I. Purpose:

This policy is to provide guidance to employees and non-employed personnel about how to disclose information and/or ask questions in good faith without fear of retaliation or adverse employment consequences regarding a reasonable belief or misconduct involving the St. Luke’s Code of Conduct (Code), policies, laws regulations, or actions that jeopardize patient safety, quality of care, or billing for services rendered to patients. Also, this policy is intended to encourage employees and non-employed personnel to promptly raise any question or concern for investigation and resolution.

This policy applies to (1) St. Luke’s University Health Network (SLUHN) and its wholly-owned subsidiaries and affiliates (each, an “Affiliate”); (2) any other entity or organization in which SLUHN or an Affiliate owns a direct or indirect equity interest of 50% or more; and (3) any hospital or healthcare facility in which SLUHN or an Affiliate either manages or controls the day-to-day operations of the facility (each, a "St. Luke’s Entities") (collectively, “St. Luke’s”).

II. Definitions:

A. **Good Faith** is a belief that reasonable grounds exist for believing the truth of the allegation based upon the facts. An allegation is not made in Good Faith if made maliciously, with knowledge of its falsity and/or with reckless disregard of facts that would disprove the allegation. Any Good Faith report, concern or complaint is protected by this and other related St. Luke’s policies even if the report, question or concern is, after investigation, not substantiated.
B. **Employees** are individuals hired by SLUHN to perform assigned work or responsibilities subject to SLUHN control and direction and for which work SLUHN pays the individual wages or a salary, resulting in the issuance of a year-end W-2 form. SLUHN may employ such an individual full-time, part-time, or per diem (as needed).

C. **Non-employed personnel** include, but not limited to, consultants, external agency staff, physicians, advanced practitioners, independent contractors, joint ventures, personnel servicing equipment, personnel servicing facilities, service providers, students, observers, and volunteers.

D. **Retaliation** is any reprisal or adverse employment action taken against an employee as a result of his or her utilizing any of St. Luke’s internal reporting or grievance procedures or otherwise reasonably exercising any of his or her rights as an employee or non-employed personnel. This includes but is not limited to any retaliation in connection with reporting waste or wrongdoing, including any ethical concerns, actual or potential unlawful conduct or any other concern reported in good faith to St. Luke’s Human Resources, management, the Network Compliance Department or the Compliance Hotline.

E. **Prohibited Retaliation** includes any retaliation in connection with reporting waste or wrongdoing including any ethical concerns, actual or potential unlawful conduct or any other concern reported in good faith to St. Luke’s Human Resources, St. Luke’s management, the Network Compliance Department, or the Compliance Hotline. Employees who report issues in Good Faith will not be retaliated against; examples of protected activity include:

1. Providing information or supporting an internal audit investigation,
2. Filling of a grievance, or
3. Accessing human resources, compliance, risk management or any member of St. Luke’s management in connection with a patient safety concern, unusual occurrence or other reasonable concerns about St. Luke’s policies, practices or compliance with any applicable law(s) or regulations.
III. General:

St. Luke’s encourages employees and non-employed personnel who are part of its health care team to express their problems, concerns and opinions on any issue, and it is our policy to provide a procedure through which employees can express problems, concerns and opinions of waste or wrongdoing without fear of retaliation or reprisal.

All employees including supervisors and managers have an affirmative duty to promptly report actual or potential waste or wrongdoing, including any actual or potential violation of law, regulation, policy, procedure or code of conduct.

No employee or other person who, in good faith, reports suspected waste or wrongdoing and/or misconduct involving the Code of Conduct, St. Luke’s policies, laws, regulations, patient safety or quality care will suffer harassment, retaliation or adverse employment consequences for having raised the good faith question or concern. Any St. Luke’s employee, including any supervisor or manager, who retaliates against someone who has reported suspected waste or wrongdoing in good faith is subject to corrective action up to and including involuntary separation consistent with the St. Luke’s Corrective Action Policy and Work Rules.

Employees may not exempt themselves from the consequences of waste or wrongdoing by reporting their own waste or wrongdoing, although self-reporting may be taken into account in determining the appropriate course of action.

IV. Procedure:

A. Employee Accountability

1. Employees and non-employed personnel are encouraged to promptly discuss questions, concerns or complaints with someone who can address the issue properly. In most cases, the employee or non-employed personnel’s supervisor is in the best position to address a concern; however, this may not always be the case.

2. An employee or non-employed personnel with a concern regarding retaliatory conduct should promptly report any claims of retaliation to his or her supervisor or through the appropriate management chain of command.
a. Discuss the question or concern with his or her supervisor (or other member of management) and give the supervisor a chance to resolve the concern or problem.

b. If the supervisor is unable to find the answer, or if the employee is uncomfortable discussing the issue with his or her supervisor, the employee may contact the Network Compliance Department, or

c. If the employee wishes to remain anonymous, the employee should contact the St. Luke’s Compliance Hotline at 1-855-9 ETHICS (1-855-938-4427).

d. After considering all of the above options, if an employee has an unresolved concern about safety or quality of care, the Employee or Non-employed Personnel may contact The Joint Commission by fax: Office of Quality Monitoring (630) 792-5636 or email: complaint@jointcommission.org.

B. Supervisor/Management Accountability

1. Create a work environment where retaliation is not tolerated.

2. Respond appropriately to employee and non-employed personnel concerns regarding perceived retaliation. Advise Human Resources immediately of any allegations of retaliation raised by an employee.

3. Cooperate fully in the investigation of any retaliation claims.

4. After discussing the situation with Human Resources, take prompt and appropriate action where concerns of retaliation are supported through the investigation process.

C. Human Resources Department Accountability


2. Be available and sensitive to employee and non-employed personnel concerns regarding perceived retaliation. Provide guidance and counseling to employees, non-employed personnel, and managers regarding the handling of such retaliation claims.
3. Provide prompt direction and guidance to support the investigation of retaliation claims. Work closely with management, Network Compliance Department and Legal Services Department to ensure that appropriate actions are taken if retaliation is supported by investigation.

V. Compliance:

A. Allegations of retaliation will be promptly investigated and if supported, will result in corrective or other appropriate action, up to and including, termination of employment of the individual responsible for the retaliation. In the event the investigation determines that a claim of retaliation was not made in good faith, the claimant who made the claim without a good faith basis may him or herself be subject to corrective or other appropriate action, up to and including termination of employment.

B. In addition, all employees have the right to be protected against retaliation for doing lawful acts under the Health Insurance Portability and Accountability Act, the federal False Claims Act, the Deficit Reduction Act, state whistleblower laws or any other applicable federal or state law(s). Both the federal False Claims Act and the Deficit Reduction Act and state law whistleblower statutes provide remedies for employees who are retaliated against for reporting in good faith their concerns of waste or wrongdoing. Nothing in this policy or any other St. Luke’s policy is intended to expand or alter any legal rights or responsibilities as set forth in applicable federal or state law(s).

VI. References

St. Luke’s Code of Conduct

VII. Policy Responsibility

| SLA-SLB-SLM-SLM-SLQ-SLRA-SLW SLWEEC-SLAASC | Chief Compliance & Privacy Officer | Lead Preparer |
VIII. Disclaimer Statement

This policy and procedure is intended to provide a description of a course of action to comply with legal requirements and/or operational standards. There may be specific circumstances not contemplated by this policy and procedure that may make compliance either unclear or inappropriate. For advice in these circumstances, consult with your Chain of Command, Administrator on Call, Clinical Risk Management, Legal Services, Accreditation and Standards, or Chief Compliance & Privacy Officer, as appropriate.

IX. Approval

Network Compliance Committee every two years