

### Categorization of Behavioral Incidents

Name	Code	Definition	Source	Usual Action
Practitioner Care Improvement Opportunity	Improv	Care which involves simple errors or diagnosis, treatment or judgment by the index physician. May include instances where a practitioner has drifted into a practice pattern which may increase the likelihood of human error and needs coaching and/or education to correct this.	Policy: Medical Staff Professional Practice Evaluation (February 2010)	<u>Med Staff:</u> PPEC <u>Housestaff:</u> Program Director
Inappropriate Care	InapproCare	Care which is clearly outside the acceptable practice (as determined by the reviewing committee) – raises concerns whether the practitioner might require significant education and/or coaching to prevent recurrence	Policy: Medical Staff Professional Practice Evaluation (February 2010)	<u>Med Staff:</u> PPEC <u>Housestaff:</u> Program Director
Inappropriate Care - Severe	InapproCareS	Cases which suggest a reckless disregard of the practitioner’s duty to the patient, through gross negligence, general incompetence or actual intent to provide substandard care.	Policy: Medical Staff Professional Practice Evaluation (February 2010)	Chief of Staff
Inappropriate Behavior	InapproBeh	<p>Conduct that is unwarranted and is reasonably interpreted to be demeaning or offensive. Persistent, repeated inappropriate behavior can become a form of harassment and thereby become disruptive, and subject to treatment as “disruptive behavior.” Examples include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Belittling or berating statements</li> <li>• Name calling</li> <li>• Use of profanity or disrespectful language</li> <li>• Inappropriate comments in the medical record</li> <li>• Blatant failure to respond to patient care needs or staff requests</li> <li>• Personal sarcasm or cynicism</li> <li>• Lack of cooperation without good cause</li> <li>• Refusal to return phone calls, pages or other messages concerning patient care</li> <li>• Condescending language; and degrading or</li> </ul>	Policy: Medical Staff Code of Professional Behavior (February 2010)	<u>Med Staff:</u> COP Process <u>Housestaff:</u> Program Director

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Name	Code	Definition	Source	Usual Action
		demeaning comments regarding patients and their families; nurses, physicians, hospital personnel and/or the hospital		
Disruptive Behavior	Disrup	<p>Any abusive conduct 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. Examples include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Physically threatening language directed at anyone in the hospital including physicians, nurses, other Medical Staff members, or any hospital employee, administrator or member of the Board of Directors.</li> <li>• Physician conduct with another individual that is threatening or intimidating</li> <li>• Throwing instruments, charts or other things</li> <li>• Threats of violence or retribution</li> <li>• Sexual harassment</li> <li>• Other forms of harassment, including but not limited to, persistent, inappropriate behavior and repeated threats of litigation</li> <li>• Repetitive inappropriate comments or disruptions in meetings</li> </ul>	Policy: Medical Staff Code of Professional Behavior (February 2010)	<u>Med Staff:</u> COP Process <u>Housestaff:</u> Program Director
Care Systems Improvement Opportunity	PI	A means to improve the care system to reduce caregiver errors, mitigate the effect of any errors, or otherwise better support the care process. This rating will apply whenever a system improvement opportunity is identified independent of any individual practitioner's rating.	Policy: Medical Staff Professional Practice Evaluation (February 2010)	Local supervisor, QPSED, other
Not applicable	NA	Further investigation did not substantiate the original report.	None	Delete incident