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	EFFECTIVE DATE: JUNE 2009	NUMBER: 9641
	ORIGINATOR: Corporate Compliance Officer	
ORGANIZATIONAL POLICY Code of Conduct	CONCURRENCE: Executive VP, COO Vice President, Human Resources	
	APPROVAL: CEO/PRESIDENT	

INTRODUCTION

Ellis Hospital is committed to the provision of quality healthcare in a lawful and ethical manner and that all covered parties will be treated courteously, respectfully, and with dignity. This Code of Conduct is intended for covered parties to affirm that open, honest communication internally and with external parties is expected and that violations of legal, behavioral or ethical norms are not tolerated.

Parties subject to compliance with this policy will be referred to as “covered parties”. This Code of Conduct is supportive of the Mission, Vision and Values (Policy #1249) and complements its objective by promoting professional, cooperative and ethical behavior among covered parties of the Hospital.

This policy recognizes that safety and quality thrive in an open and honest environment that supports working in teams and respecting other people, regardless of their position in the organization. In recognition of the crucial role coordinated team efforts and open, honest communication play in quality patient care, any behavior which could be reasonably inferred to adversely affect this is unacceptable.

POLICY STATEMENT

It is the policy of Ellis Hospital, and those acting on the Hospital’s behalf (agents of the organization) to conduct business and work together in a professional, cooperative, ethical and legal manner for the well-being of the patient.

PURPOSE OF POLICY

This policy is intended to provide standards by which covered parties of Ellis Hospital will conduct themselves in order to protect and promote organization-wide integrity and to enhance the ability of Ellis Hospital to achieve the organizational mission. The Code of Conduct contains Principles articulating the policy of Ellis Hospital and Standards which are intended to provide additional guidance to persons functioning in managerial or administrative capacities and to all covered parties of Ellis Hospital.

SCOPE

Applies to all Ellis Hospital covered parties. Covered parties include Members Board of Trustees, employees, physicians, volunteers, students and others deemed appropriate by management or the Board of Trustees.

General Conduct Principles and Standards

Honesty, Integrity and Working Together

Ellis Hospital strives for all relationships to be open and honest. Honesty is being forthcoming and truthful when interacting with others and ourselves. It ensures sincerity in our relationships both internally and externally. In that respect covered parties must conduct all personal and professional activities with honesty, integrity, respect, fairness, and good faith. Covered parties exercise due care in all matters relating to the discharge of duties and responsibilities.

Ellis recognizes that safety and quality of patient care is dependent on TEAMWORK, respect, open communication, and a collaborative work environment where all team members are accountable for modeling desirable behavior. Adherence to desirable behaviors will be enforced consistently and equitably among all, regardless of their position in the organization.

Covered parties must interact respectfully with each other and avoid actions and conduct that may be considered as disruptive behavior. The inability to work with others and engaging in disruptive behavior is a sufficient basis for instituting (1) hospital employee disciplinary policies, including policy 3452- Work Rules and Disciplinary Actions or (2) Medical-Dental Staff review of and appointees actions related to appointment status (consistent with policy 6246- Medical – Dental Staff Conduct Within The Hospital).

Desirable Behavior Code of Conduct

- treat others with respect, courtesy and dignity and conduct yourself in a professional manner

Disruptive Behavior

Disruptive behavior is described as a style of interaction with others that tends to cause distress among other staff and affect over-all morale within the work environment. The following are examples of such unacceptable disruptive behavior.

