

NORTH CENTRAL HEALTH CARE

# CODE OF CONDUCT

2023



North Central  
Health Care

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## A MESSAGE FROM YOUR EXECUTIVE DIRECTOR .....



**Gary Olsen**  
Executive Director

**Every day**, the services provided by North Central Health Care (NCHC) touch the lives of people we serve. Our vision is *Lives Enriched and Fulfilled*. Each interaction we have with those we serve, our community partners, and

each other will lead to lives that are more enriched and fulfilled. We face the world with undeterred optimism and hope of possibility. Every day is a new chance to make people’s lives better. The vast potential to make a difference in each individual’s life is our greatest inspiration and measure of success.

At NCHC we live by our Core Values: *Dignity, Accountability, Partnership, Continuous Improvement, and Integrity*. If our Core Values are our compass, then our Code of Conduct is our road map. Our *Code of Conduct* ensures that we hold ourselves and how we do business to a high standard. The Code sets requirements for how we conduct ourselves and serves

as a foundation for our policies and procedures, all of which provide additional guidance on expected behaviors. Our actions, words and behaviors do matter. Regardless of where we live or the job we do, when we do what’s right—in other words, when we act with the highest integrity—we live our Core Values, and show we truly care for the people we serve and respect the people with whom we work.

I am proud to be a part of an organization that has a long history of high ethical health care practices, including empowering our employees to do the right thing. I remind you to familiarize yourself with NCHC’s *Code of Conduct* and use it as your daily guide. In a world that is increasingly complex, we all must remain vigilant that our words and actions reflect the right behavior.

Thank you for doing your part to carry on our Core Values and fulfill the obligations of our *Code of Conduct*. Together, these critical tools help each of us forge a positive path to better serve all our clients.

## A MESSAGE FROM YOUR COMPLIANCE OFFICER



**Jennifer Peaslee**  
Compliance Officer  
715.848.4507  
NCHCcompliance@norcen.org

I am pleased to present the 2023 North Central Health Care Code of Conduct. Our code defines how we are to conduct ourselves and act with integrity in everything we do. It outlines our commitments to our government regulators, our community, the people we serve and each other. Each of us is personally responsible for supporting our Core Values: Dignity, Integrity, Accountability, Partnership, Continuous Improvement. We are also responsible to be in compliance with the law and conduct ourselves ethically. I'm asking all employees to follow this *Code of Conduct* and demonstrate this commitment to integrity and accountability through our actions. Thank you for your commitment to doing the right thing every day! If you have a question or need help, please contact me anytime. I'm here to be your partner!

A handwritten signature in black ink that reads "Jennifer Peaslee". The signature is written in a cursive, flowing style.

# THE CODE OF CONDUCT

North Central Health Care's *Code of Conduct* guides appropriate conduct and behaviors expected of all North Central Health Care Staff. By following our Code and acting with integrity, you play an important role in supporting our Mission, Vision, and Core Values. It outlines our commitments and defines our responsibilities for all that we do. We need a *Code of Conduct* as it reinforces our Core Values which guide our strategies, policies, practices, and behaviors. It is part of our Compliance Program and is to help us make sure that we are complying with the laws and regulations that govern our organization.

## WHO FOLLOWS THE CODE OF CONDUCT?

Whatever your role is at North Central Health Care, this code applies to you. Our organization's Board of Directors is responsible for adopting and approving our Code. The Compliance Officer is accountable for promoting, monitoring, and enforcing it.

## OUR MISSION

*Langlade, Lincoln and Marathon Counties partnering together to provide compassionate and high quality care for individuals and families with mental health, recovery and skilled nursing needs.*

## OUR VISION

**LIVES ENRICHED AND FULFILLED.**

## OUR CORE VALUES

### DIGNITY

We are dedicated to providing excellent service with acceptance and respect to every individual, every day.

### INTEGRITY

We keep our promises and act in a way where doing the right things for the right reasons is standard.

### ACCOUNTABILITY

We commit to positive outcomes and each other's success.

### PARTNERSHIP

We are successful by building positive relationships in working towards a system of seamless care as a trusted community and county partner.

### CONTINUOUS IMPROVEMENT

We embrace change through purpose-driven data, creativity and feedback in pursuit of the advancement of excellence.



