

## **OBSERVER/JOB SHADOW APPLICATION**

### **Instructions:**

- ➤ It is recommended ALL documents be completed and submitted at least 30 days in advance of Observer/Job Shadow request.
- > Incomplete/partial documents will not be processed.

The following documents must be	<u>completed and</u>	<u>l attached as pa</u>	art of the LCN	<u>/IC Health</u>
Observer/Job Shadow Application	<u>ı:</u>			

documentation	adow Applica	tion, including LCM	C nealth Requi	rements vernication			
☐ Signed Observer Confidentiality Agreement							
☐ Signed Statemen	t of Agreeme	nt & Acknowledgem	ent of Roles &	Responsibilities			
☐ Signed Sponsor	Acknowledge	ment					
☐ Signed Learner C	ode of Condu	uct Policy					
☐ Copy of Driver's	License or leç	gal photo I.D.					
	P	ersonal Informatio	on				
First Name		Last Name	Last Name Date of Birth				
U.S. Citizen (circle one): Yes / No At the time of the experience, I will be at least 16 years of age: Yes / No							
Address							
City	State	Zip/Country	Phone				
E-Mail		Anticipated Start Da	te: Anticip	pated End Date:			
Emergency Contact		Relationship Phone					
Requested Activities/Duties	s/Responsibilit	ies During Visit:		-			
Requested Hospital and Dept/Unit/Specialty Where Observation will occur?  LCMC Sponsor (employee or Med Staff med)			(employee or Med Staff member)				

	<b>Health Requirements</b>	
Requirements		Verification Date(s):
A negative TB skin test or negative chest x-observation/shadowing date (s))	-ray (within 12 months of the requested	
Proof of 2 MMR vaccines or positive Rubel	la titer	
Proof of Hepatitis B vaccination series (1st,	2 <sup>nd</sup> & 3 <sup>rd</sup> );	
This can be proven by three (3) doses of Hepatitis B	vaccine or with antibody-proven immunity.	
Signed declination of Hep B vaccination may be acc	epted.	
Proof of varicella vaccine or positive blood	titer;	
	s an acceptable alternative to proof of (2) varicella vaccines. If	
these vaccination are medically contraindicated, a physic	cian note to this effect is required.	
Proof of Tdap vaccination, within 10 years		
Proof of influenza vaccine (within past 12 m occur between October 1st–March 31st)	nonths, if observing/shadow experience will	
	ral health units, offender care units, intensive care ital-designated high-risk units or departments unless	
PURPOSE OF EXPERIENCE (describe experience in hospital)	e rationale and purpose of request for	
	HEALTH INSURANCE INFORMATION:	
Company Name:	Policy #:	Group #:
Guarantor Name:	Date:	

If the applicant will	be under eighteen years of age at must sign permissi		•	erien	ce, a parent
Permission is granted for	(First & Last Name of Student) PLEASE PRINT	_to parti	cipate in a sł	nado	wing/observing.
Signature	Printed Name		Date		-
SPECIAL APPLI	CATION TO OBSERVE CRITIC	AL CA	RE / HIGH	RIS	K UNIT:
intensive care units, labor a	dowing is not permissible within the operating roo and delivery, or other specific hospital-designated ospital Chief Medical Officer (CMO) or designee)				
At the time of the experie	nce, I will be >16 years of age:		Yes	N	0
The date(s) requested are permitted]:	e [note that no more than 5 work days	are			
The provider directly resp will be:	onsible for my supervision during this	s time	Provider Sp	oecia	lty
Chief Medical Officer nam	ne (please print)		Approve		Decline
Chief Medical Officer sign	nature				



### **Observer Confidentiality Agreement**

Name of Observer:			Oate:
I agree that I will not at any time dupatient information, including demo			
I understand that LCMC Health is of understand that the information that media such as medical records, cla	at I as an obser	ver am exposed to, is	presented to me in a variety o
I understand I may not take picture documents during or after my obse		• •	tients or of any
I understand that medical records a hospital.	and other forms	s of medical information	n may not be removed from th
I share the commitment of LCMC F document, pledge compliance with Agreement.	•	•	
I understand that a person may be occur.	subject to civil	or criminal legal sancti	ons when such violations
I have read and had a chance to a terms of this agreement and agree	•		t. I understand the
Observer Signature	Date	Sponsor Signature	Date
Parent/Legal Guardian Signature  **If observer is under the age of 18 years	Date		

the



#### **POLICIES & PROCEDURES**

Department:	Academic Affairs
Policy Number:	004
Effective Date:	5/11/23
Revised Date:	
Reviewed Date:	

