

# POLICY AND PROCEDURE

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## House of New Hope

**TITLE:** Corporate Compliance and Integrity Plan

**EFFECTIVE DATE:** 9/1/2008

**AUTHORIZED BY:** Board of Trustees

**REVISION DATE:** 4/21/2010  
9/16/2010

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### **PURPOSE:**

This Corporate Compliance and Integrity Plan have been adopted by the Board of Trustees of House of New Hope (the "Agency"). The purpose of this Plan is to provide standards by which employees of the Agency must conduct themselves in order to protect and promote agency-wide integrity and to enhance the Agency's ability to achieve the Agency's mission.

The Agency is committed to the establishment, implementation, and maintenance of a corporate compliance program that emphasizes (1) prevention of wrongdoing-whether intentional or unintentional, (2) a medium for reporting an investigation of questionable activities and practices without consequences to the reporting party, and (3) timely correction of any situation which puts the organization, it's a leadership or staff, funding sources or consumers at risk.

### **INTRODUCTION:**

The agency's Organizational Ethics contains *Principles* articulating the policy of the Agency and *Standards* which are intended to provide additional guidance to persons functioning in managerial or administrative capacities. The Principles set forth in the Organizational Ethics policy will be to all employees on the agency website. The Principles and Standards will be distributed annually to Directors, officers, selected employees, and volunteers having administrative or managerial responsibilities. All employees are responsible to ensure that their behavior and activity is consistent with the agency's Organizational Ethics.

### **NON-RETALIATION POLICY AND "GOOD FAITH" REPORTING**

No retaliatory action will be taken against an employee for reporting in "good faith" any compliance concerns. "Good faith" requires that the employee report information, as they understand it to be true, without fabrication. Employees who record their own behavior as non-compliant are not exempt from disciplinary actions if called for by regulation, law or policy. However, self-reporting of violations is seen as positive and may result in a lessening of consequences for the employee.

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The Agency is committed to protecting employees from retaliation regarding the reporting of suspected violations of the Corporate Compliance and Integrity Plan and law. If an employee feels that they have suffered retaliation, they should report this to the Corporate Compliance Officer and/or the Executive Director.

### **RESPONSE TO FRAUDULENT REPORTING**

The Agency is dedicated to protecting employees from fraudulent or intentionally inaccurate reporting. Deliberately making false or misleading reports or accusations against other employees is a serious offense and may lead to disciplinary action up to and including termination of employment.

### **INVESTIGATIONS AND RESPONSE**

The Corporate Compliance Officer investigates all reports of suspected or actual compliance violations. All information is kept confidential and shared only on a need-to-know basis. Results of investigations are documented in a report shared with the Executive Management team. Recommendations are included in this report and are based on best practices, agency policy, related standards or law, and suggestions by the Executive Director.

Every reasonable measure will be taken to maintain the confidentiality of the reporter and those involved in the investigation. However, the Agency cannot control whether or not the reporter or those involved in the investigation break their own confidentiality. Therefore, as part of the investigation, employees are asked to not discuss issues under investigation and to not participate in speculation regarding the investigation.

### **DISCIPLINARY ENFORCEMENT OF ORGANIZATIONAL ETHICS**

When an employee violates standards or regulations, measures are taken to correct the situation and discourage further occurrences. All employees will be treated in a fair manner and will receive progress of disciplinary action when appropriate. The degree of discipline depends on the severity of the offense and circumstances under which it occurred.

All violations of Agency policies and procedures will be investigated thoroughly before any discipline is imposed. If an employee has any questions about disciplinary action, the Executive Director should be contacted for clarification. If not satisfied, the employee may appeal such action through the agency's grievance procedures.

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### **REQUIRED COMPLIANCE-RELATED TRAINING**

In conjunction with the reading of this Manual, all employees are required to attend:

1. A brief overview of compliance as part of the agency orientation
2. Compliance training scheduled within the first six months of hire
3. Topic training related to the employee's specific position, i.e., Medicaid, HIPAA, documentation, medical necessity, billing/coding, etc.

After employees complete compliance training, they will be asked to sign a statement signifying training attendance and their agreement to abide by the corporate compliance program, HONH's Organizational Ethics Policy and related compliance laws and regulations to which the agency is subject.



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false representations to any person or entity in order to gain or retain participation in a program or to obtain payment for any service.

### Standard 1.3 – Lobbying/Political Activity

The agency expects each of its employees to refrain from engaging in activities which may jeopardize the tax exempt status of the agency, including a variety of lobbying and political activities.

