uchealth

Environment of Mutual Respect	
Effective Date: 7/2022	**Replaces Policy:** N/A
	Policy Owner: Clinical Policy Advisory Group and Office of Diversity, Equity, and Inclusion

Introduction:
UCHealth is committed to maintaining a safe, healthy and efficient environment that is free from any form of harassing or threatening behavior. UCHealth has an expectation of mutual respect from all participants in the healthcare system. Patients, visitors, providers, staff, trainees, learners, vendors and all individuals providing care, obtaining care, or visiting our facilities are expected to act in a manner that treats everyone with dignity and respect. This document describes the organization's policy for promoting an environment of mutual respect and maintaining a safe atmosphere, free from all forms of harassment, threats, violence, and abuse. While this policy provides a system for appropriately responding to and reporting incidents that violate this program, it in no way replaces or invalidates any related HR / employment or medical staff bylaw, policy, process, rule or regulation.

Scope:
View the UCHealth Policy Scope Statement to see where this policy applies.

Policy Details:
I. General Information

    A. All individuals who enter the UCHealth system, or any UCHealth facility, or UCHealth entity, are expected to treat each other, staff, providers, trainees, learners, patients, vendors, visitors, and all others with respect through courteous communication and respectful demeanor. To this end, UCHealth strives to create an environment free from all forms of harassment and conduct which are considered offensive, discriminatory, intimidating, threatening, racist, sexist, coercive, abusive, or disruptive. Examples of such inappropriate behaviors include, but are not limited to unwelcome or unwanted:

Verbal	name calling, purposeful misnaming; mispronouning, and misgendering, profanity, sexual innuendos, suggestive comments, humor and jokes, propositions, threats, discriminatory comments
Unspoken	obscene, suggestive or offensive pictures, posters, calendars, sounds, looks, gestures, aggressive or threatening behavior

The current version of this policy can be viewed on The Source. Printing is discouraged.

Page 1 of 4

Physical	touching, pinching, rubbing, brushing the body, blocking or impeding movement, violating someone's personal space, hitting, kicking, etc.
Electronic	e-mail, instant messaging, texting, cell phone pictures, applications, social media

B. UCHealth will not tolerate aggressions or microaggressions from any individual or group that enters the UCHealth system, including any language or actions that are discriminatory based on race, national origin, religion, sex, gender identity, gender expression, age, or disability.

C. Anyone who requests or refuses to work with or receive care from an individual with specific characteristics may be informed that UCHealth will not honor the request. UCHealth is not obligated to honor requests from staff, patients, or visitors, to not receive care from, provide care to, or otherwise interact with, a specific individual or group of individuals, unless there is a valid non-discriminatory reason. Should such a request occur, the issue should immediately be raised to and evaluated by the direct supervisor.

Procedure:
I. Initial Response
    A. When it is safe to do so, initiate medical treatment, as appropriate.
    B. Everyone involved should move to a safe space if there is a threat of harm or violent behavior.
        1. For any illegal activity, including but not limited to, physical or sexual assault, stalking, or continued threats of violence, get to a safe area and contact security or law enforcement and/or call a Code Gray or Code Silver per facility policy.
    C. Involve the appropriate supervisor and/or the patient's provider so that the individual with behavior in violation of this policy may be informed that such behavior will not be tolerated and that the behavior must stop or they will have to leave immediately.
        1. If an individual who is not a patient refuses to stop the behavior and refuses to leave when requested, involve security and/or contact law enforcement as needed.
        2. Hospitalized patients with behavior in violation of this policy may be discharged, if appropriate based on the patient's medical condition.
        3. Clinic and ambulatory patients who are in violation of this policy may be dismissed from that clinic or ambulatory area per patient dismissal policy.
        4. If a patient is being treated for a condition that may be a cause of such behavior, medically appropriate interventions should be initiated when possible.
    D. For Employees who may be in violation of this policy, refer to the appropriate Human Resources policy.
    E. For Medical Staff members, refer to the appropriate Medical Staff Bylaws and Rules and Regulations.