# UNDERSTANDING YOUR RESPONSIBILITY

At North Central Health Care, we are fully committed to high-quality health care and dedicated to the health and well-being of the people we serve. We are also committed to fully complying with all the federal, state, and local laws and regulations. Meeting these standards does not just happen; it requires a commitment from all of us.

## DELIVER PERSON-CENTERED CARE.

Always put the needs of the those we serve first. The best test for every action and every decision is to ask yourself, "Is this what's best for that individual?"

## BE VIGILANT ABOUT SAFETY.

Never take shortcuts that compromise your safety, that of your teammates, or of those we serve.

## DO THE RIGHT THING ALWAYS.

Demonstrate an unwavering commitment to doing the right thing in every action you take and in every decision you make, especially when no one's looking.

## EMBRACE DIVERSITY & INCLUSION.

We make better decisions when we consider multiple perspectives. North Central Health Care strives to welcome diversity and inclusion.

## LEAD BY EXAMPLE.

Demonstrate Dignity, Integrity, Accountability, Partnership and Continuous Improvement daily. Always conduct ourselves ethically.

## SPEAK UP!

We are ALL required to report any suspected violations or misconduct concerns. If you see something, say something.

## TREASURE, PROTECT, AND PROMOTE OUR REPUTATION.

Consider how your actions affect our collective reputation, and be a proud ambassador for North Central Health Care, our team and our services.

## KEEP INFORMATION SECURE.

Choose to honor the confidentiality and privacy of those we serve. Protect our patients, clients and residents by keeping their personal health information (PHI) secure.

## MANAGEMENT RESPONSIBILITIES

### ● EDUCATE

Training and educating yourself and staff on how to spot and report misconduct as well as the policies and procedures, rules and regulations that are relevant to your department or program.

Ensure employees know they can always report suspected violations of applicable laws, this *Code of Conduct* and/or policies and procedures without fear of retaliation.

### ● LEAD

Never reveal the identity of staff members who wish to report misconduct anonymously.

Protect staff members from retaliation for reporting misconduct.

Create a work environment in which concerns can be raised and openly discussed without fear of retaliation.

Model and reward integrity.

Encourage honesty and ethical decision making.

### ● MONITOR

Develop methods to monitor compliance with all rules, regulations, and policies.

### ● COMMUNICATE

Responding properly to employee reports of misconduct.

Immediately inform the Compliance Officer if you receive or suspect a violation of the Code of Conduct, policies and/or applicable laws.

Seek help in de-escalating and resolving issues when they arise.

# ALL STAFF RESPONSIBILITIES

## ● LEARN

- Be familiar with and understand our Code of Conduct.
- Learn the policies and procedures, rules, and regulations that are relevant to your specific daily responsibilities.

## ● BE AWARE

- Report any suspected violations of our Code of Conduct, policies or the law.
- Cooperate in any NCHC investigations related to these.

## ● COMMIT

- Speak up if you are in doubt as to the proper course of conduct or you become aware of possible violations.
- Abide by the standards outlined in this code of conduct and in company policies and with the law.
- Complete all NCHC required trainings.



# ACKNOWLEDGMENTS

All employees will complete an acknowledgment form that states they have read and understand our Code of Conduct and agree to abide by its guidelines.

## The acknowledgment form states that the employee will:

1. I confirm that I have received a copy of the Code of Conduct or know where to find it.
2. I understand that it is my responsibility to read the Code of Conduct and I agree to do so.
3. I also understand that anything that was unclear to me in the Code of Conduct can be clarified by my supervisor or the Compliance Officer.
4. I do not currently know of any violations of the Code of Conduct.
5. I understand that I have a personal duty to bring all (real or suspected) violations of the Code of Conduct to the attention of my supervisor and/or Compliance Officer. I will utilize the resources listed in the Code to speak up.
6. I understand that it is against NCHC policy to be retaliated against for upholding the Code of Conduct and for obeying the laws and regulations that apply to my job. Retaliation should be reported immediately.

**I agree that I have read and understand and will comply with the terms of this Code of Conduct and all applicable policies and procedures. I understand that my failure to comply with the Code of Conduct may result in disciplinary action, up to and including termination of employment.**

# A CULTURE OF EMPLOYEE SAFETY

**North Central Health Care** is committed to fostering an environment where all employees feel safe. We want to ensure an environment free of harassment, workplace violence, safety concerns, and hazardous conditions.

