SUMMARY

It is the policy of University Hospital not to tolerate any form of discrimination, harassment or other inappropriate workplace behavior. It is the obligation of every University Hospital employee to create a respectful workplace environment free of any discriminatory conduct, harassment or other inappropriate workplace behavior and to report such conduct if they become aware of it.

I. PURPOSE

This policy outlines University Hospital’s policy prohibiting any form of discrimination, harassment and other inappropriate workplace conduct and the procedures and mechanisms to resolve allegations of discrimination, harassment, including sexual harassment, and other inappropriate workplace conduct.

II. ACCOUNTABILITY

By direction of the President & CEO, and through the Chief Human Resources Officer, the Manager – EEO, Leaves and Labor Relations shall ensure compliance and implementation of this policy in conjunction with other members of management. It is the responsibility of every employee to demonstrate behavior in the spirit of this policy and to take appropriate action to eliminate discrimination, harassment and other inappropriate workplace conduct.
III. APPLICABILITY

This policy applies to all full-time, part-time, regular and temporary employees, Residents, applicants for employment, students, volunteers, patients, vendors, contractors, subcontractors and all parties engaged in business and educational relationships with the hospital.

IV. DEFINITIONS

A. Discrimination - an individual is subject to disparate treatment because of his or her protected class. Protected classes are race, color, national origin, ancestry, sex (including pregnancy), sexual orientation, gender identity or expression, disability, age, religion or creed, marital, familial, domestic partnership or civil union status, military or veteran status or genetic information.

B. Harassment –

1. Harassment (Protected Class) - is a form of discrimination that occurs when an individual because of his/her protected class is subjected to conduct that is sufficiently severe or pervasive to create an intimidating, hostile or offensive working or academic environment.

2. General Harassment (Non-Protected Class) - occurs when an individual is subjected to conduct that is sufficiently severe or pervasive to create an intimidating, hostile or offensive working or academic environment.

3. Sexual Harassment - unwelcome or unwanted sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature when it takes the form of:

   a. Quid Pro Quo Sexual Harassment - occurs when a supervisor makes or threatens to make a subordinate’s submissions to sexual demands a basis for academic or employment decisions.

   b. Hostile Environment Sexual Harassment - occurs when an individual is subjected to conduct because of his/her sex and that conduct is sufficiently severe or pervasive to create an intimidating, hostile, or offensive academic or working environment.
c. Third Party Sexual Harassment - occurs when the victim, who is not necessarily the target of the sexually harassing conduct, has his/her academic environment or terms and conditions of employment altered or compromised as a result of the sexually harassing conduct.

C. Consensual Relationships - shall include marriage, cohabitation, engagement, dating and other ongoing relationships of an intimate or close personal nature which passes beyond a platonic relationship.

D. Inappropriate workplace conduct – refers to conduct that is unprofessional and inappropriate in a workplace setting that does not rise to the level of harassment and/or discrimination based upon a protected class.

V. POLICY

A. General

One of the basic tenets of University Hospital’s Code of Conduct is the core value of respect for others. This value is expressed in the hospital’s commitment to a working and learning environment for all members of the University Hospital Community that is free from discrimination, harassment and other inappropriate workplace conduct. Therefore, the hospital prohibits any form of discrimination and harassment on the basis of race, national origin, creed, color, religion, disability, pregnancy, age, gender, gender identity and expression, sexual orientation, civil union or domestic partnership status, exercising rights to take Family Medical Leave, genetic information and other protected classifications in all educational, employment, research, healthcare delivery and service components. The hospital has established procedures to address and resolve allegations of discrimination, harassment and other inappropriate workplace conduct.

All forms of discrimination, harassment and other inappropriate workplace conduct and all attempts to commit such acts will not be tolerated and allegations involving such behavior will be addressed in accordance with this policy. Those employees found to have violated this policy will be subject to appropriate remedial and/or disciplinary action. Those students, volunteers, vendors or patients found to have violated this policy will be restricted from University Hospital, if appropriate.
B. Use of University Electronic Information Systems

Consistent with providing an environment free of objectionable, disrespectful and harassing conduct or communication, the direct or indirect use of the hospital’s computer information system, including but not limited to email, hospital owned or operated desktops, laptops, cell phones, PDAs, camera devices on cellular telephones, etc., in a manner inconsistent with hospital policy or existing law may subject the violator to discipline, including but not limited to termination. The hospital’s computing, networking, telephonic and information system resources may not be used to disseminate hate speech, harass others, access or view pornography or conduct illegal activity. Violations of this policy involving potentially illegal activity will be reported to Public Safety and appropriate law enforcement agencies.

