

University of Maryland School of Medicine

PROCESS FOR DEALING WITH COMPLAINTS BY MEDICAL STUDENTS
ABOUT FACULTY MEMBERS BY “PROXY.”

Justification: Medical Students and others in a learning status (e.g. interns, residents and fellows) are frequently interviewed after clinical or other rotations, individually or in groups, where they make observations about the unprofessional behavior of the faculty. Because of the “power differential,” the fear of retribution, and/or the intimidation felt in complaining about those very faculty and /or others who will write their evaluations, contribute to their “Deans’ letters” and write their recommendations for residencies and/or higher positions, it is necessary to have a method by which they can voice their opinions without identification.

Procedure: Faculty members who learn of unprofessional behavior on the part of other faculty members, especially if repetitive and from multiple persons or in the same time period, may fill out a complaint form (attached) but clearly sign it as a “proxy” for one or more persons. All such complaints should be directed to the Vice Dean for Academic Affairs.

7/26/05

University of Maryland School of Medicine

**REPORT OF UNPROFESSIONALISM ON THE PART OF A MEMBER OF THE
FACULTY**

Faculty member's name (print or type) Department Location observed

Name of complainant or "proxy" Date Date observed

A medical staff member has displayed a lapse in professional behavior in the following category (see appended List of Areas of Professionalism/Unprofessionalism):

Comments:

Send to Bruce Jarrell M.D., Vice Dean for Academic Affairs,

List of Areas of Professionalism/Unprofessionalism

1. Respect for Persons

Lapse in our resolve to:

- Treat each other with respect and dignity, no matter what station, degree, race, age, sexual orientation, religion, gender, disability and/or disease.
 - Treat patients, families, colleagues, other health professionals, students, and teachers with the same degree of respect and dignity we would wish them to show us.
 - Treat patients with kindness and gentleness.
 - Respect the privacy and modesty of patients.
 - Not use offensive language, verbally or in writing, when referring to patients or their illnesses.
 - Not use offensive language when interacting with any others in the community.
 - Not harass others physically, verbally, psychologically, or sexually.*
 - Not abuse one's power or position for sexual and/or romantic ends.
- Not discriminate on the basis of sex, religion, race, disability, age, or sexual orientation.*
- Refer to patients by their names when in their presence not by their diseases or conditions.
 - Treat all physicians, other health professionals, students, and other trainees as professionals in a professional manner.

2. Respect for Patient Confidentiality

Lapse in our resolve to:

- Keep all patient communications and information confidential.
- Not share the medical or personal details of a patient with anyone except those health care professionals integral to the well being of the patient or within the context of an educational endeavor.*
- Not discuss patients or their illnesses in public places where the conversation may be overheard.
- Not publicly identify patients, in spoken words or in writing, without patients' permission.
- Not invite or permit unauthorized persons into patient care areas of the institution.
- Not share confidential passwords.
- Not look up confidential data on patients unless the information is necessary for the care of that patient.*

3. Honesty, Integrity

Lapse in our resolve to:

- Be truthful in verbal and in written communications.
 - Acknowledge an unanticipated outcome to colleagues and patients when the result of a treatment or procedure differs significantly from what was anticipated.
 - Protect the integrity of clinical decision making, regardless of financial impact.
- Lapse in our resolve to:
- Not knowingly mislead others.
 - Not cheat, plagiarize, or otherwise act dishonestly.

4. Responsibility for Patient Care

Lapse in our resolve to:

- Obtain the patient's informed consent for diagnostic tests or therapies.
- Assume 24-hour responsibility for the patients under our care; when off duty, or on vacation, assure that our patients are adequately cared for by another practitioner.
- Adhere to the RRC Duty Hour Requirements to ensure all trainees have adequate rest and sleep during their training.
- Follow up on ordered laboratory tests and complete patient record documentation conscientiously.
- Coordinate with our team about the timing of information sharing with patients and their families to present a coherent and consistent treatment plan.
- Charge patients or their insurers only for clinical services provided or supervised.*

Lapse in our resolve to:

- Not abandon a patient. If unable/unwilling to continue care, we have the obligation to assist in making a referral to another competent practitioner willing to care for the patient.
- Not document items in the medical record that were not performed.
- Not abuse alcohol or drugs.

