Guidelines for Staff Requests for Reassignment

Consistent with UVA’s Notice of Non-Discrimination and Equal Opportunity, its policy on Preventing and Addressing Discrimination and Harassment, Medical Center policy and the ASPIRE values, staff are expected to provide care and treatment to all patients without regard to age, color, disability, gender identity or expression, marital status, national or ethnic origin, political affiliation, race, religion, sex (including pregnancy), sexual orientation, veteran status, and family medical or genetic information. Therefore, requests for reassignment based on these characteristics will not be permitted, unless required by law or clinically indicated. In such circumstances, managers and supervisors should contact Human Resources for guidance.

Staff may request reassignment in rare circumstances and managers/supervisors will maintain discretion in accommodating staffing reassignment requests, as appropriate, to meet staffing and operational needs within their unit/clinic. The guidelines below are intended to assist managers/supervisors in responding to staff requests for reassignment and facilitate compliance with applicable state and federal laws and Medical Center, Health System and University policies.

Team members shall be advised during the recruitment process and upon hire that the UVA Medical Center provides care to a wide diversity of people, and that our employees must provide that care without regard to age, color, disability, gender identity or expression, marital status, national or ethnic origin, political affiliation, race, religion, sex (including pregnancy), sexual orientation, veteran status, and family medical or genetic information.

In the event a team member does request a reassignment, the manager shall consider the following:

Questions to consider:
• What is the level of urgency regarding the request?
• Is reassignment plausible under the circumstances?
• Why is the team member requesting reassignment?
  o Request based on patient behavior-
    ▪ a team member may request a break from a difficult or challenging patient
    ▪ a patient may exhibit abusive language or behavior towards the team member
  o Request based on relationship to the patient- patient may be a family member, neighbor, friend or have another relationship that makes providing care difficult for the team member
  o Request based on beliefs – the team member feels they cannot or should not provide care to the patient either because of who the patient is (demographics, appearance) or the medical procedure/type of care required
• Is there an indication of bias against a particular group or type of person?
• Is the team member visibly anxious, upset or does their behavior indicate patient care may be compromised?

When to Reassign
• Reassignment requests based on patient behavior or relationship should be honored if possible.
• Reassignment requests that are based on bias are inconsistent with institutional values, and should not be accommodated.
• Reassignment requests based on beliefs that are not a sincerely held religious belief are personal beliefs and should not be accommodated.
• Reassignment requests based on a sincerely held religious belief should be granted if the team member can describe the religious principle, tenet or belief that prevents the team member from providing care to a patient, and how that religious principle, tenet, or belief precludes them from caring from the patient. This is a legal analysis and managers should engage the assistance of Human Resources, who will consult with the Office of University Counsel.
• Managers should use their best judgment in determining what action to take. The care and well-being of the patient should always take priority. If reassignment is not possible, the team member may be directed to care for the patient.
• Reassignment requests should be extraordinarily rare. Team members who fail to cooperate or who request reassignment on a more frequent basis should be referred by their manager to Employee Relations or their HR Business Partner, who may also recommend other resources.
• Managers should also consider the team member’s demonstrated emotional state and behaviors at the time. An individual who is visibly upset or agitated may not be able to provide quality care.
• When reassignment is appropriate or necessary, the manager will provide for delivery of patient care while attempting to accommodate the request through a variety of mechanisms, including, but not limited to scheduling/rescheduling of staff, reassignment of duties to other qualified staff or use of part-time or Medical Center Pool or Unit-Based Pool staff.
• Staff requests to not participate in abortion procedures are handled in a manner that meets the provisions of Virginia Code (18.2-75), the “conscience clause,” which legally protects the caregiver’s right to refuse to participate in abortion procedures.