

\\Management System\Tillsonburg District Memorial Hospital\Administrative Services\Human Resources\Policies Procedures\

Subject: Code of Conduct	
Distribution:	Document # 24879 Version: Current 1.0
	Last Modified Date: 2012-10-25 9:30:25 AM
	Authorized by: Lynda VanDeMaele

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POLICY

Tillsonburg District Memorial Hospital (TDMH) supports a culture which upholds the Hospital's Mission, Vision and Values and promotes a caring environment for patients, team members, professional staff, physicians, volunteers, Board Members, students and visitors. Built on our commitment to *Caring, Sharing and Working Together*, our Code of Conduct describes the fundamental principles that guide our behaviours and set performance standards.

PROCEDURE

1.1 Principles

This policy is hospital-wide, and pertains to all team members, professional staff, physicians, volunteers, board members, students, visitors and contract staff.

The guiding principles of the TDMH Code of Conduct are outlined in the acronym below:

- C - Create and foster a collaborative and caring work environment.**
- O - Offer suggestions and concerns with discretion and tact.**
- N - Nurture open and truthful communication.**
- D - Demonstrate compassion and genuine concern for others.**
- U - Understand and respect the rights of others and protect privileged information.**
- C – Consider and recognize the opinions and contributions of others.**
- T – Treat everyone with dignity and respect.**

1.2 Accountabilities

For everyone at TDMH

All individuals at TDMH are expected to maintain a safe and professional work environment. As such, each individual takes responsibility and is accountable for his/her behaviour.

It is the responsibility of each team member of TDMH to:

- (a) Acknowledge and uphold the TDMH Code of Conduct.
- (b) Ensure that his/her attitudes and behaviours are consistent with the TDMH Code of Conduct.
- (c) Speak to colleagues when their behaviour is inconsistent with the TDMH Code of Conduct and address issues directly with the person in a confidential, positive and professional manner.
- (d) Do not discuss workplace conduct, concerns and conflicts with or in front of patients, their families, friends, community partners and team members.
- (e) Report continued inappropriate behaviours to your Leader.

For the TDMH immediate supervisor:

Leaders share responsibility with team members to support a safe and professional work environment.

It is the responsibility of each TDMH Leader to:

- (a) Ensure that each individual under his/her direction upholds and follows the TDMH Code of Conduct.
- (b) Investigate reports of violations of the TDMH Code of Conduct, document and initiate appropriate action within 3 working days of becoming aware of the inappropriate behaviour. Appropriate action may include referral to counseling

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(e.g. – Family Services Employee Assistance Program, Employee Health), coaching and mediation).

- (c) Contact Human Resources when inappropriate behaviour persists and progressive disciplinary action is required.

2.0 Procedure

The TDMH Code of Conduct is a protocol for everyone at TDMH. Each individual is accountable for adhering to the protocol and should always attempt to deal with issues immediately and professionally. Any individual who experiences or observes inappropriate behaviour in the workplace is empowered to address any behaviours that do not align with the TDMH Code of Conduct.

2.1 Process for Dealing with Inappropriate Behaviour

Definition of Inappropriate Behaviour – Conducting oneself in a way that is undesirable, unsuitable, improper or incorrect. Inappropriate behaviour can be a subjective interpretation based on how an individual expects to be treated. Inappropriate behaviour may be written, verbal or physical in nature.

Examples of inappropriate behaviour or conduct include:

- Comments that are insulting, hurtful, disrespectful or rude
- Threatening or abusive language directed at an individual
- Degrading or demeaning comments
- Profanity or similar offensive language
- Physical behaviour with another individual that is perceived as threatening, intimidating or unwelcome
- Body language that is irritating or offensive
- Discussing workplace conduct, concerns and conflicts in front of others

If the inappropriate behaviour and/or conduct involves any of the following:

- Assault
- Criminal conduct

Contact: 1. Ontario Provincial Police (OPP) Immediately
2. Notify Executive Leader or Clinical Leader

The process for responding to inappropriate behaviour involves five stages. It may not be necessary to move through all five of the stages, as this will depend on the individuals involved and the situation. An individual may choose to begin the process as Stage 1, 2 or 3 depending on the circumstances of his/her situation. In certain cases, for example, if the situation is more serious in nature, it may be necessary to move directly to Stage 4 or 5. Communicating with individuals about inappropriate behaviour will be done face-to-face. The recommended process for responding to inappropriate behaviour is outlined below:

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Stage 1 – Direct Communication

The individual attempts to resolve the issue by communicating directly with the person in a confidential and professional manner. This should be done face-to-face but if this is not possible, it may be done by telephone. If the individual is not comfortable communicating directly with the person about the behaviour, or if the issues cannot be resolved, assistance may be needed.

Stage 2 – Seek Assistance

The individual seeks out a peer or team member that he/she trusts, to develop strategies, in confidence for speaking with the person about his/her behaviour.

Stage 3 – Seek Coaching from Leader

The individual seeks assistance from his/her Leader. Coaching is provided to assist the individual in developing an approach for speaking with the person about his/her behaviour. If the person that the individual has an issue with is his/her own Leader, then the individual should seek assistance from the individual who supervises his/her Leader.

In order to promote a healthy work environment, if the issue remains unresolved, it is important to proceed to the next stage.

Stage 4 – Leader Response

At this stage of the process the responsibility for resolution shifts from the individual to the Leader. In cases involving health care professionals, this may occur in conjunction with the CEO, Senior Executive Leader/Chief Nursing Executive, Senior Executive Leader/Chief Financial Officer or Chief of Staff. If the person that the individual has an issue with is his/her own Leader, then the individual should seek assistance from the individual who supervises his/her Leader. The Leader initiates appropriate action within 3 working days of being notified of the inappropriate behaviour. The Leader meets with the individuals involved and any witnesses to gather the facts. If the individuals involved report to more than one Leader, the Leaders work together to determine how to resolve the issues.

The Leader documents the investigation process, which includes statements from the individuals and the witnesses. The Leader determines what needs to occur in order to resolve the issue and outlines what is expected of the individuals. The Leader may decide to intervene using development strategies, negotiation and/or mediation or referral to the Employee and Family Assistance Program. The Leader is responsible for ongoing communication with all parties involved regarding the resolution process.

Stage 5 – Progressive Discipline

Before taking any steps towards progressive discipline, it is the responsibility of the Leader to consult with Human Resources and the Senior Executive Leader/Chief Nursing Executive regarding team members or the Chief of Staff regarding physicians.

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This policy does not interfere with the rights of individuals to seek alternative processes either through their union, Human Resources Department, Risk Management, externally through the Ontario Human Rights Commission, through the police department and/or courts.

[Code of Conduct Agreement Form](#)

[Code of Conduct Resolution Process](#)

References: London Health Science Centre (LHSC) Code of Conduct,
 West Haldimand General Hospital Code of Conduct

Approved by: TDMH Board of Directors – September 25, 2012