Dear West Tennessee Healthcare Colleague,

The true foundation of West Tennessee Healthcare has always been its commitment to provide quality care to our patients. As part of this, we strive to ensure an ethical and compassionate approach to health care delivery and management. We must demonstrate consistently that we act with absolute integrity in the way we do our work.

This Code of Conduct provides guidance to promote work that is done in an ethical and legal manner. It emphasizes the shared common values which guide our actions. It contains resources to help resolve questions about appropriate conduct in the workplace. Please review it thoroughly. Your adherence to its spirit, as well as its specific provisions, is absolutely critical to our future.

If you have any questions regarding this Code or encounter any situation that you believe violates federal healthcare program requirements, WTH compliance policies and procedures, or provisions of this Code, you are expected to immediately consult your supervisor, another member of management, or the Compliance Office. You may also call the Compliance Line at 1-877-7-INFORM (1-877-746-3676) or visit our website at https://www.integrity-helpline.com/WTH.jsp. WTH prohibits retaliation against you for making a good faith report of possible improper conduct, and you may make any such report anonymously and/or confidentially.

No code of conduct can substitute for our own internal sense of fairness, honesty and integrity. Thus, if you encounter a situation or are considering a course of action which may be technically within the guidelines of the Code of Conduct, but you are worried that the contemplated action simply "does not feel right," please discuss the situation with your supervisor, a member of management or the Compliance Office.

We trust you as a valuable member of our healthcare team. We ask you to help us and your colleagues in this organization to support and implement the values and principles outlined in this Code, which are critical to achieving our mission.

Sincerely,

James E. Ross
President and
Chief Executive Officer

Danny Wheeler
Chairman,
Board of Trustees

Effective 1/1/99
Revised 5/1/18
To improve the health and well-being of the communities we serve while providing exceptional and compassionate care.

**Purpose of Our Code of Conduct**

We must fulfill our mission in a way that encourages the trust and confidence of our patients, staff, affiliated physicians, other health care providers, educational institutions involved with our organization, payors and the communities we serve.

This Code of Conduct sets out WTH’s general principles and expectations for you to carry out our daily activities within appropriate ethical and legal standards. The Code of Conduct does not replace the specific policies and procedures, by-laws, and management guidelines that are in place, and you are expected to be familiar with those documents, and to comply with their provisions, along with this Code of Conduct.

**Summary**

This Code of Conduct applies to all members of WTH’s workforce, including officers, directors, employees, physicians, contractors, and agents. We expect you to:

1. **Act in Accordance with Published Standards.** All workforce members must abide by published standards. This includes the Code of Conduct, WTH policies and procedures, and federal and state regulations, including federal healthcare program requirements.

2. **Uphold the Highest Standards of Ethics and Integrity.** We expect the members of our workforce, and in particular, our managers, to set an ethical tone for our organization.

3. **Learn the Standards that Apply.** While members of the WTH workforce are not expected to know every facet of every law, they have an obligation to familiarize themselves with the rules and standards that apply to them.

4. **Report and Detect Wrongdoing.** WTH expects each workforce member to report violations of this Code of Conduct, legal requirements (such as federal healthcare program requirements) or compliance-related policies and procedures. WTH provides mechanisms for members of the workforce to do so anonymously or confidentially, if you wish. Managers, such as department directors and supervisors, have a duty to detect conduct that a person should reasonably know is unlawful and are prohibited from retaliating against persons who make a good faith report of misconduct.

We intend to enforce these expectations and this Code of Conduct. We have faith that members of our workforce will not willingly violate this Code of Conduct or applicable laws and regulations. However, if you do not comply with these expectations or with federal healthcare program requirements, a number of consequences can result for you and for WTH.

- **Governmental enforcement.** If you fail to comply with federal healthcare program or other legal requirements, you may be subject to enforcement action by the government. The precise nature of such enforcement action will depend on the violation at issue but may include financial penalties, repayments to federal healthcare programs, imprisonment, exclusion from participating in the federal healthcare programs, disciplinary actions by medical licensing agencies, or other actions.
Discipline by WTH. Employees who fail to meet these obligations may also face disciplinary action up to and including termination.

Evaluations. WTH evaluates every employee’s conformance to the Code of Conduct and the Corporate Compliance Program. That evaluation is reflected in the employee’s annual performance evaluation.