II. Method of Reporting
    A. An individual who is, or becomes aware of, observes, or is subjected to conduct in violation of this policy, should notify a charge nurse, supervisor, nursing supervisor, manager, patient representative, risk manager, or other UCHealth staff member about the incident or, if their supervisor's behavior is at issue, notify the next person in the chain of command (Director, Senior Director, Chief, etc.) or, in their absence,

The current version of this policy can be viewed on The Source. Printing is discouraged.

Page 2 of 4

the Administrator-on-call. Additionally, the UCHealth Integrity Helpline may be used to report misconduct.

B. It is the responsibility of any staff member or provider who becomes aware of any such incident to report it to leadership and complete an occurrence report in the electronic reporting system by the end of the shift when the incident occurred or when they become aware of the event.

C. Staff injuries are reported to Employee Health Services (EHS) through alternate reporting systems per the Work Related Injury and Illness Reporting and Follow-up policy.

D. Partner with security and risk management prior to reporting to law enforcement as appropriate. Reporting behavior that is illegal, criminal, violent, or threatening to law enforcement is encouraged.

E. Retaliation for reporting will not be tolerated.

III. Documentation

A. Document medically relevant events in the electronic health record (EHR). Describe the occurrence, including the time of the occurrence, actions taken (i.e. vital signs), notifications (i.e. supervisor, provider, and family), quotations of statements made, assessments, diagnostic procedures, treatment performed, results of actions, and subsequent monitoring of the patient's condition.

B. Do not document in the EHR that an occurrence report was completed or that Risk Management, Quality, or Patient Representatives were notified.

C. Document, within the electronic occurrence reporting system, any discussions that were had, including quotations from the parties involved. Future actions and decisions may be dependent on complete and accurate documentation.

D. An FYI flag may be added to the EHR of patients who violate this policy indicating an issue about which caregivers should be aware.

Definitions:
Aggression: Hostile or destructive behavior or attitudes.
Code Gray: An organized approach by trained personnel and Security to a patient who has lost behavioral control. Code grays are categorized as either tier 1 or tier 2.

Tier 1- non-violent aggressive behavior: Patient and/or visitor have used loud, profane, or aggressive language without threats of violence without successful de-escalation. Patient and/or visitor behavior that is disruptive to the unit but does not threaten the safety of any caregiver or other visitors.

Tier 2 -violent aggressive behavior: Caregiver has been threatened with physical violence. Caregiver feels physically or psychologically threatened. Caregiver articulates that they are afraid of patient and/or visitor and/or is afraid to be in the patient's room alone with patient and/or family member

Code Silver (Active Shooter): An individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearm(s) and there is no pattern or method to their selection of victims.

Harassment: Misconduct that denigrates or shows hostility or aversion toward an individual because of that person's race, color, religion, gender, gender identity, age, national origin, sexual orientation, disability, veteran status or other protected groups. It is also misconduct that has the purpose or effect of intimidating, offending, disrupting or adversely affecting an individual.

Microaggressions: Brief and commonplace verbal, behavioral, and environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, or negative slights and insults that potentially have harmful or unpleasant psychological impact on the target person or group.

The current version of this policy can be viewed on The Source. Printing is discouraged.

Page 3 of 4

Retaliation: Unwarranted, adverse treatment of an individual who files a complaint, provides information related to a complaint or participates in an investigation.

Sexual Harassment: Unwelcome or unwanted sexual advance or request for sexual favors, as well as other conduct of a sexual nature. This does not mean occasional compliments of a socially acceptable nature. Sexual harassment may include but is not limited to:

- subtle, deliberate, repeated, unsolicited, verbal comments, gestures or physical actions of a sexual nature, including flirtations, advances or propositions;
- explicit or implicit promises of career advancement in return for sexual favors;
- implied or overt threats.

The current version of this policy can be viewed on The Source. Printing is discouraged.

Page 4 of 4