5. Awareness of Limitations, Professional Growth

Lapse in our resolve to:

- Be aware of our personal limitations and deficiencies in knowledge and abilities and know when and whom to ask for supervision, assistance, or consultation.
- Know when and for whom to provide appropriate supervision.
- Have all patient workups and orders countersigned by the appropriate supervisor when in a student or trainee role.
- Avoid patient involvement when ill, distraught, or overcome with personal problems.
- Not engage in unsupervised involvement in areas or situations where not adequately trained or perform procedures beyond one's competence even when ordered or asked to by a superior or other person in a more powerful position.

6. Deportment as a Professional

Lapse in our resolve to:

- Clearly identify ourselves, our roles and our professional levels to patients and staff and wear a name tag.
- Dress in a neat, clean, professionally appropriate manner.
- Maintain professional composure despite the stresses of fatigue, professional pressures, or personal problems.
- Not introduce medical students as "doctor" or allow ourselves as medical students to be introduced as "doctor."
- Not write offensive or judgmental comments in patients' charts.
- Avoid disparaging and critical comments about colleagues and their medical decisions in the presence of patients.
- Avoid the use of first names without permission in addressing others, whether patients, family members, staff members or students.

7. Avoiding Conflicts of Interest

Lapse in our resolve to:

- Avoid conflicts of interest undermining our science, practice and teaching
- Declare all conflicts when lecturing, writing or serving on professional bodies.
- Resolve all clinical conflicts of interest in favor of the patient.
- Not accept non-educational gifts of value from for-profit companies such as drug companies or medical equipment vendors or suppliers. As of this writing, such gifts may not exceed \$50.00.
- Not refer patients to laboratories or other agencies in which we have a direct financial stake. *
- Not accept a "kickback" for any patient referral.*

8. Responsibility for Peer Behavior

Lapse in our resolve to:

- Take the initiative to identify and help rehabilitate impaired physicians with the assistance of the Medical Staff's Professional Assistance Committee.
- Report serious breaches of the Code of Professional Conduct to the President of the Medical Executive Committee using the form "Documentation of Unprofessionalism on the part of a member of the Medical Staff."
- Report illegal* acts to the appropriate internal authorities.
- Indicate disapproval or seek appropriate intervention observing less serious breaches.

9. Respect for Personal Ethics

Lapse in our resolve to:

- Respect each individual's beliefs and ethical principles
- Inform patients and their families of available treatment options that are consistent with acceptable standards of medical and nursing care.
- Respect patient wishes, including advanced directive, living wills, etc., consistent with acceptable standards of care.

10. Respect for Property and Laws

Lapse in our resolve to:

- Adhere to the regulations and policies of the University of Maryland, Baltimore, University of Maryland Medical Center, University Physicians Incorporated as they apply to us, e.g., policies governing fire safety, hazardous waste disposal, and universal precautions.
- Adhere to local, state, and federal laws and regulations.*
- Not misappropriate, destroy, damage, or misuse property of any of the Center's components.*

11. Integrity in Research

Lapse in our resolve to:

- Adhere to the ethical, institutional and Federal regulations that govern research using human subjects and animals and the use of personal health information for research purposes.*
- Not minimize research-related risks and ensure that research participants have the information needed to make informed decisions about research participation.

- ___ Maintain patient safety when performing medical research.
- ___ Ensure confidentiality of all participants in human subjects' research.
- ___ Report research results honestly and without exaggeration in scientific and scholarly presentations and publications, and to the public and press.
- ___ Give proper credit to colleagues and others who participated in the research when publishing and presenting research results.
- ___ Avoid potential conflicts of interest in research; disclose funding sources, company ownership, and other potential conflicts of interest in written and spoken research presentations and informed consent documents; and to promote objectivity in research by developing study designs that ensure against investigator bias.

Items marked with an asterisk () indicate behaviors that also may violate federal or state laws.

7/26/05

Adapted from the Dartmouth Hitchcock Medical Center Code of Professional Conduct (with permission).