#### Policy for Visiting Learners including Observation and Shadowing

#### I. SCOPE

- A. It is the position of LCMC to participate in various learner programs to foster clinical knowledge and support our healthcare disciplines. This policy applies to all LCMC hospitals that host learners in the hospital setting.
- B. Excluded and outside the scope of this policy are currently enrolled or previous medical students, and individuals who are current, prospective, or previous medical residents. Undergraduate medical education (UME) and graduate medical education (GME) in LCMC Health are both restricted to the training necessary to support the two major academic partners of LCMC Health: LSU and Tulane. Current, prospective, or prior medical students/ residents must work with LSU or Tulane's academic offices to explore pathways for education through either or both schools.
- C. Excluded and outside the scope of this policy are all International, non-U.S. citizens. See the International Visitor Policy for information.
- D. Excluded and outside the scope of this policy are learners approved to participate in clinical experiences at LCMC as part of a currently executed Academic Affiliation Agreement with LCMC.
  - a. If a learner is unsure if their school is an affiliate of LCMC, check the <u>listing of Current LCMC Academic Affiliation Agreements</u> (AAA).
  - b. If the school is not listed, complete the <u>Request for Academic Affiliation with LCMC Health</u>, and submit to <u>LCMCAcademicAffairs@lcmchealth.org</u>
    - Once the request is received, LCMC will launch the agreement process with your school. This process may take up to one month to complete and does not guarantee capacity for clinical experience.

#### II. DEFINITIONS

- **A.** Academic Affiliation Agreement: The Academic Affiliation Agreement is a signed and executed agreement between a hospital site and a school that states the conditions of a learner's clinical rotation at the hospital.
- **B.** Chief Medical Officer (CMO): The CMO is the LCMC designated physician who has oversight for the clinical quality of care and for the medical staff at each facility.
- **C.** <u>Clinical Rotation</u>: refers to a learning experience in the LCMC hospital or ambulatory setting for any type of learner who has obtained permission for the experience by way of an AAA.
- D. Graduate Medical Education (GME): The term "graduate medical education or GME" refers to programs focused on the development of necessary clinical skills, attitudes, and professional competencies that prepare residents to deliver safe-high-quality medical care based on the professional educational standards established by the ACGME, RRC or organized medical specialty of a respective training program. The purpose of GME is to provide an organized and integrated clinical experience and educational program that provides guidance and clinical instruction of the resident
- **E.** <u>LCMC Policies</u>: The term "LCMC Policies" shall mean and include the bylaws, policies, procedures, and practices of [LCMC or Covered LCMC Facilities], all as are from time to time adopted, authorized, and approved by the applicable governing authority where services are being rendered.
- **F.** <u>Learner:</u> term broadly indicating an individual within the healthcare facility who is learning, and who always requires appropriate and delegated supervision. Learner can include students, residents, fellows, and those participating in a shadow/observer experience.
- **G.** Observer (observation): also referred to as Shadowing indicates individuals, over the age of 16 years, who are approved by LCMC to participate in a short-term, non-contact, observational experience in the clinical care areas for the purposes of exploring a future career in various health care professions. Supervision is provided by an LCMC supervising medical staff member or LCMC employee. AAA are not required. The process for requesting and approval for observation is detailed below.
  - Note that LCMC does not permit observer / shadow experiences for any current or any prior medical students outside what has been arranged and contracted with LSU and Tulane.

