Doing the Right Thing:
Ethics and Organizational Responsibilities Code of Conduct
Dear Team Member:

Consistent with our mission and values, all who represent the health system—board members, officers, team members, physicians, volunteers and students—are expected to adhere to high standards of competent and ethical behavior and to obey the law. We also expect our vendors, consultants, contractors and suppliers to be guided by these same values and principles when working with us.

As you know, the values of our organization are trust, respect, and dignity and reflect our responsibility to achieve health care excellence for our community.

**Trust**—To have confidence in the ability, character and integrity of another.

**Respect**—To treat one another as individuals, appreciating our uniqueness and diversity; and at the same time remembering our commitment to our community.

**Dignity**—To value each person and seek to treat them with concern and care to the point that we can help them to develop their potential.

**Responsibility**—To act with a sense of ownership and obligation to one another and to the community; to do the right thing and to seek clarification and guidance when in doubt.

**Excellence**—To demonstrate our individual and team commitment to exert our best efforts in serving our community.

We have developed a Corporate Responsibility Program that supports these values and helps us fulfill our obligations. It provides direction on personal and corporate conduct and reinforces our high expectations. The program establishes a system for team members to express concerns and seek guidance when questions arise.

While common sense and good judgment are always important, we sometimes need additional resources in fulfilling our responsibilities. Along with detailed policies and procedures, this booklet serves as an important resource. It reflects the values and principles that guide our day-to-day actions at work.

While you can count on us to do our part to meet the values and standards, we are counting on you to do the same.

Sincerely,

Stephen Mason
President/CEO
BayCare Health System
Our Mission

BayCare Health System will improve the health of all we serve through community-owned health care services that set the standard for high-quality, compassionate care.
Our Code of Conduct
Reviewed March 9, 2012

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Exercise Your Rights And Responsibilities As A Team Member

We are committed to the hiring and retention of team members who meet high standards. All job applicants and team members have the right to be treated in a fair and respectful manner, without regard to race, age, sex, color, religion, marital status, national origin or disability. We believe in promoting a positive, healthful work environment and encouraging team members to learn, grow and develop.

• Familiarize yourself with this booklet and the Team Member Guide. They provide guidance regarding your rights and responsibilities.
• Use property, facilities, resources, equipment, tools and time wisely and ethically, for professional use only, focusing on customer service and excellence.
• Only use internal communication channels or access to the Internet at work for approved job-related functions. For example, don’t use the Internet at work to post, store, transmit, download, distribute or view any inappropriate, inflammatory or derogatory material.
• Represent yourself accurately and fairly to the public. When on duty, always wear your badge where others can see it.
• Report events that are not in keeping with our values, organizational policies or laws governing our industry to your supervisor. Your supervisor is expected to facilitate open communication regarding problems and concerns. You may also report concerns to any member of the Senior Management Team, Corporate Responsibility Officer, the BayCare Chief Compliance Officer or the anonymous hotline: 1-877-OUR-DUTY.

Treat Others With Trust, Respect And Dignity

We are dedicated to these values. It is the responsibility of all members of the community governing board, administration, medical staff, students, contracted agents, team members and volunteers to act in a manner that is consistent with these principles and in compliance with supporting policies.

• Treat customers with respect and dignity. Conduct business honestly, fairly and with integrity. Do not engage in any conduct that is disloyal, disruptive, or damaging to our facilities.
• Remember that you are a representative of our organization whether you are on or off duty.
• Provide care to all patients based on their need for care, not on the basis of their ability to pay or other factors unrelated to patient care.
• Refer concerns about patient care decisions and alternatives to the Ethics Committee. A request for consultation can be made by any health care team member, patient, family member or other decision-maker through Nursing Administration or Pastoral Care.
• Follow the Ethical and Religious Directives for Catholic Healthcare Services as they apply to your institution. If you have questions concerning the Directives or how they apply to your institution, please contact the Mission Integration Department.
Provide Care In Keeping With Patients’ Rights And Responsibilities

We want all our patients to have the best possible care and we strive to meet all their health care needs. To ensure this happens, we have developed Patient Rights and Responsibilities, which follow guidelines set forth by the American Hospital Association. These rights and responsibilities are posted throughout the facility and/or made available to each patient.