1. Treatment of Patients
WTH workforce members are expected to treat patients with dignity, respect, and courtesy and to provide high quality healthcare to all patients in accordance with legal requirements and West Tennessee Healthcare policies.

Our mission is to improve the health and well-being of the communities we serve while providing exceptional and compassionate care. We are committed to the delivery of safe, effective, and compassionate patient care. WTH facilities are focused on the attentiveness and dedication of service to patients, the utilization of evolving technology to ensure quality and patient safety and to create an overall culture that makes patient safety a priority. You are expected to treat all patients with dignity, respect, and courtesy and provide care that is safe, necessary, and appropriate.

There are increasingly numerous measures that relate in some way to the quality of patient care. These include, for example, the Conditions of Participation of the Centers for Medicare and Medicaid Services (CMS), the standards and surveys of The Joint Commission and other measures promoted by the National Quality Forum and the Institute for Healthcare Improvement (IHI). WTH is attentive to these standards and seeks to establish systems that reflect the best practices required by these organizations. This commitment to quality of care and patient safety is an obligation of every WTH colleague.

You are to comply with all applicable rules, regulations, and policies. These include requirements that you:

- Not discriminate in the admission, transfer or discharge of patients, or in the care we provide based on race, color, religion, or national origin.
- Involve patients in all aspects of their care and obtain informed consent as required.
- Ensure the accuracy of all clinical documentation.
• Treat patients in a manner that preserves their dignity, autonomy, self-esteem, civil rights, and involvement in their own care.

• Adhere to the Emergency Medical Treatment and Labor Act (“EMTALA”) in providing emergency medical treatment to all patients, regardless of ability to pay.

• Adhere to federal and state laws governing the confidentiality of patient information. You must be familiar with and follow these laws.

You are expected to review and be familiar with WTH’s policies and procedures on the issues referenced above. In any circumstance where you have a question about whether the quality or patient safety commitments are being fully met, you are obligated to raise this concern through appropriate channels until it is satisfactorily addressed and resolved. Such channels include those established by your facility, and if necessary, include the WTH Compliance Line. In addition, WTH workforce members are provided with resources and guidance as to how to report concerns to The Joint Commission, state survey agencies, or state quality improvement organizations.

2. Accreditation and Surveys
WTH workforce members must deal with all accredit ing and external agency survey bodies in a direct, open, and honest manner.

In preparation for, during, and after surveys, WTH colleagues must deal with all accredit ing and external agency survey bodies in a direct, open, and honest manner.

From time to time, government agencies and other entities may conduct surveys in our facilities. We respond with openness and accurate information. In preparation for or during a survey or inspection, WTH colleagues must never conceal, destroy, or alter any documents, lie, or make misleading statements to the agency representative. WTH colleagues must never attempt to cause another colleague to fail to provide accurate information or obstruct, mislead, or delay the communication of information or records relating to a possible violation of law.
3. Financial Relationships and Business Courtesies
WTH employees must comply with laws that restrict giving anything of value to physicians, or accepting anything of value from vendors, designed to influence referrals or purchases.

WTH workforce members must remember that the federal Stark law governs all business relationships with physicians and that the federal anti-kickback statute and other laws restrict the giving or receiving of anything of value to induce the referral or recommendation of federal healthcare program business.

In order to promote compliance with these laws, WTH policies and procedures require that any business arrangement with, or provision of anything of value to, a physician must be consistent with WTH policies and/or reviewed and approved by the General Counsel.

Further, in order to ethically and legally meet all standards regarding referrals and admissions, you must adhere strictly to two primary rules:

Do not pay or give anything of value for referrals.
You should not give or offer to give anything of value to anyone to induce the referral of patients or federal healthcare program business. Violation of this policy may have grave consequences for the organization and the individuals involved, including civil and criminal penalties, and possible exclusion from participation in federally funded healthcare programs.

Do not accept anything of value that is to induce referrals from WTH.
No WTH workforce member or any other person acting on behalf of the organization is permitted to solicit or receive anything of value, directly or indirectly, that is intended to induce the referral of patients. When making patient referrals to another healthcare provider, you should not take into account the volume or value of referrals that the provider has made (or may make) to us.

You must adhere to WTH policies regarding giving or accepting business courtesies to or from persons outside of WTH. See the Business Courtesies Policy.

