DEPARTMENT OF ADMINISTRATION

CODE OF CONDUCT

INTRODUCTION

King County Public District Hospital #1, dba Valley Medical Center promotes the health and service needs of our hospital district residents. Fundamental to the provision of high quality healthcare, is the commitment to an environment which adheres to all applicable laws, ethical business practices, and behavioral expectations for all members of the care and service teams. This Code of Conduct summarizes the foundational elements which underlie this commitment to those we serve and all members of our organization.

PURPOSE OF OUR CODE OF CONDUCT

The purpose of Valley Medical Centers’ code of conduct and policy is to ensure its affairs are conducted in accordance with the Law and with sound, ethical business practices. As a public hospital, Valley Medical Center views this commitment as part of its public mission.

It is essential that each Valley Medical Center representative, employee, medical staff member, and authorized agent, be individually educated and are in compliance with these practices. Each Valley Medical Center employee and medical staff member is responsible for reviewing, knowing, acknowledging, and personally upholding this Code of Conduct.

As a Public District Hospital, we are governed by publicly elected commissioners. Valley Medical Center is committed to serving the health care needs of the citizens of this district, and to complying with all applicable laws and regulations governing public hospitals in the state of Washington. Consistent with its mission, Valley Medical Center works in collaboration with others to provide comprehensive, quality care in an ethical, cost-effective manner, consistent with existing law and hospital code standards.

SAFETY

Valley Medical Center is committed to the safety of its patients, its employees, and its visitors, and will comply with all laws and regulations in those areas, including but not limited to industrial safety laws and environmental safety laws. In addition, Valley Medical Center is committed to a Culture of Safety that includes a confidential reporting environment; collaboration across ranks; a communication system that encourages input regarding safe care from all sources, and provides that patients receive information from their physicians and care givers about both expected and unexpected outcomes of care; and willingness to direct resources to address safety. It is important that all employees immediately advise his or her supervisor or the Safety Officer of any serious workplace injury or any situation presenting a danger of injury so timely corrective action may be taken to resolve the issue.

PATIENT RIGHTS

Valley Medical Center is committed to ensuring and protecting its patients’ rights, and to complying with all applicable patient rights laws and regulations. These rights include, but are not limited to: access to care, respect and dignity, privacy and confidentiality, personal safety, adequate information (regarding care as well as charges), communication, informed consent (including refusal of treatment), pain management, and complaint resolution.
CONFIDENTIALITY
Valley Medical Center prohibits the unauthorized access to or disclosure of confidential information, particularly information contained in a patient’s medical record that is related to a patient’s care, but also including all personal information regarding patients and their families. Valley Medical Center is committed to complying with all applicable state and federal laws and regulations governing confidentiality of patient information.

Any violation of this Standard, as with any standard in this Code of Conduct, will subject an individual to appropriate disciplinary action, corrective action, or contractual action by Valley Medical Center, within the scope of any applicable collective bargaining agreement. This specific reference to consequences of violating this standard is not intended to imply that the other standards in this Code are of lesser importance; however, patient confidentiality is particularly critical to Valley Medical Centers’ mission.

LEGAL AND REGULATORY COMPLIANCE
Valley Medical Center provides varied healthcare services pursuant to appropriate Federal, state and local laws and regulations and the conditions of participation for Federal healthcare programs. Valley Medical Center, and each member of the Valley Medical Center community, including the Board of Commissioners, employees, medical staff, agents, representatives, contractors and vendors, is obligated to follow all applicable laws and regulations, and to maintain a health care and business environment that is committed to integrity and ethical conduct.

Anyone who becomes aware of an actual or potential violation of the law or of the compliance policies set forth in this Code of Conduct or of UW Medicine Compliance Policies has a duty to report it, and may do so without fear of reprisal.

To report a potential problem or for questions regarding compliance issues, including further information regarding specific laws and regulations, anyone may contact UW Medicine Compliance at:

Anonymous Hotline: 206.616.5248 (local) or 1.866.964.7744 (toll free)
Direct line: 206.543.3098
Fax: 206.221.5172
Email: comply@uw.edu

ACCREDITATION AND SURVEYS
In preparation for, during and after surveys, Valley Medical Center employees deal with all accrediting bodies in a direct, open and honest manner. No action should ever be taken in relationships with accrediting bodies that would mislead the accredditor or its survey teams, either directly or indirectly.

BILLING AND CLAIMS
Valley Medical Center is committed to charging, billing and submitting claims for reimbursement only when hospital and professional services have been provided and documented in the manner required by applicable laws and regulations, including, but not limited to, the federal False Claims Act, as well as all Medicare and Medicaid billing requirements. This requires all appropriate documentation to be included in the record by the treating provider, regardless of other care documentation that may appear in the record.

