

# Code of Conduct 2023



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# Table of Contents

<b>Introduction .....</b>	<b>1</b>
<b>Section 1 - Integrity in Business Practices.....</b>	<b>1</b>
1.1 Mission Statement .....	1
1.2 Ethical Practices .....	1
1.3 Required Conduct .....	2
1.4 Improper Payments, Referrals, and Agreements .....	2
1.5 Business Entertainment and Gifts .....	2
1.6 Financial Reporting .....	3
1.7 Billing.....	3
1.8 Control of Funds.....	3
1.9 Discounts .....	3
<b>Section 2 - Admission &amp; Treatment of Residents .....</b>	<b>4</b>
2.1 Marketing .....	4
2.2 Person Centered Care .....	4
2.3 Non-Discrimination .....	4
2.4 Quality of Care.....	5
2.5 Dignity, Respect, and Resident Rights .....	5
2.6 Resident Safety .....	5
<b>Section 3 - Compliance with Laws .....</b>	<b>6</b>
3.1 General.....	6
3.2 Achieving Compliance.....	6
3.3 Political Activity .....	7
3.4 CHCC's Policies Against Healthcare Fraud.....	7
3.5 Federal False Claims Act.....	7
3.6 State Laws Regarding Fraud and Kickbacks .....	9
3.7 HIPAA .....	10
3.8 Screening for Exclusion from Federal Health Care Programs .....	10
<b>Section 4 - Conflicts of Interest .....</b>	<b>11</b>
4.1 Personal Benefit .....	11
4.2 Acceptance of Gifts .....	12
4.3 Outside Business Activities .....	12

4.4	Business Information .....	12
4.5	Disclosures of Conflicts of Interest .....	12
<b>Section 5 - Personnel and Work Environment .....</b>		<b>13</b>
5.1	Discrimination .....	13
5.2	CHCC's Investigation.....	13
5.3	Non-Retaliation .....	14
5.4	Workplace Safety .....	14
5.5	Compliance Training.....	14
<b>Section 6 - Reporting Concerns and Investigations.....</b>		<b>15</b>
6.1	Reporting Concerns .....	15
6.2	Investigations.....	15
6.3	Confidentiality.....	16
6.4	Non-Retaliation.....	16
<b>Section 7 - Enforcement and Discipline.....</b>		<b>16</b>

# Introduction

Christian Health Care Center (CHCC) is committed to compliant, ethical behavior and the provision of quality care. This Code of Conduct was developed in order to strengthen that commitment. CHCC requires both its employees and all others directly or indirectly serving CHCC residents to abide by this Code at all times and without exception. CHCC requires employees and those vendors and contractors providing services to its residents ("Employees and Outside Providers") to review this Code and return a signed receipt to CHCC's Compliance Officer as a condition of employment or engagement.

## Section 1 - Integrity in Business Practices

### 1.1 **Mission Statement**

**To provide skilled nursing care with compassion and love in Christ's name.**

To fulfill our mission, we pledge to:

- Communicate to all concerned that addressing the needs of residents, patients and their families is our primary objective.
- Provide a comprehensive range of health, behavioral, pastoral, and supportive services without regard to race, color, religion, national origin, age, sex, sexual orientation, marital status, disability or any other legally protected classification.
- Recognize the importance of providing quality care that meets or exceeds the generally accepted standards of the community, in an efficient and cost-effective manner.
- Uphold our charitable mission and strive to assure access to our services by all those in need, while maintaining financial integrity.
- Provide a safe and well-maintained physical environment.
- Offer health promotion services and educational programs to the community.
- Evaluate the needs of those we serve to determine if the existing array of services should be modified or expanded.
- Work cooperatively with appropriate service agencies, as well as churches and other religious organizations to assure that community needs are met.

### 1.2 **Ethical Practices**

The public has a right to expect that CHCC will conduct its business ethically and competently. We shall strive for excellence in performing our duties, while maintaining honesty and integrity. We shall avoid any

conduct that could reasonably be expected to reflect adversely upon the integrity of the facility. CHCC Employees and Outside Providers should encourage other workforce members to do likewise.