Everyone has an individual responsibility to report any activity by another employee, physician, member of management, contract or vendor staff, student, volunteer, or any other person with or working for NCHC, that appears to violate applicable laws, rules, regulations, accreditation standards, or NCHC's Code of Conduct or policies.

## GENERAL EXPECTATIONS

We want everyone within our facilities to be safe and healthy. It's essential that our employees conduct themselves free from substances that might affect skills and judgment, endangering the safety of others. We ask all NCHC employees to commit to the following things:

- Do not use alcohol or illegal drugs while working or on call
- Do not bring illegal drugs, weapons or other contraband to work
- We are a smoke free Organization. Do not use tobacco products in the workplace.
- Do not perform any job duties while under the influence of alcohol, illegal drugs, or while misusing prescription drugs

Anyone who appears to be under the influence of alcohol or drugs while working on behalf of the organization, misuses a prescription drug or is involved in a drug diversion must be immediately reported to your Manager and HR and may be subject to disciplinary action up to and including termination. Refer to the policy regarding drug and alcohol use and testing for additional information.

## HARASSMENT & WORKPLACE VIOLENCE

Every employee at NCHC has the right to work in an environment free of harassment and disruptive behavior. NCHC has zero tolerance for workplace violence or harassment. Harassment is any verbal, written, visual or physical act that creates a hostile, intimidating or offensive work environment or interferes with an individual's ability to perform their job duties. Unacceptable behaviors include:

- Engaging in Gossip/Spreading Rumors
- Derogatory Comments or Jokes/Offensive Language
- Unprofessional or Discriminatory Behavior
- Sexual Harassment

## HEALTH AND SAFETY

We comply with state and federal laws as it pertains to maintaining a safe working and service environment. We immediately report unsafe acts or circumstances which may create an unsafe condition. NCHC staff are expected to cooperate and follow all safety rules and practices, take necessary steps to protect themselves and others, attend required safety trainings and report immediately all accidents, injuries and unsafe practices or conditions. **Be familiar with and follow any work safety information and training provided to you and always speak up when:**

- A job you think you are not properly trained to perform and that may harm you or others is assigned to you
- Equipment is not operating properly and may be unsafe
- An unsafe condition or a potential danger to yourself, others or the environment comes to your attention

## RETALIATION

Retaliation against any employee for filing a harassment/discrimination complaint; or for assisting, testifying or participating in an investigation is illegal and prohibited by NCHC and by state and federal statutes. Retaliation is employee misconduct. **We promote culture where everyone, in good faith, can:**

- Communicate about ethics or compliance concerns
- Report concerns or inappropriate behavior
- Participate in an investigation
- Refuse to participate in inappropriate activity
- Exercise their rights protected by law without fear of retaliation.

**Examples of adverse behaviors that may be considered retaliatory include:**

- Demotion, Suspension or Termination
- Harassing the reporting employee or encouraging others to harass the employee
- Unjustifiably failing to hire, promote or consider for hire or promotion or giving equal consideration in employment decisions
- Adversely impacting working conditions/denying employment benefit which the employee is entitled
- Attempting to identify the employee who reported a concern/behavior or participated in an investigation

***If you observe, experience or suspect retaliation, contact Human Resources or the Compliance Officer immediately.***

# WORKING THROUGH ETHICAL DILEMMAS

Facing ethical dilemmas can become fairly common in the workplace, especially when the actions we take impact other people. Often we do not consider the ethical nature of our decisions until we become aware that our actions have negatively impacted someone. Consider the following chart when confronted with an ethical dilemma.

## WORKING THROUGH AN ETHICAL DILEMMA

1

### IDENTIFY THE ETHICAL PROBLEM.

List possible solutions and any obstacles to resolving the problem. Seek input from a member of management, clinical team, or other consultation.

2

### DETERMINE SOLUTIONS AND THE BEST APPROACH.

Is it consistent with our NCHC Mission, Vision & Core Values? Is it legal? Does it comply with our policy, regulations, laws? Would your approach embarrass you or NCHC? How would it look if published in the media? Would you be comfortable with the example it sets for future decisions?

