

Policy No:

6.39

Page Number:

1 of 4

Effective Date: Board Motion No: 01/10 10.1-07

TITLE:

CONFLICT RESOLUTION IN THE WORKPLACE

PURPOSE:

To define a process that identifies, reviews, and resolves conflicts between individuals; and supports optimum patient care by achieving a safe, cooperative, and professional environment that promotes collaboration, teamwork, mutual

respect, and high standards of conduct in the workplace.

POLICY STATEMENT:

All individuals working in Harris County Hospital District (HCHD) facilities will be treated with courtesy, dignity, and respect in accordance with HCHD Service First Standards of Behavior (See Attachment A); and are encouraged to resolve conflict at the lowest level possible by using all available resources and conflict management skills.

POLICY ELABORATION:

This policy provides the process for intervention and support; and addresses interactions between employees and healthcare providers who must conduct themselves in a manner that enables each individual to perform his or her duties in accordance with HCHD policies and procedures as well as applicable state and federal laws and regulations.

I. **DEFINITIONS:**

- Α. INAPPROPRIATE CONDUCT: Behavior that is not acceptable in the workplace. Inappropriate conduct includes, but is not limited to threatening, violent, or disruptive behavior.
 - DISRUPTIVE BEHAVIOR: Activities that negatively affect interactions within the 1. workplace. Examples of disruptive behaviors include, but are not limited, to the following:
 - Conflicts, verbal abuse, or poor relationship with patients, co-workers, a. supervisors, or others;
 - Reluctance or refusal to answer questions, return phone calls, or pages; b.
 - Condescending or disrespectful language or voice when responding to c. questions, profanity;
 - d. Outbursts of rage or anger;
 - Offensive, inappropriate, or crude comments, jokes, or paraphernalia; e.



Policy No:

6.39

Page Number:

2 of 4

Effective Date: Board Motion No: 01/10 10.1-07

f. Derogatory cartoons, pictures, posters, screensavers, text messages, or emails;

g. Prolonged stares or leers;

h. Unwelcome talk about any individual's personal life;

i. Gossip about other persons;

j. Use of personal cell phone while providing care to patients; or

k. Use of cell phones or other devices to take pictures, to record conversations or video-record within the workplace.

2. THREATENING OR INTIMIDATING BEHAVIOR: An expressed or implied threat made while within a HCHD property that interferes with an individual's physical or emotional well-being or safety, which causes a reasonable fear that such harm or injury is about to occur. Examples of threatening behavior include the following:

a. Words or gestures, which create a reasonable fear of harm or injury to another person(s);

b. Prolonged or frequent shouting, which creates a reasonable fear of harm or injury to another person (s);

c. Continual invasion of personal space of another person(s);

d. Stalking of another person (s); or

e. Unwelcome, after-hours phone calls e-mails or texting to another person(s).

3. **VIOLENT BEHAVIOR:** The use of physical force or violence to inflict harm to others; endanger the health or safety of another person or the property of the HCHD or property on HCHD premises belonging to others; or to restrict the freedom, action, or movement of another person. Examples, include but are not limited to the following:

a. Unwelcome physical contact with another person;

b. Slapping, punching, striking, pushing, or otherwise physically touching or attacking another person; or

c. Throwing, punching, or otherwise handling objects in an aggressive manner.

B. **PERSON:** A HCHD employees, physicians, medical students, medical residents; practitioners in training; independent practitioners; or other healthcare providers.



Policy No:

6.39

Page Number:

3 of 4

Effective Date:

01/10

Board Motion No:

10.1-07

C. **SUPERVISOR:** A person who is authorized to take appropriate remedial action.

II. PROCEDURE:

Any individual who observes or is subjected to inappropriate conduct by any person must report the incident immediately to the person's supervisor, HCHD's Vice President of Human Resources, or by calling the HCHD Ethics and Compliance hotline telephone number: 1-800-500-0333.

- A. The individual receiving the report shall notify the Vice President (VP) of Human Resources (HR). The Vice President of Human Resources shall designate an individual to investigate the allegation.
- B. The investigator shall initiate a discussion with the involved parties. The investigator's documentation must include the following:
 - 1. Date and time of the alleged inappropriate conduct;
 - 2. The name of any person affected by or involved in the alleged inappropriate conduct;
 - 3. The name(s) of any witnesses;
 - 4. The circumstances leading up to the alleged inappropriate conduct;
 - 5. A factual and objective description of the alleged inappropriate conduct; and
 - 6. Any potential impact on patient care or hospital operations.
- C. If the allegation involves a physician or a healthcare provider who is not employed by HCHD, the investigator must provide documentation to the provider's supervisor and work collaboratively to investigate the occurrence.
- D. The investigator shall document his investigation, including the date, time, place, action and name(s) of those interviewed and any remedial actions taken by the supervisor to resolve the issue(s).
- E. At any time, HCHD may recommend outside mediation, internal or external consultation or facilitation, Employee Assistance, or training to facilitate a resolution.
- F. The investigator shall advise the individual who reported the incident of the outcome of the investigation.



Policy No:

6.39

Page Number:

4 of 4

Effective Date:

01/10

10.1-07 Board Motion No:

Individuals who report disruptive or abusive behavior in good faith will be protected G. from retaliation. An individual who commits or condones any form of retaliation will be subject to discipline up to and including termination.

REFERENCES/BIBLIOGRAPHY:

HCHD Medical Staff Bylaws.

HCHD Policy and Procedure 3.19 Medical Staff Guidelines on Physician/Practitioner Health Issues.

HCHD Policy and Procedure 6.20 Employee Discipline

HCHD Policy and Procedure 6.8 Grievance Procedure

American Nurse Credentialing Center, Pathway to Excellence, Standard #10.

The Joint Commission, January (2009). Standards and Elements of Leadership, LD.01.07.01.

HCHD Service First Standards of Behavior - Attachment A.

OFFICE OF PRIMARY RESPONSIBILITY:

Vice President of HCHD Human Resources.

REVIEW/REVISION HISTORY:

Effective Date	Version# (If Applicable)	Review or Revision Date (Indicate Reviewed or Revised)	Reviewed or Approved by: (If Board of Managers Approved, include Board Motion#)
		Reviewed 8/14/2007	Director of Nursing Programs & Workforce Development
		Revised 8/14/2007	District Nursing Policy and Procedure Council
		Revised 8/27/2007	Nurse Administrative Council
		Approved 10/18/2007	Nurse Executive Council
		Approved 1/7/2008	BT Medical Executives
		Approved 2/6/2008	LBJ Medical Executives
		Approved 2/22/2008	CHP Medical Executives
		Approved 3/11/2008	Medical Board
		Approved 09/01/2009	District Policy Review Committee
01/28/2010	1.0	Approved 01/28/2010	HCHD Board of Managers (Board No. 10.1-07)