### **1.3 Required Conduct**

We shall perform our responsibilities in good faith, in a manner that is in the best interest of the facility and with the due care that a reasonably prudent person in the same position would use under similar circumstances. We shall avoid all illegal conduct, both in business and personal matters, including efforts to circumvent the law by devious means or questionable interpretations. We shall comply with all laws, rules, and regulations at all levels of government. We shall be open and honest in our business relationships with other company employees.

### **1.4 Improper Payments, Referrals, and Agreements**

We shall not engage, either directly or indirectly, in any corrupt business practice, including bribery, kickbacks or payoffs, intended to induce, influence, or reward favorable decisions of any person in a position to benefit the company. We shall not make or offer to make any payment or provide any other thing of value to another person with the understanding or intention that such payment is to be used for an unlawful or improper purpose.

We shall not pay anyone for referrals of short or long stay residents. We shall not solicit or receive, or offer to pay or pay, any remuneration of any type in return for referring, or recommending the referral of, an individual to another provider (person, physician, hospital, or medical entity) for services. When we are in the position to refer residents to other providers, we shall provide adequate quality information so they are free to make the best choice for themselves.

We shall not make payments or provide non-cash benefits to physicians or health-care personnel. Agreements with physicians shall be approved through the company's approval process to ensure compliance with applicable laws and regulations. Physician payments shall be made in accordance with established contracts with supporting documentation.

### **1.5 Business Entertainment and Gifts**

We may occasionally provide ordinary and reasonable business entertainment and gifts of nominal value (less than \$100) provided that such do not violate the laws of the locale in which the business is transacted and are not given for the purpose of influencing the business

behavior of the recipient. Cash gifts to physicians or other referral sources are prohibited. Non-cash gifts that have a value exceeding \$100 are prohibited.

## **1.6 Financial Reporting**

It is management's responsibility to ensure that assets and liabilities are accounted for properly in compliance with all tax and financial reporting requirements and generally accepted accounting principles. All reports submitted to governmental authorities shall be made accurately and timely. All transactions shall be executed in accordance with management's authorization. Access to assets shall be permitted only in accordance with such authorization. Any transactions not recorded in compliance with the above requirements shall be reported promptly to the Compliance Officer or Administrator.

## **1.7 Billing**

Christian Health Care Center bills only for services rendered. We comply with special billing requirements for government-sponsored programs and other payers, including Medicare secondary payer regulations. This includes submitting claims only for services actually rendered which have been appropriately documented in the medical record. Deliberate submission of information that is false, fictitious, or inaccurate will not be tolerated. We shall take necessary steps to review the standards and criteria used to determine resident classification from the MDS, billing codes, and levels of service to assure that those standards and criteria are accurate.

## **1.8 Control of Funds**

Each officer, department director, or administrator shall monitor the expenditure of the facility's funds by employees under his or her authority. Each must ensure, to his or her ability, that any expenditure or transfer of funds is made for a valid business purpose, is appropriately documented, and is actually received by the recipient indicated in the records.

## **1.9 Discounts**

Discounts with vendors shall not be based on Medicare or Medicaid patient referrals or number of patients.

## Section 2 - Admission & Treatment of Residents

### 2.1 **Marketing**

Communication with the community on the quality of services that we provide shall be truthful. Any specific claims about the quality of services shall be supported by evidence to substantiate the claims. All price advertising shall accurately reflect the true charge for services provided and shall not imply that Medicare or Medicaid is accepted as payment in full or that discounts will be given to any group.

We shall not speak negatively about any of our competitor's facilities, services, or employees.

The payment, offer, solicitation, or acceptance of any bribe, kickback, improper bonuses and finder's fees, or provision of expensive gifts or free services to residents, agents, vendors, or physicians and their families is prohibited. Items or services shall not be offered, given or received in hopes of influencing referrals or as a reward for referrals from other business.

