

NATIONAL INSTITUTE OF AYURVEDA

JORAWAR SINGH GATE, AMER ROAD

JAIPUR - 302002 (RAJASTHAN) INDIA

NIA Staff Code of Professional Behavior

I. PURPOSE

To encourage a Fair and immediate Culture - which in turn facilitates the highest standards of safety and quality - the Staff of National Institute of Ayurveda has adopted this Code of Conduct as part of our Staff bylaws, which shall be the primary means for review and disciplining members for inappropriate or disruptive behavior.


A high standard of professional behavior, ethics and integrity are expected of each individual member of the Staff at National Institute of Ayurveda. This Code is a statement of the ideals and guidelines for professional behavior of the Staff in all dealings with patients, their families, other health professionals, employees, students, vendors, government agencies, and others, aiming for the highest levels of patient care, trust, integrity and honesty.

II. POLICY STATEMENT

Institute Staff members have a responsibility for the welfare, well-being, and betterment of their patients, along with a responsibility to maintain their own professional and personal well-being. Each Staff member is expected to treat all fellow NIA Staff members, hospital staff, house staff, students, and patients with courtesy and respect and with regard for their dignity.

When a member is found to have fallen short of these expectations, the NIA Staff supports tiered, non-confrontational intervention strategies focused on restoring trust, placing accountability on, and rehabilitating the offending Staff member. However, the safeguarding of patient care and safety is paramount, and the Staff will enforce this policy with disciplinary measures whenever necessary.


The evaluation, monitoring and regulation of professional behavior are essential elements of Professional Practice Evaluation, and this document is a supplement to the Staff Professional


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Practice Evaluation policy. Confidentiality and conflicts of interest are addressed in that policy (and in the Conflict of Interest for NIA Staff policy) and apply equally to this policy.

III. DEFINITIONS

1. "Appropriate behavior" includes any reasonable conduct to advocate for patients, to recommend improvements in patient care, to participate in the operations, leadership or activities of the organized NIA Staff, or to engage in professional practice including practice that may be in competition with the hospital. Appropriate behavior is not subject to discipline under these bylaws.
2. "Inappropriate behavior" means 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."
3. "Disruptive behavior" means 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.
4. "Harassment" means conduct toward others based on but not limited to their race, religious creed, color, national origin, physical or mental disability, marital status, sex, age, sexual orientation, or veteran status; which has the purpose or direct effect of unreasonably interfering with a person's work performance or which creates an offensive, intimidating or otherwise hostile work environment.
5. "Sexual harassment" means unwelcome sexual advances, requests for sexual favors, or verbal or physical activity through which submission to sexual advances is made an explicit or implicit condition of employment or future employment-related decisions; unwelcome conduct of a sexual nature which has the purpose or effect of unreasonably interfering with a person's work performance or which creates an offensive intimidating or otherwise hostile work environment.
6. "NIA Staff member" means physicians, nursing staff, MTS, academic staff and others granted membership on the NIA Staff and, for purposes of this Code, includes individuals with temporary clinical privileges.


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7. This policy applies to behavior directed toward any individual who is associated with NIA, including employees, colleagues, patients, families, visitors, vendors and other associates. The policy may also apply to behavior which occurs outside of NIA physical boundaries, if it is directed toward any of the above persons.

IV. STANDARDS OF BEHAVIOR

A) Inappropriate Behavior

Inappropriate behavior by NIA Staff members is strongly 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:

- ✦ Belittling or berating statements; Name calling;
- ✦ Use of profanity or disrespectful language;
- ✦ Inappropriate comments written in the medical record;
- ✦ Blatant failure to respond to patient care needs or staff requests;
- ✦ Personal sarcasm or cynicism;
- ✦ Lack of cooperation without good cause;
- ✦ Refusal to return phone calls, pages, or other messages concerning patient care.
- ✦ Condescending language; and degrading or demeaning comments regarding patients and their families; nurses, physicians, hospital personnel and/or the hospital.
- ✦ Inappropriate comments or behaviors in meetings

B) Disruptive Behavior

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

- ✦ Physically threatening language directed at anyone in the hospital including physicians, nurses, other NIA Staff members, or any hospital employee, administrator or member of the Institute;
- ✦ Physical contact with another individual that is threatening or intimidating;
- ✦ Throwing instruments, charts or other things;

- ✦ Threats of violence or retribution;
- ✦ Sexual harassment; and,
- ✦ Other forms of harassment including, but not limited to, persistent inappropriate behavior and repeated threats of litigation.
- ✦ Repetitive inappropriate comments or disruptions in meetings.

