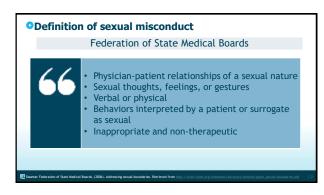


Objectives At the conclusion of this program, participants should be able to: Review the current landscape of the risk and definitions of sexual misconduct Review specific sections of the Oklahoma statute on unprofessional conduct that relate to sexual misconduct Identify best practices, essential guidelines, and protocols that should be in place to prevent and defend allegations Discuss steps and considerations when an allegation occurs Review lessons learned through case examples

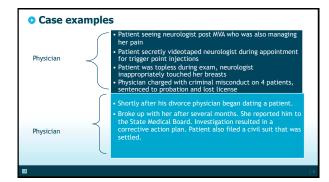


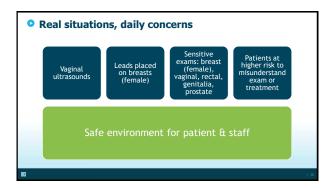
• Sexual impropriety	
Federation of State Medical Boards: Sexual impropriety may comprise behavior, gestures, or expressions that are seductive, sexually suggestive, disrespectful of patient privacy, or sexually demeaning to a patient. Examples:	
Deliberately watching a patient dress or undress	
Having students or others present for sensitive exams without patient consent	
Saying inappropriate things about a patient's genitalia, sexual innuendo, jokes	
Asking about sexual history or preferences when not clinically pertinent	
Asking for a date	
Conducting intimate exam without clinical justification	_
Passive - Sexual attraction to a patient - Anticipation (sexual in nature) of patient's office visit - Share personal problems with patient - Hugs - Hugs - Sexual sassult - Sexual favors in exchange for drugs - Inappropriate sexual jokes, comments - Not offering a chaperone when indicated - Hugs - Provider romantic/sexual involvement with a patient is unethical	
 Oklahoma Statute Title 59. Professions and Occupations §59-509 Unprofessional conduct. Excerpts from specific sections below: 5. Conviction of a felony or of any offense involving moral turpitude; 8. Dishonorable or immoral conduct which is likely to deceive, defraud, or harm the public; 9. The commission of any act which is a violation of the criminal laws of any state when such act is connected with the physician's practice of medicine. A complaint, indictment or confession of a criminal violation shall not be necessary for the enforcement of this provision. Proof of the commission of the act while in the practice of medicine or under the guise of the practice of medicine shall be unprofessional conduct; 17. Engaging in physical conduct with a patient which is sexual in nature, or in any verbal behavior which is seductive or sexually demeaning to a patient; 	
□	

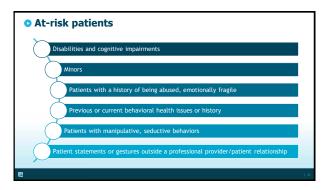
• Sexual misconduct consequences						
Civil litigation	Criminal litigation	Board investigations and actions				
Patient safety	Non-therapeutic	Reputation and goodwill				
0		6				

Sexual harassment and sexual misconduct • 45-year-old physician made unwanted sexual advances toward female coworkers • Conducted inappropriate physical exam of female patients • Three state pattern	al
	female
Board of Medicine settlement agreement - S5,000 fine - Professional boundary class - Board-approved female chaperones - Five years of board monitoring: polygraphs a work monitor	and a

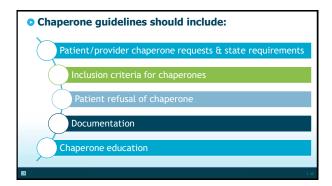
• Case example	les
Physician Assistant: Failure to provide chaperone when requested	PA fondled 50-year-old patient, exposed himself, and barricaded patient in exam room Patient requested a nurse monitor before exam PA refused request
<u>Medical assistant</u> : Negligent hiring	21-year-old medical assistant sexually assaulted a patient Clinic had not done criminal background check or sexual predator search
e	10