### 2.2 **Person Centered Care**

We are committed to providing care in which the residents have choices and control over their individual care. Treatment decisions will be based upon medical necessity and in accordance with the residents' goals and preferences. We shall not consider a resident's payment source as the primary determinant of what services to provide to the resident, but will offer services that best meet the resident's need.

### 2.3 **Non-Discrimination**

It is the policy of this facility not to discriminate on the basis of race, color, religion, national origin, age, sex, sexual orientation, marital status, disability or any other legally-protected classification. We shall establish, maintain, and implement identical policies and practices regarding transfer, discharge, and the provision of services for all individuals regardless of source of payment, diagnosis, severity of condition or gender identity/sexual orientation. CHCC requires any Employee or Outside Provider who believes someone has been subjected to

discrimination to report the matter to CHCC's Compliance Officer or Administrator so that CHCC may promptly address the concern. We shall not retaliate against anyone who opposes discrimination, reports a concern, or participates in a subsequent investigation in good faith.

## **2.4 Quality of Care**

We are committed to providing the care and services necessary to attain or maintain the residents' highest practicable physical, mental, and psychosocial well-being. We seek out and employ/contract with healthcare professionals with adequate experience and expertise in meeting the needs of our residents. Because residents depend on us for their health and safety, it is the duty and responsibility of all Employees and Outside Providers to follow all standards, policies, and procedures when providing care. Employees and Outside Providers are also responsible for bringing any deficiencies or errors to the attention of the Compliance Officer or Administrator.

## **2.5 Dignity, Respect, and Resident Rights**

At all times, residents shall be treated with dignity and respect, in both our verbal and non-verbal interactions and communications. We shall promote and protect the rights of residents, including the right to a dignified existence that promotes freedom of choice, self-determination, and reasonable accommodation of individual needs. Employees and Outside Providers are responsible for understanding those rights, and are expected to report any concerns regarding situations that impact a resident's rights to the Compliance Officer or Administrator so that the issue can be promptly addressed.

## **2.6 Resident Safety**

Residents have the right to be free from abuse, neglect, and misappropriation of property. We shall employ/contract with healthcare professionals who are in good standing with their licensing or certification boards, and who have not been found guilty of abuse or neglect of a resident. Employees and Outside Providers are required to report any actual or suspected actions of abuse, neglect, misappropriation of property to the Director of Nursing/designee, Administrator/designee and Residential Care Services abuse hotline within two hours. All employees



are mandated reporters and must report any suspicion of abuse, neglect or misappropriation of property to the Director of Nursing Services/designee, Administrator/designee and Residential Care Services abuse hotline within two hours. Any Employee or Outside Provider who is aware of a crime, or activities that are suspicious of a crime, is required to report to the Compliance Officer or Administrator and have the right to report without fear of retaliation.

## Section 3 - Compliance with Laws

### 3.1 **General**

CHCC is committed to complying with all federal and state laws, specifically laws and regulations designed to reduce fraud, waste and abuse. As a health care company with significant legal and ethical responsibilities, we shall comply with all relevant laws, rules, and regulations at all levels of government when conducting our business. This includes compliance with the requirements for participation with Medicare and Medicaid. We shall audit and monitor our practices so that we may identify non-compliance and promptly address any compliance issues. CHCC requires Employees and Outside Providers to report immediately any suspected violations of laws, regulations, standards, and company policies and procedures to the Compliance Officer or Administrator.

### 3.2 **Achieving Compliance**

CHCC routinely evaluates compliance risk areas by conducting internal and external audits. Audit results are reviewed by the Quality Assurance and Performance Improvement (QAPI) committee as part of CHCC's ongoing QAPI program. CHCC intends that this process will result in continuous improvement in CHCC's professional, business and operational practices. CHCC requires its employees, professional staff members, directors, and, to the extent applicable, vendors and agents to cooperate with CHCC's compliance activities.

