UW Medicine Policy on Professional Conduct

Questions, suggestions, and concerns regarding this policy are welcomed, and should be directed to the UW Medicine Continuous Professionalism Improvement Committee (blackley@uw.edu).

Policy

UW Medicine is committed to high standards of professionalism in patient care, research and education among our faculty, staff, residents, fellows, and students. Professionalism is integral to our mission of improving health, and includes demonstrating excellence, respect, integrity, compassion, altruism, and accountability in all endeavors and creating an environment supportive of diversity in ideas, perspectives and experiences. All individuals in our UW Medicine community are responsible for creating an inclusive environment where every person is valued and honored.

All members of the UW Medicine community are expected to conduct themselves in a professional and ethical manner with colleagues, patients, and the public. Leaders in our community are expected to model, promote, and advocate for a strong and visible culture of professionalism.

Values and Principles

Excellence represents dedication to continuous improvement of quality of care, research inquiry, and teaching effectiveness. Excellence also includes promoting and cultivating an institutional culture of inclusion, equity, and diversity in all its forms. Pursuit of excellence should be accompanied by respect, integrity, compassion, altruism, and accountability.

Diversity is integral to excellence, and refers to the variety of personal experiences, values, and worldviews that arise from differences of culture and circumstance. Such differences include race, ethnicity, gender, age, religion, language, abilities/disabilities, sexual orientation, gender identity and expression, socioeconomic status, and geographic region, and more. The aims of diversity are to broaden and deepen our experience in all areas of learning and work that support our mission of improving the health of the public. For the aims of diversity to be fully realized, the institutional culture must be one of inclusion, where all individuals are valued and honored, and resources and opportunity are distributed equitably and without undue bias.

Respect includes actions that recognize the inherent dignity and value of all persons and that seek to understand the perspectives of others. Working to achieve effective communication and acknowledging power differentials (formal or informal) are key to fostering mutual respect and trust.

Integrity refers to honesty in all interactions and upholding high moral and ethical standards in all endeavors.

Compassion is recognition of suffering and taking action to help. Compassion must also extend to self, recognizing that self-care is a key element of personal wellness.
Altruism reflects a commitment to advocate for the needs and interests of others.

Accountability refers to accepting responsibility for one’s behavior and striving to uphold professional standards, as well as acknowledging that—as members of a larger community—we are answerable to each other for our conduct and outcomes. Accountability includes working to recognize and address one’s own biases (conscious and unconscious), and mitigating their impact on behavior as providers of care, teachers, scientists and learners. Accountability includes assisting UW Medicine in recognizing and addressing institutional racism and other forms of bias and taking action that demonstrates intolerance of discrimination, in contrast to condoning or perpetuating discrimination through inaction.

Professionalism in clinical practice settings includes adherence to the UW Medicine Service Culture Guidelines and includes, but is not limited to safeguarding the privacy and confidentiality of patient information, communicating effectively in an interprofessional environment, observing established standards for patient safety and timely completion of medical records, participating in quality improvement initiatives, exercising cultural humility, reporting errors, and following rules for billing and compliance.

Professionalism in the conduct of research includes, but is not limited to fostering a collaborative environment, employing collegial, non-threatening and fair treatment of research team members, which include faculty, staff, fellows and students. Research should be undertaken and conducted in a manner that is inclusive of diverse opinions, ideas and populations.

Professionalism in education includes, but is not limited to respect for diverse experiences and perspectives, modeling community and civil discourse, a commitment to the highest standards of scholarship, innovation in teaching methods, and leadership through modeling of life-long learning.

Professionalism in administration includes, but is not limited to respect for the culture and values of the academy, commitment to creation of collegial partnerships with co-workers one is responsible for and responsible to, support of the work of collaborative teams, recognition of the needs of patients and our professional community, and dedication to the mission of the institution.

