

# Code of Ethical Behavior

## Guidelines and Explanations

### **PURPOSE**

The purpose of this Code is to communicate clearly, in writing, the expectation for basic standards of ethical behavior to all staff.

### **POLICY**

It is the policy of the UIHC to conduct activities in accordance with the highest ethical standards and the law.

It is the obligation of each and every individual in the UIHC to make a good faith effort to understand these standards. Additionally, policies, rules, and laws that affect his or her area of responsibility should be understood and clarification sought when these standards are not clear.

Behavior in violation of these standards may result in disciplinary action in accord with existing disciplinary procedures. Such violations may be reported to a supervisor, other departmental management staff, the Compliance Office or the Compliance Helpline.

### **CORE VALUES**

The Code of Ethical Behavior is based upon the following core values:

We are dedicated to providing high quality health care services that meet the needs and respect the rights of those we serve.

We conduct our business activities and patient care operations in compliance with applicable federal, state, and local laws and regulations.

We encourage open and candid communications and respond to issues and concerns in a timely manner.

We seek to treat all applicants and employees fairly and equitably, and in accordance with all relevant governmental rules and regulations.

We take all reasonable precautions to avoid conflicts, or the appearance of conflicts, between our private interests and the performance of our official duties and responsibilities.

We protect all assets that are entrusted in our care.

We are committed to maintaining a safe and healthy working environment in compliance with relevant laws and regulations.

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### **STANDARDS**

1. Treat all patients with dignity and respect.
2. Keep patient information confidential.
3. Provide services that are appropriate, safe and in compliance with applicable laws, regulations and professional standards.
4. Report activity, behavior, or requests by other staff to perform activities, which may be unethical or illegal. Retaliation for good faith reporting of illegal or unethical activity is not tolerated.
5. Be open, accurate and honest in all communications with patients, their families, and legal representatives; co-workers; physicians and other health care providers.
6. Respect the rights and dignity of all staff and keep information contained in personnel files confidential.
7. Make decisions in the best interest of University of Iowa Hospitals and Clinics. Avoid any business or financial opportunity that might conflict, or appear to conflict, with the interests of University of Iowa Hospitals and Clinics.
8. Do not accept gifts of over \$3.00 in value from anyone who does business or is seeking to do business with University of Iowa Hospitals and Clinics.
9. Be responsible and accountable for the proper use of all University of Iowa Hospitals and Clinics property and equipment. Take reasonable steps to safeguard the personal property of patients, visitors and staff.
10. Maintain a safe working environment. Take precautions to ensure the safety of patients, visitors and co-workers. Report any conditions or circumstances that may create a safety hazard.

### **Acknowledgement**

By electronically documenting my attendance at compliance training, I certify that the above information has been presented to me, that I have received and read the Code of Ethical Behavior, and that I have had an opportunity to ask questions about it. I also understand that it represents mandatory policy of the organization.

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### 1. Treat all patients with dignity and respect.

Staff will provide each patient with care that is appropriate and necessary for the patient's medical condition. Treatment will be provided without regard to gender, age, disability, race, color, creed, religion, national origin, veteran status or sexual preference.

### 2. Keep patient information confidential.

Staff will protect each patient's individual privacy and give assurance that all communications and records regarding their care will be kept confidential. The performance of one's job may require retrieval of information from patient medical records or computer-stored patient information. Hospital policy prohibits disclosure or retrieval of medical records or electronically stored information that is not required in the performance of one's duties and responsibilities.

### 3. Provide services that are appropriate, safe and in compliance with applicable laws, regulations and professional standards.

The UIHC strives to assure that all activity by or on its behalf is in compliance with applicable laws, and the highest standards of honesty, integrity, and fairness. When the interpretation of the law or an ethical principle is difficult, staff should consult with a supervisor, the Compliance Office or hospital legal counsel.

### 4. Report activity, behavior, or requests by other staff to perform activities, which may be unethical or illegal. Do not fear retaliation for good faith reporting of illegal or unethical activity. Such retaliation is not tolerated.

Every staff member has an obligation to report immediately any actions they, in good faith, believe are illegal or in violation of these standards. In this way an opportunity to resolve problems is not overlooked. Discipline may be taken against an employee who has deliberately failed to report a violation or deliberately withheld information concerning a violation.

No individual at University of Iowa Hospitals and Clinics is authorized to ask or instruct another staff member to break the law or to violate the principles set forth in this Code. Each staff member is responsible for his or her actions and their consequences. No one will be excused from illegal or unethical behavior because another person instructed or asked him or her to participate.

Reports of such activity, behavior or requests may be directed to a supervisor, other departmental management staff, or directly to the Compliance Office, Compliance Helpline, or hospital legal counsel.

