

On-call specialist censured and fined for rudeness to colleagues and delays in responding to call-outs



Key messages from the case

This case involving rudeness and inappropriate responses to colleagues illustrates how rude behaviour can become a professional conduct issue where it forms part of a pattern of behaviour and may put patient safety at risk.

Details of the decision

Part of Dr H's role as a specialist employed in a NZ hospital included on-call support. He was the subject of multiple complaints about his behaviour when consulted by colleagues.

The tribunal addressed three specific incidents over a period of three years where he was rude to colleagues who called him for advice, complained about being called at home, and either delayed in returning to the hospital or declined to see the patient. These illustrate different ways in which poor communication can expose patients to harm, in some cases even where the clinical decision is appropriate.

Unprofessional communication – rudeness to colleagues

The tribunal accepted that unprofessional, rude or discourteous communications can potentially affect the protection of public and quality of health care.

Doctors are working in stressful conditions, and things can be said between professionals in the heat of the moment. However in this case the tribunal considered Dr H's manner to colleagues had on occasions been denigrating, unprofessional and disproportionate to the stressors.

While one-off communications may not warrant sanction – in this case they did form part of the bigger picture of unprofessional behaviours.

The fact that he later sought to apologise was relevant – but the apology needed to have happened before the matter came to the tribunal.

Poor communication about treatment plan

In one case, the practitioner declined to see a patient with an unusual presentation but did not provide instructions regarding ongoing management. The ED doctors were left to call

around other specialists to get information about the condition and appropriate treatment.

The tribunal accepted it was appropriate for Dr H to make a clinical decision about the patient's condition and whether they needed urgent care. However, if he made the decision that the matter was not urgent, he was expected to communicate this to referring doctors and provide treatment advice or agree on a plan.

Refusal to attend on-call exposes patient to harm

In the case of another patient, Dr H was called and said he could not assess the patient and refused to explain why or provide advice. The referring junior ED doctor was left in uncertainty about the urgency or the appropriate treatment and had to call another specialist who advised on an appropriate course of treatment.

The tribunal considered that this incident had exposed the patient to harm and did amount to malpractice and professional misconduct.

Employment conditions and professional conduct

The tribunal also commented on the relationship between employment conditions and professional standards.

Dr H's employment conditions required him to respond to calls within 15–30 minutes and to see patients depending on clinical need and presenting symptoms. However, the tribunal noted that these were employment conditions, and his professional obligations to his colleagues and of good patient care could override these.

Outcome

Dr H's conduct did amount to professional misconduct.

Dr H had since stopped providing on-call services and had undertaken communication courses, the appropriate penalty was censure and order for costs of \$45,000.

Key lessons

- Consider how you are reacting to stressful situations and whether this is affecting communication with colleagues. One-off rudeness or an unhelpful response may not warrant sanction, but tribunals will look at the bigger picture of communications between colleagues and the pattern of behaviour and whether the comments are proportionate to the stressors.
- Think about your behaviours towards colleagues who are more junior or seeking to rely on your professional advice. Even if your clinical judgement is exercised correctly, rude responses or an unwillingness to explain or consult on a treatment plan may be putting patients at risk.
- Even if you are technically complying with requirements of your employment contract – consider whether you are also fulfilling your obligations to your profession and of good patient care.

References and further reading

Avant Factsheet: [Doctors with disruptive behaviours](#)

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