Ethics in decision-making and relationships means establishing safeguards to ensure that decisions are free of improper bias or influence, guaranteeing that personal and professional relationships do not present a conflict that threatens (or is perceived to threaten) the integrity of the decision, and removing oneself from decisions where fairness may be compromised, especially decisions made in the context of supervisory relationships.

Ethical business practices means the wise and fair use of resources and practices that comply with laws, regulations, and policies governing conflicts of interest, sponsored research, and the delivery of and reimbursement for healthcare services.

Ethical research practices means practicing intellectual integrity, ensuring the welfare of human and animal research subjects, exercising diligent and unbiased acquisition, evaluation, and
reporting of scientific information, and adhering to university regulations for the conduct of research.

*Unprofessional behavior* means behavior that violates laws or rules regarding discrimination and harassment, violates rules of professional ethics (including professionalism in clinical, educational, research or business practices), or is disrespectful, demeaning, retaliatory, or disruptive. Bullying is unprofessional behavior that misuses power to control or harm others.

*Rules of professional ethics* means the adoption of ethical standards that have been established by external professional societies and associations (e.g., The Joint Commission, American Association of Medical Colleges, National Institutes of Health) or by UW Medicine entities for various professions (e.g., physicians, nurses).

*Discrimination and harassment* is as defined in University of Washington (UW) Executive Order 31. As of the effective date of this policy, this includes discrimination or harassment on the basis of race, color, creed, religion, national origin, citizenship, sex, age, marital status, sexual orientation, gender identity or expression, disability, or military status.

*Disrespectful, retaliatory, or disruptive behavior* includes, but is not limited to behavior that in the view of reasonable people has a negative impact on the integrity of the healthcare or research team, the care of patients, the education of students or trainees, or the conduct of research, such as:

- Physical assault or other uninvited or inappropriate physical contact;
- Shouts, profane or offensive language;
- Degrading or demeaning comments;
- Discriminatory or harassing behavior or language (as defined above);
- Retaliation in response to a person raising concerns about a behavior that may violate laws or policies (such as discrimination), or present a threat to safety or security
- Threats or similar intimidating behavior, as reasonably perceived by the recipient;
- Exploiting, neglecting or overworking those in subordinate positions;
- Unreasonable refusal to cooperate with others in carrying out assigned responsibilities;
- Failure to respond to inquiries within a reasonable time frame; and
- Obstruction of established operational goals, beyond what would be considered respectful dissent.

**Values in Action / Procedures**

*Engagement of our community to advance professional values.* All members of our community should seek opportunities to acknowledge, promote, and celebrate professionalism in our environment. Leaders in our community are especially accountable for creating a culture of professionalism in their own units by exhibiting professionalism, recognizing individuals and teams that exhibit best practices and demonstrate core principles, finding opportunities to convey the importance of professionalism in our shared work, and making time for collaborative, inclusive dialogue around challenging issues. To ensure that the professionalism standards outlined in this policy are upheld, those aware of the behavior are responsible for raising their
concerns within a reasonable time frame so that the behavior can be addressed and remediated as appropriate.

Incorporating the principles of professionalism into applicable documents. UW Medicine units should incorporate these principles as appropriate into their policies, procedures, and practices. Professionalism expectations should be included in offer letters, merit evaluations and promotion criteria. Expectations and any available measures of professional behavior should also be specifically highlighted in annual performance reviews, as well as in documents that relate to situations where the evaluator becomes aware of acts of unprofessional behavior.

Supervisor responsibility. Supervisors, including health care and research team leaders and teachers, are expected to exhibit professionalism, set clear expectations, and manage performance of their subordinates in accordance with these standards through regular communication and timely performance reviews. Supervisors must confront unprofessional behavior effectively and engage in conversations that may be difficult or uncomfortable. In these challenging situations, supervisors should draw on existing resources including their own supervisors, administrative leadership, and human resources offices. Supervisors are expected to respect diversity of opinions and will not retaliate against subordinates who offer their respectful, dissenting views. Finally, supervisors are expected to address professionalism concerns and deficiencies through routine performance evaluations, counseling, discipline, or other action as appropriate in accordance with policies and procedures within the UW, UW Medicine, affiliates and partner entities.