- (a) No individual may make any agreement to contribute any money, property, or services of any officer or employee at the agency's expense to any political candidate, party, Agency, or committee for individual in violation of any applicable law. Officers and employees may personally participate in and contribute to political agencies or campaigns, but they must do so as individuals, not as representatives of the Agency, and they must use their own funds.
- (b) Where its experience may be helpful, the agency may publicly offer recommendations concerning legislation or regulations being considered. In addition, it may analyze and take public positions on issues that have a relationship to the operations of the agency when the agency's experience contributes to the understanding of such issues.
- (c) The agency has many contacts and dealings with governmental bodies and officials. All such contacts and transactions shall be conducted in an honest and ethical manner. Any attempt to influence the decision-making process of governmental bodies or officials by an improper offer of any benefit is absolutely prohibited. Any request for demands by any governmental representative for any improper benefits should be immediately reported to the Agency's Compliance Officer.

### Standard 1.4 – Environmental

It is the policy of the Agency to manage and operate its business in a manner which respects our environment and conserves natural resources. The agency's employees will strive to utilize resources appropriately and efficiently, to recycle where possible and otherwise dispose of all waste in accordance with applicable laws and regulations, and to work cooperatively with the appropriate authorities to remedy any environmental contamination for which the agency may be responsible.

### Standard 1.5 – Discrimination

The agency believes that the fair and equitable treatment of employees, people we serve, and other persons is critical to fulfilling its vision and goals.

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It is the policy of the agency to treat the people we serve without regard to the race, color, religion, sex, ethnic origin, age or abilities of such person, or any other classification prohibited by law.

It is the policy of the agency to recruit, hire, train, promote, assigning, transfer, layoff, recall and terminated employees based on their own ability, achievement, experience and conduct without regard to race, color, religion, sex, ethnic origin, age or abilities, or any other classification prohibited by law.

No form of harassment or discrimination on the basis of sex, race, color, abilities, age, religion or ethnic origin or abilities or any other classification prohibited by law will be permitted. Each allegation of harassment or discrimination will be properly investigated in accordance with applicable agency personnel policies.

### **Principle 2 – Business Ethics**

**In furtherance of the agency’s commitment to the high standards of business ethics and integrity, employees will accurately and honestly represent the agency and will not engage in any activity or steamed intended to defraud anyone of money, property were honest services.**

The standards set forth below are designed to provide guidance to ensure that its business activities reflect the high standards of business ethics and integrity. Employee conduct not specifically addressed by these standards must be consistent with Principle 2.

#### Standard 2.1 – Honest Communication

The agency requires candor and honesty from individuals in the performance of their responsibilities and in communication with its attorneys, regulators and auditors. No employee shall make false or misleading statements to any individual whom we serve or other person or entity doing business with the agency about any individuals, persons or entities doing business or competing with the agency, or about the products or services of the agency or its competitors.

#### Standard 2.2 – Misappropriation of Proprietary Information

The agency’s employees shall not misappropriate confidential or proprietary information belonging to another person or entity nor utilize any publication, documents, computer program, information or product in violation of the third party’s interest in such product. All of the agency’s employees are responsible to ensure they do not improperly copy for their own use documents or computer programs in violation of applicable copyright laws or licensing agreements. All employees must comply with the agency’s confidentiality policy. Employee

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shall not utilize confidential business information obtained from competitors, including foster parent lists, contracts or other information in violation of a covenant not to compete, prior employment agreements, or any other manner likely to provide an unfair competitive advantage to the agency.

### Standard 2.3 – Fraud and Abuse (Standard 1.2 above)

#### **Principle 3 – Confidentiality**

**The agency's employees shall strive to maintain confidential information in accordance with applicable legal and ethical standards.**

The agency and its employees are in a position to have access to a broad variety of confidential, sensitive and proprietary information, the inappropriate release of which could be injurious to the people we serve, the agency's business partners and the agency itself. Every employee of House of New Hope has an obligation to actively protect and safeguard confidential, sensitive and proprietary information in a manner designed to prevent the unauthorized disclosure of information.

### Standard 3.1 – Information Related to the People We Serve

All employees of the agency have an obligation to conduct themselves in accordance with the principle of maintaining the confidentiality of information from within about people we serve in accordance with all applicable laws and regulations. Employee shall refrain from revealing any such personal or confidential information unless in accordance with applicable law and the agency's policies. If questions arise regarding an obligation to maintain the confidentiality of information or the appropriateness of releasing information, employee should seek guidance from Agency management or the Agency's Compliance Officer.

The United States Department of Health and Human Services (HHS) has issued standards for the Privacy of Individually Identifiable Health Information (Privacy Rule) which became effective on April 14, 2003, establishing a set of national standards for the protection of health information. The Privacy Rule standards address the use and disclosure of Protected Health Information as well as standards for an individual's privacy rights to understand and control how their health information is used. The Office of Civil Rights, within HHS has the responsibility for implementing and enforcing the Health Insurance Portability and Accountability Act (HIPAA) Privacy regulations.

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All employees receive training related to confidentiality and HIPAA Privacy regulations prior to being responsible for Protected Health Information and have an obligation to follow all applicable confidentiality and HIPAA policies and procedures. These policies and procedures are related to confidentiality, individual access and amendment of Protected Health Information and communication preferences.