SCIENTIFIC INTEGRITY
Valley Medical Center is committed to following all laws and regulations related to scientific research in which it may participate. Valley Medical Centers’ employed and medical staff physicians, and other researchers, must familiarize themselves with all federal and state laws governing research activities, and must follow the appropriate approval processes before participating in any research activities at Valley
Medical Center. Questions regarding research activities should be directed to Valley Medical Centers’ Institutional Review Board.

**DOCUMENTATION OF HEALTH CARE SERVICES**
The delivery of all health care services will be documented in a complete, legible, and timely manner, as required by applicable laws, regulations, Valley Medical Center policies, and accrediting criteria.

**CONFLICTS OF INTEREST**
Valley Medical Center employees in positions that may influence contract negotiations and medical staff members will be required to disclose annually (employees) or biannually (medical staff—at time of reappointment) any actual, potential or perceived conflicts of interest.

- **Kickbacks.** All purchasing decisions must be made without any conflicts of interest that could be considered a kickback or otherwise affect the decision outcome. Concerns of this nature should be brought to the attention of UW Medicine Compliance before any such purchasing decision is made, so that appropriate committee or other action may take place.

  In addition, Valley Medical Center will comply with applicable anti-kickback rules and regulations regarding patient referrals, physician recruitment, joint ventures, and the like. Valley Medical Centers’ General Counsel and/or UW Medicine Compliance should be consulted before entering into any transaction to which these rules may apply, to avoid any inadvertent illegality.

- **Other Patient Referral Issues.** If a referring physician, or his or her immediate family member, has an ownership or financial interest in the entity to which a patient is referred, including Valley Medical Center, and payment for the referred services will be made from a federal or state health care program such as Medicare or Medicaid, a federal law, commonly referred to as the “Stark law”, may prohibit the referral. Valley Medical Center will not be involved in patient referrals that are in violation of the law. Valley Medical Centers’ General Counsel and/or UW Medicine Compliance should be consulted before entering into any transaction to which the Stark law and similar rules may apply, to avoid any inadvertent illegality.

- **Other Conflict of Interest Issues.** Valley Medical Center employees and medical staff members also should avoid potential or perceived conflicts of interest. If there is any question about a perceived conflict, the employee or staff member should seek guidance from UW Medicine Compliance.

  All contracts, commitments, obligations or payments of physicians by outside vendors or companies must be disclosed to legal counsel on an annual basis. Valley Medical Center maintains an environment of transparencies and requires that these financial relationships be disclosed to patients as appropriate.

- **Antitrust.** Valley Medical Center will not engage in market competition business practices such as setting charges in collusion with competitors, or other practices that may violate state and federal antitrust (monopoly) laws and regulations.

**INDEPENDENT CONTRACTORS AND VENDORS**
All contractors and vendors who provide services to Valley Medical Center must comply with all applicable laws and Valley Medical Center policies. Any such contractors or vendors providing physician or other healthcare services will be required to acknowledge receipt of and signed compliance with this Code of Conduct as part of the contracting process.
GRANTS
Valley Medical Center will follow all applicable state and federal regulations relating to accurate reporting and appropriate expenditure of grant funds. Questions concerning grants should be directed to Valley Medical Centers’ Vice President of Finance or UW Medicine Compliance to ensure that all regulations are observed.

TAX-EXEMPT ORGANIZATION
Valley Medical Center is a nonprofit, tax-exempt organization. Valley Medical Center conducts its activities in furtherance of its charitable mission in the areas of patient care and education.

DISCRIMINATION
Valley Medical Centers’ commitment to patients is reflected in our willingness to help anyone in need without regard to race, creed, ethnicity, age, or sex. Valley Medical Center will comply with all applicable laws and regulations regarding the evaluation, admission and treatment of patients with emergency medical conditions and pregnant women who are in labor, regardless of a patient’s financial or insurance status. VMC does not discriminate on the basis of race, color, religion, sex, national or ethnic origin, age, disability, sexual orientation, or military service in its programs, activities, or employment.

DISRUPTIVE BEHAVIOR
“Intimidating and disruptive behaviors can foster medical errors, contribute to poor patient satisfaction and to preventable adverse outcomes and increase the cost of care. Safety and quality of patient care is dependent on team work, communication and a collaborative work environment. To assure quality and to promote a culture of safety, Valley Medical Center will address behaviors that threaten the performance of the health care team.” The Joint Commission, Sentinel Event Alert, Issue 40, 7-08.

By addressing unprofessional and disruptive behavior a professional, healthy and collaborative work and patient care environment will be maintained.