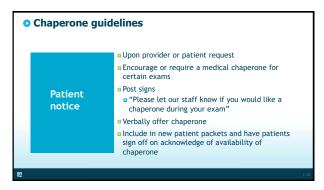








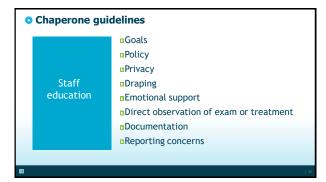




Chaperone gu	idelines			
	Get new patient preference on intake	-		
	Provide a brochure or information that explains chaperones and chaperoned exams			
Process	Have front desk staff ask patient's preference at check-in to standardize the process			
	Have chaperone act as a witness for the patient and provider during an exam or procedure. The			
	chaperone should be in a location where he or she is able to assist as needed and observe the			
	examination or procedure Identify chaperone criteria considering gender and			
	training			
		15		
		¬		
Chaperone gu	idelines	7		
Chaperone gu	Consider or require a chaperone for:]		
Chaperone gu	Consider or require a chaperone for: Sensitive exams, procedures, or treatments: breasts (female), vagina, genitalia, and] <u> </u>		
	Consider or require a chaperone for: Sensitive exams, procedures, or treatments:] <u> </u>		
Inclusion	Consider or require a chaperone for: Sensitive exams, procedures, or treatments: breasts (female), vagina, genitalia, and rectum, prostate]		
	Consider or require a chaperone for: Sensitive exams, procedures, or treatments: breasts (female), vagina, genitalia, and rectum, prostate Cognitively impaired			
Inclusion	Consider or require a chaperone for: Sensitive exams, procedures, or treatments: breasts (female), vagina, genitalia, and rectum, prostate Cognitively impaired Minors History of sexual abuse/assault/emotionally			
Inclusion	Consider or require a chaperone for: Sensitive exams, procedures, or treatments: breasts (female), vagina, genitalia, and rectum, prostate Cognitively impaired Minors History of sexual abuse/assault/emotionally fragile Unusually anxious about an exam or			
Inclusion	Consider or require a chaperone for: Sensitive exams, procedures, or treatments: breasts (female), vagina, genitalia, and rectum, prostate Cognitively impaired Minors History of sexual abuse/assault/emotionally fragile Unusually anxious about an exam or treatment Apply criteria for both male and female			

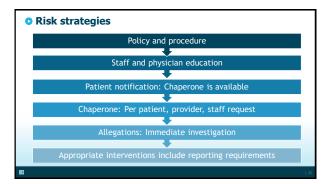
Patient refuses Refuses provider-requested chaperone Provider agrees or refers and considers termination Refuses gender of staff chaperone Accommodates if and when possible Reschedules Refers (gender not employed) and considers termination

0 (• Chaperone guidelines					
	Document	Date/time Patient or provider request Chaperone's name Exam, treatment, procedure directly observed Refusal, accommodations, interventions				
10		111				





Addressing complaints	
Investigate	
 Identify and train key person to investigate <u>all</u> complaints Interview patient and staff involved 	_
Employment actions	l
Suspend or place on leave Require chaperone Limit or reschedule duties/workload	
Reporting	
Notify authorities as requested or needed Notify Professional Liability (PL)/Employment Practices Liability (EPL) carrier Do statutory reporting as required	



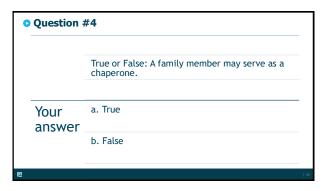
Patient complaint: Employee is telling sexually provocative jokes and hugs me, making me feel uncomfortable.

Your
a. Sexual harassment
b. Sexual misconduct
c. Both 1 & 2
d. Neither 1 or 2

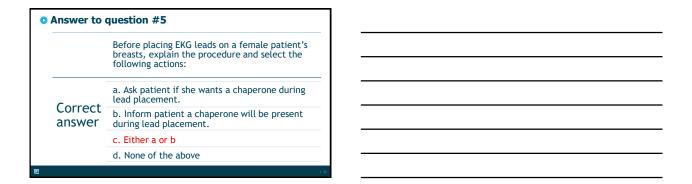
Correct a. Sexual harassment b. Sexual misconduct c. Both 1 & 2 d. Neither 1 or 2 The receptionist tells you that Ms. Smith told her she was surprised that Dr. B performed a breast exam for her complaint of a sore throat. What immediate actions should be taken? A. Tell the patient there was probably a clinical reason for it and then discuss with Dr. B. b. Interview the patient. Talk to Dr. B. and determine next steps. c. Discuss with Dr. B and then suggest a chaperone for when seeing this patient.
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	True or False: It is acceptable to ask a recently divorced parent out for dinner.				
Your	a. True	_			
answer	b. False	_			
		27			
Answer to	question #3				
Answer to	question #3 True or False: It is acceptable to ask a recently divorced parent out for dinner.	_			
Answer to					
Answer to					
Correct	True or False: It is acceptable to ask a recently divorced parent out for dinner.				
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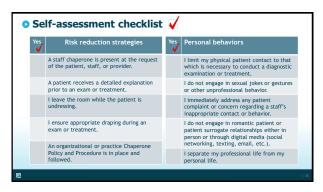


	True or False: A family member may serve as a chaperone.	_		
Correct	a. True	- <u> </u>		
answer				
	b. False			
		30		
		_		
Ouestion #	\$5	7		
Question #	÷5	. _		
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Question #	Before placing EKG leads on a female patient's breasts, explain the procedure and select the following actions:	-		
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	Before placing EKG leads on a female patient's breasts, explain the procedure and select the following actions: a. Ask patient if she wants a chaperone during lead placement. b. Inform patient a chaperone will be present during lead placement.			
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Question a	How should we handle a patient who is making unwelcome and sexually inappropriate gestures toward an employee? The patient is 45 years old
Your	a. Coursel patient on behavior expectations and consequences if behavior persists (behavior contract)
answer	b. Follow your sexual harassment policy
	c. Tell the staff to ignore the patient's behavior
	d. Both a and b

How should we handle a patient who is making unwelcome and sexually inappropriate gestures toward an employee? The patient is 45 years old and not cognitively impaired. Correct answer a. Counsel patient on behavior expectations and consequences if behavior persists (behavior contract) b. Follow your sexual harassment policy c. Tell the staff to ignore the patient's behavior d. Both a and b



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