- Note that LCMC does not permit observer/ shadow experiences for any prospective, current, or former medical or dental residents/fellows outside what has been arranged and contracted with LSU and Tulane.
- Note that observation and shadowing is not permissible within the emergency room, psychiatric units, offender care units, operating rooms, intensive care units, or labor & delivery units- unless specific approval has been granted by the hospital Chief Medical Officer or designee.
- H. Resident: The term "Resident" shall mean an individual who has completed medical, dental, or podiatric school training and who is enrolled in a graduate hands-on training program and who has been granted a resident training license. Residents can be at the level of intern, resident, intermediate resident, or chief resident and can participate in patient care under the direction of supervising medical staff physician. Collectively, residents and fellows may be referred to as "House Staff."
- I. Shadowing: also referred to as Observing indicates individuals, over the age of 16 years, who are approved by LCMC to participate in a short-term, non-contact, observational experience in the clinical care areas for the purposes of exploring a future career in various health care professions. Supervision is provided by an LCMC supervising medical staff member or LCMC employee. AAA are not required. The process for requesting and approval for shadowing/ observation is detailed below.
  - Note that LCMC does not permit observer / shadow experiences for any current or any prior medical students outside what has been arranged and contracted with LSU and Tulane.
  - Note that LCMC does not permit observer/ shadow experiences for any prospective, current, or former medical or dental residents/ fellows outside what has been arranged and contracted with LSU and Tulane.
  - Note that observation and shadowing is generally not permissible within the emergency room, psychiatric units, offender care units, operating rooms, intensive care units, or labor & delivery unitsunless specific approval has been granted by the hospital Chief Medical Officer or designee.
- J. <u>Supervising medical staff member</u>: shall mean any credentialed and privileged medical staff member at one or more of the Covered LCMC facilities to provide clinical services at LCMC. This individual assumes ultimate responsibility for the educational experience, conduct, and supervised care of patients provided by all

learners assigned to them by LCMC. The supervising medical staff member may not necessarily conduct the day-to-day educational experience throughout the term of the rotation.

- K. <u>Supervision:</u> Supervision is an intervention provided by a supervising medical staff member, in appropriate cases by a supervising resident or fellow, or by a healthcare employee to a learner. This relationship is evaluative (both summative and formative), and over time, has the simultaneous purposes of enhancing the professional functioning of the learner while monitoring the quality of clinical and professional services delivered. Supervision is exercised through instruction, observation, consultation, directing the learning of the resident, and role modeling.
  - <u>'Direct Supervision'</u> indicates the supervisor is physically present and accompanying the supervised learner.
  - <u>'Indirect Supervision'</u> indicates the supervisor is not physically present for the care event being provided by the learner.
- **L.** <u>Undergraduate Medical Education (UME):</u> The term "undergraduate medical education or UME" refers to allopathic or osteopathic medical programs focused on the development of necessary clinical skills, attitudes, and professional competencies that prepare a student for GME.
- M. <u>Visiting Resident:</u> LCMC hosts only residents and fellows who have been approved to visit, either through an AAA with an organization, or through one of its 3 LCMC- affiliated GME offices: LSU, Tulane, or East Jefferson General Hospital. A visiting resident is defined as a resident who is approved to visit for a clinical rotation through either formal AAA or through one of the partners' GME offices. Interested residents should reach out to LSU, Tulane or EJGH GME offices.
- N. <u>Visiting Medical Student</u> LCMC hosts only medical students who have been approved to visit, either through an AAA with their school, or through one of its 2 LCMC-affiliated undergraduate medical education (UME) offices: LSU or Tulane. A visiting medical student is defined as a medical student who is approved to visit for a clinical experience through either formal AAA or through one of the partner UME offices. Interested medical students should reach out to LSU or Tulane UME offices.

#### III. OBSERVATION AND SHADOWING AT LCMC

- A. Purpose: designed for individuals who wish to explore health career professions
- B. Observation/ Shadowing is not designed for current or former medical students,

- or for prospective, current, or former medical or dental residents or fellows.
- C. Observation/ Shadowing is not a clinical rotation, does not grant any credit hours, or fulfill any formal curricular requirements. Letters of recommendation are not provided, and no credit of any kind is given.
- D. Observation/ Shadowing does not fulfill requirements for volunteer or community service hours.
- E. **At all times**, the observer must be directly accompanied (Direct Supervision) by their supervisor, unless on meal breaks.
- F. The supervisor is ultimately responsible for the conduct, and activities of the learner at all times.
- G. Observation/ Shadowing does not involve direct patient care.
- H. Participants do not access the medical record
- I. Learners must be U.S. Citizens, at least 16 years of age at the time of the experience. For those between 16 18 years of age, signed consent from a parent or legal guardian is required
- J. All experiences require pre-approval by LCMC
- K. All requests are reviewed by LCMC Health with patient privacy and safety as the primary consideration.
- L. Observation/ Shadowing is not permissible within psychiatric units, offender care units, intensive care units, labor and delivery, or the operating room unless specific approval has been granted by the hospital Chief Medical Officer or designee.
- M. Observers are permitted a maximum total of 20 observation hours. Any additional time requires written approval from the Chief Medical Officer, or designee
- N. Participants will comply with all appropriate policies and procedures of the clinical area(s) where the experience is held.
- O. LCMC reserves the right to open, cancel or close any or all in-person experiences at its discretion.
- P. Confidentiality and HIPAA
  - a. All participants must comply with rules designed to protect patient privacy.

