

# Addressing Workplace Conduct and Practice

Training Module for Northern Health Medical Staff Leaders

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**northern health**  
*the northern way of caring*





## Overview


Northern Health Medical Affairs has developed a suite of orientation and education resources for Medical Staff Leaders to support them in their administrative positions. This training module booklet is a supplement to the corresponding summary booklet (also titled “Addressing Workplace Practice and Conduct”). The training module guides Leaders through key aspects of different policies and processes and tests their knowledge of how to apply what they have learned. The summaries provide more details regarding Medical Staff Leaders’ roles and responsibilities. All of the orientation and education materials for Medical Staff Leaders can be found online at: <http://physicians.northernhealth.ca/PhysicianResources/OrientationEducation.aspx>.





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# 1. Professionalism and a Respectful Workplace

# 1. Professionalism and Respectful Workplace

## What this module covers:

*By the end of this module, you will be able to:*

- Define “Professionalism”.
- Describe the fundamental principles of professionalism in the workplace.
- Describe the elements of a respectful workplace.
- Identify the role and responsibilities of Medical Staff Leaders.

## Why do I need to know this?

As a Medical Staff Leader, you are responsible for addressing problematic behaviour with colleagues, as well as assisting colleagues to resolve disputes with one another.

## What is “professionalism”?

Professionalism means that a physician will place the interests of patients above their own, even when it is difficult.

The Canadian Medical Protective Association writes:

- “An important part of professionalism is appropriate behaviour with patients, colleagues, providers and administrators. The absence of positive and constructive behaviour can have a detrimental impact on patient safety and team-based care.”

## Our responsibility

According to the Medical Professionalism Charter for Physicians, our responsibility includes commitment to:

- Professional competence.
- Honesty with patients.
- Patient confidentiality.
- Maintaining appropriate relationships with patients.

## Expectations of medical staff

- Act in a way that respects the dignity and value of others
- Address concerns they have with other people directly
- Seek assistance when necessary





# 1. Professionalism and Respectful Workplace

## Expectations of Medical Leaders

- Be a role model
- Address concerns you have with staff members
- Respond to complaints using Northern Health's processes and protocols.

## How has this changed?

It hasn't.

But medical staff are practicing in a more complex environment due to:

- Shifting from independent practice to integrated, team-based models
- Changing expectations from patients
- Increased access to health information & technology
- Funding and staffing constraints

## Three main aspects of medical professionalism

The Canadian Medical Association (CMA) emphasizes three main aspects of medical professionalism:

1. Ethics of care
2. Clinical independence
3. Self-Regulation

## Four elements of protection

The Canadian Medical Association outlines 4 elements that support medical professionalism, enhance safer care, and reduce medico-legal risk:

1. Clinical competence
2. Responsiveness
3. Engagement
4. Integrity

## The way forward

Emphasize good, respectful working relationships;

Create a respectful workplace.

## Elements of a respectful workplace:

- Celebrate and acknowledge different perspectives and ways of being.
- Address conflict in a way that focuses on issues and behaviours.
- Encourage better patient care, and
- Support physician and staff retention.







Quiz Time

# 1. Professionalism and Respectful Workplace

## True or False?

The move towards a team-based service delivery model is one of the factors that has contributed to a more complex professional environment.

- ☐ True
- ☐ False

**Answer: True**

As we move away from independent practice, it is critical to develop and maintain respectful relationships with our team members.

## Multiple Choice

*Which one of the following are known to reduce medico-legal risk?*

- A. Ongoing professional development
- B. Taking time to respond to questions
- C.. Developing friendships with patients
- D. (a) and (b)

**Answer: D**

Ongoing professional development will help ensure we maintain and increase our professional competence.

Taking the time to respond to questions helps patients perceive that we are responsive to their concerns.

On the other hand, a respectful professional relationship with a patient may not include friendship.

## Multiple Choice

If a health care professional has an issue with a colleague, ideally he/she will:

- A. File a complaint.
- B. Talk to their Supervisor or Manager.
- C.. Talk to the other individual involved.

**Answer: B**

Ideally, they will be comfortable enough to talk to the other person involved.

Sometimes, they may not feel safe or comfortable. In those circumstances, they will seek assistance from a Medical Staff Leader.





## 2. Investigating Patient Safety Events

## 2. The Medical Staff Complaints Process

### What this module covers:

*By the end of this module, you will be able to:*

- Identify the principles of the complaints management process
- Describe the types of behaviours that can lead to a complaint
- Understand how complaints are reported and investigated
- Define your responsibilities in the complaints process as a Medical Staff Leader.

