APPENDIX B

MEDICAL STAFFS POLICY ON SEXUAL AND OTHER HARASSMENT

Virtua Health is committed to providing a work environment in which productivity, interpersonal relations and behavior are promoted in a fair and professional manner and free from illegal discrimination and harassment. It is the policy of Virtua Health that harassment in any form, whether verbal, physical or environmental, is unacceptable and will not be tolerated. This policy reaffirms Virtua Health's commitment that all employee/practitioners should be able to enjoy a work environment free from all forms of discrimination including sexual harassment, and reaffirms that Virtua Health is an equal opportunity employer.

Although much of this policy is framed in terms of sexual harassment, it applies equally to harassment and discrimination of any sort whether based upon sex, gender, race, age, disability, religion, ethnicity, sexual preference or other individual or group characteristics protected by federal, state and local law.

This Medical Staffs Policy conforms to the Virtua-wide policy that covers all employees of Virtua Health as well as physicians and others doing business with Virtua Health and visitors, patients and family members. Virtua Health will not condone or allow illegal harassment and/or discrimination, whether engaged in by fellow employee/practitioners, supervisors or non-employee/practitioners (including medical staffs) who conduct business with Virtua Health. Virtua Health encourages reporting of all incidents of harassment and discrimination, regardless of whomever the offender may be.

DEFINITIONS

Sexual harassment in the workplace is offensive, unwelcome or unwanted verbal and/or physical conduct of a sexual nature. It is behavior:

- (a) In which there is an explicit or implicit threat that a refusal to submit or a rejection of the conduct will adversely affect an employee's employment evaluation, work advancement, assignment, or other condition of employment or when preferential treatment is promised in return for engaging in sexual conduct, and/or
- (b) Which creates an intimidating, offensive or hostile work environment or substantially interferes with an employee/practitioners work performance.

Inappropriate behavior in the workplace is behavior that is based on sex, gender, race, age, disability, religion, ethnic background, etc. Examples may include, but are not limited to:

(a) linking sexual behavior to employment, evaluation, pay, promotion, assignment or any other aspect of employment;

- (b) unwelcome sexual flirtation, touching, advances, or similar behavior;
- (c) gestures or verbal abuse of a sexual nature;
- (d) sexually graphic or suggestive comments about an individual's or group's dress, body, appearance or activities;
- (e) jokes, comments or stories which have the purpose or effect of stereotyping, demeaning or making fun of any individual or group;
- (f) using sexually degrading words or gestures to describe an individual or group, including innuendoes, epithets, derogatory slurs, off-color jokes, propositions, graphic commentaries, threats, and/or suggestive or insulting sounds;\
- (g) displaying objects or pictures in the work place which are sexually suggestive and/or offensive due to their racial, gender, age, ethnic, disability, and/or religious perspectives;
- (h) graphic or suggestive gestures, comments and/or abuse about an individual's or group's dress, body, appearance or activities based on race, ethnic background, age, gender, disability, religion or other personal attributes;
- (i) E-mail or internet use that violates policy.

Harassment of any kind is unacceptable in the work place and in other work-related settings, such as business trips and business-related social events, and in non-work settings if the conduct affects the work relationship.

REPORTING GUIDELINES

- (a) Any employee/practitioner or practitioner who believes he/she is being harassed is encouraged to notify the individual(s) involved firmly and promptly that the behavior is unwelcome.
- (b) If a discussion is not possible due to the relationship between the employee/practitioner and the offender(s), or if the employee/practitioner is uncomfortable with raising the issue with the offender or is not satisfied with the resolution of the problem, the following steps must be followed:
 - (1) The employee must notify his/her Human Resources Manager immediately. Physicians should notify employees' supervisors or the President of the Medical Staff.
 - (2) If the employee/practitioner is uncomfortable in notifying the Human Resources Manager, or is not satisfied with the action or resolution after notifying his/her Human Resources Manager, he/she should notify the Director, HR Client Relations.

- (3) Any questions regarding the policy or possible harassment can also be brought to the attention of the same people and/or the employee/practitioner's direct supervisor.
- (c) Employee/practitioners are encouraged to report all incidents of harassment, regardless of who the offender may be.
- (d) Employee/practitioners also always have the option of reporting issues/concerns to Virtua Health's Corporate Compliance Hotline: 800-268-0502.

The individual who reports an incident shall be requested to document it in writing. If he or she does not wish to do so, the supervisor or Medical Administrative Contact (Medical Staff President, Department Chairperson, CCEO (or designee), orVPMA) may document it, after attempting to ascertain the individual's reasons for declining and encouraging the individual to do so.

The documentation should include:

- (a) the date and time of the incident;
- (b) a factual description of the questionable behavior;
- (c) the name of any patient or patient's family member who may have been involved in the incident, including any patient or family member who may have witnessed the incident;
- (d) the circumstances which precipitated the incident;
- (e) the names of other witnesses to the incident;
- (f) consequences, if any, of the behavior as it relates to patient care, personnel, or Hospital operations;
- (g) any action taken to intervene in, or remedy, the incident; and
- (h) the name and signature of the individual reporting the matter

The Medical Administrative Contact shall follow up with the individual who made the report by informing him/her that the matter is being reviewed, offering thankings for reporting the matter and rendering instruction to report any further incidents of inappropriate conduct. The individual shall also be informed that, due to legal confidentiality requirements, no further information can be provided regarding the review of the matter.

INVESTIGATION AND RECOMMENDATIONS

Because of the unique legal implications surrounding sexual harassment, a single confirmed incident requires the following actions:

- (a) A meeting shall be held with the practitioner to discuss the incident. If the practitioner agrees to stop the conduct deemed specifically to constitute sexual harassment, the meeting shall be followed up with a formal letter of admonition and warning to be placed in the confidential portion of the practitioner's file. This letter shall also set forth those additional actions, if any, which result from the meeting. If the incident is so egregious as to merit further specific action, the matter shall be referred to the Executive Committee and Precautionary Suspension invoked if necessary.
- (b) If the practitioner refuses to stop the conduct immediately, this refusal shall result in the matter being referred to the Executive Committee for review pursuant to Article VII of the Bylaws.
- (c) Any reports of retaliation or any further reports of sexual harassment, after the practitioner has agreed to stop the improper conduct, shall result in an immediate investigation by the Medical Executive Committee (or its designee(s)). If the investigation results in a finding that further improper conduct took place, the matter shall be referred to the Executive Committee for a formal investigation or other steps in accordance with the Bylaws. Such referral shall not preclude other action under applicable hospital policies. Should the Executive Committee make a recommendation that entitles the individual to request a hearing under the Bylaws, the individual shall be provided with copies of all relevant complaints so that he or she can prepare for the hearing subject to agreement of the practitioner and counsel, if any, not to retaliate in any way.
- Investigation, Medical Executive Committee actions, and Hearings shall be as provided in Articles VII and VIII of the Bylaws. Referral for evaluation of Health Impairment may be made at any point during the investigation or Medical Executive Committee actions, as provided in the Health Impairment Policy.