- Engaging in, making statements or exhibiting acts, demeanor, or professional conduct either within or outside the hospital which may be detrimental to patient safety, delivery of quality patient care, disruptive to hospital operations, or constitute fraud and abuse.
- Verbal comments which are personal, irrelevant or go beyond the bounds of fair and constructive comments.
- Non-constructive criticism made in such a way as to intimidate, undermine confidence, belittle, or imply stupidity or incompetence.
- Abusive or intimidating treatment of others, including patients, including the use of abusive or demeaning terms and unnecessary sarcasm or cynicism.
- Impertinent and inappropriate comments made in patient medical records or other documents impugning the quality of care in the hospital or attacking particular physicians, nurses/staff or hospital policy.
- Raised voice or yelling or shouting in a hostile manner or profanity and disrespectful language.
- Uncooperative or defiant approach to problems or refusal to complete a task or carry out duties, disrupting meetings or repeated violations of policies and rules.
- Bullying, intimidating, insulting, aggressive, or assaulting behavior.
- Physical attacks, throwing things, pushing or slapping or any unwanted touching
- Threats of violence, retribution, or litigation
- Behavior that disparages or undermines confidence in hospital or its leadership or public derogatory comments about the quality of care being provided
- Boundary violations with patients, family members, staff or other care providers.

- Jokes or non-clinical comments about race, ethnicity, religion, sexual orientation, age, physical appearance or socially socioeconomic or educational status.

Hospital Information

Covered parties are expected to provide officials and constituents of the hospital information that is full, fair, complete, objective, timely and understandable. In that respect, covered parties are expected to act in good faith, responsibly and objectively with due care, competence and diligence, without any misrepresentation of material facts and without allowing independent judgment to be subordinated.

Covered parties are required to report potential or perceived conflicts of interest in accordance with *Policy #9050 Conflicts of Interest*.

Covered parties are bound by restrictive covenants that define the limitations and restrictions on relationships with vendors and outside parties. *Policy #9309 Anti-kickback Guidelines for Payments, Discounts, Gifts and Meals* and *Policy #9010 Employee Relationships with Healthcare Vendors* outline issues related to non-compliance with expected behavior.

Compliance with Rules

Ellis Hospital will strive to ensure all activity by covered parties or agents of the organization is in compliance with applicable laws. Covered parties are required to comply with all applicable laws, rules and regulations of all governmental authorities, as well as other private or public regulatory agencies to which the hospital is subject whether or not specifically addressed in these policies. If questions regarding the existence of, interpretation or application of any law arise, they should be directed to the Corporate Compliance Officer of Ellis Hospital.

Promote Ethical Behavior

Covered parties have a responsibility to promote the collective social ethical practices at Ellis Hospital. Each covered party is responsible and required to report situations of possible illegal or fraudulent activity to the Compliance and Fraud Hotline at 243-3600 or via postal mail to:

Audit and Compliance Department
Ellis Hospital
1101 Nott Street
Schenectady, New York 12308

All correspondents wishing to remain anonymous may do so.

Ellis Hospital Policy #9000 Corporate Compliance Program outlines many aspects of legal compliance and acts of wrongdoing.

Privacy and Confidentiality

Ellis Hospital covered parties will strive to maintain the confidentiality of patient and other confidential information in accordance with applicable legal and ethical standards. Ellis Hospital and its covered parties are in possession of and have access to a broad variety of confidential, sensitive and proprietary information, the inappropriate release of which could be injurious to individuals, business partners and Ellis Hospital itself. Each covered party has an obligation to actively protect and safeguard confidential, sensitive and proprietary information in a manner designed to prevent the unauthorized disclosure of information. Covered parties are required to respect the confidentiality of information acquired in the course of performing work responsibilities, except when legally obligated or authorized to disclose such information. Information obtained through the course of performing work responsibilities should not be utilized for personal advantage.

Several policies addressing the confidentiality of information have been developed as a result of NYS Regulations and the Health Insurance Portability and Accountability Act (HIPAA). Policies addressing confidentiality include but are not limited to:

- Policy #9500 Accounting and Disclosures
- Policy #9540 HIPAA Definitions
- Policy #9550 Individual Right to Access Personal Health Information
- Policy #9580 Minimum Necessary Standards for Routine and Non-routine Situations
- Policy #9620 Patient Right to Request Additional Privacy Protection for Protected Health Information
- Policy #9560 Patient Right to Request Confidential Communication
- Policy #9590 Privacy of Psychotherapy Notes
- Policy #9600 Privacy Rights of Minors
- Policy #9610 Release of Patient Information
- Policy #9635 Uses and Disclosures for Research Purposes
- Policy #9630 Uses and Disclosures of Protected Health Information
- Policy #9640 Verification of Identity and Authority of Persons Requesting Personal Health Information

Each above referenced policy should be reviewed to ensure that the requirements of compliance are well understood. Further HIPAA polices are available via the Ellis Organizational Policy Manual online through the intranet.