### Why do I need to know this?

Northern Health wants to prevent these types of problems; failing that, we want to resolve complaints quickly and effectively. We also want to understand, identify and correct systematic problems.

### Authority

The College of Physicians and Surgeons indicates that complaints can be filed for “inappropriate treatment or care of a medical condition [or] inappropriate or unprofessional conduct.”

The *Hospital Act* outlines the authority to manage disruptive physician behaviour, as well as to discipline the Medical Staff member, under the *Hospital Act Regulations*.

### Two Types of Complaints

The NH Medical Staff Complaints policy addresses two types of complaints:

- A. Patient complaints, and
- B. Staff complaints.

### What May Prompt a Complaint?

Complaints can come from patients, families, or colleagues.

Words or action which cause patients or members of the team to feel intimidated, belittled, disrespected, ignored or frightened may be considered inappropriate or disruptive and potentially damaging to relationships and health care delivery.

### Who Can Report a Complaint?

Anyone, patient or staff member, can file or report a complaint.

Complaints can be received orally or in writing. All complaints, no matter how informal the process, must be documented.



## 2. The Medical Staff Complaints Process

### 7 Principles of the Complaints Management Process

1. Focus on the **customer** to satisfy complainants' and respondents' needs.
2. Focus on the **system** to use complaints to improve quality of care.
3. Focus on **learning** rather than blaming.
4. **Involve** and empower staff.
5. Use the Patient Safety and Learning System (PSLS) to **document** complaints.
6. **Train** staff to ensure they have the skills to handle complaints
7. **Commit** to using patient complaints to improve quality of care.

### What is My Role?

**Health Service Delivery Area Medical Directors** have overall responsibility for the complaints process.

**Chiefs of Staff** are typically responsible for the investigation of complaints and development of action plans.

**Department Heads** and /or the Chief of Staff should bring forward severe complaints to the HSDA Medical Director.

**Health Services Administrators** or **Chief Operating Officers** should be involved if the complaint involves an operational issue.

### A Staged Approach to Managing Complaints

#### **Stage One:**

Interventions are warranted for first time complaints perceived as being of low severity.

#### **Stage Two:**

Interventions are warranted for complaints that are of moderate severity and/or where stage one intervention has been ineffective.

#### **Stage Three:**

Interventions are warranted for complaints that have continued despite previous interventions and/or where their concern about self injury or harm to others.

#### **Crisis Intervention:**

Required in the event of the sudden appearance of a complaint or behaviour that is too egregious for a staged response.

## 2. The Medical Staff Complaints Process

### How do I respond to a complaint?

The *Medical Staff Complaints Process* Decision Support Tool (DST) outlines the steps to follow to address and resolve a complaint related to the appropriate intervention stage.

The Discipline Subcommittee is a subcommittee of the Northern Health Medical Advisory Committee (NHMAC) and may be required to review complaints at Stage Two or Stage Three interventions..

### *Is there an appeal process?*

Yes.

The respondent has a 15 day appeal period; if that period of time passes, and Northern Health Medical Advisory Committee has not received a written notice of intention to appeal, then the process is done!

### Limits to confidentiality

- Confidentiality will be maintained to the degree permitted by law.
- Names and statements may be disclosed in the event of a legal process.
- No action will be taken to address anonymous complaints.

### Invoke Section 51 for Stage 2 or 3 Interventions

- Implement Section 51 for most incidents.
- The Health Care Protection Program indicates that this includes “all occurrences, events or adverse outcomes that give rise to significant quality of care concerns”, and are “reviewed for the purposes of examining the quality of care by health care professionals.”
- Section 51 can be removed during the course of a review if appropriate.







Quiz Time

## 2. The Medical Staff Complaints Process

### Yes or No?

I just received a written complaint about a physician making inappropriate comments to a nurse. It's an anonymous note that identifies the physician, but not the nurse being harassed.

#### *Do I investigate?*

- ☐ Yes
- ☐ No

#### **Answer: No**

We do not investigate anonymous complaints. In this case, the situation is even more complicated because we also don't know which nurse was involved.

### True or False?

The Complaints Process identifies how to investigate and resolve employee complaints about a physician's conduct.

- ☐ True
- ☐ False

#### **Answer: Partially True**

Complaints can be made by patients, not just employees.