A. Each Valley Medical Center employee has the right to work in an environment free of harassment and disruptive behavior. Sexual harassment is prohibited. Harassment also includes violence, or threats of violence, in the workplace.

B. To aid in both the education of Valley Medical Center Staff members and Supervised Staff and the enforcement of this Policy, examples of “inappropriate conduct” include, but are not limited to:

(a) threatening or abusive language directed at patients, nurses, Hospital personnel, Supervised Staff (Allied Health Professionals) or physicians (e.g., belittling, berating, and/or non-constructive criticism that intimidates, undermines confidence, or implies incompetence);

(b) degrading or demeaning comments regarding patients, families, nurses, physicians, Hospital personnel, or the Hospital;

(c) profanity or similarly offensive language while in the Hospital and/or while speaking with any Hospital personnel;

(d) inappropriate physical contact with another individual that is threatening or intimidating;

(e) derogatory comments about the quality of care being provided by the Hospital, another staff member, or any other individual outside of appropriate administrative channels;

(f) inappropriate medical record entries impugning the quality of care being provided by the Hospital, Hospital Staff members or any other individual;

(g) imposing onerous requirements on Hospital employees;

(h) deliberate failure to follow organizational policies;

(i) failure to address safety concerns or patient care needs that are personally recognized or are expressed by another provider of care;

(j) refusal to abide by Hospital Staff requirements as delineated in the Code of Conduct, Hospital Policy, and Rules and Regulations (including, but not limited to, medical record keeping, and other
(k) “sexual harassment,” which is defined as any verbal and/or physical conduct of a sexual nature that is unwelcome and offensive to those individuals who are subjected to it or who witness it. Examples include, but are not limited to, the following:

i. **Verbal:** innuendoes, epithets, derogatory slurs, off-color jokes, propositions, graphic commentaries, threats, and/or suggestive or insulting sounds;

ii. **Visual/Non-Verbal:** derogatory posters, cartoons, or drawings; suggestive objects or pictures; leering; and/or obscene gestures;

iii. **Physical:** unwanted physical contact, including touching, interference with an individual’s normal work movement, and/or assault; and

iv. **Other:** making or threatening retaliation as a result of an individual’s negative response to harassing conduct.

C. Staff shall report all disruptive behavior to their immediate manager, or the manager of the unit/area where the incident occurred. If their supervisor’s behavior is at issue, they shall notify Human Resources. Any staff member who observes such behavior by another person shall notify their manager or Human Resources as appropriate.

**EMPLOYMENT PRACTICES**

Valley Medical Center is committed to complying with all applicable laws and regulations regarding fair employment practices. Contact the Human Resources department with any questions, or for copies of these regulations.

**CONTROLLED SUBSTANCES**

Valley Medical Center prohibits the unlawful possession, use, manufacture or distribution of illicit drugs and alcohol on its property or as part of any Valley Medical Center sponsored activity. All health care professionals, including those who maintain Drug Enforcement Agency (DEA) registration must comply with all federal and state laws regulating controlled substances.

**INVESTIGATIONS**

Valley Medical Center will cooperate with government investigators as required by law. If an employee encounters an investigator, or receives a subpoena, search warrant or other similar document, related to an investigation of Valley Medical Center’s business or clinical practices, the employee will immediately contact General Counsel and/or UW Medicine Compliance, and/or the Administrator On-Call, before taking any action or discussing any matters with such an investigator.

**DISCIPLINE**

All Valley Medical Center employees, as well as those who hold medical staff privileges or otherwise deliver care to Valley Medical Center’s patients, must carry out their duties in conformance with this Code of Conduct and related Valley Medical Center policies. Any violation of applicable law, or deviation from appropriate standards, including this Code of Conduct, will subject an individual to appropriate disciplinary action, corrective action, or contractual action by Valley Medical Center, within the scope of any applicable collective bargaining agreement. These actions also may apply to a person in a supervisory capacity who directs, approves, or is aware of but fails to correct, the improper actions.

**REPORTING**

Valley Medical Center expects that any one of its employees, medical staff members, or independent contractors and vendors who becomes aware of any apparent violation of this Code of Conduct or Valley Medical Centers’ compliance policies will report it to a supervisor or to UW Medicine Compliance. Valley Medical Center will treat any such reports as confidential and will share them only on a bona fide need-to-
know basis. Valley Medical Center will take no adverse action against anyone making such a report in good faith, whether or not the report ultimately proves to be well founded.

Any knowing failure to report conduct violating this Code or Valley Medical Centers’ compliance policies will subject an individual to appropriate disciplinary action, corrective action, or contractual action by Valley Medical Center, within the scope of any applicable collective bargaining agreement.