If questions arise regarding an obligation to maintain the confidentiality of information or the appropriateness of releasing information, employee should seek guidance from the agency management or the agency's corporate compliance officer. Employees should contact the Agency management or the corporate compliance officer if they have questions about a specific HIPAA related policy or procedure.

### Standard 3.2 – Proprietary Information

Information, ideas and intellectual property assets of the agency are important to organizational success. Information pertaining to the agency's competitive position or business strategies, payments in reimbursement information, and information relating to negotiations with employees or third parties should be protected and shared only with employees having a need to know such information in order to perform their job responsibilities. Employees should exercise care to ensure that intellectual property rights, including patents, trademarks, copyrights and software is carefully maintained and managed to preserve and protect its value.

### Standard 3.3 – Personnel Actions/Decisions

The salary, benefits and other personnel information relating to employees shall be treated as confidential. Personnel files, payroll information, disciplinary matters and similar information shall be maintained in a manner designed to ensure confidentiality in accordance with applicable laws. Employees will exercise due care to prevent the release or sharing of information be on those persons who may meet such information to fulfill their job function.

### **Principle 4 – Conflicts of Interest**

**Trustees, officers and key employees owe a duty of undivided and unqualified loyalty to the agency. Persons holding such positions may not use their positions to profit personally or to assist others and profiting in any way at the expense of the Agency. (Please refer to the agency's Conflict of Interest Policy for further guidance.)**

All covered persons are expected to regulate their activities so as to avoid actual impropriety and/or the appearance of impropriety which might arise from the influence of those activities

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on business decisions of the agency, or from disclosure or private use of business affairs or plans of the agency.

### Standard 4.1 – Outside Financial Interests

While not all inclusive, the following will serve as a guide to the types of activities by a covered person, or household member of such person, which might cause conflicts of interest:

- (a) Ownership in or employment by any outside concern which does business with the agency. This does not apply to stock or other investments held in a publicly held corporation, provided the value of the stock or other investments does not exceed 5% of the corporation's stock. The agency may, following a review of the relevant facts, permit ownership interests which exceed these amounts if management concludes such ownership interests will not adversely impact the agency's business interest or the judgment of the covered person.
- (b) Conduct of any business not on behalf of the agency, with any vendor, supplier, contractor, or agency, or any of their officers or employees.
- (c) Representation of the agency by a covered person in a transaction in which he or she or a household member has a substantial personal interest.
- (d) Disclosure or use of confidential, special or inside information of or about the agency, particularly for personal profit or advantage of the covered person or household member.
- (e) Competition with the agency by a covered person directly or indirectly or in the purchase, sale or ownership of property or property rights or interests, or business or investment opportunities.

### Standard 4.2 – Services for Competitors/Vendors

No covered person shall perform or render services for any competitor of the Agency or for any agency with which the Agency does business or which seeks to do business with the agency outside of the normal course of his/her employment with the agency without the approval of the executive director. Nor shall any such employee be a trustee, officer, or consultant of such an Agency, nor permitted his/her name to be used in any fashion that would tend to indicate a business connection with such agency.

### Standard 4.3 – Participation on Boards of Directors/Trustees

- (a) The covered person must attain approval from the Executive Director prior to serving as a member of the Board of Directors/Trustees of any Agency whose interests may conflict with those of House of New Hope.
- (b) A covered person who is asked to serve on the Board of Directors/Trustees of any Agency whose interest would not impact the agency (for example, civic, most charitable, fraternal and so forth) will not be required to obtain such approval.

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- (c) All fees/compensation (other than reimbursement for expenses arising from Board participation) that I receive for Board services provided during normal work time shall be paid directly to the agency.
- (d) A covered person must disclose all Board of Directors/Trustees activities in the annual conflict of interest disclosure statement.
- (e) The agency retains the right to prohibit membership on any Board of Directors/Trustees where such membership might conflict with best interest of the agency.
- (f) Questions regarding whether or not Board participation might present a conflict of interest should be discussed with a member of the Executive Management Team.

#### Standard 4.4 – Honoraria

Employees are, with the permission of their supervisor, encouraged to participate as faculty and speakers at educational programs and functions. However, any honorary of in excess of \$100 shall be turned over to the agency unless the employee used paid time off to attend the program or that portion of the program for which the honoraria is paid.

#### Standard 4.5 – Dual Relationships

A multiple relationship occurs when an employee is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the employee has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person. An employee refrains from entering into a multiple relationship if the multiple relationships could reasonably be expected to impair the employee's objectivity, competence, or effectiveness in performing his or her functions as an employee, or otherwise risks exploitation or harm to the person with whom the professional relationship exists. Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical. If an employee finds that, due to unforeseen factors, a potentially harmful multiple relationships has arisen, the employee takes reasonable steps to resolve it with due regard for the best interests of the affected person and maximal compliance with their professional Ethics Code or Agency Code of Ethics.