### True or False?

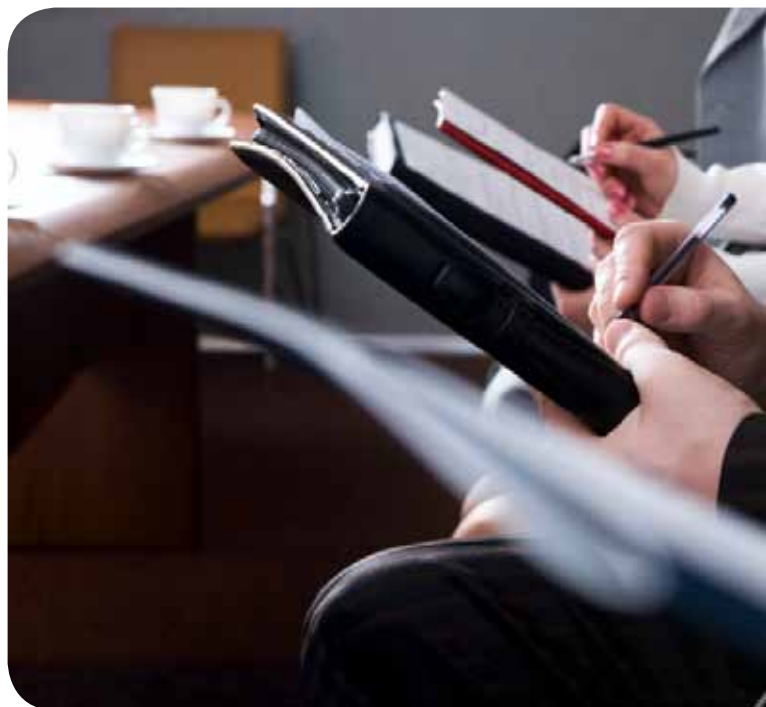
The purpose of the Complaints Management Process is to discipline employees who behave inappropriately.

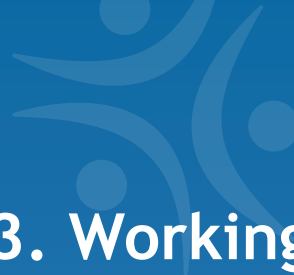
- ☐ True
- ☐ False

#### **Answer: False**

The purpose of the Complaints Management Process is to improve quality of care.

Investigating and responding to complaints is one way to ensure we maintain quality. While disciplinary actions are sometimes the outcome, they are not the purpose behind the process.





### 3. Working with the Northern Health Patient Care Quality Office

### 3. Working with the Northern Health Patient Care Quality Office

#### **What this module covers:**

*By the end of this module, you will be able to:*

- Define a “Care Quality Complaint”
- Describe the role of the Patient Care Quality Office
- Understand how complaints are managed and investigated
- Define your responsibilities in the PCQO complaints process.
- Describe the role of the Patient Care Quality Review Board

#### **Why do I need to know this?**

While some complaints will be resolved at the local level, some patients may report a complaint to the Patient Care Quality Office.

As a Medical Staff Leader, you will need to work with the PCQO to resolve the complaint.

#### **What is a “Complaint”?**

The Health Association of BC states that:

- A complaint is an expression of dissatisfaction when an expectation is not met.
- Although the complaint may appear trivial, it is a very real problem to the complainant and should be taken seriously.
- Complaining is a patient/client’s right and the health care organization has the responsibility to inform its customer how to complain.

#### **What is a “Care Quality Complaint”?**

A complaint about the quality of any health care service that a patient/client/resident received, (or did not receive), from a health authority.

A complaint must pertain to:

- The delivery of, or failure to deliver, health care;
- The quality of health care delivered;
- The delivery of, or failure to deliver, a service relating to health care;
- The quality of any service relating to health care.

#### **The role of the PCQO**

1. Receive complaints from patients or caregivers that are not comfortable talking directly to the care provider or manager at the local level.
2. Follow up if a patient is unhappy with how their concerns were handled locally.
3. Track and trend complaints so that quality improvements may be made.

#### **What may prompt a complaint?**

“Words or action which cause patients to feel intimidated, belittled, disrespected, ignored or frightened may be considered inappropriate or disruptive and potentially damaging to relationships and health care delivery.”

### 3. Working with the Northern Health Patient Care Quality Office

#### Receiving complaints

The PCQO receives complaints by phone, fax, mail, email, and in person.

The PCQO will communicate with you by submitting an action request through the Patient Safety and Learning System (PSLS). You must login to PSLS to see the request.

#### Why PSLS?

The PSLS is the best way to communicate confidentially regarding a request and response to a complaint.

The PCQO uses PSLS to track action items, the status of responses, and tracks compliance with mandatory timelines.

#### Timelines for investigations

Complaints must be investigated by you within 30 business days. Weekends and statutory holidays are not included.

