

**POLICY TITLE: NON-RETALIATION****Former Policy Title:****POLICY PURPOSE:**

To outline the protections available to any Individual who in good faith, reports possible misconduct, violations of law or regulation, violations of Lancaster General Health (LG Health) policy or the Code of Conduct, concerns about safety or quality of care, and/or other compliance concerns.

**POLICY STATEMENT:**

Individuals are free to report information about actual or possible misconduct, inappropriate business practices, violations of federal, state or local law, violations of LG Health policy or the Code of Conduct, concerns about safety or quality of care, and/or other types of compliance concerns. In fact, the LG Health Code of Conduct requires employees who are aware of misconduct or possible misconduct to report it using one or more of the following available mechanisms:

- Contact their supervisor or manager
- Contact the Compliance Office at (717) 544-5866
- Contact the Compliance Hotline. Callers can remain anonymous. 1-215-P-Comply (215-726-6759)
- Utilize EthicsPoint at [www.upenn.edu/215pcomply](http://www.upenn.edu/215pcomply), a website that can be accessed from the LG Health intranet site. Users can remain anonymous.
- For patient safety and/or quality of care concerns, individuals may contact The Joint Commission (TJC) at **The Office of Quality and Patient Safety, The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181**, or email [https://www.jointcommission.org/report\\_a\\_complaint.aspx](https://www.jointcommission.org/report_a_complaint.aspx), or by fax to 630-792-5636.

Individuals reporting compliance concerns are protected by federal and state whistleblower laws. This non-retaliation policy protects employee whistleblowers from any adverse action if they report in good faith. Once an employee makes a disclosure, LG Health will:

- investigate complaints of retaliation or interference made by the reporting individual;
- take immediate steps to stop any actual retaliation; and
- take appropriate disciplinary action, as necessary, against any person associated with LG Health found to have retaliated against or interfered with an individual who reports their compliance concerns in good faith.

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## **APPLICABILITY/SCOPE/EXCLUSION:**

All LG Health employees, students, volunteers, Medical and Dental Staff members, contractors and agents of LG Health (Individuals).

## **DEFINITIONS:** N/A

## **PROCEDURE:**

### **Filing a Report:**

Anyone who wants to report a problem under this policy should contact the Compliance Office, or use the other available resources previously mentioned, as soon as reasonably possible after the alleged retaliation occurs. If the alleged retaliatory action involves the Compliance Officer, or the Compliance Officer has a conflict of interest that might impair or reasonably appear to impair his/her independent judgment, the complaint should be filed with the Legal Services Department.

### **Content of the Report:**

All complaints alleging retaliatory action must be documented and should include specific information supporting the whistleblower's complaint. The following information should be included if available:

- A copy of the original complaint regarding potential or actual misconduct or inappropriate business conduct filed by the whistleblower alleging the misconduct;
- An explanation of the alleged interference with the filing of the report or of the retaliation taken as a result of filing the report;
- Details related to the retaliation including the person involved in the retaliation dates, specific actions, etc.;
- Contact information including name, address, telephone and email address and contact information for the whistleblower's representative, if any; and

For those wishing to use EthicsPoint or the Compliance Hotline, a report will automatically be generated from the information provided by the caller/complainant.

### **Initial Report Review and Acknowledgement to Whistleblower**

The Compliance Officer (CO) or designee will investigate and respond to the whistleblower as soon as reasonably possible after the complaint is known. The initial review will only assess the nature and seriousness of the retaliatory action. The CO or designee will:

- Review the whistleblower's report of retaliation and determine whether or not an investigation is warranted.

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- If an investigation is not warranted, the CO or designee will inform the whistleblower in writing and provide a justification for the decision. The whistleblower may request a review of the decision by the Legal Services Department.
- If an investigation is warranted, the CO or designee will be responsible for initiating and conducting the investigation.
- If additional information is required for the CO or designee to make a determination related to the need for an investigation, the CO or designee will request the additional information from the whistleblower in writing specifying what information is needed and when. Failure to respond to the CO's or designee's request may result in a discontinuation of the investigation.

### **Interim Protections**

At any point prior to resolution of the whistleblower's complaint, the whistleblower may request, or the CO or designee may determine the need for, interim action to be taken to protect the whistleblower against an existing adverse action or a credible threat of an adverse action. The CO or designee will gather and review information pertinent to the perceived adverse action and will discuss recommended solutions with the appropriate department managers and Human Resources. When the investigation is concluded and the whistleblower's allegation is fully resolved, the interim measures will be discontinued and may be replaced with permanent remedies.

### **Resolving Allegations of Retaliation or Interference**

Credible allegations will be investigated according to the following process:

- Role of CO or designee – The CO or designee will initiate the investigative process and be responsible for conducting the investigation. The CO or designee will determine if additional resources are needed to conduct the investigation such as a need to develop a team of individuals who can assist with the investigation process. .
- Investigation Process – The investigation process will include interviews with the whistleblower, the alleged retaliator and any other individuals relevant to the investigation who can provide factual information regarding the allegation. LG employees are expected to cooperate fully with any investigations. Documents and any other materials relevant to the investigation will be collected and reviewed.
- Timeliness – All investigations of whistleblower retaliation must be conducted timely and not take longer than 180 days unless the whistleblower agrees to an extension.
- Confidentiality – Confidentiality will be maintained to the extent possible.

Final Report – The findings and conclusions of the investigation will be documented in a written report. The report will include a description of the investigative process, findings of fact, a list of individuals interviewed, an analysis of the evidence and recommendations regarding remedies and disciplinary action. The final report will be issued to Human Resources and applicable management for the

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implementation of appropriate remedies and disciplinary actions. The report will be maintained by the Compliance Office.

**ROLES/RESPONSIBILITIES:** As stated above.

**APPENDICES:** N/A

**FORMS:** N/A

**REFERENCES:**

**LG Health Code of Conduct**