Code of Conduct EHA Staff, Activities, and Volunteers 2026

This Code of Conduct sets out the standards of behavior expected of all individuals who volunteer for and are employed by the European Hematology Association (EHA), including, but not limited to, staff, committee members, board and task force members, faculty, abstract reviewers, and congress or event volunteers.

The Code supports staff and volunteers in fulfilling their roles with integrity and confidence, while safeguarding the well-being of all participants in EHA activities.

The Code applies equally to leadership, faculty, and organizers across all EHA-related activities and explicitly includes both formal and informal settings, such as social events, networking activities, and off-program interactions (e.g., dinners, receptions, and retreats);whether in person, online, or hybrid, including emails, virtual meetings, and social media, and reflects EHA's commitment to a culture of trust, transparency, and accountability.

EHA recognizes that respectful, inclusive, and psychologically safe environments are essential for scientific integrity, collaboration, mentorship, innovation, and responsible participation within the hematology community.

Key Principles

- Treat everyone respectfully and professionally
- Support inclusive and accessible participation
- Protect confidentiality and personal data
- Avoid conflicts of interest
- Report concerns in good faith
- No harassment, discrimination, intimidation, or retaliation
- Respect applies online and offline
- Concerns can be reported confidentially to: cre@ehaweb.org

1. Mission and Core Values

Volunteers play a vital role in advancing EHA's mission to promote excellence in patient care, research, and education in hematology while upholding the highest standards of professionalism, integrity, and scientific rigor. By serving as ambassadors of the association, EHA expects all volunteers to model respect, collegiality, and inclusiveness to ensure a safe environment for all members and stakeholders. These values guide all interactions with colleagues, patients, partners, and the broader scientific community, ensuring that EHA activities remain safe, welcoming, and conducive to open scientific exchange.

2. Expected Professional Conduct

As an EHA volunteer, you agree to:

i. Treat all individuals with respect, courtesy, and consideration at all times.

ii. Foster a positive environment free from discrimination, harassment, or intimidation.

iii. Communicate constructively, enabling the exchange of a broad range of ideas and inclusive dialogue.

iv. Respect cultural differences and diverse viewpoints.

v. Adhere to applicable protocols and high standards of decorum, including treating others with courtesy, decency, and respect, and using appropriate etiquette when representing EHA to third parties or on social media.

vi. Maintain professional conduct at all times. The use, possession, or distribution of illegal drugs or controlled substances is prohibited. Where alcohol is served, consumption must be responsible and must never impair judgment, safety, or behavior.

vii. Volunteers must comply with applicable laws, venue rules, and other EHA policies, including but not limited to the Conflict of Interest, Non-Disclosure Agreements, as well as other EHA Responsible-use Frameworks, which advocate for a safe, respectful, and professional environment at all EHA-supported events.

As representatives of EHA, volunteers are expected to model leadership behaviors that foster psychological safety and constructive scientific dialogue. This includes supporting early-career researchers and professionals in the field of hematology and related scientific fields, encouraging diverse viewpoints, and contributing to an environment where all participants feel valued and able to contribute.

Individuals in leadership, faculty, or organizational roles have a responsibility to actively promote a respectful environment and to take appropriate action when inappropriate behavior is observed. This includes addressing concerns in a timely and proportionate manner and, where necessary, seeking support through established reporting channels.

Participation in initiatives as a volunteer does not create an employment or representative relationship with EHA. Volunteers take part in their personal capacity and are responsible for their own conduct. EHA is not responsible for actions that fall outside authorized EHA activities or that breach this Code of Conduct.

3a. Harassment and Discrimination

EHA has zero tolerance for any form of aggression, harassment, discrimination, or bullying. Prohibited conduct includes, but is not limited to:

i. Offensive verbal comments related to gender, sexual orientation, disability, physical appearance, race, or religion.

ii. Unwelcome sexual attention, inappropriate physical contact, or the use of sexualized imagery and language.

iii. Deliberate intimidation, stalking, or harassing photography/recording.

iv. Sustained disruption of talks or other EHA events.

Good-faith scientific disagreement, evidence-based debate, and critical inquiry do not in themselves constitute misconduct, provided interactions remain respectful and free from harassment, intimidation, discrimination, or abuse of authority.