- b. Participants will not access any patient medical records or proprietary business information.
- c. Protected Health Information (PHI) includes patient name, names of relatives, patient address, photos, email address, phone number or other information that can be used to identify an individual.
- d. The participant will not share patient information from their experiences with anyone.
- e. Patient information will not be released via social media or any other electronic or personal communication medium by the participant.
- f. Participants may not take any photos, or use any recording devices while in the facility
- g. Learners are advised That if a patient or family declines to allow the learner to observe, the learner is expected to adhere to the patients' wishes.
- h. Supervising staff are expected to document the patients' acceptance or declination of the observers' participation.

#### Q. Code of Conduct and Appearance

- a. If a learner is accepted for an experience, the learner must obtain a facility 'Visitor' badge from the facility prior to beginning the observational experience.
- b. 'Visitor' badges will not be issued unless all required forms have been submitted and the applicant has received a written approval to obtain a badge.
- c. 'Visitor' badges must be always worn and visible and returned to supervisor at the conclusion of the experience.
- d. Cell phones and other electronic devices will be silenced or turned off during the experience.
- e. Participants must dress professionally with closed-toe shoes.
- f. While participating, the learner is expected to abide by the <u>LCMC Learner</u> Code of Conduct policy
- R. Infection Prevention, Personal Protective Equipment, and Personal Safety

- a. Keeping our patients, visitors, guests, staff, and providers safe is a primary safety goal in all LCMC facilities
- b. Participants with known exposure to a contagious agent, who have active colds or infections or who do not feel well, may not observe, and must reschedule.
- c. Mandatory PPE will be provided by LCMC and the supervisor and will be enforced where and when appropriate. PPE examples include but are not limited to facial masking, donning/doffing, gloves, eye shields, handwashing, ear plugs, non-slip shoes, etc.
- d. All learners are responsible for understanding the emergency codes at the facility. This information will be detailed in the orientation packet. Elements should include, but are not limited to, the following topics: fire extinguishers, fire pull stations, evacuation routes, emergency exits, oxygen shut off valves, eye wash stations, personal protective equipment, sharps containers, material safety data
- e. Leave valuables at home or locked in a non-visible area of your vehicle. LCMC is not responsible for lost or stolen items.

#### S. Application Process

- a. Learners must procure their own supervisor and submit the name of the supervisor at the time of application. LCMC will verify the experience with the supervisor.
- b. Learners must obtain, complete and submit an Observer/ Shadowing Application Packet
- c. Prior to any observational experience, the observer must complete and return:
  - i. A completed application
  - ii. A signed confidentiality agreement
  - iii. Provide a copy of a drivers' license or legal photo I.D,
  - iv. Documentation of immunizations that are compliant and consistent with the most updated LCMC Health immunization schedule.



Observer:	
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# Statement of Agreement and Acknowledgement of Roles and Responsibilities

#### **Observer Acknowledgement**

**Agreement** - LCMC Health and its member affiliates, has agreed to allow the undersigned Observer to observe patient care or hospital services after meeting the established requirements and under the supervision of a designated sponsor. In consideration of the undersigned Observer being allowed the opportunity at LCMC Health, the undersigned Observer, hereby agrees to the following:

Confidentiality - The Observer agrees that any information or knowledge acquired or received during the course of the observation at LCMC Health including but not limited to patient care information and information contained in patient care records, shall be treated as confidential and shall not, unless required by law or otherwise permitted by LCMC Health, be disclosed or used during or after termination of the Observer placement at LCMC Health without the prior written consent of LCMC Health.

**Release/Indemnification -** The undersigned Observer agrees to and hereby does release, indemnify and hold harmless LCMC Health, its member affiliates, directors, officers, employees, and representatives from any and all responsibility and obligation, and agrees not to hold LCMC Health liable for any or all injuries, losses, damages or expenses which may occur as a result of any act or omission of LCMC Health, its member affiliates, directors, officers, employees, or representatives, or which may arise for the Observer's participation in the Observer Program.