### **3.3 Political Activity**

The company, Employees and Outside Providers shall comply with all federal, state and local laws governing participation in government relations and political activities. We shall ensure that our personal political activities are separated from those of the company. Corporate political contributions and the use of corporate resources for campaigning purposes are not allowed. Corporate resources include employee's work time, telephones and computers. Communication of our facility's views to legislators or governmental agencies concerning policies or practices affecting business operations is not prohibited, so long as the communication is made in accordance with applicable laws, such as laws relating to lobbying.

### **3.4 CHCC's Policies Against Healthcare Fraud**

CHCC is committed to providing services in a manner that meets the highest ethical standards and is in compliance with all applicable federal and state laws. CHCC fully complies with federal and state laws addressing healthcare fraud, waste and abuse. CHCC provides these policies to emphasize the importance of these topics and provide guidance on reporting suspected misconduct.

### **3.5 Federal False Claims Act**

The federal False Claim Acts (FCA) imposes liability on employees, contractors, agents and companies who make false claims for payment to the federal government. The FCA prohibits anyone from taking the following actions.

- (a) Knowingly presenting or causing to be presented to the federal government a false or fraudulent claim for payment or approval.
- (b) Knowingly making or using, or causing to be made or used, a false record or statement in order to have a false or fraudulent claim approved by the government.
- (c) Conspiring to defraud the government by getting a false or fraudulent claim allowed or paid; and
- (d) Knowingly making or using, or causing to be made or used, a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the government.

Violations of the federal False Claims Act can result in civil monetary penalties ranging from \$5,500 to \$11,000 for each false claim submitted and repayment of three times the amount of damages sustained by the government. The court can also impose criminal penalties against individuals and organizations for willful violations of the False Claims Act. A provider or supplier found in violation may also be excluded from participation in federal health care programs.

### **3.5.2 Obligation to Report Violations**

CHCC requires any Employee or Outside Provider to report any known or suspected violation of the FCA to the CHCC Compliance Officer or CHCC's Administrator. An individual may also report known or suspected violations of the FCA to the OIG hotline, (800) 424-5197, by email at [hotline@oig.doc.gov](mailto:hotline@oig.doc.gov) or visit the website at [www.oig.doc.gov](http://www.oig.doc.gov). Anyone making reports of compliance concerns is assured that such reports will be considered confidential to the extent permitted by law. Such reports will be shared with others on a need-to-know basis.

### **3.5.3 Non-Retaliation**

CHCC prohibits retaliation and will take no adverse action against an Employee or Outside Provider for making good faith reports, even if the report turns out to be incorrect. An Employee or Outside Provider who believes that he or she has been subjected to retaliatory conduct for reporting a suspected violation of the FCA or for refusing to engage in activity that would be a violation of the FCA must report the alleged violation immediately to the CHCC Compliance Officer or CHCC's Administrator so that CHCC may conduct an appropriate investigation.

### **3.5.4 Qui Tam Relator Protection and Recovery Percentages**

In order to encourage individuals to come forward and report misconduct involving false claims, the FCA (state and federal) contain a "Qui Tam" provision. The government or an individual acting on behalf of the government can bring actions under the FCA. An Employee or Outside Provider who has actual knowledge of allegedly false claims may file a lawsuit on behalf of the government. If the lawsuit is successful, and provided certain legal requirements are met, the Employee may receive an award ranging from the 15% to 30% of the amount recovered. Washington's FCA caps recovery at 25%.

### **3.6 State Laws Regarding Fraud and Kickbacks**

CHCC also fully complies with applicable state laws regarding kickbacks, rebates, self-referrals and submission of false claims. CHCC requires Employees and Outside Providers to fully comply with the following laws.

#### **3.6.1 Washington Anti-Rebating Statute (RCW 19.68)**

Washington's Anti-Rebating statute is intended to deter and punish improper self-referrals of health care services such as payments of rebates, commissions, refunds, or unearned discounts or profits in connection with the furnishing of medical services by a person licensed by the state to practice medicine and surgery, drugless treatment dentistry or pharmacy. CHCC notes that violation of Washington's Anti-Rebating statute is considered a misdemeanor and may result in the revocation or suspension of a state-issued license.