Extending Business Courtesies to Possible Referral Sources or Receiving Business Courtesies from Possible Vendors or Referral Recipients

Any entertainment or gift involving physicians or other persons who are in a position to refer patients to our healthcare facilities must be undertaken in accordance with organizational policies as described above. You are expected to comply with all federal laws, rules, and regulations regarding these practices.

Receiving Business Courtesies
We recognize that there are times when you may wish to accept from a current or potential business associate an invitation to attend a social event in order to further develop your business relationship. Similarly, a business associate may sometimes extend training and educational opportunities to you at no cost to you or WTH. Prior to accepting any such invitation, you must receive approval to do so consistent with the policy on this subject. Under no circumstances may you solicit a gift nor may you ever accept cash.

Extending Business Courtesies to Non-Referral Sources
There may be times when you may wish to extend to a current or potential business associate (other than someone who may be in a position to make a patient referral) an invitation to attend a social event. Such business entertainment with respect to any particular individual must be infrequent and in accordance with WTH policies.
U.S. federal and state governments have strict rules and laws regarding gifts, meals, and other business courtesies for their workforce members. With regard to gifts, meals, and other business courtesies involving any other category of government official or employee, you must determine the particular rules applying to any such person and carefully follow them.

4. Federal Healthcare Program Billing Requirements

WTH workforce members must prepare and submit bills that are truthful, accurate, and complete and that comply with federal healthcare program or private payor requirements. WTH workforce members must include truthful and complete information in medical records to promote accurate billings.

You are required to conduct your business in a manner that promotes truthful, complete, and accurate billings that are compliant with federal healthcare program or private payor requirements.

Workforce members or agents of WTH may not knowingly present or cause to be presented claims which are false, fictitious, or fraudulent. In addition, all identified overpayments should be refunded to payers in accordance with WTH policies and procedures.

To further accurate and compliant billing, medical records are expected to be truthful, accurate, and complete. Medical record documentation is a critical component of accurate and compliant billing.

All clinical and administrative staff are expected to be knowledgeable about billing requirements applicable to their particular departments. These include coverage, medical necessity standards for billing, accurate coding of diagnoses and procedures, and documentation requirements.

If you have a question about appropriate documentation or procedures for ensuring that particular services are appropriately billed, you are expected to ask your department director or other appropriate individual.

5. Accuracy of Documentation

WTH workforce members must prepare accurate documents and records and retain them in accordance with WTH policy.

Each WTH workforce member is responsible for the integrity and accuracy of our organization’s documents and records, not only to comply with regulatory and legal requirements, but also to ensure that records are available to defend our business practices and actions. No one may alter or falsify information on any record or document.

Medical and business documents and records (including computerized or other format materials) must be retained in accordance with the law and our record retention policy.

You must retain and destroy records appropriately according to our policy. Never tamper with records or remove or destroy them prior to the specified date in the record retention policy.

6. Confidentiality of WTH Business Information

WTH workforce members are expected to keep our patients’ protected health information and WTH business information confidential.

Each workforce member is responsible for maintaining the privacy and security of our patients’ protected health information in accordance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Workforce members will only access patient information that is necessary for their job responsibilities.

Furthermore, information about our organization’s strategies and operations is confidential and is a valuable asset. Although you may use confidential information to perform your
job, it must never be shared with others outside WTH or your department unless the individuals have a legitimate need to know this information and have agreed to maintain the confidentiality of the information.

7. Electronic Media and Security Requirements
WTH workforce members are expected to use all communication systems, including but not limited to computers, electronic mail, Intranet, Internet access, telephones, and voice mail, primarily for business purposes and in accordance with WTH policies and procedures.

All communications systems, including but not limited to computers, electronic mail, Intranet, Internet access, telephones, and voice mail are the property of the organization and are to be used primarily for business purposes in accordance with electronic communications policies and procedures. Limited reasonable personal use of WTH communications may be permitted; however, users should assume these communications are not private. Users of computer and telephone systems should presume no expectation of privacy in anything they create, store, send, or receive on the computer and telephone systems, and WTH reserves the right to monitor and/or access communications usage and content consistent with WTH policies.

WTH workforce members may not use internal communication channels or access to the Internet at work to view, post, store, transmit, download, or distribute any threatening materials, knowingly, recklessly, or maliciously false materials, obscene materials; or anything constituting or encouraging a criminal offense, giving rise to civil liability, or otherwise violating any laws. Also, these channels of communication may not be used to send chain letters, personal broadcast messages, or copyrighted documents that are not authorized for reproduction.

