



## Clinical Staff Executive Committee

### MEDICAL CENTER POLICY NO. 0291

- A. SUBJECT: Clinical Staff Code of Conduct
- B. EFFECTIVE DATE: January 1, 2014 (Rvd)
- C. POLICY:

Each member of the Clinical Staff at the University of Virginia Medical Center is responsible for cultivating and sustaining a healthcare environment which encourages quality patient care, civility and a collaborative spirit. These responsibilities require that each member of the Clinical Staff be held to the highest personal and professional standards, with adherence to the University of Virginia Medical Center's Core Values of:

- **Respect:** To respect the dignity of every person.
- **Integrity:** To be honest, fair and trustworthy.
- **Stewardship:** To manage resources responsibly.
- **Excellence:** To work at the highest level of performance, with a commitment to continuous improvement.

Consistent with these responsibilities, expectations, and values, this policy sets forth the standards for competencies in medical knowledge, clinical practice, interpersonal relationships and communication skills, practice-based learning and improvement, professionalism, systems-based practice, and relationships within the Medical Center, the University of Virginia Physicians Group, the Schools of Medicine and Nursing, and the community at large. This policy is intended to supplement other Medical Center's policies (referenced below) which outline responses to and management of unacceptable personal and professional conduct by members of the Clinical Staff.

#### D. PROCEDURE

1. Each member of the Clinical Staff is expected to adhere to the following standards of personal and professional conduct and competency:
  - a. **Medical Knowledge and Procedural Skill**
    - i. Maintain Board Certification as required by [Medical Center Policy No. 0221 "Board Certification Requirements for Medical Center Physicians"](#);

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- ii. Complete the minimum amount of CME per license renewal cycle as required by the Virginia Board of Medicine;
- iii. Demonstrate knowledge of best medical practice based on relevant specialty-specific practice guidelines;
- iv. Demonstrate knowledge of evolving biomedical, clinical and social sciences;
- v. Demonstrate procedural competency, using volume indicators, appropriateness reviews, and outcome data;
- vi. Demonstrate an investigative approach to clinical problem solving;
- vii. Apply the knowledge and competency described above to patient care and education.

**b. *Clinical Practice***

- i. Provide the highest quality patient care compassionately, appropriately, and effectively so as to promote health, prevention of illness, diagnosis and treatment of disease, and care at the end of life;
- ii. Meet patients' healthcare needs, commensurate with the training, skill and qualifications of the physician; refer patients for specialty care as appropriate;
- iii. Respond promptly and professionally when called upon by other practitioners to provide appropriate consultation or clinical service;
- iv. Respect patient confidentiality and privacy at all times, and follow policies and regulations governing the release of information (see, for example, [Medical Center Policies 0021 "Confidentiality of Patient Information"](#); [0084 "Health Information Request for Non Patient Care Usage"](#); [0092 "Release of Patient's Protected Health Information"](#); [0201 "Patient Identification"](#); [0163 "Access to Electronic Medical Records and Institutional Computer Systems"](#); [0245 "Minimum Necessary Use and Disclosure of Protected Health Information;"](#) [School of Medicine Policy No. 1.430 "Required HIPAA Privacy Training"](#); [School of Medicine Policy No. 1.431 "HIPAA Violations Sanctions"](#));
- v. Seek and obtain appropriate consultations as required in [Medical Center Policy No. 0090 "Consultations"](#);
- vi. Arrange for appropriate coverage when necessary. Document the hand-off of care with necessary medical documentation to assure the continuity of high quality care;
- vii. Disclose any potential conflict of interest and, as necessary, cooperate in resolving any such conflict in accordance with Medical Center policy, University policy, and state law ([Medical Center Policy No. 0008 "Gifts, Gratuities and Interactions with Vendors"](#)); [School of Medicine Policy 2.001 "Policy on Conflict of Interest and Conflict of Commitment"](#));

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- viii. When transferring care of a patient to another physician, provide prompt, pertinent and appropriate medical documentation to assure continuity of care.

**c. *Interpersonal Relationships and Communications***

- i. Treat patients, referring physicians, clinical staff members, allied health professionals, GME trainees, students, and Medical Center employees with respect, dignity and courtesy;
- ii. Demonstrate the ability to work honestly, effectively and collegially with other members of the multidisciplinary healthcare team;
- iii. Respond promptly, courteously, and appropriately to requests from patients and staff;
- iv. Demonstrate the ability to create and sustain therapeutic relationships with patients;
- v. Use conflict management skills, together with respectful and courteous verbal communication, to effectively manage disagreements among individuals working within the Medical Center (See also [Medical Center Policy No. 0283 “Behavioral Code of Conduct”](#)).

**d. *Practice-based Learning and Improvements***

- i. Maintain the integrity and quality of job performance;
- ii. Obtain and use information about one’s own patient population, and the larger population of patients from which they are drawn, to improve practice outcomes;
- iii. Support the efforts of the Medical Center’s Quality and Performance Improvement initiatives. Participate in case and clinical outcome reviews and quality assurance procedures ([Medical Center Policy No. 0132 “Quality Reporting Process”](#));
- iv. Develop and implement strategies to manage personal stress and promote professional growth and personal well-being;
- v. Facilitate the education of students, GME trainees and Medical Center employees.