3

### DECIDE WHAT YOU SHOULD DO.

After considering all potential solutions, make a decision. If your path still isn't clear, ask for additional guidance.

4

### FOLLOW THROUGH ON YOUR DECISION.

## ETHICAL CONSULT SERVICES

To help maintain the highest ethical standards in delivery of care and treatment at North Central Health Care, Ethical Consult Services are available. Please reach out to your manager for more info on how to request an ethical consultation or refer to the policy.







# SEEKING GUIDANCE & VOICING CONCERNS

**It is your responsibility** to ask questions and raise concerns when compliance issues arise. This Code of Conduct cannot describe every possible situation that you might encounter in your daily work. If you cannot find an answer in our Code, or if you have questions on how to interpret our Code, seek guidance. Likewise, if you are aware of something that may be a violation of our Code, our policies, or the law, you must speak up and report it so it can be addressed.



## CHANNELS FOR GUIDANCE

You have several channels to seek guidance, voice concerns or make a report within North Central Health Care. Please start with your manager when possible.







# WHO TO CALL AND WHEN TO CALL

## CONTACT HUMAN RESOURCES

### IF THE SITUATION INVOLVES:

- Workplace Conduct Issues
- Inappropriate Behavior
- Harassment/Mistreatment
- Discrimination
- Conflicts with Coworkers
- Disciplinary Issues

email: [HResources@norcen.org](mailto:HResources@norcen.org) | phone: 715.848.4419

## WHAT HAPPENS WHEN I REPORT A CONCERN?

When a concern is reported a prompt investigation by the appropriate individuals will occur.

### Investigators will:

- Determine facts through interviews and review of documents
- Contact employees who may have knowledge or were involved in the incident
- Recommend corrective action and/or disciplinary measures where appropriate

If asked, you are **REQUIRED** to cooperate fully with any inquiry or investigation.

## CONTACT COMPLIANCE

### IF THE SITUATION INVOLVES:

- Patient Rights Violations
- Fraudulent Billing or Coding
- Privacy Issues/Breaches of Confidentiality
- Ethical Violations
- Bribes or Kickbacks
- Medicare/Medicaid Fraud/Abuse
- Lost or Stolen Electronic Devices Containing PHI
- Conflicts of Interest
- Noncompliance with Professional Standards

**NCHC COMPLIANCE OFFICER: JENNIFER PEASLEE**

email: [NCHCcompliance@norcen.org](mailto:NCHCcompliance@norcen.org) | phone: 715.848.4507  
online: [www.norcen.org/Compliance](http://www.norcen.org/Compliance)

These are not exhaustive lists.

# BUSINESS PRACTICES

## COMMITMENT TO GOVERNMENT REGULATORS

**We are committed** to satisfying the payment conditions required by payors with which North Central Health Care transacts business, including Federal Health Care Programs. Further, we are committed to monitor and structure North Central Health Care's relationships with physicians and other healthcare providers to be consistent with relevant federal and state laws and regulations.

**FRAUD:** The intentional deception or misrepresentation to obtain money or property of a federally funded healthcare benefit program (Medicaid/Medicare). Knowing: actual knowledge, deliberate ignorance or reckless disregard of the truth.

**ABUSE:** Obtaining payment for items or services when there is no legal entitlement to that payment, but without knowing and/or intentional misrepresentation of facts to obtain payment.

**WASTE:** The over utilization of services or careless and needless expenditures for healthcare services that result in unnecessary costs to a healthcare benefit program (Medicaid, Medicare).

**CODING & BILLING:** We bill only for those services that are actually provided, medically necessary, appropriately authorized and properly documented, using billing codes that most accurately describe the services and care provided. Up-coding or improperly bundling charges to increase reimbursement is strictly prohibited.

**ANTI-KICKBACK:** We prohibit asking for or receiving anything of value to induce or reward referrals of Federal Healthcare program business (Medicare and Medicaid) to include bribes, rebates, cash, in-kind donations-referred to as "kickbacks."

**STARK LAWS (PHYSICIAN SELF-REFERRAL):** The purpose is to prohibit improper referral relationships that can harm Federal Health Care Programs (Medicaid and Medicare) and program beneficiaries. It limits physician referrals where there is a financial relationship (either their own or an immediate family member) with the business entity. For example: referring a patient to a medical equipment company that they own.