WTH workforce members shall comply with WTH’s information security policies and standards governing the use of information systems. Only assigned user IDs shall be used and should not be shared. Portable devices and removable media, such as laptops, USB drives, CD’s and external hard drives should be secured at all times. These devices may require encryption in accordance with WTH policy if protected health information is permitted and present on the device.

8. Conflict of Interest
WTH workforce members should avoid conflicts of interest.

A conflict of interest may occur if your outside activities or personal interests influence or appear to influence your ability to make objective decisions in the course of your job responsibilities. A conflict of interest may also exist if the demands of any outside activities hinder or distract you from the performance of your job or cause you to use WTH resources for other than WTH purposes. It is your responsibility to ensure that you remain free of conflicts of interest in the performance of your responsibilities at WTH. If you have any question about whether an outside activity might constitute a conflict of interest, you must obtain the approval of your supervisor before pursuing the activity. See the Conflict of Interest Policy.

9. Controlled Substances
You must ensure proper handling of controlled substances and medical supplies.

Some of our workforce members routinely have access to prescription drugs, controlled substances, and other medical supplies. Many of these substances are governed and monitored by specific regulatory organizations and must be administered by physician order only. It is extremely important that these items be handled properly and only by authorized individuals to minimize risks to us and to patients. If you become aware of the diversion of drugs from the organization, you should report the incident immediately.
10. Diversity and Equal Employment Opportunity
You must comply with all laws, rules, and regulations relating to non-discrimination in all personnel actions.

Our workforce members provide us with a wide complement of talents which contribute greatly to our success. We are committed to providing an equal opportunity work environment where everyone is treated with dignity, respect, and courtesy. You are required to comply with all laws, rules, and regulations related to non-discrimination in all personnel actions.

11. Harassment and Inappropriate or Disruptive Behavior
You must comply with all WTH policies prohibiting harassment and inappropriate or disruptive behavior.

Appropriate behavior toward co-workers and patients at WTH is defined in our Quality PLUS Principles, and our values which emphasize love and respect for all people.

WTH workforce members have the right to work in an environment free from all forms of discrimination and conduct which can be considered harassing, coercive, or disruptive. We do not tolerate harassment by anyone based on race, color, creed, sex, sexual orientation, religion, national origin, citizenship status, age, disability, or limited English proficiency.

Additionally, any form of sexual harassment is strictly prohibited. This prohibition includes sexual advances, requests for sexual favors, unwelcome or offensive touching, and other verbal, graphic, or physical conduct of a sexual nature.

Harassment also includes incidents of workplace violence.

Other inappropriate and disruptive behaviors may include, but are not limited to, the following: slurs and any other offensive remarks or jokes; attacks, verbal or physical, that are personal, irrelevant, or beyond the bounds of fair professional conduct; inappropriate comments made in patient records; non-constructive criticism that is addressed in such a way as to intimidate, undermine confidence, belittle, or imply stupidity or incompetence; and refusal to accept, or disruptive acceptance of assignments.

If you witness inappropriate behavior, it should be reported to your supervisor, Human Resources, the Medical Affairs office, or the Compliance Office. Individuals who exhibit inappropriate or disruptive behaviors will face disciplinary action in accordance with Medical Staff rules and regulations or other WTH disciplinary policies.

12. Health and Safety
You are expected to comply with laws, rules, regulations, and policies to promote a safe workplace.

All WTH workforce members must comply with all government laws, rules and regulations and with WTH policies that promote the protection of workplace health and safety. Our policies have been developed to protect you from potential workplace hazards. You should become familiar with and understand how these policies apply to your specific job responsibilities and seek advice from your supervisor whenever you have a question or concern. It is important for you to
notify your supervisor of any workplace injury or any situation presenting a danger of injury so that timely corrective action may be taken to resolve the issue.

13. Relationships with Subcontractors and Suppliers
You should select subcontractors and suppliers in a fair and reasonable manner.

We must manage our subcontractor and supplier relationships in a fair and reasonable manner, consistent with all applicable laws, rules, regulations, and good business practices.

We promote competitive procurement to the maximum extent practicable. Our selection of subcontractors, suppliers, and vendors is made on the basis of objective criteria including quality, technical excellence, price, delivery, adherence to schedules, service, and maintenance of adequate sources of supply. Our purchasing decisions are made on the supplier’s ability to meet our needs and not on personal relationships and friendships. We always employ the highest ethical standards in business practices in source selection, negotiation, determination of contract awards, and the administration of all purchasing activities. We do not communicate to a third party confidential information given to us by our suppliers unless directed in writing to do so by the supplier. We do not disclose contract pricing and information to any outside parties.