If the investigation will take longer than this, you must contact the PCQO to determine whether they need to apply for an extension.

#### How does the PCQO manage complaints?

1. When a complaint is received, the PCQO will acknowledge it right away.
2. When complaints involve more than one department, the PCQO follows-up with each department separately.
3. The PCQO will investigate even if the complaint has also been made at the local level. This sometimes results in parallel investigations.
4. The PCQO will send a response with the help of those involved in addressing the complaint.

#### What are my responsibilities?

- **Resolve:** Work to resolve the complaint at the local level. Provide full answers to the questions posed by the complainant.
- **Inform:** If the complaint can't be resolved, work with local administration, and advise patients that they can redirect the complaint to the NH PCQO.
- **Respond:** The PCQO will send you an action request through PSLS.
- **Follow-up:** Take steps to ensure that steps are taken to improve quality and minimize the likelihood of a recurrence.

#### Confidentiality & the process

- Confidentiality will be maintained to the degree permitted by law.
- Names and statements may be disclosed in the event of a legal process.

#### What if the complainant is still not satisfied?

Complainants can request a review by a Patient Care Quality Review Board if:

- They are not satisfied with the response from the NH PCQO.
- Have not received a response within 40 business days
- The PCQ Review Board may make recommendations to the health authority.







Quiz Time

### 3. Working with the Northern Health Patient Care Quality Office

#### True or False?

I just completed an investigation. The complainant isn't happy with the outcome, but there's no sense referring him to the Patient Care Quality Office, because there won't be any change in the outcome.

- ☐ True
- ☐ False

#### **Answer: False**

If a complainant is not satisfied with the response received at the local level, they have the right to file a complaint with the Patient Quality Care Office, and it is your responsibility to ensure they are aware of this right.

#### True or False?

I just completed my investigation and filed the response in PSLs.

I don't need to contact the complainant because the PCQO will notify the complainant of the outcome.

- ☐ True
- ☐ False

#### **Answer: False** **Check with the PCQO.**

Sometimes, the complainant won't want to speak to you directly.

While it's true that the PCQO will write the letter to notify the complainant of the outcome, it is still your responsibility to communicate effectively with the complainant and answer any questions he/she may have. Also, the PCQO may have additional questions for you.





### 3. Working with the Northern Health Patient Care Quality Office

#### True or False?

A patient was upset that a doctor appeared to touch one of the nurses inappropriately. While the nurse hasn't complained, the patient is concerned that the doctor is harassing staff members.

This is an example of a type of complaint that would be received and investigated by the Patient Care Quality Office.

- ☐ True
- ☐ False

#### **Answer: False**

The PCQO will investigate inappropriate behaviour that is potentially damaging to health care delivery. This patient has not indicated that the situation has impacted her trust in the physician.

If the patient indicated that the physician's behaviour impacted her own feelings of comfort and safety, or in some way damaged the physician – patient relationship, the PCQO would investigate.

#### True or False?

You have 30 days to investigate and respond to a complaint referred to you by the Patient Care Quality Office.

- ☐ True
- ☐ False

#### **Answer: True**

You have 30 days to investigate and respond to a complaint referred to you by the Patient Care Quality Office. That gives the PCQO time to prepare a report and notify interested parties.

#### True or False?

A patient complains that eight people came into his room, looked through his chart and began discussing his treatment. They did not introduce themselves, and he did not know why they were there. He felt that his privacy had been violated. This is an example of a type of complaint that would be received and investigated by the Patient Care Quality Office.

- ☐ True
- ☐ False

#### **Answer: True**

The PCQO will investigate "...words or action which ... may be considered inappropriate or disruptive and potentially damaging to relationships and health care delivery."

### 3. Working with the Northern Health Patient Care Quality Office

#### True or False?

The daughter of an elderly patient complains because she was advised that the specialist would be in to see her mother. She waits with her mother for seven hours, but the doctor does not come.

This is an example of a complaint that would be investigated by the PCQO.

- ☐ True
- ☐ False

#### **Answer: True**

The PCQO will investigate, as the patient and her daughter felt disrespected and ignored.

This could have a damaging effect on the relationship between the patient's family and the health care professionals.

#### True or False?

A patient complains that he was treated disrespectfully by staff in the Emergency Room. He asked for pain killers to deal with an intense tooth ache, but states he was not given adequate pain medication and staff implied he was simply trying to access narcotics.

He states that he is aboriginal, and was dressed in sweatpants and an old sweatshirt and he feels that this influenced how he was treated. This is an example of a type of complaint the PCQO would investigate.

