

High-Risk Issue Escalation and Investigation Algorithm

Complaint Received via Any Mechanism

Assess for high-risk activity

- Criminal Complaints
 - Sexual Assault
 - Physical Assault
 - Diversion
 - Theft
- Alleged Malpractice
- Aberrant Behavior
- Fitness for Duty Concerns
- Major HIPAA Violations

Yes

Immediately notify WMG Human Resources contact.

HR contact to send immediate email notification to Issue Escalation Team (IET):

- Human Resources Senior Leaders (SVP, VP)
- WMG Senior Leaders (SVP, CMO, COO)
- Legal (SVP, VP)
- PR/Marketing (SVP, VP)
- Other Senior Leaders as appropriate (CIO, Hospital Presidents, SLVP, etc.)

**Senior leader can pull in other leaders as appropriate.*

No

Follow standard employee relations process. If new information warrants, escalate as outlined above.

Remember to:

- Provide support for employee and practice (EAP/Specialists)
- Use investigation templates (under development)
- Maintain regular contact with patient throughout investigation
- Provide closure for patient and employee
- Monitor social media activity and provide guidance to staff
- Support employees as needed for external investigations

HR Contact to schedule meeting/call with IET to discuss issue and next steps (same day or within 24 hours):

- Assign owners of investigation pieces
- Determine administrative leave and access restrictions
- Determine regulatory/reporting issues
- Assign patient contact and communication plan
- Assign contact for involved employee
- Assign staff contact and communication plan
- Determine PR/mkting messaging decisions
- Determine on-going touch points for IET

ETHICS

AMA Principles of Medical Ethics

Document accessed on 10/22/2020. Current document available at: <https://www.ama-assn.org/delivering-care/ethics/physicians-disruptive-behavior>

Physicians with Disruptive Behavior

Code of Medical Ethics Opinion 9.4.4

The importance of respect among all health professionals as a means of ensuring good patient care is foundational to ethics. Physicians have a responsibility to address situations in which individual physicians behave disruptively, that is, speak or act in ways that may negatively affect patient care, including conduct that interferes with the individual's ability to work with other members of the health care team, or for others to work with the physician.

Disruptive behavior is different from criticism offered in good faith with the aim of improving patient care and from collective action on the part of physicians. Physicians must not submit false or malicious reports of disruptive behavior.

Physicians who have leadership roles in a health care institution must be sensitive to the unintended effects institutional structures, policies, and practices may have on patient care and professional staff.

As members of the medical staff, physicians should develop and adopt policies or bylaw provisions that:

1. Establish a body authorized to receive, review, and act on reports of disruptive behavior, such as a medical staff wellness committee. Members must be required to disclose relevant conflicts of interest and to recuse themselves from a hearing.
2. Establish procedural safeguards that protect due process.
3. Clearly state principal objectives in terms that ensure high standards of patient care, and promote a professional practice and work environment.
4. Clearly describe the behaviors or types of behavior that will prompt intervention.
5. Provide a channel for reporting and appropriately recording instances of disruptive behavior. A single incident may not warrant action, but individual reports may help identify a pattern that requires intervention.
6. Establish a process to review or verify reports of disruptive behavior.
7. Establish a process to notify a physician that his or her behavior has been reported as disruptive, and provide opportunity for the physician to respond to the report.
8. Provide for monitoring and assessing whether a physician's disruptive conduct improves after intervention.
9. Provide for evaluative and corrective actions that are commensurate with the behavior, such as self-correction and structured rehabilitation. Suspending the individual's responsibilities or privileges should be a mechanism of final resort.
10. Identify who will be involved in the various stages of the process, from reviewing reports to notifying physicians and monitoring conduct after intervention.
11. Provide clear guidelines for protecting confidentiality.
12. Ensure that individuals who report instances of disruptive behavior are appropriately protected.

AMA Principles of Medical Ethics: I, II, VIII

Read more opinions about this topic

Code of Medical Ethics: Professional Self-Regulation

Visit the [Ethics main page](#) to access additional Opinions, the Principles of Medical Ethics and more information about the Code of Medical Ethics.

[ETHICS](#)

AMA Principles of Medical Ethics

Document accessed on 10/22/2020. Current document available at: <https://www.ama-assn.org/delivering-care/ethics/code-medical-ethics-professional-self-regulation>

Code of Medical Ethics: Professional self-regulation

Society permits medicine to set standards of ethical and professional conduct for physicians. In return, medicine is expected to hold physicians accountable for meeting those standards and to address lapses in professional conduct when they occur.

Sexual boundaries

Romantic or sexual interactions detract from the goals of the patient-physician relationship and may exploit the vulnerability of the patient, compromise the physician's ability to make objective judgments about the patient's health care and ultimately be detrimental to the patient's well-being.