#### **3.6.2 Washington Medicaid False Statements/Fraud Provisions (RCW 74.09)**

Washington law also prohibits attempts to induce referrals of, or making false statements related to, services reimbursed under the Medical Assistance (Medicaid) program. In addition to the prohibitions against making false statements or representations, the statute prohibits providers from offering or receiving remuneration in return for the referral of Medicaid services.

#### **3.6.3 Washington Health Care False Claims Act (RCW 48.80)**

Washington law broadly prohibits persons from making false claims related to health care with insurers, health maintenance organizations, health care service contractors and self-funded plans including knowingly presenting false claims or making false statements related to claims for health care payment. In addition, the law prohibits persons from concealing or failing to disclose information in order to obtain health care payment.

#### **3.6.4 Washington Medicaid Fraud False Claims Act (RCW 74.66)**

Washington's FCA is almost identical as the federal FCA and imposes liability on any person or corporation who knowingly presents a false or fraudulent claim to the Washington Medicaid program, misappropriates public property or improperly avoids or decreases an obligation to a Washington state Medicaid agency. The Washington FCA allows individuals to file Qui Tam lawsuits if they

know of violations and affords those individuals protection against adverse employment actions equivalent to those provided by the federal FCA.

### **3.6.5 Obligation to Report Violations**

CHCC requires any Employee or Outside Provider to report any known or suspected violation of these state laws to the Compliance Officer or Administrator. Anyone making reports of compliance concerns is assured that such reports will be considered confidential to the extent permitted by law. Such reports will be shared with others on a need-to-know basis.

### **3.6.6 Non-Retaliation**

CHCC prohibits retaliation and will take no adverse action against an Employee or Outside Provider for making good faith reports, even if the report turns out to be incorrect. An Employee or Outside Provider who believes that he or she has been subjected to retaliatory conduct for reporting a suspected violation must report the alleged violation immediately to the Compliance Officer or Administrator so that CHCC may conduct an appropriate investigation.

## **3.7 HIPAA**

We are committed to respecting the privacy of our residents and the confidentiality of their protected health information in accordance with the Health Insurance Portability & Accountability Act (HIPAA). It is expected that all Employees and Outside Providers abide by the facility's policies and procedures related to the privacy and security of protected health information, including paper and electronic medical records. CHCC requires Employees and Outside Providers with questions, or how to handle a particular situation to contact CHCC's Compliance Officer or Administrator prior to taking the contemplated action.

## **3.8 Screening for Exclusion from Federal Health Care Programs**

It is the policy of this facility to verify all employees, physicians, practitioners and contracted employees, that provide services to residents & patients, have not been excluded from participation in any federal health care program. Employees, physicians, practitioners, and contracted employees that will provide services to residents must

acknowledge that they have not been convicted of any offense that would preclude working in a nursing facility and that they are not excluded from participation in the federal health care programs. Current employees, physicians, practitioners and contracted employees must report if, subsequent to their working relationship with CHCC, they are convicted of an offense that would preclude working in a nursing facility or are excluded from participation in any federal health program. This information must be reported directly to the CEO and Administrator. It is the policy of this facility to check the Office of Inspector General's (OIG) List of Excluded Individuals/Entities (LEIE database) to verify that employees, physicians, practitioners and contracted employees are not excluded from participating in federal health care programs. Verification reports will be kept on file. Any conviction, debarment, or exclusion, that precludes working in a nursing facility, may result in termination of that employee, physician, practitioner or contracted employee/service.