We commit to the following actions for those who interact with patients or their families or are otherwise involved in providing, coordinating or obtaining payment for their care:

• Introduce yourself to patients.
• Deliver care without regard to race, color, belief, national origin, sex, handicap or ability to pay.
• Be respectful of patients. Respond promptly to their requests and provide clear, reasonable and responsive answers to their questions.
• Allow patients to express their wishes and participate in treatment decisions.
• Obtain informed written consent from patients or their legal representatives as required by law and the facility’s policies and procedures. Informed consent means that the procedure and related risk factors were explained to and understood by the person consenting.

• Provide patients with access to educational resources and information about their care.
• Maintain patients’ privacy and safety at all times.
• Inform patients of how to access appropriate personnel for presenting complaints.
• Access the Ethics Committee for consideration of ethical issues concerning patient care.
• Provide, upon request, reasonable estimates of charges for medical care and understandable bills listing charges for services provided.

We want all our patients to know their rights, as well as their responsibilities to themselves, their physicians and the health system.

We hope this will help foster mutual respect and trust among patients and caregivers.
Safeguard The Privacy Of All Patients And Team Members

We have a legal and ethical responsibility to do this. We have established Confidentiality and Information Security policies and procedures that apply to all those in the health system. These policies are posted on the Intranet and are also available upon request. You are required to read, understand and sign a Confidentiality Agreement. This signifies your commitment to following these policies.

- Protect all medical, financial and personal information as confidential, regardless of its form (electronic, paper, film, voice). Protect it from unauthorized viewing, discussion and disclosure.
- Use proper safeguards when sending confidential information. If you are uncertain about applicable safeguards, ask your supervisor.
- Make sure that confidential information is not discussed in public areas.
- Make sure recording devices are used in compliance with recording policies applicable to your department, including the use of video, digital, camera phone or other cameras.
- Use information only as it relates to the performance of your job.
- Access and operate computer systems only for the performance of authorized duties. For example, you should not access your own health information, co-worker information or anyone else’s information unless it is part of your job to do so.
- Keep your assigned password and access codes confidential. You are responsible for the modification or use of information that is obtained with your approved access. For example: keys, entry codes, badges, user or log-on ID or password. Report stolen or lost badges, keys, laptops, etc. immediately.
- Discuss any concerns with your supervisor when in doubt.
Conduct Research Ethically

We are committed to following accepted ethical and legal standards when proposing, conducting, and reporting research.

- Obtain approval for all research from the Institutional Review Board (IRB) prior to conducting research.
- Provide all individuals considering participation in a research study with the information they need to make an informed decision, without coercion.
- Submit only true, accurate and appropriate information to the IRB for review and approval.
- Ensure fair and equal access to research protocols without discrimination.
- Promptly report any adverse reactions or unexpected events to the Institutional Review Board.
- Avoid scientific misconduct, including but not limited to, making up or changing results, or copying results from other studies without performing the research.
- Report research-related conflicts or scientific misconduct to your supervisor, any member of the Senior Management Team, Corporate Responsibility Officer, the BayCare Chief Compliance Officer or the anonymous hotline.
- Do not bill patients or payers for the costs of research-related tests, procedures or treatments, which are paid by a study sponsor. Promptly correct any errors in billing and refund any duplicate payments.
- Submit only true, accurate and appropriate costs related to each research grant.
Maintain A Safe And Healthy Environment

We are committed to providing a safe and healthy environment. Every team member is responsible for safety. It is our duty to comply with applicable local, state and federal environmental laws.

• Know what and where the policies and procedures are in your department.
• Follow all universal safety policies and procedures as well as those of your department.
• Take proper precautions when handling, storing or disposing of hazardous materials.
• Become familiar with all Material Safety Data Sheets (MSDS) for hazardous materials that you may encounter.
• Learn how to safely operate equipment and report problems.
• Report equipment problems, environmental concerns or unsafe conditions to the appropriate department within your facility.
• Know how and when to use proper personal protective equipment. Take all required precautions to protect yourself and others from hazardous conditions.
• Make sure that you complete all required health screenings/vaccinations.
• Know what types of injuries/accidents are common to your job and how to prevent them.
• Know and be prepared to follow security and emergency procedures.