C. Consensual Relationships:

The hospital prohibits any consensual relationship between employees, residents or students when one individual has authority, influence, or responsibility with regard to the other, including consensual relationships between anyone in a supervisory capacity over students and residents employed or not employed by the University. Such relationships may lead to circumstances which can be interpreted as sexual harassment or be viewed as causing a hostile or offensive work or academic environment when other individuals believe that the person(s) involved in the relationship(s) is (are) receiving favorable treatment in employment or educational decisions and actions. Persons engaging in such conduct may be subject to disciplinary action, if the conduct results in an offensive or hostile environment or interferes with the proper functioning of the hospital. Such consensual relationships may also violate University Hospital’s policy, Employment of Relatives and New Jersey State Ethics Conflict of Interest Law, N.J.S.A. 52:13D-21.2 Subchapter 7, the anti-nepotism provision.

An individual with supervisory or educational responsibility for an employee, resident or student must inform his or her superior of the consensual relationship, so that the hospital can take action to change the reporting relationship between the two people. If the hospital is unable to change the reporting relationship, the employees will be provided the opportunity to decide which one of the two will resign. Failure to give proper notice to the individual’s immediate superior may result in denial of legal representation and indemnification by the State in the event that a lawsuit is filed in connection with the relationship or considered a violation of this policy and subject the person to disciplinary action.
D. Workplace Violence:

The Department of Public Safety is designated as the primary resource of protection and assistance for those who are subject to violence or threats of violence. Employees are required and students are strongly encouraged, but not required, to report immediately any incident of violence or threat of violence to the Department of Public Safety for assistance and investigation.

Allegations of violence or threats of violence may also be reported to the Ethics and Compliance Helpline at 1-855-431-9966 or www.uhcompliancehelpline.alertline.com pursuant to this policy for administrative resolution only.

E. Complaint Resolution Procedures

1. Any member of the hospital community covered by this policy who is the target of or witness to discrimination and/or harassment as outlined in the policy is expected to immediately report the matter to the Ethics and Compliance Helpline at 1-855-431-9966 or at www.uhcompliancehelpline.alertline.com setting forth 1) a description of the incident or incidents of discrimination and/or harassment, 2) identifying any witnesses to the conduct and 3) indicating the response the individual believes would be appropriate.

2. The Office of Ethics and Compliance will jointly assess each complaint and retain them for investigation, or refer them to the relevant department which will review the matter, through any of the following methods: investigation, or informal review for resolution.

3. The result or outcome of any investigation must be communicated back to the Office of Ethics and Compliance along with any associated recommendations or corrective actions.

4. Corrective Action:

Departmental Management shall determine and take appropriate corrective action in consultation with Labor Relations, Legal Management, and/or the Manager – EEO, Leaves and Labor Relations, as warranted to address discrimination, harassment and inappropriate workplace conduct.
Corrective action may include, by way of illustration, but not limitation, directed counseling and/or mandatory education and training, warning, reprimand, probation, suspension or termination. Corrective actions shall be implemented fully and in a timely manner and will be documented in an employee’s official personnel file.

F. Retaliation:

The hospital prohibits retaliation against anyone who has filed complaints or cooperated in an investigation or proceeding designed to foster the implementation of this policy. No form of retaliation will be tolerated. Retaliation is a separate and distinct offense under this policy. Any person found to have retaliated against anyone will be subject to disciplinary action, up to and including termination.

G. Confidentiality:

All participants in the complaint and/or investigation are expected to maintain confidentiality, except if disclosure is required by law, or when lack of disclosure impedes a full and fair investigation of the complaint or implementation of complaint remedies.

H. False Complaints and Refusal to Cooperate:

The intentional filing of a false complaint is a violation of this policy and may subject such person to discipline up to and including termination. Refusal to cooperate with/or participate in an investigation is a violation of this policy and may subject such person to discipline. Anyone who believes that he/she has been the subject of a false complaint may file a complaint with the Ethics and Compliance Helpline. If evidence of an intentional false complaint has been found, appropriate disciplinary action will be taken.

This provision is not intended to discourage complaints in those instances where an individual believes in good faith that discrimination, harassment and/or inappropriate workplace conduct has occurred.

I. Legal Representation:

No outside attorneys representing anyone covered by the policy will be permitted to participate in or attend meetings related to the complaint process.
J. Recording:

No recording devices and camera-equipped devices (including mobile communication devices) will be permitted during procedures associated with resolutions of complaints.

K. Education:

The hospital provides education and training on the prevention and recognition of any type of discrimination, harassment and other inappropriate workplace behavior for all employees, including supervisory and managerial personnel, residents and students. This policy shall be distributed to each new employee, Resident and student at the time of orientation and by special publication or electronic distribution issued periodically to each member of the hospital community.

L. Resources:

1. The Manager – EEO, Leaves and Labor Relations is available to provide advice and guidance on ways to prevent discrimination and harassment in the workplace or advice on any diversity related issue.

2. The confidential services of the Employee Assistance Program are available to employees who may need counseling and other assistance at any time at 973-972-5429 for the Newark Campus.

3. Employees and students may seek assistance from the Department of Public Safety to address safety and security concerns.

By Direction of the President and CEO:

________________________________
Chief Human Resources Officer