**Illness -** The undersigned Observer hereby forever releases and shall discharge all claims and causes of action whatsoever, present and future, against LCMC Health, its directors, officers, employees, and agents, related to or arising out of any illness, disease, or health condition the individual may contract, develop or come into contact with while on the premises of an LCMC Health facility.

**Medical Treatment –** LCMC Health shall provide or refer for outpatient treatment to Observers while in the facility for the Observer Program in the case of an accident or illness. However, under no circumstances shall LCMC Health bear the cost of the treatment.

LCMC Health Hospital Policy - The Observ	ver agrees to conform	to all policies and procedures		
including those related to safety, patient care	e, non-discrimination, (	Code of Ethics, The Joint		
Commission, CMS, and Occupational Safety	and Health Administra	ation (OSHA) requirements.		
Clinical Conduct - The Observer agrees to r	not participate in any d	lirect clinical action, nor perform		
any task that would normally be performed by	y a healthcare worker.	. The Observer understands		
they may not observe invasive examinations	or procedures. The O	bserver agrees to not		
document in the patient's medical record or a	any other depository of	f patient information. The		
Observer understands there may be restriction	ons in the areas/units	of observation and their		
sponsor may be required to obtain special permission from the LCMC Health facility Chief Medical				
Officer (CMO) or designee for observations in	n high-risk areas.			
Patient Consent - The Observer understand	ls that they may not ob	oserve patient care without the		
patient first consenting to the observing.				
Observer Signature	Date			

Date

Parent/Legal Guardian Signature

\*\*If observer is under the age of 18 years of age.

Observer:



Sponsor First & Last Name (PRINT)

Sponsor Signature (Employee or Medical Staff member)

Health	
rieditii	Observer:
Sponsor Acknowledgen	ent
established by this Agreement, LCMC Health and its member	derstands that the Observer must observe within the limitations the Confidentiality Agreement, the policies and procedures on a spitals and affiliates. The Sponsor agrees that he or she is sing the Observer's time at the LCMC Health Facility.
and that the responsibility canr	she is solely responsible for the supervision of the Observer of the transferred to someone else without the knowledge and ents and medical students may not serve as sponsors.
	ers to begin observation until the entire application process is otified that the Observer is cleared to observe.
have read the Observer's policy	of the required elements to participate in this experience. I , specifically the limitations of observers and the confidentiality e by the policy, and all terms of this agreement.

Email Address

Date



#### **POLICIES & PROCEDURES**

Department:	Academic Affairs
Policy Number:	002
Effective Date:	12.6.2021
Revised Date:	5.11.23
Reviewed Date:	5.11.23

#### LEARNER CODE OF CONDUCT

#### I. INTRODUCTION

LCMC HEALTH is committed to supporting a culture that values integrity, honesty, and fair dealing with each, and to promote a caring environment for patients, their families, physicians, nurses, other health care workers and employees.

LCMC HEALTH endeavors to create and promote an environment that is professional, collegial and exemplifies an outstanding educational experience, research opportunities and patient care.

Towards these goals, LCMC HEALTH strives to maintain a workplace that is free from harassment. This includes behavior that could be perceived as inappropriate, harassing, or that does not endeavor to meet the highest standards of professionalism.

#### II. SCOPE

This policy and the contents within shall apply to all learners while participating in any training, learning, observational or shadowing experience at LCMC HEALTH facilities

#### III. PURPOSE

The purposes of this Academic Code of Conduct are to:

- 1.clarify the expectations of all learners while participating in the LCMC HEALTH clinical learning environment.
- 2.encourage the prompt identification and resolution of alleged inappropriate conduct.

- 3.encourage identification of concerns about the well-being of a health care provider whose conduct is in question; and
- 4.acknowledge and authorize the sharing of information by and between LCMC HEALTH and the Learner's school or program, where needed.

Disruptive conduct and inappropriate workplace behavior may be grounds for suspension from access to LCMC HEALTH facilities, including, without limitation, badge access and access to medical records, pending resolution of an investigation by the learner's respective school or program and notification from that entity to LCMC HEALTH of the learner's fitness to return to duty. Nothing herein shall require LCMC HEALTH to allow the learner access to future work/rotations in the event of egregious activity, which shall be determined (a) in accordance with any contract then in place by and between LCMC HEALTH and the learner's school or program, or (b) if said contract is silent, solely in LCMC HEALTH's discretion.