**ZERO TOLERANCE:** We will not tolerate the submission of any claim for payment or reimbursement that is false, fraudulent, fictitious, or is grossly misleading or inaccurate.

## COMMITMENT TO EACH OTHER

**CONFLICT OF INTEREST** We do not tolerate any business or financial opportunity which might conflict, or appear to conflict, with the interests of North Central Health Care or those we serve. A conflict exists whenever a trustee, officer, physician or employee (or a related party such as a business or family member) may receive a financial benefit from any decision or action that he/she takes. Here are some examples of potential conflicts of interest:

- Reporting relationship between family members
- Using NCHC property, information or resources, for non-NCHC purposes
- Holding outside jobs or positions that distract from our work at NCHC or that could potentially share clients or referrals
- Making business decisions that could benefit ourselves, family or friends
- Issuing testimonials, endorsing or promoting a vendor, payor, provider, product or service

Conflicts of interest may be manageable and therefore not be a violation. You must promptly disclose any actual/potential conflicts of interest to your manager who will connect with Compliance. We then work with you to advise how to avoid or reduce the conflict and what action you need to take if any.

**GIFTS AND GRATUITIES** NCHC employees are prohibited from soliciting gifts. Gifts of a nominal value and on an occasional basis may be accepted. However, gifts that would influence or appear to influence an employee, physician, or volunteer in the conduct of his/her responsibilities at NCHC shall never be accepted. Examples of acceptable gifts would be a hand-made card given to you by a client or family member or baked goods that are shared with co-workers. No employee should ever accept cash or cash equivalents like gift cards from anyone. Please refer to the organization's Gift policy for more information and requirements.

# PROTECTING PRIVACY

**We are required** by our own policies, as well as by state and federal laws and regulations, to protect the confidentiality, integrity, and availability of Protected Health Information (PHI) and all other confidential information. Regarding PHI, the Health Insurance Portability and Accountability Act (HIPAA) establishes rules that restrict who can access and/or receive PHI and sets limits on how PHI can be used and disclosed. We treat our patient's information with care, respecting our patient's privacy. We will only

*All sharing or exchanging of PHI must be accompanied by a written consent that is signed by the individual or that person's guardian or decision maker.*

use patient information for treatment purposes, to obtain payment, and for other health care operations, including administrative purposes and evaluation of the quality of care that our patients receive. In addition to HIPAA, there are other laws that govern protected health information that pertains

to individuals with a substance abuse diagnosis or receiving treatment for their substance abuse diagnosis.

All individuals who receive care at NCHC are given a Notice of Privacy Practices, required by law, which explains all of the rights they have for their information to be private. An example of a right is to request copies of their medical records. Any requests and copies should be completed by Health Information. Staff generally are not permitted to print or make copies of the medical record or PHI.

## DEFINING PHI

**Protected health information (PHI)**, is any piece of information in an individual's medical record that was created, used, or disclosed during the course of diagnosis or treatment that can be used to personally identify them. This includes past, present, or future physical or mental health conditions, the provision of care or payment for that care to an individual.

Protected health information includes all individually identifiable health information, including demographic data, medical histories, test results, insurance information, and other information used to identify a patient or provide healthcare services or healthcare coverage. 'Protected' means the information is protected under the HIPAA Privacy Rule. PHI also includes individually identifiable health information of persons who have been deceased for less than 50 years.

**For more information, please refer to our policies regarding HIPAA.**

**CONTACT YOUR HIPAA PRIVACY OFFICER TO FILE A REPORT:**

**JENNIFER PEASLEE**

**NCHCcompliance@norcen.org | 715.848.4507 | norcen.org/Compliance**

## *HIPAA Identifiers May Include Any of the Following:*

PATIENT NAMES

GEOGRAPHICAL ELEMENTS  
(Street Address, City, County or Zip)

IDENTIFIABLE PERSONAL DATES  
(Date of Admission, Discharge, Birth, Death or Exact Age)

TELEPHONE OR FAX NUMBERS

EMAIL ADDRESS

SOCIAL SECURITY NUMBERS

MEDICAL RECORD NUMBERS

HEALTH INSURANCE NUMBERS

ACCOUNT NUMBER

CERTIFICATE/ LICENSE NUMBERS

VEHICLE IDENTIFIERS

DEVICE ATTRIBUTES OR SERIAL #

DIGITAL IDENTIFIERS/WEB URLS

IP ADDRESSES

BIOMETRIC ELEMENTS  
(Finger, Retinal or Voice Prints)