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### Principle 5 – Business Relationships

**Business transactions with vendors, contractors and other third party shall be transacted free from authors or solicitation of gifts and favors or other improper inducements in exchange for influence or assistance in a transaction.**

The standards set forth below are intended to guide key employees in determining the appropriateness of the listed activities are behaviors within the context of the Agency’s business relationships, including relationships with vendors, providers, contractors, third party payers and governmental entities. It is the intent of the Agency that this policy be construed broadly to avoid even the appearance of improper activity. If there is any better concern about whether specific conduct are activities are ethical or otherwise appropriate, you should contact the agencies compliance officer.

#### Standard 5.1 – Gifts and Gratuities

In it is the agency’s desire to all times preserve and protect its reputation and to avoid the appearance of impropriety. Consequently:

- (a) Gifts from people whom we serve: Employees are prohibited from soliciting tips, personal gratuities or gifts from people we serve and their family members, and from accepting monetary tips or gratuities. Employees may accept gratuities and gifts of a nominal value from the people we serve in their family members. If a person we serve or another individual wishes to present a monetary gift, he/she should be referred to a member of the executive management team.
- (b) Gifts influencing decision-making: Employees shall not accept gifts, favors, services, entertainment for other things of value to the extent that decision-making or actions affecting the agency might be influenced. Similarly, the offer for giving of money, services or other things of value with the expectation of influencing the judgment or decision-making process of any purchaser, supplier, customer, government official or other person by the agency is absolutely prohibited. Any such conduct must be reported immediately either to the Executive Director or the agency’s compliance officer.
- (c) Guest from existing vendors: Employees may retain gifts from vendors, which have a nominal value. (House of New Hope has made no attempt to define “nominal” as a specific dollar value. Rather, the agency expects its employees to exercise good judgment and discretion in accepting gifts). If an employee has any concern whether GIF should be accepted, the employee should consult with his/her supervisor. To the extent possible, these gifts should be shared with the employees’ coworkers. Employees shall not accept excessive gifts, meals, expensive entertainment or other authors of goods or services which have more than a

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nominal value nor may solicit us from vendors, suppliers, contractors or other persons.

(d) Vendor sponsored entertainment: At a vendor's invitation, an individual may accept meals or refreshments at the vendor's expense. Occasional attendance at a local theater or sporting event, or similar entertainment as enter expense may also be accepted. In most circumstances, are regular business representative of the vendor should be in attendance with the employee.

Nothing in this policy and shall prohibit a supervisor from establishing stricter rules relating to the acceptance of gifts, gratuities or other things of value from vendors.

### Standard 5.2 – Workshops, Seminars and Training Sessions

Attendance at local, vendor-sponsored workshops, seminars and training sessions is permitted. Attendance, at vendor expense, act out-of-town seminars, workshops in training sessions is permitted only with the approval of an employee's supervisor.

### Standard 5.3 – Contracting

Employees may not utilize "insider" information for any business activity conducted by or on behalf of the agency. All business relations with contractors must be conducted on arm's length both in fact and an appearance and in compliance with the agency's policies and procedures. Employees must disclose personal relationships and business activities with contractor personnel, which may be construed by an impartial observer as influencing the employees' performance or duties. Employees have a responsibility to obtain clarification from an edge meant employees on questionable issues which may arise and to comply, where applicable, with the agency's conflict of interest policy.

### Standard 5.4 – Business Inducements

In the agency's employees shall not see the gain any advantage through the improper use of payments, business courtesies or other inducements. Offering, giving, soliciting or receiving any form of a ride or other improper payment is prohibited.

Appropriate commissions, rebates, discounts and allowances are customary in acceptable business inducements provided that they are approved by the agency's management and that they do not constitute illegal or unethical payments. Any such payments must be a reasonable in value, competitively justified, properly documented, and made to the business entity to whom the original agreement or invoice was made are issued. Such payment should not be made to individual employees or agents of business entities.

In addition, employees may provide gifts, entertainment and meals of nominal value to the agency's customers, current and prospective business partners and other persons when such

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activities have a legitimate business purpose and are reasonable and consistent with all applicable laws.

### **Principle 6 – Protection of Assets**

**All employees will strive to preserve and protect the agency's assets by making prudent an effective use of the agency's resources and properly and accurately reporting its financial condition.**

The standards set forth below are intended to guide key employees by articulating the agency's expectations as they relate to activities or behaviors which may impact the agency's financial health which reflect a reasonable and appropriate use of the assets of a nonprofit entity.

#### Standard 6.1 – Internal Control

The agency has established control standards and procedures to ensure that assets are protected improperly used and that financial records and reports are accurate and reliable. All employees of the agency share the responsibility for maintaining and complying with required internal controls.

#### Standard 6.2 – Financial Reporting

All financial reports, accounting records, research reports, expense accounts, Conn sheets and other documents must accurately and clearly represent the relevant facts or the true nature of the transaction. Improper or fraudulent accounting, documentation or financial reporting is contrary to the policy of the agency and may be in violation of applicable laws.