#### IV. POLICY STATEMENT

Collaboration, communication, and collegiality are essential for the provision of safe and competent patient care. Thus, all health care providers practicing in at LCMC HEALTH must treat others with respect, courtesy, and dignity and conduct themselves in a professional and cooperative manner, in accordance with LCMC HEALTH and School policies and standards.

This Policy outlines efforts that can be used by LCMC HEALTH to address conduct that does not meet this standard. The goal of these efforts is to arrive at voluntary, responsive actions by the individual to resolve the concerns that have been raised and, where possible, return the learner to LCMC HEALTH for further education and training.

This policy also addresses sexual harassment of employees, patients, learners, members of the Medical Staff, and others, which will not be tolerated.

In dealing with all incidents of inappropriate conduct, the protection of patients, employees, and others in the hospital and the orderly operation of LCMC HEALTH are paramount concerns. Complying with the law and providing an environment free from sexual harassment are also critical.

#### V. DEFINITIONS

**A.** "Appropriate behavior" includes any reasonable conduct (both spoken and unspoken) to advocate for patients, to recommend improvements in patient care, to participate in the operations, leadership, or activities of learners at LCMC HEALTH, or to engage in professional practice, including practice that may be in competition with LCMC HEALTH.

- **B.** "Inappropriate behavior" means conduct that is unwarranted and is reasonably interpreted to be demeaning or offensive. Persistent, repeated inappropriate behavior is a form of harassment and thereby can become disruptive, and subject to treatment as "disruptive behavior." Examples of inappropriate behavior are provided below.
- C. "Disruptive behavior" means any behavior that causes unrest and/or disorder that interrupts and/or impedes patient care progress and safe operations in the workplace, including sexual or other forms of harassment, or other forms of verbal or non-verbal conduct that harms or intimidates others to the extent that quality of care or patient safety could be compromised.
- **D.** "Learners" means residents, fellows, students, and all others receiving education, experience, training, and supervision on the LCMC HEALTH-affiliated campuses.
- E. "Harassment" includes verbal conduct (such as making derogatory comments, slurs, jokes, banter, imitation, mockery, innuendos, invitations, inappropriate or intimidating comments); visual conduct (such as displaying or circulating derogatory posters, photographs, cartoons, or drawings); and physical conduct (such as impeding or blocking normal movement, unwanted attention, physical contact or proximity, staring at a person, or any surveillance tactics that may be considered "stalking;" and unwanted communication (such as unwelcomed visiting in person, calling, texting, recording, videoing, or other forms of communication that are not welcome or wanted) that interferes with a person's work performance or creates an offensive, intimidating, or otherwise hostile environment
- F. "Sexual harassment" means unwelcome sexual advances, requests for sexual favors, and/or unwanted verbal or physical conduct of a sexual nature. Sexual harassment may include direct or indirect request or demands for sexual favors in exchange for job security, i.e., in which sexual contact is made an explicit or implicit condition of employment or future employment-related decisions; unwelcome conduct of a sexual nature (which may involve the telling of sexual jokes, stories, displaying of sexually suggestive materials, making suggestive remarks) which has the purpose or effect of unreasonably interfering with a person's work performance or which creates an offensive, intimidating or otherwise hostile environment.
- **G.** "Medical staff member" means physicians, allied health practitioners, and others granted membership on the medical staff and for purposes of this Code of Conduct, includes individuals with clinical privileges.
- H. "Retaliation" occurs whenever a person or a group "gets back at" another person or holds it against that person when he/she exercises the right to refuse advances or file a complaint about inappropriate behavior or harassment of any kind. Retaliation may also occur if adverse action is taken against someone who cooperates in the investigation of a complaint. Retaliation of any type is prohibited by LCMC HEALTH.