• Remember that this is a drug-free workplace.
• Come to work well rested, sober and alert. Impairment of your attentiveness puts you and others at risk.
• Be aware of our four major areas of environmental matters. They are:
  – Pollution prevention
  – Waste management and recycling
  – Air quality issues
  – Construction and campus development
Provide The Right Care, At The Right Time, In The Right Place

We are dedicated to providing appropriate, high-quality care to our patients in the proper setting. Skilled and compassionate care throughout the term of treatment and recovery is essential to ensure the best outcomes for our patients.

- Admit only those patients whose physicians have determined require our services.
- Perform only services that the facility is licensed to provide and you are qualified to provide.
- Comply with all regulations related to the transfer of patients.
- Provide care in accordance with all established protocols.
- Always comply with federal and state laws (COBRA/EMTALA/Florida Access to Care Law) when treating patients with emergency conditions. Understand that all patients arriving at the Emergency Department will receive a medical screening.
- Ensure all patients receive appropriate discharge planning.
Retain And Release Documents Appropriately

We are committed to the integrity, accuracy and confidentiality of information for the benefit of all we serve. In the normal course of our business, records are created and maintained to comply with legal, regulatory and accreditation requirements. Patient health information, team member information, billing and business documents are all records required to be maintained for periods spelled out in our record retention policies and guidelines.

- Maintain quality documents by ensuring their integrity, accuracy, consistency, reliability and validity.
- Do not alter documents regardless of their form (paper, electronic, etc.) or remove unauthorized portions of medical or financial records.
- Make corrections or additions to records in accordance with departmental policy.
- Be knowledgeable about, and adhere to, patient confidentiality policies.
- Refer all requests for medical information to the appropriate Health Information Management Department, including requests for corrections or additions to the medical record so that both electronic and non-electronic documentation can be maintained and released accurately.

- Keep information for at least the period specified by state statute of limitations or federal regulations. Also, take guidance from other appropriate resources such as The Joint Commission, AHA, CMS, IRS, Florida Agency for Health Care Administration, Medicare Conditions of Participation and the HIPAA regulations.
- Adhere to the facility’s Risk Management and HIPAA retention policies for patient health information. Consult with the Risk Management Department for defining specific retention policies for other types of information.
- Contact Risk Management, the appropriate Health Information Management Department or the BayCare Corporate Responsibility Department when in doubt about the appropriateness of the release or removal of documents.
Respect Copyrights And Licenses
We will comply with copyright and licensing laws.

In order to avoid copyright or license violation:

- Purchase, rather than make complete copies of, a periodical or book.
- Get permission from the copyright owner if you have a need to share substantial portions of a work with others.
- Don’t make and distribute copies of articles or newsletters to avoid subscription costs.
- DON’T COPY SOFTWARE—unless it states otherwise, software is licensed to the purchaser with definite restrictions on its use.
- Remember that if a reproduction of a work reduces the author’s or publisher’s ability to profit from the work, then it may have violated copyright law.
- Follow these guidelines for electronic media and videos as well as written documents.

Avoid Conflicts Of Interest
We have the responsibility to act in the best interests of our organization and to be fair in making business decisions. To maintain our professional judgment we need to avoid situations that lead to actual or perceived conflicts of interest.

A conflict of interest exists when an outside activity or relationship influences or appears to influence a team member’s decision-making process.

- Avoid the following situations, which have the potential of being conflicts of interest:
  - Secondary employment by a competitor or potential competitor of the organization or any of its affiliated entities, depending on the nature of the employment.
  - Acceptance of gifts, payments, or services from outside vendors seeking to do business with the organization or any of its affiliated entities.
  - Vendor-paid out-of-town travel or lodging.
  - Directing business to a company owned or controlled by a team member or their family.
  - Owning or holding a substantial interest in a company that is a competitor or supplier of the organization or any of its affiliated entities.
  - Performing consulting services for a customer or supplier of the organization or any of its affiliated entities.
  - Participating as an expert witness in a position adverse to BayCare.
  - Accepting an independent contractor position with any BayCare facility.
- Disclose any potential conflicts of interest.
- Consult your supervisor, the Corporate Responsibility Officer or BayCare Chief Compliance Officer for clarification of the above, or any time you’re in doubt.
Bill Accurately

It is our policy to bill all payers in compliance with all regulations.