IDENTIFYING PHOTOS/VIDEOS

IDENTIFYING NUMBERS/CODES



# ADDITIONAL NCHC EMPLOYEE PRIVACY REMINDERS

**NCHC'S Privacy Program is designed to protect all those we serve** and their protected health information (PHI) which includes verbal, written, and electronic information that can identify someone as a recipient of our services. Further, our patients, clients, and residents have a right to have their information kept private. One way we can make sure that this is occurring, is through random audits of patients' medical records to determine if there is potential snooping or unauthorized access by staff.

## What are the consequences of unauthorized access?

**Consequences could mean termination** of your employment and applies to intentionally and inappropriately accessing records, whether for purposes of curiosity, malicious intent, or personal gain of:

- Your spouse/partner
- Your siblings
- Your children/grandchildren
- Co-workers
- Friends/neighbors
- Public figures or those of media interest
- Any patient without a legitimate, authorized, work-related reason

## What if I am involved in an acquaintance's treatment, billing, or other activity?

If your job requires you to access the person's medical information, then you should **immediately report this to your supervisor**, who will determine whether to assign the task to someone else. Clarify with your supervisor the preferred handling of these situations in the future.

## Can I view my own medical records?

It is not a HIPAA violation to view your own records, however it is NCHC policy that **you must formally request this through HIM**. Please follow the proper procedure to receive your records to avoid disciplinary action leading up to and including termination of employment for improper access.

## To help maintain P/C/R privacy and confidentiality:

- Access patient medical records only when it is required for your job. Just because you have access to medical records and protected health information does not mean you can look at anything or anyone.
- Do not access medical records of co-workers, friends, family members or others listed unless for a work-related reason or with approval.
- If authorized: access, use and disclose only the minimum protected health information needed to get the job done.
- Log off and lock your computer whenever you leave your workspace. Employees who leave their workstations without logging off are responsible if someone else uses their login and password to access medical records.

## What If I am directly involved in the treatment or care?

If you are the patient's treating provider, case manager, crisis professional, nurse, etc.:

- You may only access protected health information (PHI) related to your involvement in the patient's care.
- You may share PHI only with the treatment team as needed for purposes of treatment, payment, or operations.
- You may not share info with anyone who does not have a work-related reason to know or without the proper consent of the patient. Working at NCHC does not automatically equal having a right to PHI. You must have a work-related reason or be involved in the person's treatment, payment, or operational functions (i.e., quality audits, DHS surveys).

## What if my child or parent is a patient here?

To get copies of your child or parent's medical records, you must **request the records by making a request through Health Information**. You may not access the records directly through the electronic medical record.

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*If you recognize any privacy breaches or violations, please fill out an occurrence report so it can be properly investigated.*

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## THE DO'S & DON'TS OF IT PRIVACY & SECURITY

**The Health Insurance Portability and Accountability Act** (or "HIPAA") was enacted in 1996 to protect health insurance coverage for workers and their families when they change or lose their jobs (Portability) and to protect health data integrity, confidentiality, and availability (Accountability). Storing and transmitting electronic records makes the health care system more efficient, simpler, and less costly but it also comes with the added responsibility to maintain patient privacy. Here are some guidelines on best practices in affording privacy to all whom we serve.

### **USE STRONG PASSWORDS AND NEVER SHARE THEM.**

Make your passwords hard for others to guess, but easy for you to remember so you don't have to write them down.

### **DON'T PUT PROTECTED INFO ON PERSONAL COMPUTERS/DEVICES.**

Use only company-approved and encrypted devices when you work with protected information. Never download or copy protected information to your personal computer or to any device that unauthorized people have access to. Never download or back up information about patients/clients/residents, or employees to the cloud without approval.

### **REPORT MISSING DEVICES IMMEDIATELY.**

Report lost or stolen devices to your manager immediately. Don't delay even if you think it will still be found.

### **LOCK YOUR MONITOR WHEN YOU STEP AWAY.**

Lock your computer screen by pressing CTRL+ALT+DELETE>LOCK. When working in a patient record, lock your screen even if you are just stepping away for a moment.