#### VI. TYPES OF CONDUCT

#### A. Appropriate Behavior

Learners cannot be subject to suspension from access to LCMC HEALTH and reported to his/her respective school for appropriate behavior. Examples of appropriate behavior include, but are not limited to, the following:

- 1. Criticism or expressions of concern communicated in a reasonable manner and offered in good faith with aim of improving patient care safety.
- 2. Encouraging clear communication.
- 3.Expressions of dissatisfaction with policies through appropriate grievance channels or other civil non-personal means of communication.
- 4. Use of cooperative approach to problem resolution.
- 5. Constructive criticism conveyed in a respectful and professional manner, without blame or shame for adverse outcomes.
- 6.Professional comments to any professional, managerial, supervisory, or administrative staff, or members of the Board of Directors about patient care or safety provided by others.
- 7. Active participation in hospital meetings; and
- 8. Seeking legal advice or the initiation of legal action for cause.

#### **B.** Inappropriate Behavior

Inappropriate behavior by learners is discouraged. Persistent inappropriate behavior can become a form of harassment and thereby become disruptive and subject to treatment as "disruptive behavior." Examples of inappropriate behavior include, but are not limited to, the following:

- 1. Belittling or berating statements.
- 2. Name calling.
- 3. Use of profanity or disrespectful language.
- 4. Inappropriate comments written in the medical record
- 5. Blatant failure to respond to patient care needs or staff excess.
- 6. Deliberate refusal to return phone calls, pages, or other messages concerning patient care or safety.
- 7. Inappropriate comments or behavior in meetings.
- 8. Intentional condescending language; and

Degrading or demeaning comments regarding patients, patient families, nurses, physicians, allied health professionals, LCMC HEALTH pesantel or contractors and/or LCMC HEALTH.

#### C. Disruptive Behavior

Disruptive behavior by learners is prohibited. Examples of disruptive behavior include, but are not limited to, the following:

- 1. Physically threatening language directed at anyone at LCMC HEALTH including, physicians, nurses, other medical staff members, patients, their families, any hospital employee, administrator, or member of the Board of Directors.
- 2. Physical contact with another individual that is threatening or intimidating.
- 3. Throwing instruments, charts, or other items.
- 4. Threats of violence or retribution.
- 5. Sexual harassment.
- 6.Other forms of harassment including, but not limited to, persistent inappropriate behavior and repeated threats of litigation; and
- 7. Repetitive inappropriate comments or disruptions inmeetings.

#### D. GENERAL GUIDELINES/PRINCIPLES

- Issues of employee conduct will be dealt with in accordance with LCMC
  HEALTH's Human Resources Policies. Issues of conduct by members of the
  Medical Staff will be addressed in accordance with the Code of Conduct
  applicable to the LCMC HEALTH Medical staff. Employees and providers are
  expected to adhere to the code of conduct applicable to them, which codes
  are substantially like this Code applicable to learners.
- 2. This Code of Conduct outlines the steps that can be taken to address concerns about inappropriate conduct by learners. However, a single incident of inappropriate conduct or a pattern of inappropriate conduct may be so unacceptable that immediate action is required. Therefore, nothing in this policy precludes an immediate suspension of a learner from access to LCMC HEALTH and immediate referral of a matter being addressed through this policy to the learner's school or program the elimination of any step in this Code of Conduct.
- 3. LCMC HEALTH Academic Affairs, or its designee, shall provide education to all learners regarding the Learner Code of Conduct, and appropriate professional behavior, at the time of onboarding and/or orientation. The Medical Staff leadership and Hospital Administration shall also make employees, members of the Medical Staff, and other personnel in the hospital aware of this policy and shall institute procedures to facilitate prompt reporting of inappropriate conduct and prompt action as appropriate under the circumstances.

#### VII. COMPLAINT CONTENT

Every individual should feel free to lodge a complaint in good faith about

unprofessional behavior without fear of reprisal or retaliation. Learners have an obligation to address and/or report incidents of inappropriate and disruptive behavior. Complaints regarding allegedly inappropriate or disruptive behavior should reported to the appropriate LCMC Health hospital administrator or designee and can be submitted through RL Solutions (BSAFE), or other incident reporting system.

The complaint should include, to the extent feasible:

- 1. Name of individual exhibiting disruptive or inappropriate behavior, the dates(s), time(s), and location of the behavior.
- 2. A factual description of the inappropriate or disruptive behavior.
- 3. The circumstances which precipitated the incident.
- 4. The name and medical record number of any patients or patients' family members who were involved in or witnessed the incident.
- 5. The names of other witnesses to the incident.
- 6. The consequences, if any, of the inappropriate or disruptive behavior as it relates to patient care or safety, or LCMC HEALTH personnel or operations; and
- 7. Any action taken to intervene in, or remedy, the incident, including the names of those intervening.