No one should be treated badly because they reported, in good faith, activity believed to be unethical, illegal or in violation of institutional standards. Any such retaliation is prohibited, and any staff engaging in retaliation will be disciplined. Any staff who believe

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they have been a victim of retaliation should contact their supervisor, other departmental management staff, Staff Relations and Development, the Compliance Office, Compliance Helpline or legal counsel.

**5. Be open, accurate and honest in all communications with patients, their families, and legal representatives; co-workers; physicians and other health care providers.**

Staff of the UIHC are truthful in all communications and do not take advantage of those with whom the University of Iowa Hospitals and Clinics does business. This includes following the rules imposed by the government and other third party payors.

**6. Respect the rights and dignity of all staff and keep information contained in personnel files confidential.**

Staff will keep as confidential information that he or she may hear or have access to about co-workers. Information normally only contained in a personnel file, such as a performance evaluation is personal data that is considered confidential. This type of information is only to be released or shared with those who have a business reason for the information or to whom the staff member has authorized release.

**7. Make decisions in the best interest of University of Iowa Hospitals and Clinics. Avoid any business or financial opportunity that might conflict, or appear to conflict with the interests of University of Iowa Hospitals and Clinics.**

Personal interest (e.g. financial investments, family business) that could impact, or could appear to impact, the decisions made by staff members of the UIHC are called conflicts of interest. Both the reality of a conflict of interest and the appearance of a conflict of interest should be avoided.

Any actual conflicts of interest or potential conflicts of interest, which may exist, must be disclosed. In regard to a conflict of interest, appearance is as important as reality as far as the public is concerned. Therefore, full disclosure of even a potential conflict of interest needs to be made.

**8. Do not accept gifts over \$3.00 in value from anyone who does business or is seeking to do business with University of Iowa Hospitals and Clinics.**

Staff perform work duties to the best of their abilities and do not accept gifts, bribes or other items of value. The University of Iowa Policy: "Prohibition on Giving and Receiving Gifts" is specifically made a part hereof.

All bribes, kickbacks, and other payments that are prohibited under federal or state laws or regulations are prohibited under University of Iowa and UIHC policy. Violations of these policies should be immediately reported to a supervisor, other departmental management staff, the Compliance Office, Compliance Helpline or hospital legal counsel.

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**9. Be responsible and accountable for the proper use of all University of Iowa Hospitals and Clinics property and equipment. Take reasonable steps to safeguard the personal property of patients, visitors and staff.**

Staff protect the resources (e.g. money, other property, staff time, reputation) of University of Iowa Hospitals and Clinics. This means that UIHC resources are not used for personal gain. Resources are used only to further the patient care, teaching and research missions of University of Iowa Hospitals and Clinics. Common sense and fiscal wisdom are exercised in the use of such resources.

The reputation of University of Iowa Hospitals and Clinics is protected from injury due to the mishandling of resources by:

- a) Reporting the financial condition of the UIHC truthfully and honestly.
- b) Ensuring that all books of account, financial statements, records and other documentation in the UIHC are handled honestly and recorded accurately.
- c) Extending this commitment to all documentation necessary to support services billed to patients and/or government or other third party payors.
- d) Establishing and abiding by policies and safeguards necessary to achieve accurate financial reporting for the UIHC.
- e) Not using employment at the UIHC for personal gain.

**10. Maintain a safe working environment. Take precautions to ensure the safety of patients, visitors and co-workers. Report any conditions or circumstances that may create a safety hazard.**

Staff anticipate and immediately report any conditions or circumstances which may create a safety hazard. All hazardous materials and medical waste must be handled and disposed of in accordance with all applicable laws and regulations. Reasonable precautions should be taken to ensure staff safety as well as the safety of patients, visitors, and co-workers. "Standard precautions" should be employed at all times. Accidents involving injury to a patient, employee or visitor should be reported to a supervisor immediately and an incident report promptly completed.

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### Additional Resources

UIHC Policy and Procedure Manual, Legal, Licensure and Accreditation. Policy #II.0: Confidentiality of Patient Information

UIHC University Hospital Advisory Committee Policy # 102: UIHC Guiding Principles of Patient Care: Staff Rights: Freedom from Discrimination and Abuse; Freedom to Adhere to Religious or Ethical Beliefs

University of Iowa Operations Manual, II. Community Policies, Chapter 11: Anti-retaliation

-----II. Community Policies, Chapter 17: Prohibition on Giving and Receiving Gifts

-----II. Community Policies, Division I, Chapter 18: Conflict of Interest

-----III. Human Resources, Division I, Chapter 7: Access to Personnel Files

-----III. Human Resources, Division I, Chapter 8: Conflicts of Interest in Employment (Nepotism)

-----II. Community Policies, Division I, Chapter 27.7: Policy on Conflicts of Interest in Sponsored Research

-----II. Community Policies, Chapter 27.8: Anti-retaliation Policy for Reporting of Misconduct in Research.