

Subject: REPORTING OF WRONGDOING	Page 1 of 5	Policy # NMHC ADM 01.0020
Title: REPORTING OF WRONGDOING: RESPONSIBILITIES & PROTECTIONS	Revision of: NEW NMHC	Version: 1.0
		Effective Date: 08/31/2011
		Removal Date:

I. PURPOSE:

The purpose of this Policy is to ensure that:

- A. All NMHC personnel understand the responsibilities for reporting potential wrongdoing, including concerns regarding patient safety and quality of care, accurate books and records, privacy and confidentiality, and claims submission.
- B. All NMHC personnel know there are safeguards and protection from retaliation that exist through our Code of Ethics, accrediting bodies, laws, and regulations.
- C. All NMHC personnel are aware of the methods for reporting potential wrongdoing and that a structured process exists for conducting investigations of suspected, potential, or known wrongdoing. The process is designed to ensure objective fact-gathering assessments and analysis.

II. POLICY:

- A. It is the duty of all NMHC personnel to report suspected, potential, or known wrongdoing. Prompt, accurate and thorough disclosure of these occurrences is not only an expectation but is an obligation for all NMHC personnel.
- B. It is the policy of NMHC to maintain a channel of open communications at all levels of management to allow for reporting of suspected, potential, or known wrongdoing.
- C. It is the policy of NMHC to address all reports of suspected, potential, or known wrongdoing promptly.
- D. It is the policy of NMHC that NMHC personnel should not be disciplined or otherwise punished or retaliated against on the basis that he or she reported, in good faith, a suspected, potential, or known act of wrongdoing.
- E. It is the policy of NMHC that NMHC will not intimidate, threaten, or punish NMHC personnel to prevent the good faith reporting of suspected, potential, or known wrongdoing.

III. PERSONS AFFECTED:

NMHC personnel, including officers, directors, members of committees with Board-delegated authority, employees, members of the hospital subsidiary medical staff, house staff, researchers, volunteers, students, and agency personnel. This policy also affects independent contractors, consultants and other business partners (Vendors) who are not employees but are working at or for NMHC entities as outlined in individual contracts.

IV. DEFINITIONS:

- A. **NMHC** means Northwestern Memorial HealthCare and its subsidiaries and affiliates.
- B. **NMHC Personnel** means NMHC officers, employees of NMHC and its subsidiaries and affiliates, members of all medical staffs, house staffs, volunteers, agency personnel, contractors and consultants of NMHC.

- C. **Good Faith** means the information reported or disclosed is reasonably believed to be true and may be a potential or actual, past or present violation of NMHC's Code of Ethics, institutional policy(ies), rules or standards imposed by NMHC's accrediting bodies or applicable laws or statutes.
- D. **Wrongdoing** means any activity, practice or policy that is in violation of any law, regulation, rule, standard, or any provision of the NMHC Code of Ethics, or any action reasonably believed to pose a risk to quality of care, safety, health, or welfare of a patient, the public, and/ or NMHC.

V. REPORTING RESPONSIBILITIES:

NMHC personnel are required to report all instances of suspected or known wrongdoing to their immediate manager or appropriate department. If someone is not comfortable speaking to their immediate manager or is unsure whom to call, they are encouraged to contact their local compliance department

A. Appropriate departments to consult for assistance include but are not limited to:

- (a) Risk Management - Contact your Risk Management department to report any event or condition which has resulted or may result in an injury to a patient, or visitor, has resulted in or may result in impairment of patient care, or reflects a variation from policy, procedure or practice affecting patient care.
- (b) Quality - Contact your Quality office to report issues related to hospital licensing, meeting accreditation standards, state and federal regulations for hospital and related NMHC facilities, and healthcare clinical practice.
- (c) Corporate Compliance/Integrity - Contact your compliance department or call the Compliance Hotline to report concerns or issues related to the Code of Ethics which include but are not limited to accurate books and records, conflict of interest, fraud, bribery and theft, billing or coding accuracy, tax exemption, , and patient privacy and confidentiality. Privacy concerns may also be reported to your Privacy Officer.
- (d) Environmental and Occupational Safety - Contact your Safety Officer to report issues related to laws and regulations concerning the hospital environment, exposure to toxic materials, air or water pollution or workplace safety.
- (e) Infection Control and Prevention - Contact your Infection Control and Prevention department to report an infectious disease or any knowledge pertaining to the spread of infectious materials.
- (f) Clinical Research - Contact your Research offices to report issues such as improper use of human subjects, unauthorized consent to use patient information in research activities and any legal issues regarding research projects.
- (g) Human Resources - Contact your Human Resources department to report issues related to retention, diversity, benefits, employment laws, rules of personal conduct, family medical leave, collective bargaining, discrimination, threatening or hostile work environment, harassment by NMHC personnel.
- (h) Medical Staff Office - Members of the medical staff should contact their Medical Staff offices or Chief of Staff's office for assistance.
- (i) Medical Affairs Administration - House staff members, including residents and fellows should contact their Medical Affairs Administration offices for assistance.
- (j) Security - Contact your Security office to report issues such as theft, workplace violence, narcotics diversion, bomb threats, criminal acts, trespassing, vandalism, access or abduction and other forms of harassment.