#### Standard 6.3 – Travel and Entertainment

Travel and entertainment expenses should be consistent with the employee's job responsibility and the agencies needs and resources. It is the agency's policies that an employee should not suffer a financial losses or if financial gain as a result of business travel and entertainment. Employees are expected to exercise reasonable judgment in the use of the agency's assets and to spend the agency's assets is carefully as they would spend their home. Employees must also comply with the agency's policies relating to travel and entertainment expense.

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### Standard 6.4 – Personal use and agency’s assets

All property in business of the agency shall be conducted in a manner designed to further the agency’s interest rather than the personal interest of an individual employee. Employees are prohibited from the unauthorized use or taking of the agency’s equipment, supplies, materials, assets, or services. Prior to engaging in any activity on company time which will result in remuneration to the employee or the use of the agency’s equipment, supplies, materials, assets, or services for personal or non-work related purposes, employee shall obtain the approval of a member of the Executive Management Team.

### **Principle 7 – Professional Responsibilities**

**Counselors, social workers, and marriage and family therapists are expected to adhere to the code of ethical practice and professional conduct as specified in Section 4757-5-01 of the Ohio Administrative Code.**

The rules of ethical practice and conduct shall apply to the conduct of all licensed counselor, social worker, and marriage and family therapists. A violation of these rules of ethical practice and professional conduct constitutes unprofessional conduct and may result in an allegation reported to the Ohio Counselor, Social Worker and Marriage and Family Therapist Board, 50 West Broad Street, Suite 1075, Columbus, Ohio 43215-5919 or (614) 466-0912.

House of New Hope subscribes to codes of ethics and practice standards for counselors, social workers, and marriage and family therapists promulgated by the “American Counseling Association” and the “National Association of Social Workers” and the “American Association for Marriage and Family Therapy” which shall be used As aids in resolving ambiguities which may arise in the interpretation of the rules of professional ethics and conduct.

### Standard 7.1 – Integrity

All staff members of House of New Hope will carry out their job and professional responsibilities with integrity, treating those with whom they work or have professional relationships in a dignified, respectful, honest and fair manner.

### Standard 7.2 – Propriety

All employees will maintain high standards of personal moral conduct when engaged in Agency business and professional activities. Personal standards and conduct are private matters except when such conduct may compromise work or professional responsibilities, or reduce public confidence in the Agency’s mission.

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### Standard 7.3 – Avoiding Harm

All employees will act in the best interest of those toward whom they have professional responsibilities, to include avoiding doing harm. It is expected that employees conduct themselves in a manner not to inflict either emotional or physical harm toward any person, to include clients (or prospective clients), family members or significant others. Employees should never partake in punching, shaking, striking, spitting, swearing, verbal or physical abuse, to include racial or personal slights, or insensitivity in one's interactions with a client or others.

### Standard 7.4 – Non-Discrimination

1. House of New Hope employees will not engage in and will act to prevent discriminatory behaviors based on age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, socioeconomic status, HIV/AIDS status, veteran's status, or any basis proscribed by law.
2. Where personal or cultural differences could significantly affect best practice intervention with a particular individual, family or group, employees will seek and obtain the supervision and training necessary to ensure that the intervention is unbiased, competent and culturally appropriate.

### Standard 7.5 – Sexual Harassment

1. House of New Hope employees will not engage in and will act to prevent sexual harassment.
2. House of New Hope employees will follow Agency personnel policy on sexual harassment.

### Standard 7.6 – Duality of Relationships

Employees will take into consideration the potential harm that intimate, social or other non-professional contacts and relationships with consumers, their family members, foster parents, colleagues and supervisees could have on those with whom may have a professional relationship. Employees should be aware that any relationships, outside of a professional one, could affect professional objectivity, judgment and performance.

1. Employees will avoid any conduct that would lead a reasonable person to conclude that the employee might be biased or motivated by personal interest in the performance of their duties.
2. Whenever feasible, employees should avoid professional relationships when a pre-existing non-professional relationship is present.

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3. Employees should discuss past, existing and potential dual relationship concerns with their supervisor and resolve them in a manner that avoids harming and/or exploiting affected persons.

#### Standard 7.7 – Personal Problems

1. Employees will not perform professional activities when they know or should know that personal problems, mental health concerns or substance abuse/dependents could impede professional judgment and performance.
2. When such problems could affect performance, employees should inform their supervisor who will assist in determining if the employee should limit, suspend or terminate their professional duties. Employees are strongly encouraged to obtain professional help to alleviate performance issues due to personal problems.