V. PROCEDURES


A. Delegation by chairperson of Staff committee-

At the discretion of the chairperson of Staff committee (or Vice chairperson if the chairperson of Staff committee is the subject of the complaint), the duties here assigned to the chairperson of Staff committee can be delegated to a designee (who are part of the Staff committee).

B. Initiation of Complaints

NIA Staff Members have an obligation to address and/or report incidents of inappropriate and disruptive behavior. Complaints about a member of the NIA Staff regarding allegedly inappropriate or disruptive behavior are encouraged to be in writing, signed, and directed to the chairperson of Staff committee or, if the chairperson of Staff committee is the subject of the complaint, to the Vice Chairperson of Staff, and include to the extent feasible:

- 1) the date(s), time(s) and location of the inappropriate or disruptive 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 patient or patient's family member who was 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 hospital personnel or operations; and
- 7) any action taken to intervene in, or remedy, the incident, including the names of those intervening.


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Persons making a complaint should be aware that a written and signed complaint is quite helpful in enabling the NIA Staff to conduct a thorough and valid investigation, although anonymous complaints will also be accepted, investigated and addressed to the degree possible.

C) Handling of Complaints

1. The Chairperson of staff or designee will screen all complaints to determine the authenticity and severity of the complaint. If the complaint is clearly not valid, it may be summarily dismissed. If it is determined that the complaint may have substantial validity, the chairperson of staff or designee will speak with the complainant and the subject of the complaint.
2. NIA Staff members who are the subject of a complaint shall be provided a summary of the complaint and a copy of this Policy in a timely fashion, in no case more than 30 days from receipt of the complaint by the Chairperson of staff or designee. The subject shall be offered an opportunity to provide a written response to the complaint, and any such response will be kept along with the original complaint in all relevant files.
3. The NIA Staff member will be notified that attempts to confront, intimidate, or otherwise retaliate against the complainant is a violation of this Code of Conduct and may result in corrective action against the NIA Staff member.
4. The complainant will also be provided a written acknowledgement of the complaint and an explanation of how complaints are handled. If the complaint is determined to have no substance or validity, the complainant will be counseled regarding appropriate use of the incident reporting system.
5. After discussion with the NIA Staff member, the chairperson of staff or designee will document the disposition of each complaint, as outlined below, and a record shall be kept in the Quality Department files as well as the chairperson of staff office files.
6. Chiefs of Service will be kept informed regarding complaints directed toward their members. This should always occur at the time of final disposition (for routine complaints), but the Chairperson will also be informed earlier in the process when indicated by the seriousness or repetitive nature of the incident.



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D) Consequences

1. If this is the first incident of inappropriate behavior, the chairperson of staff or designee shall discuss the matter with the offending NIA Staff member, emphasizing that the behavior is inappropriate and must cease. The offending NIA Staff member may be asked to apologize to the complainant. The approach during this initial intervention should be collegial and helpful.
2. Further isolated incidents that do not constitute persistent, repeated inappropriate behavior will be handled by providing the offending NIA Staff member with notification of each incident, and a reminder of the expectation the individual comply with this Code of Behavior.
3. If the chairperson of staff or designee determines the NIA Staff member has demonstrated persistent, repeated inappropriate behavior, constituting harassment (a form of disruptive behavior), or has engaged in disruptive behavior on the first offense, the case will be referred to the Chairperson of staff (chairperson of staff). The subject will be notified of this decision and given an opportunity to provide a written response both prior to and subsequent to meeting with the chairperson of staff or committee.
4. Chiefs of Service will be notified and invited to provide input whenever a referral is received by the chairperson of staff or committee. Chiefs will also be kept informed of any further actions taken by the chairperson of staff or committee, as described below.
5. If it is determined that the subject has engaged in disruptive behavior, a letter of admonition will be sent to the offending member, and, as appropriate, a rehabilitation action plan developed by the chairperson of staff and/or committee, with the advice and counsel of the medical executive committee as indicated. The assistance of the Wellbeing Committee may be offered at any stage of this process.
6. If, in spite of this admonition and intervention, disruptive behavior recurs, the chairperson of staff or designee shall meet with and advise the offending NIA Staff member such behavior must immediately cease or corrective action will be initiated. This "final warning" shall be sent to the offending NIA Staff member in writing.
7. If after the "final warning" the disruptive behavior recurs, corrective action (including possible suspension or termination of privileges) shall be initiated pursuant to the NIA Staff bylaws of

which this Code of Behavior is a part, and the NIA Staff member shall have all of the due process rights set forth in the NIA Staff bylaws.