Code of Medical Ethics opinions: sexual boundaries

- [Romantic or Sexual Relationships with Patients: Opinion E-9.1.1](#)
- [Romantic or Sexual Relationships with Key Third Parties: Opinion E-9.1.2](#)
- [Sexual Harassment in the Practice of Medicine: Opinion E-9.1.3](#)

Physician education & training

As educators, physicians have a responsibility to instill the ethical precepts of medicine and to be fair and respectful to trainees as well as to patients.

Code of Medical Ethics opinions: physician education & training

- [Medical Student Involvement in Patient Care: Opinion E-9.2.1](#)
- [Resident & Fellow Physicians' Involvement in Patient Care: Opinion E-9.2.2](#)
- [Performing Procedures on the Newly Deceased: Opinion E-9.2.3](#)
- [Disputes Between Medical Supervisors & Trainees: Opinion E-9.2.4](#)
- [Medical Students Practicing Clinical Skills on Fellow Students: Opinion E-9.2.5](#)
- [Continuing Medical Education: Opinion E-9.2.6](#)

- [Financial Relationships with Industry in Continuing Medical Education: Opinion E-9.2.7](#)

Physician wellness

Physicians have a responsibility to maintain their own health and wellness, broadly construed as preventing or treating acute or chronic diseases, including mental illness, disabilities, and occupational stress. When physician health or wellness is compromised, so may the safety and effectiveness of the medical care provided.

Code of Medical Ethics opinions: physician wellness

- [Physician Health & Wellness: Opinion E-9.3.1](#)
- [Physician Responsibilities to Impaired Colleagues: Opinion E-9.3.2](#)

Peer review & disciplinary action

Peer review by medical societies, hospital credentials and utilization committees, or other bodies, has long been established by organized medicine to scrutinize professional conduct. The peer review process is intended to balance physicians' right to exercise medical judgment freely with the obligation to do so wisely and temperately.

Code of Medical Ethics opinions: peer review & disciplinary action

- [Peer Review & Due Process: Opinion E-9.4.1](#)
- [Reporting Incompetent or Unethical Behavior by Colleagues: Opinion E-9.4.2](#)
- [Discipline & Medicine: Opinion E-9.4.3](#)
- [Physicians with Disruptive Behavior: Opinion E-9.4.4](#)

Physician involvement in health care institutions

Physicians have a responsibility to promote patient safety, quality of care and respectful professional relationships as individuals and through the organized medical staff of health care facilities.

Code of Medical Ethics opinions: physician involvement in health care institutions

- [Organized Medical Staff: Opinion E-9.5.1](#)
- [Staff Privileges: Opinion E-9.5.2](#)
- [Accreditation: Opinion E-9.5.3](#)
- [Civil Rights & Medical Professionals: Opinion E-9.5.4](#)
- [Gender Discrimination in Medicine: Opinion E-9.5.5](#)

Physician promotion & marketing practices

As responsible businessmen and professionals, physicians must communicate truthfully about their practices and take care that conflicts of interest do not undermine their professional conduct or compromise the trust of patients and the public.

Code of Medical Ethics opinions: physician promotion & marketing practices

- [Advertising & Publicity: Opinion E-9.6.1](#)
- [Gifts to Physicians from Industry: Opinion E-9.6.2](#)
- [Incentives to Patients for Referrals: Opinion E-9.6.3](#)
- [Sale of Health-Related Products: Opinion E-9.6.4](#)
- [Sale of Non-Health-Related Goods: Opinion E-9.6.5](#)
- [Prescribing & Dispensing Drugs & Devices: Opinion E-9.6.6](#)
- [Direct-to-Consumer Advertisement of Prescription Drugs: Opinion E-9.6.7](#)
- [Direct-to-Consumer Diagnostic Imaging Tests: Opinion E-9.6.8](#)
- [Physician Self-Referral: Opinion E-9.6.9](#)

Physician interactions with government agencies

As citizens and as professionals with specialized knowledge and experience, physicians have civic duties, but medical ethics do not require a physician to carry out such duties when that would contradict fundamental principles of medical ethics.

Code of Medical Ethics opinions: physician interactions with government agencies

- [Medical Testimony: Opinion E-9.7.1](#)
- [Court-Initiated Medical Treatment in Criminal Cases: Opinion E-9.7.2](#)
- [Capital Punishment: Opinion E-9.7.3](#)
- [Physician Participation in Interrogation: Opinion E-9.7.4](#)
- [Torture: Opinion E-9.7.5](#)

[Chapter 9: Opinions on professional self-regulation \(PDF\)](#)

AMA Code of Medical Ethics

Visit the [Code of Medical Ethics page](#) to access additional Opinions, the Principles of Medical Ethics and a list of CME courses that are available.

These Opinions are offered as ethics guidance for physicians and are not intended to establish standards of clinical practice or rules of law.