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- (k) Internal Audit - Contact Internal Audit to report issues related to internal controls, safeguarding of assets, fraud and embezzlement, and security of patient information.
- B. Whether reporting to a manager or other department in person, by phone or in writing, NMHC personnel are required to provide as much detail as possible, including names, dates (times), places and the specific conduct they feel may indicate wrongdoing. Unless the reporter wishes to remain anonymous, reports should include a name, telephone number and address where they may be contacted.
- C. The Joint Commission Accreditation Participation Requirements –
 - (a) In accordance with The Joint Commission Accreditation Participation Requirement (APR.09.02.01) any NMHC staff, medical staff and other individual who provides care, treatment or services may report concerns about safety or quality of care to the Joint Commission without retaliatory action from NMHC or any of its local entities. Such reporting is not mandatory.
 - i. Phone: 800-994-6610
 - ii. E-Mail: complaint@jointcommission.org
 - iii. Mail: The Joint Commission
Office of Quality Monitoring
One Renaissance Blvd.
Oakbrook Terrace, IL 60181

VI. NON-RETALIATION:

It is the policy of NMHC that NMHC Personnel shall not be disciplined, punished or retaliated against on the basis that they:

- A. reported what they reasonably and in good faith believed to be suspected, or known wrongdoing; or
- B. Objected to or refused to participate in an activity or practice that may have involved wrongdoing.

VII. SELF REPORTING AND DISCIPLINARY ACTION:

NMHC Personnel will be subject to disciplinary action for knowingly fabricating, distorting, exaggerating or minimizing a report of suspected wrongdoing to either injure someone else or to protect himself/herself.

An individual whose report of misconduct contains admissions of personal misconduct will not be guaranteed protection from disciplinary action. In deciding what, if any, disciplinary action may be taken against an employee, NMHC will consider the following:

- A. Whether the admission was complete and truthful.
- B. Whether the admission was not previously known to NMHC.
- C. Whether discovery of the potential wrongdoing was not imminent.

The weight to be given to the self-disclosure will depend on all the facts known to NMHC, at the time it makes its disciplinary decisions.

VIII. EDUCATION:

- A. All managers shall take appropriate measures to make their staff aware of the requirements and protections of this policy.
- B. All managers should review this policy annually with NMHC personnel.

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- C. NMHC policies on reporting of wrongdoing and non-retaliation are presented and communicated during Best People Orientation for all new employees and are also included in compliance education and the NMHC Code of Ethics.
- D. The Chief of Staff is responsible for ensuring that all medical staff members are familiar with how to report suspected, potential or known wrongdoing in addition to NMHC's non-retaliation position.
- E. Similarly, Medical Affairs is responsible for ensuring that all house staff members are familiar with how to report suspected, potential or known wrongdoing in addition to NMHC's non-retaliation position.

IX. RELEVANT REGULATORY REFERENCES:

[Illinois Hospital Report Card Act \(HRCA\), Illinois Public Act 93-0563, 210 ILCS 86/](#)

[Illinois Whistleblower Act, Illinois Public Act 93-544, 740 ILCS 174/](#)

X. POLICY UPDATE SCHEDULE:

This policy will be reviewed every three years, or more frequently as deemed necessary by the Office of Corporate Compliance and Integrity.

XI. APPROVAL:

Responsible Party: Marsha Liu
Chief Integrity Executive

Reviewers: Deputy Human Resources
Director, Medical Affairs
Director, Quality
Chief Risk Executive
Chief of Staff
Office of General Counsel

Committees: NMHC Audit Committee, August 24, 2011

Approval Party: Dean Harrison
President & Chief Executive Officer
Northwestern Memorial HealthCare
Electronic Approval: August 31, 2011

XII. REVIEW HISTORY:

Revised: 08/01/2011
Revised: 12/09/2007- NMH 1.68 ADM