Professional Standard Regarding Disruptive Behaviour by Physicians

This document is a **standard** approved by the Council of the College of Physicians and Surgeons of Nova Scotia.

A **standard** reflects the minimum professional and ethical behaviour, conduct or practice expected by the College of Physicians and Surgeons of Nova Scotia. Physicians licensed with the College are required to be familiar with and comply with the College **standards**.

**Purpose**

This professional standard provides specific guidance regarding the College’s expectations of physician behaviour in the professional environment.

As professionals, physicians are expected to act in a courteous, dignified and civil manner toward their patients and toward other health-care providers.

**Disruptive Behaviour**

Disruptive behaviour occurs when the use of inappropriate words, actions or inactions by physicians interferes with their ability to function well with others to the extent that the behaviour interferes with, or is likely to interfere with, quality health care delivery.

**Professional Standard**

Physicians are expected to behave in a professional, non-disruptive manner when dealing with patients and colleagues. Examples of non-professional, disruptive behaviour covered by this standard are described below.
Causes of Unprofessional Behaviour

There are many reasons for unprofessional behaviour. Such behaviour may have been learned through poor role models and entrenched through habit; it may be in response to a difficult or unhealthy work environment; or there may be physical or mental health bases for unprofessional behaviour (especially if the behaviour is new). Many physicians also face stress and exhaustion in their regular work which can contribute to lapses in appropriate behaviour. In all situations involving disruptive behaviour, the College urges physicians to seek assistance in addressing the behaviour. A particularly valuable resource is the Professional Support Program (PSP) at Doctors Nova Scotia. Note that interactions with the PSP are confidential.

Examples of Disruptive Behaviour

If one or more of the following behaviours occurs and/or interferes with a physician’s ability to work with others to the extent that quality health care delivery may be impeded, the behaviour is likely disruptive.

Inappropriate Words

- Profane, disrespectful, insulting, demeaning or abusive language
- Shaming others for negative outcomes
- Demeaning comments or intimidation
- Inappropriate arguments with patients, family members, staff or other care providers
- Rudeness
- Boundary violations with patients, family members, staff or other care providers
- Gratuitous negative comments about another physician’s care (orally or in chart notes)
- Passing severe judgment or censuring colleagues or staff in front of patients, visitors or other staff
- Outbursts of anger
- Bullying
- Insensitive comments about a patient’s medical condition, appearance, or situation
- Jokes or non-clinical comments about race, ethnicity, religion, sexual orientation, age, physical appearance, and socioeconomic or educational status. (See Nova Scotia Human Rights Act below)

Inappropriate Actions/Inaction

- Throwing or breaking things
- Refusing to comply with known and generally accepted practice standards such that the refusal inhibits staff or other care providers from delivering quality care. (These include failing to follow standard infection-control procedures and refusing to complete patient medical documentation such as admission histories, physical examinations or surgical operating room reports in a timely manner)
- Using or threatening unwarranted physical force with patients, family members, staff or other care providers
- Repeatedly failing to respond to calls or requests for information or persistent lateness in responding to calls for assistance when on-call or when expected to be available
- Failing to work collaboratively or cooperatively with others
- Creating rigid or inflexible barriers to requests for assistance/cooperation

**Potentially Justifiable Behaviour**

The College recognizes advocacy as an important component of the doctor-patient relationship. Physicians have an individual and collective responsibility to advocate for their patients.

However, in the course of such advocacy, physicians may find themselves in conflict with colleagues or the administration of the institution in which they work. In such circumstances, it may be difficult to evaluate whether the behaviour is disruptive, as defined in this standard. Physicians should carefully assess the impact of their conduct on their ability to deliver quality health care and behave accordingly.

**Interaction with the College**

The expectation of courteous, dignified and civil behaviour extends to interaction with the College. It is unprofessional conduct for a member to refuse to reasonably cooperate with the College. Further information is contained in Professional Standard Regarding Physician Co-operation with the College (see below).

**Further Reading**

CPSNS: Professional Standard Regarding Physician Co-operation with the College

CPSO: Physician Behaviour in the Professional Environment

CPSO: Managing Disruptive Physician Behaviour

Nova Scotia Human Rights Act

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**Document History**

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