14. Substance Abuse and Mental Acuity
You are required to report to work free of the influence of alcohol and illegal drugs.

To protect the interests of our workforce members and patients, we are committed to an alcohol and drug-free work environment. All workforce members must report for work free of the influence of alcohol and illegal drugs. Reporting to work under the influence of any illegal drug or alcohol; having an illegal drug in your system; or using, possessing, or selling illegal drugs during working hours or while on WTH property may result in immediate termination. We may use drug testing as a means of enforcing this policy.

It is also recognized that individuals may be taking prescription drugs, which could impair judgment or other skills required in job performance. If you have questions about the effect of such medication on your performance, consult with your supervisor.

15. Ineligible Persons
WTH does not contract with, employ, or bill federal healthcare programs for services rendered by ineligible persons.

Ineligible persons are individuals or entities that are excluded or ineligible to participate in federal healthcare programs; suspended or debarred from federal government contracts; or that have been convicted of a criminal offense related to the provision of healthcare items or services. WTH routinely searches the Department of Health and Human Service’s Office of Inspector General and General Services Administration’s lists of such excluded and ineligible persons.

If you become excluded, debarred, or ineligible to participate in federal healthcare programs, or if you have been convicted of a criminal offense related to the provision of healthcare items or services, you are required to report this information to WTH.
16. License and Certification Renewals

WTH workforce members in positions which require a professional license are responsible for maintaining the current status of their credentials at all times.

WTH workforce members, independent contractors, and privileged practitioners in positions which require professional licenses, certifications, or other credentials are responsible for maintaining the current status of their credentials and shall comply at all times with federal and state requirements applicable to their respective disciplines. To assure compliance WTH may require evidence of the individual having a current license or credential status.

WTH does not allow any workforce member, independent contractor, or privileged practitioner to work without valid, current licenses, or credentials. Each workforce member, contractor, or practitioner must have evidence of current and valid licensure, certification, registration, accreditation, or credential as required by their position description.

17. Research, Investigations, and Clinical Trials

In conducting research, investigations, and clinical trials, it is our first priority to protect human subjects and respect their rights.

WTH facilities follow the highest ethical standards in full compliance with federal and state laws and regulations in any research, investigations, and/or clinical trials conducted by our physicians and professional staff. We do not tolerate misconduct, which includes, but are not limited to, activities such as making up or changing results, copying results from other studies without performing the clinical investigation or research, failing to identify and deal appropriately with investigator or institutional conflicts of interest, and proceeding without Jackson-Madison County General Hospital (JMCGH) Institutional Review Board (IRB) approval. Our facilities’ first priority is always to protect the patients and human subjects and respect their rights during research, investigations, and clinical trials.

Physicians conducting clinical trials of investigational products and services are expected to fully inform all subjects of their rights and responsibilities of participating in the clinical trial.

All potential subjects asked to participate in a clinical trial are given a full explanation of alternative services that might be beneficial to them. They are also fully informed of potential discomforts and are given a full explanation of the risks, expected benefits, and alternatives. The subjects are fully informed of the procedures to be followed, especially those that are experimental in nature. Refusal of a potential subject to participate in a research study or the voluntary withdrawal of his or her participation in an existing study will not compromise his or her access to other services to which he or she is otherwise entitled. A subject’s voluntary informed consent to participate in a clinical trial is documented and retained in accordance with WTH policies.

Any WTH facility or colleague engaging in human subject research must do so in conjunction with IRB approval, if applicable at that facility, and must be consistent with WTH policies and procedures.

18. Environmental Compliance

WTH workforce members must understand how job duties may impact the environment and must act in accordance with policies regarding the disposal of hazardous and medical waste.

It is WTH policy to comply with all environmental laws and regulations as they relate to our organizations’ operations. We act to preserve our natural resources to the full extent reasonably possible. We comply with all environmental laws and operate each of our facilities with the necessary permits, approvals, and controls.
We diligently employ the proper procedures to provide a good environment of care and to prevent pollution.