• Adhere to all billing policies and procedures.
• Never mislead a payer or patient.
• Make sure that all services and products provided have been properly documented.
• Fully disclose, document and correct all known billing errors.
• Report any known problems (system or process) that may be causing an error.
• Implement corrective procedures to ensure that errors are not repeated.
• Maintain accurate data collection and billing systems and policies.
• Maintain competency and keep up-to-date with current billing and coding issues through ongoing education.
• Complete regulatory filings in a timely and accurate fashion.
• Ensure data provided to governmental agencies and other third party payers fairly represents actual activity.
Recognize And Report Fraud, Waste And Abuse

We have adopted policies to prevent and detect fraud, waste and abuse. They require compliance with federal and state laws intended to protect against fraud, waste and abuse. Our policies are available upon request and on the Intranet.

Our policies and various federal and state laws, such as the federal False Claims Act and the Florida False Claim Act, prohibit false claims and other fraudulent activity. Violations of these laws can result in civil actions and penalties. For example, the federal False Claims Act prohibits conduct such as knowingly submitting a false or fraudulent claim, or using or making a false statement to get a false or fraudulent claim paid or approved by the United States. It also prohibits any plan to defraud the United States by getting a false claim allowed or paid. Also, the Florida False Claim Act prohibits knowingly causing the Florida government to pay claims that are false. Other laws governing Medicaid program integrity also look for ways to reduce fraud and abuse.

Although not an exhaustive list, the following are examples of fraud, waste or abuse:

- Forging or changing patient billing-related items such as making false claims, or billing for services or supplies not rendered, or not documented.
- Misrepresenting a diagnosis or procedure code in order to obtain payment.
- False documentation of a diagnosis or procedure code to obtain a higher rate of reimbursement.
- Alteration or forgery of checks.
- Any misuse or theft of funds.

- Any irregularity in the handling or reporting of money transactions.
- Any irregularities of or giving or receiving payment in connection with business transactions and the giving or obtaining of contracts.
- Falsifying or altering any record or report, such as an employment application, payroll or time record, expense account, medical record, patient record, or scientific research or data collection record.
- Theft or unauthorized use of furniture, fixtures, equipment, supplies, software or other property.
- Misleading or falsely reporting financial or operational records or books.
- Falsely reporting costs.

Performing routine audits, monitoring, and reviews along with internal controls help us prevent and detect fraud, waste and abuse.

Don't ignore these types of activities. If you know or suspect activity of this type, report it immediately or call the anonymous hotline at 1-877-OUR DUTY or 1-877-687-3889.

If you are uncertain as to whether an activity is fraudulent, contact the BayCare Chief Compliance Officer for guidance.

Team members who lawfully report false claims or other fraudulent conduct or who otherwise assist in an investigation, action or testimony are protected from retaliation under both state and federal laws.
Follow Policy When Dealing With Vendors

We are committed to fair practices in obtaining all necessary goods and services. We are also dedicated to reducing costs through membership in a purchasing alliance and standardization of products. Certain guidelines should be observed:

• Follow all policies and procedures when obtaining goods and services.
• Be careful not to commit the facility’s resources beyond the scope of your purchasing authority.
• Select and use vendors based on objective criteria (membership in purchasing alliance, customer service, product quality, price, expertise, etc.) rather than giving preferential treatment based on unrelated factors or conflicts of interest.
• Solicit a sufficient number of vendors to obtain competitive prices, quality products or services.
• Do not disclose prices paid by the organization or any of its affiliated entities or negotiated terms to anyone outside the organization.
• Never accept gifts or gratuities in return for conducting business with vendors.
• Cooperate with efforts to standardize products and reduce costs.
• Perform appropriate background checks to ensure vendors are in good standing with federal health care programs.

Understand And Help Maintain Our Tax-Exempt Status

We are recognized as a tax-exempt organization under IRS Code 501(c)(3). Because of this, we must operate to serve “public” rather than “private” interests by making sure that the assets of the organization do not benefit private individuals. Additionally, we cannot engage in any political activities, such as making contributions or endorsements, or other activities that might be interpreted as favoring any candidate or cause over another.

• Make sure that payments for goods and services are at fair market value.
• Question arrangements that seem to allow for:
  – Excessive compensation or benefits
  – Payment of personal expenses
  – Free or reduced prices for rent or other goods or services
• Be especially mindful that arrangements with those who can exert influence on the organization, such as officers, directors and physicians, could affect our tax-exempt status. Seek appropriate advice.
• Participate in political activities as an individual, not as a representative of the organization or any of its affiliated entities; don’t use its funds.