EHA recognizes that power imbalances may exist within scientific and clinical environments, particularly in mentoring, training, authorship, review, and evaluative relationships.

Harassment may occur through words, actions, or subtle behaviors such as microaggressions or exclusionary conduct. It can take place in person or online, including through email, messaging platforms, or social media. EHA also prohibits the misuse of authority or seniority to intimidate, pressure, or disadvantage others. Participants should be mindful of cultural differences and personal boundaries when engaging in physical contact. Any form of physical interaction should be respectful, appropriate, and clearly welcomed by all parties.

3b. Accessibility and Inclusion

EHA is committed to ensuring that all activities are accessible and inclusive. Volunteers should be attentive to the needs of individuals with disabilities, chronic conditions, or neurodivergent profiles and support reasonable accommodation whenever possible. EHA strives to provide accessible materials, venues, and digital platforms, and encourages volunteers to communicate any accessibility needs in advance.

4a. Professional Responsibilities

i. Conflicts of Interest: Volunteers must disclose any real or perceived conflicts of interest and recuse themselves from decisions where they cannot remain impartial.

ii. Confidentiality and data protection: Volunteers must protect sensitive information (e.g., unpublished data or strategic plans) and comply with applicable data protection laws, including the General Data Protection Regulation (GDPR). Personal data obtained through EHA activities must be handled securely, used only for EHA purposes, and not shared externally without permission. Volunteers should avoid storing sensitive information on personal devices unless appropriate safeguards are in place.

iii. Scientific integrity: EHA expects fair, objective, and timely reviews of abstracts and applications based on scientific merit. Volunteers must not use unpublished data or confidential submissions for personal or professional advantage.

iv. Use of Resources: EHA funds, logos, and platforms must be used responsibly and only for authorized purposes. EHA logos, branding, mailing lists, and digital platforms may not be used for personal, political, or commercial purposes. Volunteers must not imply endorsement by EHA unless explicitly authorized.

4b. Digital Conduct and Social Media

Volunteers are expected to conduct themselves professionally in all digital environments associated with EHA (e.g., email, virtual meetings, messaging platforms, and social media). Online interactions should reflect the same standards of respect, accuracy, and professionalism expected during in-person activities. Volunteers must not speak on behalf of EHA or imply endorsement unless authorized, and must not share confidential or personal data through digital channels without permission.

5. Reporting and Consequences

EHA encourages a culture of speaking up in good faith without fear of retaliation.

- Act professionally and respectfully in all interactions, including online (Sections 2, 3a, 4b).
- Support an inclusive and accessible environment (Section 3b).
- Protect confidential information and personal data (Section 4a(ii)).
- Declare conflicts of interest and uphold scientific integrity (Section 4a(i) and 4a(iii)).
- Use EHA resources and branding responsibly and only for EHA purposes (Section 4a(iv)).
- Speak up and report concerns in good faith (Section 5).

This summary complements, but does not replace, the Congress Code of Conduct.

5a. Determining severity and proportional responses

EHA recognizes that the impact of an action can vary depending on the context and the person affected. Severity is therefore assessed on a case-by-case basis, taking into account (i) the perspective and lived experience of the person(s) affected; and (ii) relevant contextual factors to ensure a fair, consistent, and proportionate outcome.

When assessing severity, EHA may consider factors such as:

- Impact on the affected person(s), including whether they felt unsafe, threatened, humiliated, or excluded, and any ongoing effects.
- Nature of the behavior (e.g., discriminatory, harassing, coercive, retaliatory, or involving misuse of authority/seniority).
- Context and setting (e.g., public/private, in person/online, one-off/ongoing, event setting, power dynamics).

- Intent and awareness (including whether the conduct was deliberate, reckless, or repeated after being asked to stop).
- Frequency and pattern (including prior similar concerns, where known and appropriate to consider).
- Evidence available (e.g., messages, witness statements, recordings where lawful) and the credibility of accounts.
- Risk of recurrence and any safeguarding considerations.

EHA will aim to apply measures that are proportionate to the assessed severity and risk, and consistent with the principles of fairness and non-retaliation. Severity and appropriate outcomes may be discussed with the parties during the process, and EHA may implement interim protective measures at any stage where needed to safeguard individuals or the integrity of an activity.