In helping WTH comply with these laws and regulations, WTH workforce members must understand how job duties may impact the environment, adhere to all requirements for the proper handling of hazardous materials, and immediately alert supervisors to any situation regarding the discharge of a hazardous substance, improper disposal of hazardous and medical waste, or any situation which may be potentially damaging to the environment.

19. Government Relations and Political Activities

WTH workforce members must comply with all federal, state, and local laws governing participation in government relations and political activities.

It is important to separate personal and corporate political activities in order to comply with the appropriate rules and regulations relating to lobbying or attempting to influence government officials. No use of corporate resources, including email, is appropriate for personally engaging in political activity. An employee may, of course, participate in the political process on his or her own time and at his or her own expense. While doing so, it is important WTH employees not give the impression that they are speaking on behalf of or representing WTH in these activities. Employees cannot seek reimbursement for any personal contributions for such purposes.

At times, WTH may ask colleagues to make personal contact with government officials or to write letters to present our position on specific issues. In addition, it is part of the role of some WTH management to interface on a regular basis with government officials. If a employee is making these communications on behalf of the
organization, he or she must be certain to be familiar with any regulatory constraints and observe them.

**Compliance Program Resources**

WTH has created a compliance program that evidences our commitment to the highest standards of ethics and compliance. This compliance program provides assistance for you in meeting the requirements of this Code of Conduct. More detail about WTH’s compliance program is available on the WTH intranet site or see the Compliance Program Policy.

**Resources for Guidance and Reporting Violations**

Each WTH workforce member has an individual responsibility for reporting any activity that appears to violate applicable laws, rules, regulations, including suspected violations of any federal healthcare program requirements, and WTH policies and procedures. Employees who fail to report violations may be subject to disciplinary action.

You may choose from several options to meet your obligations to report possible violations. We encourage the resolution of issues at the departmental level whenever possible. It is an expected good practice, when you are comfortable with it and think it appropriate under the circumstances, to raise concerns first with your supervisor. If this is uncomfortable or inappropriate, another option is to discuss the situation with another member of management or the Compliance Office.

WTH also has available, and encourages the use of, the telephone Compliance Line and the website located at www.integrity-helpline.com/WTH.jsp. These systems were established for the reporting of suspected violations. When placing a call to the Compliance Line or reporting through the website, you will be asked for your name, department, and a telephone number where you may be reached. However, you may remain anonymous by simply not giving the above information. You should know that if you remain anonymous it may be more difficult for us to investigate your report or communicate the results of the investigation to you.

If you identify yourself but request confidentiality, WTH’s policy is to maintain, within the limits of the law and to the degree possible, the confidentiality and identity of any individual who reports possible misconduct. See the Compliance Issue Reporting Policy.

There will be no retaliation for reporting a possible violation in good faith. However, any employee who deliberately makes a false accusation with the purpose of harming or retaliating against another employee may be subject to discipline. See the Non-Retaliation and Non-Retribution for Reporting Policy.

You may call the Compliance Line anytime at 1-877-7-INFORM (1-877-746-3676).
Consequences

All violators of the Code will be subject to disciplinary action. The precise discipline imposed depends on the nature, severity, and frequency of the violation and may include:

- Verbal reminder
- Written reminder
- Final Reminder
- Performance Improvement Plan
- Termination

Compliance will be an element of all employees’ evaluations. See the WTH Performance Improvement Policy.

Questions & Answers

The Code of Conduct is not intended to provide answers to every question that you may have about West Tennessee Healthcare’s policies or the applicable laws, rules, and regulations. It is designed to set forth the organization’s position and to help you recognize activities which should be reported. The following questions and answers will help you understand how specific guidelines must be applied.

The Compliance Program

If I have a question about workplace conduct or see something that I think is wrong, whom should I contact?

We have provided several resources for you. We encourage you to talk to your supervisor first. However, if for any reason you do not feel comfortable talking to your supervisor or if your supervisor did not answer the question or address the problem to your satisfaction, you do have other options. You may try to speak with someone else in management, contact the Compliance Office, call the Compliance Line at 1-877-7-INFORM (1-877-746-3676), or visit our website at www.integrity-helpline.com/WTH.jsp.

If I report something suspicious, will I get in trouble if my suspicion turns out to be wrong?

As long as you have an honest concern, our policy prohibits your being reprimanded or disciplined. As a WTH workforce member, you have a responsibility to report suspected problems. In fact, workforce members may be subject to discipline if they witness something but do not report it. The only time someone will be disciplined for reporting misconduct is if he or she knowingly and intentionally reports something that he or she knows to be false or misleading in order to harm someone else.