Maintaining our tax-exempt status allows us to continue to operate as a community-owned, quality health care organization. If you have a question concerning tax-exempt status, please ask your supervisor or your Chief Financial Officer.
Follow The Law Regarding Patient Referrals

We do not offer or accept any incentives, kickbacks, bonuses, stipends or anything of value in exchange for patient referrals. Federal and state anti-kickback laws prohibit directly or indirectly paying or receiving anything of value for patient referrals. No payment, or other type of consideration, should ever be given to anyone with the implication that it is dependent upon the admission, recommendation or referral of patients or other business. Likewise, nothing of value should ever be accepted in return for making a referral.

- Ensure that non-employed physician agreements and contracts do not include any language specifying that patient referrals must remain within our Health System. Physicians are free to refer patients to any person or entity they deem appropriate.
- Do not pay patients.
- Do not waive insurance co-payments or deductibles or otherwise provide financial benefits to patients in return for admissions, unless specifically allowed in managed care contracts.
- Refer patients based on medical needs, not for financial or personal gain.

Strictly Adhere To Laws Governing Physician Agreements

We are committed to providing quality patient care to our community by maintaining an excellent medical staff. We accomplish this, in part, through our physician recruitment and retention program, which is designed to comply with all applicable regulations. Our tax-exempt status and our participation in federal reimbursement programs (Medicare, Medicaid, TriCare, etc.) depend on our compliance with these mandates.

- Demonstrate and document a community need before recruiting physicians from outside our service area.
- Make sure contracts with all physicians adhere to applicable guidelines and do not contain payments or considerations that are prohibited.
- Perform appropriate background checks to ensure physicians are in good standing with federal health care programs.
- Ensure all physician agreements are in writing and adhere to the conditions explained in the section regarding patient referrals.
- Enter into agreements with physicians only if you have the proper authority.
Comply With Anti-Trust Law

We believe in promoting fair competition in the health care marketplace. Anti-trust laws prohibit competitors from sharing information that would reduce competition.

• Protect pricing and managed care information from competitors.
• Keep strategic or marketing plans from competitors.

Anti-trust issues are very difficult and complex. If you have an anti-trust concern, consult with your Corporate Responsibility Officer or the BayCare Chief Compliance Officer.
Know How To Respond To A Governmental Investigation

Our policy is to cooperate with the reasonable demands of governmental investigations. Because health care rules and regulations have changed considerably in recent years, the government has increased its focus on our industry. As a result, we think it is wise to be prepared ahead of time for possible investigations. Usually requests for data in such investigations come in the form of subpoenas, which give a certain amount of time to respond. But government agents may arrive unannounced with a search warrant granting them the right to take documents immediately.

- If agents arrive in your department with a search warrant, do the following:
  - Advise your supervisor or the team member designated to control such situations.
  - Immediately call the facility’s Administrator or the Administrator on call, the BayCare Chief Compliance Officer and Risk Management. Advise them of the situation and follow their instructions.
  - Always act professionally and be courteous to federal agents.

- If you are the person designated to control such situations:
  - Ask politely for identification, and obtain the names of the agents on site.
  - Ask to read and copy the search warrant and supporting affidavit to determine the scope and basis of the search.
  - See that you or a designated team member accompanies each agent and records where they go and any comments they make.
  - Answer only questions related to the location of the documents referred to in the search warrant. Be professional. Do not engage in discussions or “chit chat” with investigators.
  - When you speak, BE TRUTHFUL — never lie or mislead an investigator.
  - State only FACTS — don’t guess or give opinions.
  - Always cooperate with agents and never interfere with the search. Politely object to any actions taken that are beyond the scope of the warrant. Document your objections and agents’ responses.
  - Be present for, and obtain a written copy of, the inventory prepared by the agents.
  - Request permission to photocopy all documents prior to their removal. Also, request permission to copy computer software and data.
  - Document in detail (including the date) all your requests made to the agents, and their responses, especially their refusals.

- Do not destroy or alter any documents or computer files that are referred to in the search warrant.
Never Ignore A Questionable Situation

When you have questions about the appropriateness of a situation, it is your responsibility to satisfy yourself that things are being done right.