**e. *Professionalism***

- i. Demonstrate commitment to continuous professional development;
- ii. Demonstrate responsiveness to the needs of patients, placing their interests above one’s own;
- iii. Provide proper and timely care to patients;
- iv. Demonstrate a commitment to ethical principles pertaining to the provision or withholding of clinical care;

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- v. Provide informed patient consent as required by [Medical Center Policies 0024 “Informed Decision-making”](#); [0079 “Do Not Resuscitate Orders”](#); and [0142 “Advance Directives”](#);
- vi. Refrain from treating patients when impaired by illness, alcohol or drugs;
- vii. Demonstrate commitment to professional self-regulation by assisting the organization in identifying colleagues who may be professionally impaired or disruptive, or potentially a danger to their patients, themselves, or others due to mental or physical illness, or use/abuse of alcohol or drugs. Relevant processes and procedures are set forth in this policy and in [Medical Center Policy No. 0281 “Health Screenings and Maintenance for Clinical Staff Members”](#), [0262 “Standards for Professional Behavior”](#), [0284 “Alcohol/Drug Free Workplace”](#), and in the Clinical Staff Bylaws;
- viii. Demonstrate commitment to a culture where all healthcare professionals cooperate and collaborate in using best practices to achieve high quality patient outcomes;
- ix. Demonstrate commitment to a culture that encourages health care professionals to report questionable clinical practices, incidents, or outcomes, as appropriate to their clinical responsibilities, without fear of retaliation or retribution;
- x. Refrain from any outside activities that interfere with one’s ability to properly and responsibly perform his/her duties to the Medical Center;
- xi. Refrain from unacceptable behaviors. Such behaviors may include, but are not limited to, the following examples (see also [Medical Center Policy No. 0262 “Standards for Professional Behavior”](#) and the [Virginia Board of Medicine’s Standards of Professional Conduct](#)):
  - a) Sexual harassment, including the use of sexual innuendo or suggestive language;
  - b) Threatening or abusive language, profanity or language that is perceived by others to be demeaning, berating, rude, loud or offensive;
  - c) Threats of violence, retribution or financial harm;
  - d) Racial or ethnic slurs;
  - e) Sarcasm or cynicism directed as a personal attack on others;
  - f) Shouting or other actions that are reasonably felt by others to represent intimidation or harassment;
  - g) Physically or verbally threatening or slandering other persons, including patients, other physicians or health care professionals;
  - h) Publicly humiliating clinical staff, Medical Center employees, GME trainees or students for negative outcomes;

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- i) Publicly criticizing clinical staff, medical center employees, GME trainees or students in an inappropriate manner or venue;
- j) Maintaining romantic and/or sexual relationships with current or former patients (or spouses, partners, children or parents of current or former patients) when the relationship results from exploitation of trust, knowledge or influence derived from the professional relationship;
- k) Maintaining romantic and/or sexual relationships with Graduate Medical Trainees or other persons supervised by the Clinical Staff Member when the relationship results from exploitation of trust, knowledge or influence derived from the supervisory relationship;
- l) Unauthorized access to confidential patient or staff information with disclosure of such information to another person;
- m) Refusal to return phone calls, pages or other messages from other providers and staff;
- n) Comments or behavior that are untruthful or directed as a personal attack on the clinical practice of others;
- o) Throwing instruments, charts, or other items;
- p) Actual or threatened inappropriate physical contact;
- q) Behaviors perceived to be a pattern of disruptive behavior or interaction that could interfere with patient care or adversely impact the quality of care rendered to a patient.

**f. *Systems-based Practice***

- i. Demonstrate an understanding of the contexts and systems in which healthcare is provided, and apply this knowledge to improve and optimize healthcare;
- ii. Promote team-based collaboration;
- iii. Maintain complete and thorough records of patient information that fulfill the requirements described in Medical Center rules, regulations, policies and bylaws, accreditation standards, and applicable laws ([Medical Center Policies No. 0094 “Documentation of Patient Care \(Electronic Medical Record\)”](#) and [0109 “Medical Orders for Patient Care”](#));
- iv. Report medical errors to the appropriate managers or Medical Center departments and participate in implementation of corrective action plans, ([Medical Center Policy No. 0132 “The Quality Reporting Process”](#));
- v. Create and promote an environment of care where all clinicians can strive for best practice.

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**g. *Relationships with University of Virginia Medical Center, University of Virginia Physicians Group and the School of Medicine***

- i. Abide by applicable rules, regulations, policies and bylaws of the Medical Center, University of Virginia Physicians Group, and School of Medicine, and address any dissatisfaction with policies and procedures through appropriate channels;
- ii. Diligently serve on Hospital and Clinical Staff committees, devoting the time and energy required to fulfill the obligations of the position;
- iii. Report all violations of Medical Center safety policies and procedures, laws, regulations, or standards to the appropriate manager or supervisor, or, as may be necessary, to the Office of Quality and Performance Improvement and/or the Corporate Compliance and Privacy Office;
- iv. Use assets wisely. Be a responsible steward of material and human assets to achieve excellence and innovation in the care of patients, the training of healthcare professionals, and the creation and sharing of health knowledge across professional disciplines;
- v. Encourage and support Medical Center employees in developing their individual skills, talents, and job performance.

**2. Managing Issues, Concerns or Complaints about Conduct or Competency**

Issues, concerns, or complaints regarding the personal and/or professional behavior or competency of a Member of the Clinical Staff shall be managed whenever possible with early collegial intervention. Violations of this code of conduct policy shall be managed in accordance with [Medical Center Policies 0279 "Professional Practice Evaluations for Members of the Clinical Staff"](#), and [0262 "Standards for Professional Behavior"](#).

SIGNATURE:



Robert S. Gibson, M.D., President, Clinical Staff



R. Edward Howell, CEO, UVA Medical Center

12/18/13

DATE:

Medical Center Policy No. 0291 (Rvd)  
 Approved December 2010  
 Reviewed December 2013  
 Approved by Credentials Committee  
 Approved by Clinical Staff Executive Committee