Hospital Assets

Each covered party is required to achieve and demonstrate responsible use of, and control over, all assets and resources employed or entrusted to them or to areas within their responsibility. Covered parties are expected to protect physical and intellectual property and information against loss, theft of misuse. Intellectual properties include patents, trademarks, marketing, copyrights, and software.

Protection of assets requires that internal controls be present and functioning as intended to mitigate risk inherent to a specific process. Covered parties are required to report detected deficiencies to their manager or to the Audit and Compliance department for review.

Sharing Knowledge

Ellis Hospital is committed to direct and candid dialogue to ensure business decisions are based on complete information. In order to achieve this goal, information, resources, ideas and related information are shared with appropriate staff in a collaborative effort. This will lead to quality patient centered care and achievement of organizational objectives.

Collaboration requires a culture of teamwork and organized cooperation. Each covered party is expected to work together to provide quality patient care and the achievement of organizational objectives.

Prompt Reporting of Suspected Violations

Each covered party is required to promptly report any violations of this policy to either the Corporate Compliance Officer or his/her designee or to Human Resources. Additional information regarding potential violations of this policy and reporting such violations may be found in related policies including but not limited to:

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|---|-------------|
| Harassment | Policy 3142 |
| Work Rules and Disciplinary Action | Policy 3452 |
| Workplace Violence | Policy 3458 |
| Medical-Dental Staff Conduct Within The Hospital | Policy 6246 |
| Sexual Harassment By An Appointee Of The Medical-Dental Staff | Policy 6365 |

Procedures

The Code of Conduct shall be disseminated periodically to all covered parties and to new employees or volunteers during new employee orientation and to new vendors at the inception of a relationship with that vendor. The Code of Conduct shall be available to all covered parties as part of the electronic Organizational Policies Manual. All covered parties are responsible to ensure that their behavior and activities are consistent with the Code of Conduct.

On an annual basis, employees holding positions at the Manager level or above are required to complete the attached Code of Conduct Acknowledgement. Management reserves the right to require any other party to complete the acknowledgement.

REFERENCES

None

ORIGINAL IMPLEMENTATION DATE: 11/3/04
REVIEW DATE: 5/12
REVIEWED: 5/09
REVISED: 6/09

Attachments– acknowledgement

Attachment I – Code of Conduct Acknowledgement

I hereby certify that I have read and understand the Ellis Hospital code of Conduct and will adhere to the following principles and responsibilities in the performance of my duties as a Covered Party of Ellis Hospital and others deemed applicable by management or the Board of Trustees.

- Act with honesty and integrity, avoiding conflicts of interest involving personal and professional relationships. Act in good faith, responsibly and objectively, with due care, competence and diligence, without any misrepresentation of material facts and without allowing my independent judgment to be subordinated
- Will treat others with respect and courtesy and behave in a professional manner at all times while avoiding disruptive behavior.
- Provide other officials and constituents of the Hospital information that is full, fair, accurate, complete, objective, timely and understandable;
- Comply with rules and regulations of all governmental authorities as well as other private or public regulatory agencies to which the Hospital is subject;
- Promote ethical behavior among other covered parties of the Hospital;
- Respect the privacy and confidentiality of information acquired in the course of my work, except when authorized or legally obligated to disclose such information, and refrain from the use of such confidential information for personal advantage;
- Achieve responsible use of, and control over, all Hospital assets and resources employed or entrusted to me;
- Share my knowledge with others and maintain skills important and relevant to the needs of my constituents;
- Promptly report to the Corporate Compliance Officer or his/her designee or Human Resources any **suspected** violations of this Code which I have knowledge of

I understand that violations of this Code are a serious matter and may result in disciplinary action up to and including termination of employment or contractual agreement.

Signature: _____

Title: _____

Date: _____