Mentor responsibility. Mentor relationships can occur formally and informally, including but not limited to principal investigator to post-doctoral fellow, program advisor to graduate student, faculty to student or trainee, or faculty to faculty. Mentors bear responsibility for sharing knowledge and expertise with mentees, as well as creating shared expectations around professionalism. Mentors will look for ways to counterbalance the inherent power differential found in a mentoring relationship and will promote the welfare of mentees in ways that increase mentee development, engagement and empowerment.

For individuals covered by collective bargaining agreements, UW Medicine managers and supervisors are expected to apply this policy in a manner consistent with the principles of just cause, as well as any other applicable requirements of the labor agreements.

For hospitals and clinics that are part of UW Medicine, this policy is intended to define “professionalism” at the UW Medicine level in accordance with The Joint Commission standards. Under this policy, “desirable behavior” means demonstrating professionalism as described above and “disruptive behavior” means engaging in conduct that is unprofessional as described above. The hospitals and clinics will have policies and practices implementing these principles and may further define expectations regarding appropriate conduct.

Mechanisms for addressing unprofessional behavior. UW Medicine does not condone or tolerate unprofessional behavior, and individuals who engage in such behavior may be subject to disciplinary action up to and including termination. Supervisors are expected to address unprofessional behavior as described above. Members of our community at all levels may also raise concerns and/or ask for support through a number of avenues depending on the particular circumstances. The many avenues of redress outlined below are meant to provide viable options
that can be pursued alone or in conjunction with other options. Members of our community seeking to raise concerns may seek counsel from within the member’s administrative structure, supervisory chain of command or one of the offices responsible for addressing conduct in violation of UW policies.

Avenues to raise concerns include but are not limited to the following: (1) informal and collegial one-on-one resolution; (2) bringing the issue to a supervisor or the next highest individual of authority, if the concerns involve the supervisor; (3) following applicable grievance procedures under collective bargaining agreements; (4) contacting Human Resources or Academic Human Resources; (5) contacting the University Complaint Investigation and Resolution Office (UCIRO); (6) contacting the University Title IX office; and/or (7) contacting the University of Washington Ombud. The UW Safe Campus office is also available as a resource in situations involving non-urgent safety concerns.

For certain types of concerns, a particular avenue may be most appropriate, or even required by UW policy. For example, Administrative Policy Statement 46.3 (Resolution of Complaints Against University Employees), contains information and processes for addressing complaints about employees, including violations of the University’s non-discrimination policy (http://www.washington.edu/admin/rules/policies/APS/46.03.html) and other concerns. Detailed administrative or contractual processes also exist to address specific types of complaints including classified and professional staff complaints, whistleblower complaints, and patient complaints. There are existing processes for addressing student conduct issues outlined in the MD Program Handbook, and processes for addressing faculty members’ rights to resolve or adjudicate issues under the Faculty Code. Individuals should contact their supervisor for help in determining whether a particular behavior is covered by an established procedure.

This Policy was implemented May 5, 2009, revised in November 2016 and October 2017 by the Continuous Professionalism Improvement (CPI) Committee, with engagement and feedback from UW School of Medicine elected Faculty Councils and Vice Deans, the Medical School Executive Committee (MSEC) and the UW Medicine Strategic Leadership Council. The CPI committee reviews the Policy annually, with formal renewal when changes are needed. Please send feedback regarding this policy to the Chair of the CPI Committee (Molly Blackley Jackson, MD - blackley@uw.edu).

Approved by,

Paul G. Ramsey, M.D.
CEO, UW Medicine
Executive Vice President for Medical Affairs and
Dean of the School of Medicine,
University of Washington