8. If a single incident of disruptive behavior or repeated incidents of disruptive behavior constitute an imminent danger to the health of an individual or individuals, the offending NIA Staff member may be summarily suspended as provided in the NIA Staff bylaws. The NIA Staff member shall have all of the due process rights set forth in the NIA Staff bylaws.

9. A confidential file summarizing the disposition of the complaint, along with copies of any written warnings, letters of apology, and written responses from the offending NIA Staff member, shall be retained in the chairperson of staff office for up to 33 years.

VI. BEHAVIOR DIRECTED AGAINST A NIA STAFF MEMBER:

Inappropriate or disruptive behavior which is directed against the organized NIA Staff or directed against a NIA Staff member by a hospital employee, administrator, board member, contractor, or other member of the hospital community shall be reported by the NIA Staff member to the hospital pursuant to hospital policy or Code of Behavior, or directly to the hospital governing board or relevant accrediting body, as appropriate.


VII. ABUSE OF PROCESS:

Threats or actions directed against the complainant by the subject of the complaint will not be tolerated under any circumstance. Retaliation or attempted retaliation by NIA Staff members against complainants will give rise to corrective action pursuant to the NIA Staff bylaws. Individuals who falsely submit a complaint or otherwise abuse this process shall be subject to corrective action under the NIA Staff bylaws or hospital employment policies, whichever applies to the individual.

VIII. AWARENESS OF CODE OF CONDUCT:

The NIA Staff shall, in cooperation with the hospital, promote continuing awareness of this Code of Behavior among the NIA Staff and the hospital community, by:

1. Sponsoring or supporting educational programs on disruptive behavior to be offered to NIA Staff members and hospital employees;


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2. Disseminating this Code of Behavior Policy to all current NIA Staff members upon its adoption and to all new applicants for membership to the NIA Staff.
3. Encouraging the Wellbeing Committee to assist members of the NIA Staff exhibiting inappropriate or disruptive behavior to obtain education, behavior modification, or other treatment to prevent further infractions.
4. Educating the members and the hospital staff regarding the procedures the NIA Staff and hospital have put into place for effective communication to hospital administration of any NIA Staff member's concerns, complaints and suggestions regarding hospital personnel, equipment, and systems.

A. Author/Original Date:

This Policy was authored by the Director, NIA Staff Services in April, 2018.

B. Gatekeeper of Original Document:

The Director, NIA Staff Services (or designee), who will be responsible for initiating its review and revision. The Policy will reside in the Credentials Policy and Procedure Manual, a copy of which is kept in the Credentials Department and in the NIA Staff Office.


C. Distribution and Training Requirements:

The distribution and training requirements for this Policy will be handled through the Credentials Department.

D. Review and Renewal Requirements:

This Policy will be reviewed and/or revised every three years or as required by change of law or practice.

This document is intended for use by staff of National Institute of Ayurveda, Jaipur, Rajasthan under the ministry of AYUSH.


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APPENDIX A


Constitution of Committee on Professional Ethics

The following Committee is constituted to look into any allegations of breach of professional ethics by the Staff and Faculty of National Institute of Ayurveda :

Chairperson	Prof. Sanjeev Sharma	(Director, NIA)
Vice –Chairperson	Prof. Meeta Kotecha	(Dean, UG Study)

Members		
Name	Designation	Phone No.
Prof. B.L.Gaur	(Ex Vice Chancellor D.S.R.R.A.U.)	98290776970141-234034
Prof. Radheshyam Sharma	(Vice Chancellor D.S.R.R.A.U.)	9828016668
Prof. K. Shankar Rao	(Dean, PhD)	9887181781
Prof. Ram Kishor Joshi	(DMS, Secretary to the Committee)	9414322297
Dr. O.P. Dhadhich	(Dean, PG Study)	9829264232
Prof. Pawan Godatwar	(Dean of Research)	9314502834
Prof. Surendra Sharma	(Controller of Examinations)	9414361874
Dr. H.M.L Meena	(Dean Paramedical courses)	9461297017
Jai Prakash Sharma	(Deputy Director)	9414042886

The Committee shall hold its meetings as and when allegations of breach of professional ethics are handed over to it by the Director. In each case, the Committee shall hold its meeting/s expeditiously and submit its report and recommendations to the Director within 15 days. The Committee shall function with immediate effect, and shall continue to do so unless it is dissolved or re-constituted. As matters of breach of professional ethics call for expeditious action, the Committee Meetings may be convened by Vice chairperson or Secretary to the Committee in the absence of the Chairman.


Director
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