#### Standard 7.8 – Documentation of Professional Work

1. House of New Hope professionals should accurately and truthfully document their professional work according to an Agency policy, licensing and/or legal requirements in order to ensure accountability and continuity in provision of services to the consumer.
2. Professional employees recognize the expectation to maintain documentation in a complete and thorough manner.
3. Employees will meet the professional code of conduct as it pertains to licensure around documentation issues.
4. Employees acknowledge that the lack of maintaining completion of documentation constitutes a violation of professional practice and maybe a violation of client's rights (such as not having a current individualized service plan).
5. Employees acknowledge that a failure to maintain a professional standard of documentation may constitute a breach of professional ethics and result in a report to the state regulatory board and/or Agency-administered disciplinary action.

#### Standard 7.9 – Consumer Self-Determination

1. The mandated nature of the House of New Hope professional/consumer relationship, especially in the case of working with minors, limits the options available to consumers, but does not eliminate their right to self-determination. Consumer self-determination refers to the client's right to make self-determined choices and to freely act upon those choices without undue influence or coercion.
2. Employees are responsible for assuring that the client receives sufficient information on the benefits and consequences of a decision in order that the client can make the best self-determined choice.

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### Standard 7.10 – Informed Consent

1. The employees will inform consumers as soon as possible and in understandable language the nature of the professional/consumer relationship, the type of interventions provided, and the professional's delegated authority, and the limits of that authority, to include confidentiality constraints, and the range of decisions that consumer can make.
2. Employees are also responsible to assure that consumers are fully aware of their rights, the grievance procedure, and have knowledge of how to access the assigned Clients Rights Officer.
3. Professional employees will inform consumers of the role of the court, as applicable, and of their legal and procedural rights.
4. Professional employees will keep consumers informed about their service plan and assure consumer participation in the development of the service plan throughout the entire period of service.
5. Professional employees will obtain permission for intervention from a legally authorized person when a consumer is a legally incapable of giving informed consent.

### Standard 7.11 – Confidentiality

1. Employees will respect the confidentiality rights of consumers and those with whom they work or consult. Confidential information should be used only for professional purposes and shared only with authorized parties.
2. Employees have a duty to be familiar with all relevant confidentiality requirements and limitations in Federal and state laws, as well as Agency policy.
3. Employees will inform consumers of all relevant confidentiality requirements and limitations.
4. Employees will not take confidential agency materials pertaining to consumers from their offices and will assure that all information will be maintained in a confidential manner. This includes destroying all personal notes and/or any materials not maintained in the consumer's record.

### Standard 7.12 – Scope of Practice

1. Employees will not misrepresent their professional abilities or training. Professional staff will operate within their expected code of ethics and practice of their licensing bodies at all times. Staff lacking skills and/or expertise in a particular area will request professional training and supervision to assure that best practice standards are met.
2. Professional staff will assure that licensure as required by their assigned position within the agency is maintained.
3. Professional staff receiving any form of professional sanctions will inform their supervisor immediately upon learning that such an action has been taken.

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### Standard 7.13 – Conflicts of Interest

1. Employees will not accept monetary gifts or gifts of substantial value from consumers. While it is recognized that consumers may wish to demonstrate their gratitude or appreciation, employees must remember that the relationship as a professional one, prescribed by their employment with the Agency.
2. Employees will not refer consumers for services with persons outside the agency in a manner to benefit themselves. This includes accepting any form of compensations or personal benefit as a result of such acts. Employees will respect the relationship of consumers, Foster parents and other staff and will not attempt to exploit such relationships for their personal benefit. This will include solicitation or undue influence on others even after termination of employment with House of New Hope.
3. In the event that a consumer requires an outside referral for services, consideration will be given as to the geographic convenience for the client, affordability, appropriateness and client preferences. The client should be given more than one referral option in the event that a private practitioner, as compared to a non-profit agency, is being recommended.
4. Staff is prohibited from directing referrals of applicants and/or persons served to a private practice in which personnel, consultants, or the immediate families of personnel and consultants are engaged, nor will they attempt to transfer cases to themselves in the event that they are leaving the Agency to establish a private practice. In the event that permission is given, the employee will provide clients with a written statement clarifying the relationship between the private practitioner and the organization.
5. No employee will conduct private practice activities on agency premises without the written consent of the Executive Director. The employee will not serve current or former clients of the agency.
6. Employees of House of New Hope, to include consultants, will not have direct or indirect financial interest in the agency's assets, leases, business transactions and/or professional services.
7. This policy is in addition to and does not supplant or supersede House of New Hope's existing Conflict of Interest Policy and sent policy will remain in full force and effect.

### Standard 7.14 – Advocacy

1. Employees are encouraged to exercise their full rights of citizenship, including communicating with their elected representatives. Employees may identify themselves as staff members of House of New Hope, however, only the Executive Director or member of the executive management team is authorized to sign a letter on behalf of House of New Hope or to represent House of New Hope on a public policy issue.
2. Lobbying of legislators or administrative agencies is limited by the Agency's status as a 501(c) 3 tax-exempt organization. By approaching legislators or administrative agencies to discuss laws or regulation, please consult with the Executive Director.