## Section 4 - Conflicts of Interest

### 4.1 **Personal Benefit**

Employment with Christian Health Care Center involves a relationship of trust and loyalty. Conflicts of interest may exist where our actions or activities result in improper personal gain or advantage, or an adverse effect upon the interest of the company. Expectations regarding employee behavior that is in the best interest of the company include, but are not limited to:

- (a) Employees shall not become involved in any manner with competitors, contractors, customers, or suppliers of Christian Health Care Center if such involvement would result in improper gain or the appearance of improper personal gain.
- (b) Employees are prohibited from placing business with any company or entity in which there is a family or close personal relationship. Hiring or having a reporting relationship to relatives may constitute a conflict of interest. CHCC requires Employees with questions about this policy, or whether a particular action would violate this prohibition, to contact the Compliance Officer or Administrator prior to taking any action.

## **4.2 Acceptance of Gifts**

Employees, nor any member of their immediate family, shall accept any personal gift or favor of any substantial value from any competitor, contractor, customer, supplier, or anyone with whom we do business on behalf of the company. Perishable gifts, other gifts of a nominal value (less than \$100), or reasonable personal entertainment may be ethically accepted if the gift would not influence, or reasonably appear to others to be capable of influencing our business judgment.

## **4.3 Outside Business Activities**

Employees shall devote their entire working time to the performance of their duties for the company. All outside business or consulting activities that would divert time, interest, or talents from company business must be avoided. Investment in any organization that is a potential competitor, supplier, or customer requires prior written approval.

## **4.4 Business Information**

CHCC considers certain information about its operations, such as information relating to its finances, marketing and business and strategic plans, confidential. CHCC prohibits its Employees or Outside Vendors from using or disclosing this confidential information except as necessary in the normal course of business. CHCC requires Employees or Outside Vendors with questions about this policy, or whether a particular action would violate this prohibition, to contact the Compliance Officer or Administrator prior to taking any action.

## **4.5 Disclosures of Conflicts of Interest**

CHCC expects our employees to conduct business according to the highest ethical standards of conduct. Employees are expected to devote their best efforts to the interest of CHCC. Business dealings that appear to create a conflict between the interests of CHCC and an employee are unacceptable. For example, CHCC prohibits its employees from accepting gifts from its vendors or other businesses and individuals with whom it conducts business. Similarly, CHCC prohibits its employees from accepting any gifts from residents without their supervisor's prior approval. CHCC requires its employees to disclose any possible conflicts to their immediate supervisor prior to taking any action so that CHCC may assess

and prevent potential conflicts of interest from arising. A potential or actual conflict of interest include those situations in which an employee is in a position to influence a decision that may result in a personal gain for the employee or immediate family member as a result of CHCC business dealings.

Employees and Outside Consultants shall disclose possible conflicts of interest involving themselves or immediate families in writing to the Compliance Officer or Administrator as soon as they become aware of the potential conflict. If the Employee or Outside Contractor is found to be in a conflict of interest situation, they shall withdraw from further involvement in any decision-making processes. CHCC retains discretion to respond to conflicts of interest at its discretion based on its assessment of all surrounding circumstances.

## Section 5 - Personnel and Work Environment

### 5.1 **Discrimination**

CHCC believes that every Employee has the right to work in surroundings that are free from unlawful discrimination. CHCC therefore strictly prohibits unlawful discrimination based on race, color, religion, national origin, age, sex, sexual orientation, marital status, disability or any other legally-protected classification. CHCC also prohibits the harassment of any individual based on these protected classifications. CHCC requires its Employees to report any violations of this policy to the Compliance Officer or Human Resources. CHCC will not retaliate against an Employee for the good faith reporting of alleged discrimination.

### 5.2 **CHCC's Investigation**

CHCC will take all reports seriously and conduct an appropriate investigation. CHCC will require employees to cooperate in any investigation, whether or not they are directly involved. CHCC will attempt to keep the fact and results of its investigation confidential, although that is not always possible. Additionally, employees are expected to refrain from discussing investigatory matters with other individuals. CHCC may take appropriate disciplinary action against an



employee found to have violated the policy, up to and including termination of employment.