- ☐ True
- ☐ False

#### **Answer: True**

The PCQO will investigate, as the patient felt belittled, and disrespected by the health care providers involved. He may have also received inadequate care.



### 3. Working with the Northern Health Patient Care Quality Office

#### True or False?

A diabetic patient is having heart problems, and attends the local hospital. The doctor tells her that she is overweight, and must exercise and watch her diet in order to improve her health.

The patient complains that the physician was condescending and she felt humiliated.

This is an example of a type of complaint the PCQO would investigate.

- ☐ True  
☐ False

#### **Answer: True**

The PCQO will investigate, as the patient felt disrespected by the health care providers involved.

While the information provided by the physician may have been factually correct, quality care includes presenting information in a manner and tone in which patients feel supported to be proactive in managing their health, and comfortable seeking help when they need it.

#### For Help with a PCQO Complaint:

Need help resolving a complaint?

Contact:

- NH PCQO Regional Manager
- NH Risk Management Regional Manager
- Medical Director
- Chief Medical Officer
- Vice President Medicine





## Notes

# Professionalism and Respectful Workplace

## For More Guidance:

- For BC Human Rights Code, Respect in the Workplace and WorkSafeBC information: [NH Organization Development](#)
- For Medical Staff Complaints related information:
  - HSDA Medical Director
  - Chief Medical Officer
  - VP Medicine
- To arrange for Respect in the Workplace training, contact NH Organization Development

## More Information on Medical Professionalism:

- *Medical Professionalism in the New Millennium: A Physician Charter*
  - ABIM Foundation, ACP Foundation, European Federation of Internal Medicine. (2004). [Medical Professionalism in the New Millennium: A Physician Charter](#).
- Doctors of BC
  - BC Medical Association (BCMA; Doctors of BC). (September 2013). [Medical Professionalism in British Columbia - Working Together: An Exploration of Professional Relationships in Medicine. A Policy Paper by BC's Physicians.](#)
- Canadian Medical Association
  - Canadian Medical Association. (2005). [Medical Professionalism](#). CMA Policy.
- Canadian Medical Protective Association
- Canadian Medical Protective Association (CMPA). (October 2012). [Why Medical Professionalism Matters - Special Edition](#). CMPA perspective

# Medical Staff Complaints Process

## Related Legislation, Policies & Guidelines

- BC Human Rights Code
- WorkSafeBC Bullying and Harassment Policy; Workers Compensation Act
- Patient Care Quality Review Board Act
- NH Medical Affairs. (September 2013). NH Complaints Regarding the Conduct or Professional Practice of Members of the NH Medical Staff - Decision Support Tool.
- NH Organization Development. (August 2009). Respect in the Workplace – Decision Support Tool.
- NH Human Resources. (October 2005). Discipline- Decision Support Tool.
- Northern Health. (September 2013). Complaints Regarding the Conduct or Professional Practice of Members of the NH Medical Staff - Decision Support Tool. <https://ournh.northernhealth.ca/PoliciesProcedures/DST%20Published%20Policies/3-1-1-010.pdf>
- Northern Health. (December 2004). Medical Staff Bylaws. <http://physicians.northernhealth.ca/Portals/8/MedicalStaffAppointments/NHA-Medical-Staff-Bylaws.pdf>
- Northern Health. (December 2012). Medical Staff Rules. <http://physicians.northernhealth.ca/Portals/8/MedicalStaffAppointments/NH-Medical-Staff-Rules.pdf>
- Northern Health. (August 2009.) Respect in the Workplace – Decision Support Tool. <https://ournh.northernhealth.ca/PoliciesProcedures/DST%20Published%20Policies/5-5-1-080.pdf>
- Northern Health. (October 2005). Discipline Policy & Procedure - Decision Support Tool. <https://ournh.northernhealth.ca/PoliciesProcedures/DST%20Published%20Policies/5-3-1-050.pdf>
- Government of British Columbia Hospital Act & Hospital Act Regulations <http://www.bclaws.ca/>

## Working with the Northern Health Patient Care Quality Office

### Related Legislation, Policies & Guidelines

- Province of BC. (2008). *Patient Care Quality Review Board Act*.
- Northern Health. (September 2013). *NH Complaints Regarding the Conduct or Professional Practice of Members of the NH Medical Staff* - Decision Support Tool.
- *Hospital Act and Hospital Act Regulation*
- NH Medical Staff Bylaws & Medical Staff Rules
- NH Respect in the Workplace Policy

***Thank you for completing these modules.***

For more information, contact:

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