitted to Medical Affairs using the "Coaching & Counselling" template
- Monitors behavior and provides ongoing feedback

# Behavior continues? No Yes

### Level 2 Response

Department Chief will work with Medical Affairs to:

- Seek guidance from HR/Medical Affairs to determine an appropriate process to confirm facts of report, including investigation as appropriate
- Inform the physician of the complaint. Physician can bring support person to this meeting
- Meet in person with the physician, obtain assessment of cause and discuss inappropriateness of behaviour
- Obtain commitment to change/remediation activities, with follow-up in writing
- Ensure complainant knows concerns have been addressed using the "Memo to Complainant" template (HR Consultant can assist)
- Document summary of discussion and follow-up, submitted to Medical Affairs using the "Investigation Report" template
- Monitor behavior and provide ongoing feedback

# Behavior continues? No Yes

### Level 3 Response

Chief of Staff to work with Department Chief to:

- Confirm facts of report through appropriate investigation HR Consultant can guide and assist
- Inform physician of the complaint. Physician can bring support person to this
  meeting.
- Seek legal counsel as needed.
- Attempt resolution through consideration of options (e.g., OMA Physician Health Program, other training, suspension, etc.)
- Escalate to MAC as required, with MAC recommending the course of action
- Document facts and findings using 'Investigation Report Template'
- Consider obligation to notify CPSO
- Ensure ongoing monitoring and follow-up of behaviour

Ongoing monitoring to ensure behavior does not continue

Suspension/restriction/regulatory action