What should I do if my supervisor asks me to do something that I think violates the Code of Conduct or WTH policy, or is illegal?

Don’t do it! No matter who asks you to do something, if you know it is wrong, you must refuse to do it. You must also immediately report the request to a level of management above your supervisor, the Compliance Office, the Compliance Hotline, or through our website at https://www.integrity-helpline.com/WTH.jsp.

Ethical Behavior

How do I know if am on ethical “thin ice”?

If you are worried about whether your actions will be discovered, if you feel a sense of uneasiness about what you are doing, or if you are rationalizing your activities on any basis (such as perhaps the belief that "everyone does it"), you are probably on ethical "thin ice." Stop, step back, consider what you are doing, get advice, and redirect your actions so that you know you are doing the right thing.
Accuracy, Retention and Disposal of Documents

In preparation for an accreditation visit, my supervisor has asked me to review medical records and to fill in any missing signatures. May I do this?

No. It is absolutely wrong to sign another healthcare provider’s name in the medical record. It is part of our basic integrity obligation to provide only complete and fully accurate information to accrediting groups.

Business Courtesies

A patient with a chronic health condition is frequently admitted to our facility for treatment. He routinely tips his primary nurse around $100. May the nurse accept it?

No. Cash gifts must never be accepted from anyone with whom we have a business relationship.

May I accept a basket of fruit or flowers that a patient sent?

Yes. Gifts to an entire department may be accepted if they are consumable or perishable.

Conflicts of Interest

I am planning a dinner meeting at our hospital. My daughter owns a catering service in town. May I pick her catering service if the prices are comparable to other restaurants?

No. This may seem unfair, but you must avoid even the appearance of favoritism.

Do the conflict of interest policies apply to distant relatives, such as cousins, in-laws, or friends?

The conflict of interest policies generally apply to members of your immediate family. However, if any relationship could influence your objectivity or create the appearance of impropriety, you must apply the policies.

Patient Information

We live in a small town, and most of the community knows each other. There is a physician in our hospital who sometimes requests medical records, whether he is taking care of the patient or not. Is he allowed to do this?

No. Only the attending, covering, or consulting physician may have access to patient medical records. We are responsible for protecting the confidentiality of patient information from interested third parties as well as our staff. Patients are entitled to expect confidentiality, the protection of their privacy, and the release of information only to authorized parties.

Personal Use of Organization Resources

Can I type my spouse's resume on my computer?

Possibly. If you use the computer during non-working hours, you may be permitted to type personal documents. Check with your supervisor.

I volunteer for Big Brothers Big Sisters. May I copy a fundraising leaflet?

West Tennessee Healthcare encourages all employees to participate in volunteer activities. Again, check with your supervisor before using organizational resources for charitable or other non-business purposes.
Political Activities and Contributions

I do volunteer work for a local candidate running for office. May I use the copy machine to make flyers?

No. You may not use WTH time or resources to support political activities that are undertaken on a personal basis.
I certify that I have completed the General Ethics and Compliance education and training required by Jackson-Madison County General Hospital District.

I certify that I have received and will read my copy of the West Tennessee Healthcare Code of Conduct and policies and procedures implemented as required by Jackson-Madison County Hospital District.

I agree to comply fully with the principles and standards of the West Tennessee Healthcare Code of Conduct and all policies and procedures related to the Ethics and Compliance Program. I understand that compliance is a condition of my continued association with West Tennessee Healthcare.

I understand that West Tennessee Healthcare reserves the right to amend, modify, or update the Code of Conduct as well as all policies and procedures. When such changes are made, I will receive a copy again with an opportunity to read, ask questions, and understand such changes.

If at any time I have questions concerning the information received during the Ethics and Compliance training provided by West Tennessee Healthcare, I understand that I may consult any member of management, any member of the Ethics and Compliance Committee, or the WTH Vice President/Compliance Officer.

______________________________   _________________________
Name (Please Print)   Date   Signature

______________________________   _________________________
Department   Employee Number (if applicable)

RETURN SIGNED FORM TO:
Amy Garner, VP/Chief Compliance Officer
Jackson-Madison County General Hospital District
620 Skyline Drive
Jackson, TN 38301
Phone: 731-541-2970
Fax: 731-541-9404