## VIII. PROCEDURE – COMPLAINTS INVOLVING LEARNERS EXHIBITING INAPPROPRIATE OR DISRUPTIVE BEHAVIOR

- The appropriate LCMC Health hospital administrator or designee will screen all complaints to determine the authenticity and severity of the complaint. If the complaint is clearly invalid, it may be summarily dismissed. If it is determined that the complaint may have validity, the designee may, speak with the complainant, or others, for additional information.
- 2. All complaints that may have validity wherein the person complained about a learner may be forwarded to the learner's school or program for handling in accordance with that school's policies and procedures.
- 3. With evidence of a pattern and/or repeat complaints regarding a learner's conduct, the appropriate LCMC Health hospital administrator or designee may request that the learner be removed from the LCMC Health learning environment until which a time a performance improvement or corrective action plan is submitted to and approved by the LCMC Health hospital administrator or designee.
- 4. Any complaint that may be reflective of a potential underlying wellbeing issue for the learner will immediately be flagged for the learner's supervising school officials so that it can be reviewed for wellbeing/wellness issue.
- 5. The appropriate LCMC Health hospital administrator or designee will

immediately notify LCMC HEALTH counsel of any complaint that poses an immediate threat to patient care or the safety of others or LCMC HEALTH personnel or operations or constitutes alleged harassment and/or sexual harassment by a learner. The appropriate LCMC Health hospital administrator or designee will inform others including LCMC HEALTH Public Safety or IT where necessary to prevent harm, suspend all badge access, parking access, email access, and medical record/EPIC access that has been assigned to the learner. The learner's school shall be immediately notified of said suspension.

- 6. Each hospital's leadership should be kept informed regarding the status of a complaint referred to the learner's school by the school. Upon resolution of the complaint, and after the school confirms the learner's fitness to return to duty, badge access, and medical record/ EPIC access can be restored. Access shall not be reinstated prior to this time.
- 7. Nothing herein shall require LCMC HEALTH to allow the learner access to future work/rotations in the event of egregious activity, which shall be determined (a) in accordance with any contract then in place by and between LCMC HEALTH and the learner's school or, (b) if said contract is silent, solely in LCMC HEALTH's discretion.

#### IX. CONFIDENTIALITY

The complaint investigation procedure is intended to be a confidential procedure. All parties to the process are expected to respect and maintain the confidentiality of the process and not to divulge the details of the investigation to anyone. Where there is any risk to other learners, providers, employees or patients, disclosure will be made to the extent necessary to offer adequate protection.

## X. PROCEDURE – COMPLAINTS REGARDING BEHAVIOR DIRECTED TOWARD A LEARNER BY ANYONE OTHER THAN ANOTHER LEARNER

Inappropriate or disruptive behavior which is directed against a learner by a LCMC HEALTH employee, administrator, board member, contractor, or other member of the LCMC HEALTH community, including LCMC HEALTH Medical Staff, shall be reported by the learner to the appropriate LCMC Health hospital administrator or designee for referral to the appropriate person, department, or entity, including, without limitation, human resources, state or federal government, or relevant accrediting body for further investigation and handling.

#### XI. AWARENESS OF LEARNERS CODE OF CONDUCT

LCMC HEALTH shall promote continuing awareness of this Code of Conduct among learners by:

- 1. Sponsoring or supporting educational programs on disruptive behavior offered to learners, Medical Staff members and/or LCMC HEALTH employees.
- 2. Disseminating this Code of Conduct to all learners at orientation.
- 3. Educating learners, Medical Staff members and LCMC HEALTH employees regarding the procedures LCMC HEALTH has put into place for effective communication of any learner's concerns, complaints, and suggestions.
- 4. Obtaining acknowledgement statements from all learners, whenever reasonable and possible, either in a written or electronic, via LCMC HEALTH U. (See Exhibit I).

#### **EXHIBIT 1**

#### **CODE OF CONDUCT**

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This is to acknowledge that I have read and understand the LCMC HEALTH Learner Code o
Conduct. I hereby authorize LCMC HEALTH and my school to communicate with each other
as outlined in the Code of Conduct where necessary.

(Print Name)		
Signature	 Date	