- Consult policies and procedures, handbooks and manuals. Policy and procedure manuals are available in your department and on the Intranet.
- Check with your supervisor if you need help locating or understanding policies or procedures.
- Contact knowledgeable team members in other departments, such as Team Resources, the Nursing Department and BayCare Corporate Responsibility.
Corporate Responsibility Program—Don’t Give Up!

You have a responsibility to report any activity that appears to violate this Code, laws, rules or regulations. You are encouraged to address any questions and issues with your supervisor or any member of the senior management team. However, if you have researched a situation and are still not satisfied or do not feel comfortable discussing the matter with your supervisor, you have other avenues available to you.

We have appointed a Director of Audit Services & Corporate Responsibility who is the organization’s Chief Compliance Officer, responsible for the overall Corporate Responsibility Program. The Chief Compliance Officer reports directly to the BayCare President/Chief Executive Officer and the BayCare Board Audit Committee. The Corporate Responsibility Council (CRC), including members of Senior Management, is responsible for the program oversight.

Additionally, there is a designated Corporate Responsibility Officer in each Community Health Alliance (CHA) who is responsible for their CHA compliance program.

Refer to the BayCare Intranet, under the Corporate Responsibility Department site, to learn who your CHA Corporate Responsibility Officer is and how to contact them.

You are encouraged to contact either the BayCare Chief Compliance Officer or your CHA Corporate Responsibility Officer when you have concerns about our compliance with any legal requirement. Ethical issues regarding patient care should be presented to the Nursing Office or the Ethics Committee. Human Resources questions should be addressed with the Team Resources department.

For anonymous reporting of compliance issues, call the hotline toll-free at 1-877-OUR-DUTY or 1-877-687-3889. The hotline is available 24 hours a day, seven days a week.

Whenever you call the hotline or express a concern to one of the team members mentioned above:

- You will be treated with respect and dignity.
- Your concerns will be taken seriously, reviewed, investigated and addressed promptly.
- You will be informed of the resolution or outcome.
- Your communication will be protected to the greatest extent possible.

Reports are reviewed by the BayCare Board Audit Committee. No adverse action or retaliation of any kind will be taken against an individual because he or she reports, in good faith, a suspected violation of the Code of Conduct or other irregularity by any person. Acts of retaliation are against our policy, should be reported immediately and will be investigated, addressed, and disciplined appropriately. Any process changes which result from a review are made promptly and corrective action is initiated to prevent similar errors from recurring in the future.
Watch For Warning Signs

Often you may hear or think something that could be a warning that things are not right. Any one of the following phrases may be innocent, but should grab your attention.

- “No one will ever find out.”
- “I don’t have time to document this.”
- “We can get paid more if we do it this way.”
- “Do you know what I found out about that person’s medical record?”
- “This conversation never happened.”
- “What’s in it for me?”
- “Just do it now and I’ll explain later.”
- “Let’s find out why that team member is a patient.”
- “Have you heard that we have a celebrity here?”
- “No one said I couldn’t do this.”
- “It’s not my job to tell them this is happening”
- “I don’t care if it’s not exactly right.”
- “Who cares about the customer?”
- “Everyone else is doing it.”

If you hear or think of one of these phrases, ask yourself some of the questions in the next section.
Ask Yourself

The following are some general questions that might help you to decide whether you’re about to make the right decision.

• Is it legal?
• Is it against policy and procedure?
• Is it fair to all concerned?
• How would I feel if my decision was published in the newspaper?
• Would I feel good if my family knew about it?
• Will I sleep soundly tonight?
• Am I violating someone’s trust?
• Is there enough privacy here to discuss this?
• Is it the right thing to do?

If you are not sure if something is right, ask your supervisor, your CHA Corporate Responsibility Officer, BayCare’s Chief Compliance Officer or call the anonymous hotline. Breach of the Code of Conduct “Doing the Right Thing,” as well as failure to report a breach, are subject to consequences under the Corporate Responsibility Program and/or Team Resources policies. Breaches may also be subject to criminal prosecution.
Doing the Right Thing: Ethics and Organizational Responsibilities Code of Conduct

Corporate responsibility

ComplianceLine 1-877-OUR-DUTY (1-877-687-3889)

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