### **5.3 Non-Retaliation**

CHCC prohibits retaliation because of an employee's good faith report of discrimination or harassment, or participation in an investigation of such a claim. Any individual who is found to have engaged in retaliatory conduct will be subject to appropriate corrective action, up to and including discharge. Employees who believe that they have experienced such retaliation should notify the Compliance Officer or Administrator.

### **5.4 Workplace Safety**

Christian Health Care Center is committed to providing a safe and healthful workplace that is free from serious, recognized hazards. Employees shall follow all health and safety policies and regulations that apply to their work. CHCC shall maintain a weapon-free & drug-free work place and will not tolerate the manufacture, dispensation, possession, distribution, use or being under the influence of illegal drugs, alcohol or the use of weapons. Employees are required to report any unsafe situations to the facility Compliance Officer or Administrator.

### **5.5 Compliance Training**

Christian Health Care Center provides compliance training as part of employee and outside provider onboarding. Annual and ongoing compliance training is provided to employees and outside providers. Training topics include CHCC Code of conduct, CHCC's compliance program, resident rights and abuse reporting, guidance on how to report compliance issues, assurance of non-retaliation, kickbacks, HIPAA etc. Outside providers receive a "Handbook for Outside Providers" and a copy of the CHCC Code of Conduct. Employees receive a copy of the "CHCC Code of Conduct" and are required to complete all onboarding training requirements/modules.

## Section 6 - Reporting Concerns and Investigations

### 6.1 **Reporting Concerns**

We believe that a compliance and ethics program can be effective only if there is active participation by all Employees and Outside Providers. CHCC therefore requires an Employee or Outside Consultant who has knowledge of an actual or potential violation of law, regulation, policies and procedures, and/or Code of Conduct to report the matter to CHCC's Compliance Officer or Administrator so that the matter can be promptly addressed. CHCC also requires an Employee or Outside Provider with questions about this Code of Conduct or its application to particular circumstances to contact CHCC's Compliance Officer prior to taking the contemplated action. CHCC provides its Employee and Outside Providers a number of options for addressing these issues.

- (a) Submit a compliance report (in writing) in the locked compliance-reporting box. This box is located in the hallway near the Activity Room. It is opened weekly. Compliance Reports may be submitted anonymously.
- (b) Send an email to the Christian Health Care Center Compliance Officer at [compliance@chcclynden.org](mailto:compliance@chcclynden.org)
- (c) Call the Compliance Officer at 360-354-4434 extension 6338
- (d) Contact CHCC's Administrator at 360-354-4434 extension 6332
- (e) Call CHCC's Compliance Hotline at 360-306-3217. Compliance Reports may be submitted anonymously.

### 6.2 **Investigations**

The Compliance Officer or appropriate designee shall promptly investigate the reported issue. Upon completion of the investigation, a final report summarizing the investigation and recommended action, if any, that shall be taken. The report shall be provided to the CHCC Administrator. All reports and investigations are summarized, trended and reported through the QAPI program at regular quarterly meetings.

### **6.3 Confidentiality**

CHCC will strive to keep the identity of CHCC personnel, vendors or contractors who make a report confidential; however, CHCC cannot guarantee that the information will remain confidential, e.g. if government entities become involved.

### **6.4 Non-Retaliation**

CHCC shall not retaliate against any Employee or Outside Consultant who makes a good faith report of a suspected violation of the Code of Conduct. However, any Employee who knowingly makes false allegations shall be subject to disciplinary action in accordance with company policy.

## **Section 7 - Enforcement and Discipline**

Consistent enforcement of the facility's standards, policies, and procedures is an important component of the facility's compliance and ethics program.

Violations of the Code of Conduct or any policy and procedure, and the failure to detect or report violations, will result in disciplinary action up to and including termination of employment or contracted services. All levels of Employees are subject to the same types of disciplinary action for the commission of similar offenses. Adherence to the Code of Conduct and all policies and procedures of the facility will also be a factor in performance evaluations of all Employees. CHCC will also require Outside Providers to adhere to the Code of Conduct as a condition for continuing their business relationship with CHCC.