5b. Complaints and reporting procedure

EHA will handle reports and complaints about potential breaches of this Code promptly, fairly, and as confidentially as possible. This procedure applies to concerns involving individuals covered by this Code (including volunteers, staff, committee members, board/task force members, faculty, reviewers, and other representatives acting on behalf of EHA) and to conduct connected to EHA activities (in person, online, or hybrid).

How to submit a complaint. Complaints should be submitted in writing (email or form) as soon as reasonably possible and should include, where known: (i) the name(s) of the person(s) involved; (ii) a factual description of what happened; (iii) date(s), time(s), and location(s) (or online channel/event); (iv) any available evidence (e.g., messages, screenshots, witness names). If you do not have all details, you may still report in good faith and EHA will assess what steps are possible.

Where to submit. Complaints should be sent to cre@ehaweb.org or directly communicated to the organizer of the relevant activity. If the complaint concerns the EHA Office, it should be submitted to the **MD** (or EHA Human Resources) for handling. Where there is an immediate risk to safety, a safeguarding concern, or a potential criminal matter, EHA may take urgent protective steps and/or advise referral to appropriate authorities.

Standard process. EHA will normally follow the steps below (timeframes may vary depending on complexity):

1. Receipt and acknowledgement: the complaint is logged confidentially and acknowledged within a stated timeframe (e.g., within 5 working days). Severe cases must be addressed immediately by the MD and EB.

2. Eligibility and triage: EHA checks whether the complaint is within scope, sufficiently detailed to assess, and whether urgent protective action is needed. Complaints that are clearly out of scope, duplicate, vexatious, or made in bad faith may be closed with reasons recorded.

3. Informal resolution (where appropriate): for lower-level or fixable issues, EHA may propose an informal outcome (e.g., facilitated conversation, clarification, apology, coaching, or agreed boundaries). Participation is voluntary and does not prevent escalation to a formal process if needed.

4. Formal investigation (where appropriate): EHA appoints an investigator who is independent of the matter as far as reasonably possible. The person complained about, will be informed of the concerns and given a fair opportunity to respond. The investigator may collect statements and documents and will produce a written report (normally with a draft for factual comment before finalization).

5. Decision: a designated decision-maker or panel reviews the report and makes a determination using the "balance of probabilities" standard, recording the reasons for the outcome.

6. Outcomes and sanctions: In situations involving serious misconduct or immediate risk, EHA may take prompt interim or protective measures prior to the conclusion of a formal investigation. Such measures may include temporary removal from an activity, restriction of participation, or other actions necessary to ensure the safety and integrity of the environment. Where a breach is found, EHA may apply proportionate measures, which may include education/training, a written warning, apology, restrictions on participation, removal from a role, suspension/termination of volunteer appointment, or referral to an external body where relevant.

7. Appeal / review: where permitted, the respondent and/or complainant may request a review of the decision within a stated timeframe (e.g., within 10 working days of being notified of the outcome). Appeals are limited to one or more of the following grounds: (i) a material procedural error that could have affected the outcome; (ii) significant new evidence that was not reasonably available at the time of the investigation; (iii) a manifestly disproportionate sanction in light of the severity assessment. An appeal is not a rehearing of the case. EHA will appoint an independent person/panel not previously involved to consider the grounds, may seek written submissions from the parties, and will issue a written decision confirming, varying, or overturning the outcome and/or sanction (and may order a partial or full re-investigation where necessary). If an appeal is submitted outside the timeframe, it may be rejected unless there are exceptional reasons.

8. Post-case learning: EHA will consider any lessons learned (e.g., trends, training needs, process improvements) and may report aggregated, anonymized themes to governance bodies. Where appropriate and legally permissible, EHA may inform relevant parties that a matter has been reviewed and addressed.

Fairness, confidentiality, and protection from retaliation. Information will be shared only with those who need to know how to handle the complaint, in line with GDPR and EHA's confidentiality obligations. All parties are expected to maintain confidentiality during the process. EHA prohibits retaliation against anyone who raises a concern or participates in an investigation in good faith; any retaliatory conduct may be treated as a separate breach of this Code. Where appropriate, parties may be accompanied to

meetings by a support person, and EHA may implement interim measures to protect individuals and the integrity of the process.

6. Volunteer Acknowledgment

By serving as a volunteer, you acknowledge that you have read, understood this Code of Conduct, and agree to uphold its principles.