

**POLICIES & PROCEDURES
GOOD SAMARITAN HEALTH CENTER
MERRILL, WISCONSIN**

Department: Administration/Medical Staff
New Policy X Effective Date 6/1/95
Date Revised & Reviewed 12/2006; 5/2007
Initiated By:
Name Michael Hammer
Title Hospital President
Date 12/2006

Policy #
Approved By:

Gregory G... 5/25/07
Medical Staff President **Date**

Michael Hammer 7/26/07
Board of Directors **Date**
Hospital President **Date**

SUBJECT: HARASSMENT BY A MEDICAL STAFF MEMBER

POLICY:

The Federal Equal Employment Opportunity Commission has declared that sexual harassment and harassment based on other protected classifications such as race, color, national origin, religion, disability, or age, constitute illegal discrimination under Title VII of the Civil Right Act of 1964. It is also illegal under the Wisconsin Fair Employment Act, along with harassment based on creed, sexual orientation, marital status and other Wisconsin protected classifications. It is and has been the policy of this hospital that sexual or other unlawful harassment of or by employees, patients, professional staff appointees, and others has no place and will not be tolerated in this hospital.

GUIDELINES:

1. Definition of Sexual Harassment – only sexual conduct that is unwelcome constitutes a violation of the hospital’s policy prohibiting sexual harassment. Sexual conduct is not limited to sexual touching, but includes demeaning sexual inquiries, vulgarity and sexual displays and sexual intimidation. “Unwelcome” sexual conduct constitutes illegal discrimination when “submission to such conduct is made either explicitly or implicitly a term or condition of an individual’s employment”. All other unwelcome sexual conduct will also be deemed to violate hospital policy even though it would not be considered unlawful discrimination.
 - A) Two types of sexual harassment constitute illegal discrimination
 - 1) Quid pro quo harassment – occurs when submission to or rejection of unwelcome sexual conduct by an individual is used as the basis for employment decisions affecting such individuals:
 - 2) Hostile environment – occurs when unwelcome sexual conduct unreasonably interferes with an individual’s job performance or creates an intimidating, hostile or offensive working environment.

2. Refer to GSHC Personnel Handbook regarding Sexual Harassment by employees for additional explanation of conduct constituting sexual harassment.
3. Definition of Other Unlawful Harassment – offensive conduct such as derogatory comments, jokes, slurs or physical displays or other verbal or physical conduct based on a person’s race, color, religion, national origin, ethnicity, creed, sexual orientation, marital status, disability or age, that is unwelcome and offense and is severe and pervasive. Unwelcome conduct of this nature that is not severe or pervasive will also be deemed to violate hospital policy even though it would not be constitute unlawful discrimination.

PROCEDURE:

If any individual working in the hospital has observed or has been the victim of conduct by a professional staff member that constitutes sexual or other unlawful harassment, the following steps should be taken:

1. A written report should be filed with the employee’s supervisor (unless the supervisor is the harasser) who shall forward it to the GSHC Hospital President. The report shall include a factual description of the incident or statement. If the supervisor is the harasser, the written report should be filed with the supervisor’s superior.
2. If, after a discussion with the individual who filed the report and other individuals who may have observed the reported conduct, it is found to constitute a credible report of conduct that constitutes sexual or other unlawful harassment, the GSHC Hospital President shall share the complaint(s) with the President of the Medical Staff.
3. The Medical Staff member involved shall be required to meet with hospital and professional staff leadership—the GSHC Hospital President and Medical Staff President. The Medical Staff member shall be advised of the complaint(s) and be given an opportunity to respond. If, at the conclusion of that discussion, hospital and professional staff leadership believe that the reported acts did occur, the Medical Staff member shall be advised that such conduct is intolerable and in violation of state and federal law, except that a higher level of corrective action may be imposed in more severe cases. Documentation of any discussions related to the complaint and related documents will be kept for five years. If no additional reports or incidents are reported, those documents may then be destroyed. Corrective action will be based upon the severity of the conduct in accordance with the Medical Staff Bylaws and will become a part of the Medical Staff member’s permanent file.
4. The matter shall be reported to the Medical Executive Committee, along with an explanation of the circumstances and the applicable state and federal law.
5. In cases where hospital and professional leadership issue only a reprimand and warning, any further confirmed reports of harassment shall result in precautionary suspension of the individual and exclusion from the work place for up to 14 days by the GSHC Hospital President in accordance with the Medical Staff Bylaws or institution of formal corrective action in accordance with the Medical Staff Bylaws or both.