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3. As direct service providers, employees are expected to advocate for the needs of clients. Providers are expected to use due diligence in obtaining needed resources and/or services for clients and to inform the custodian and/or custodial agency in writing should needs remain unmet. Staff, however, should not act outside of their assigned professional role and should keep supervisors fully informed when barriers to service occur. Employees are encouraged to advocate for creative solutions to the problems of youth and families.
4. Provision of services under the auspices of a license requires that best practice standards and ethics of the licensing body be maintained. Employees are to ensure that continuity of service needs is met for clients whenever possible. In cases where there are very are still linkage, documentation should occur of contact with the custodian and/or custodial agency with recommendations of needed services to assure continuity of care or waste and best address the needs of the client.

### Standard 7.15 – Conduct with the Media

Employees are expected to maintain the confidentiality of clients as required. Employees are not to discuss client and/or client circumstances with any member of the media. Requests for interviews for responses to questions directed from the media are to be directed to the Executive Director.

### Standard 7.16 – Personal Fundraising

Employees are expected to maintain appropriate professional boundaries with consumers and other stakeholders by not leveraging their relationship and engaging in personal fundraising activities including, but not limited to: solicitation of funds on behalf of a personal cause, having the persons served sell items on behalf of the organization, or allowing persons served to raise funds by appeals to personnel or other persons served.

### **Administration and Application of Organizational Ethics**

House of New Hope expects each person to whom this Code of Conduct applies to abide by the principles and standards set forth herein and to conduct the business and affairs of the agency in a manner consistent with the general statement of principles set forth herein.

Failure to abide by these Organizational Ethics or the guidelines for behavior which this Code of Conduct represents may lead to disciplinary action up to and including termination. For alleged violations of the Code of Conduct, House of New Hope will weigh relevant facts and circumstances, including, but not limited to, the extent to which the behavior was contrary to the expressed language or general intent of the Code of Conduct, the egregiousness of the behavior, the employee's history with the Agency and other factors which the Agency deems relevant. Discipline for failure to abide by the Code of Conduct may, in the Agency's discretion, range from oral correction to termination.

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Nothing in this Code of Conduct is intended to nor shall be construed as providing any additional employment or contract rights to employees or other persons.

While House of New Hope will generally attempt to communicate changes concurrent with or prior to the implementation of such changes, the Agency reserves the right to modify, amend or alter the Code of Conduct without notice to any person or employee.

**TITLE: Fraud and Abuse Compliance Policy**

**EFFECTIVE DATE:**

**AUTHORIZED BY:** Board of Trustees

**REVISION DATE:**

**It is the policy of House of New Hope (the “Agency”) to consistently and fully comply with all laws and regulations pertaining to the delivery of and billing for services which apply to the Agency on account of its participation in Medicaid and other government programs.**

### **INTRODUCTION**

The Agency has developed this fraud and abuse compliance program to be a comprehensive statement of the responsibilities and obligations of all employees regarding submissions for reimbursement to Medicaid, and other government payers for services rendered by the Agency. In addition, this policy is intended to apply to business arrangements with direct care personnel, vendors and other persons which may be impacted by federal or state laws relating to fraud and abuse.

### **EMPLOYEE PARTICIPATION AND REPORTING**

It is the responsibility of every employee in the Agency to abide by applicable laws and regulations and support the Agency’s compliance efforts.

All employees are required to report their good faith belief of any violation of the compliance program or applicable law. The Agency, at the request of the employee, will provide such anonymity to the employee(s) who report as is possible under the circumstances in the judgment of the Agency, consistent with its obligations to investigate employee concerns and take necessary corrective action. There shall be no retaliation in the terms and conditions of employment as a result of such reporting.

Employees will report their good faith belief of violations of the compliance program or applicable laws (1) either orally or in writing to their supervisor or (2) either orally or in writing

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to the Agency's Corporate Compliance Officer House of New Hope, Corporate Compliance Officer, 8135 Mt. Vernon Rd., St. Louisville, Ohio 43071, (740) 345-5437, ext. 46

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### **RESPONSIBLE OFFICER**

The Agency has designated the Compliance Officer as the individual within the Agency responsible for overall implementation and operation of the compliance program. The Compliance Officer shall be responsible for ensuring that:

- (a) Standards and manuals are reviewed and updated as necessary;
- (b) Employee and vendor screening mechanisms are in place and are operating properly;
- (c) Employees are receiving adequate education and training and that such education and training are documented;
- (d) Audit procedures are implemented in accordance with the Agency's audit policies;
- (e) Employee complaints and other concerns regarding compliance are promptly investigated;
- (f) Adequate steps are taken to correct any identified problems and prevent the recurrence of such problems.

### **REPORT TO THE BOARD**

The Compliance Officer will report in writing at least annually to the Agency's Board of Trustees on the status of compliance within the Agency, and at other times as appropriate. This report shall include any other information requested by the Board.



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### Investigative Process.

Upon receipt of an employee complaint or other information (including audit results) which suggests the existence of a pattern of conduct in violation of compliance policies or applicable laws or regulations, an investigation under the direction and control of legal counsel shall be commenced. Steps to be followed in undertaking the investigation shall include, at a minimum:

1. Notification to the Agency's Executive Director of the nature of the complaint.
2. The investigation shall be commenced as soon as reasonably possible but in no event more than 10 days following the receipt of the complaint or report. The investigation shall include, as applicable, but need not be limited to:
  - a. An interview of the complainant and other persons who may have knowledge of the alleged problem or process and a review of the applicable laws and regulations which might be relevant to or provide guidance with respect to the appropriateness or inappropriateness of the activity in question, to determine whether a problem actually exists.
    - i. If the review results in conclusions or findings that the complained of conduct is permitted under applicable laws, regulations or policy or that the complained of act did not occur as alleged or that it does not otherwise appear to be a problem, the investigation shall be closed and a written report filed with the Agency's Compliance Officer.
    - ii. If the initial investigation concludes that there is improper billing occurring, that practices are occurring which are contrary to applicable law, that inaccurate claims are being submitted, or that additional evidence is necessary, the investigation shall proceed to the next step.
  - b. The identification and review of representative bills or claims submitted to the Medicaid program to determine the nature of the problem, the scope of the problem, the frequency of the problem, the duration of the problem, and the potential financial magnitude of the problem.
  - c. Interviews of the person or persons in the departments who appear to play a role in the process in which the problem exists. The purpose of the interview will be to determine the facts related to the complained of activity, and may include, but shall not be limited to:
    - i. Individual understanding of the Medicaid laws, rules and regulations;
    - ii. The identification of persons with supervisory or managerial responsibility in the process;
    - iii. The adequacy of the training of the individuals performing the functions within the process;
    - iv. The extent to which any person knowingly or with reckless disregard or intentional indifference acted contrary to the Medicaid laws, rules or regulations;

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- v. The nature and extent of potential civil or criminal liability of individuals or the Agency;
- vi. Preparation of a summary report which (a) defines the nature of the problem, (b) summarizes the investigation process, (c) identifies any person whom the investigator believes to have either acted deliberately or with reckless disregard or intentional indifference toward the Medicaid laws, rules and policies, and (d) if possible, estimates the nature and extent of the resulting overpayment by the government, if any.

### ORGANIZATIONAL RESPONSE

1. Possible Criminal Activity. In the event the Agency uncovers what appears to be criminal activity on the part of any employee or program, it shall undertake the following steps:
  - a. In the event Medicaid is involved, the Ohio Department of Job and Family Services and/or the Ohio Attorney General shall be notified, as counsel for the Agency deems appropriate. The Agency, through its counsel, shall attempt to negotiate a voluntary disclosure agreement prior to the disclosure.
  - b. Initiate appropriate disciplinary action against the person or persons whose conduct appears to have been intentional, willfully indifferent or undertaken with reckless disregard for the Medicaid laws. Appropriate disciplinary action shall include, at a minimum, the removal of the person from any position with oversight for or impact upon the claims submission or billing process and may include, in addition, suspension, demotion, and discharge.
  
2. Other Non-Compliance. In the event the investigation reveals billing or other problems which do not appear to be the result of conduct which is intentional, willfully indifferent, or with reckless disregard for the Medicaid laws, the Agency shall nevertheless undertake the following steps:
  - a. Improper Payments. In the event the problem results in duplicate payments by Medicaid, or payments for services not rendered or provided other than as claimed, it shall:
    - i. Correct the defective practice or procedure as quickly as possible;
    - ii. Calculate and repay to the appropriate governmental entity duplicate payments or improper payments resulting from the act or omission;
    - iii. Initiate such disciplinary action, if any, as may be appropriate given the facts and circumstances. Appropriate disciplinary action may include, but is not limited to, reprimand, demotion, suspension and discharge; and
    - iv. Promptly undertake a program of education at the appropriate program to prevent future similar problems.
  
  - b. No Improper Payment. In the event the problem has or does not result in an overpayment by the Medicaid program, the Agency shall:
    - i. Correct the defective practice or procedure as quickly as possible.

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- ii. Initiate such disciplinary action, if any, as may be appropriate given the facts and circumstances. Appropriate disciplinary action may include, but is not limited to, reprimand, demotion, suspension and discharge.
- iii. Promptly undertake a program of education at the departmental unit to prevent future similar problems.

### **DISCIPLINE**

Employees may be subject to discipline for failing to participate in the Agency's compliance efforts, including, but not limited to:

1. The failure of an employee to perform any obligation required of the employee relating to compliance with the program or applicable laws or regulations;
2. The failure to report suspected violations of compliance program laws or applicable laws or regulations to an appropriate person;
3. The failure on the part of a supervisory or managerial employee to implement and maintain policies and procedures reasonably necessary to ensure compliance with the terms of the program or applicable laws and regulations.

Discipline should follow the Agency's existing employee discipline policies and procedures.