### **SECURE MOBILE DEVICES.**

Never leave mobile devices (even encrypted) unlocked or unattended.

### **SECURE EMAILS WITH PROTECTED INFORMATION.**

Never send patient/client/resident, or employee info outside the organization unless you use encrypted email or another NCHC approved security tool (Outlook's Secure Mail, TLS, or e-Transfer). Never send protected information to yours or anyone's personal email, even if you think you are sending securely. Any exceptions must be approved by the Compliance Officer, Jennifer Peaslee.

### **STAYING SAFE ON SOCIAL MEDIA.**

Don't use social media (TikTok, Snapchat, Facebook, Twitter, Instagram, etc.) to communicate PHI. This includes pictures and video. Please see our Social Media policy for more details on appropriate use of social media while working.

### **PROTECT AGAINST VIRUSES.**

Don't open emails with attachments or links from unknown and unexpected senders. "Spam" and "phishing" emails and infected files can release a virus into our network or trick you into giving protected info.

### **ASK IF YOU AREN'T SURE HOW TO KEEP INFO OR DEVICES SECURE.**

Talk to your manager, call CCITC, IMS, or get in touch with Compliance. They will get you additional guidance or training.

# THE PATIENT'S RIGHT TO PROTECTIVE CARE

## *Defining Abuse, Neglect, Misappropriation, Exploitation, Resident to Resident Altercation, Injury of Unknown Origin and Caregiver Misconduct*



### **ABUSE:**

- **PHYSICAL** – hitting, slapping, pinching, kicking, or intentionally causing harm
- **VERBAL** – threats of harm, saying things intentionally to frighten the client
- **SEXUAL** – harassment, inappropriate touch, assault
- **MENTAL** – humiliation, harassment, intimidation, threats of punishment, depriving care or possessions



### **NEGLECT:**

Intentionally withholding care; failure to carry out a plan that could reasonably be expected to cause pain, injury or death of a client



### **MISAPPROPRIATION OF PROPERTY:**

Theft of money, identity, credit cards, jewelry, property misuse, such as using a client's phone without consent



### **EXPLOITATION:**

Taking advantage of a resident for personal gain through the use of manipulation, intimidation, threats, or coercion



### **RESIDENT TO RESIDENT ALTERCATION:**

Incidents that occur between residents in the nursing home must also be reported



### **INJURY OF UNKNOWN ORIGIN:**

An injury should be classified as an injury of unknown origin when both of the following conditions are met:

1. The source of the injury was not observed by any person or the source of the injury could not be explained by the resident
2. The injury is suspicious because of the extent of or the location (e.g., the injury is located in an area not generally vulnerable to trauma) or the number of injuries observed at one particular point in time or the incidence of injuries over time

## **IF YOU WITNESS ABUSE**

If you witness any of these abuses to a client, resident or patient, it is your responsibility to make sure the following protocol is carried out:

### ● **WITNESS RESPONSIBILITY**

- | Immediately protect the person
- | Notify your manager
- | Fill out an occurrence report in SafetyZone

### ● **MANAGER RESPONSIBILITY**

- | Immediately protect the person
- | Investigate all allegations of misconduct
- | Document the results of your investigation
- | Report allegations/incidents to the Division of Quality Assurance (DQA) as appropriate

### ● **MANAGER/WITNESS RESPONSIBILITY**

- | For any situation that could include a potential criminal offense, contact law enforcement
- | Adult Protective Services (715.841.5160) aids elder adults/adults-at-risk who have been/are currently being abused, neglected or exploited

## **YOU MAY ALSO LEARN OF AN INCIDENT BY:**

- Receiving a verbal or written statement from an individual
- Receiving a verbal or written statement of someone in a position to have knowledge of the incident
- Discovering an incident after it occurred
- Hearing about an incident from others
- Observing physical/emotional/mental injuries to an individual
- Observing misappropriation of an individuals property
- Otherwise becoming aware of an incident



# SNAPPING PICS PUTS YOUR JOB AT RISK

With **cellphone misuse significantly on the rise** in health care facilities across the country, it's important to review your responsibility while working within North Central Health Care's facilities. Take a moment to review what caregiver misconduct can look like and what happens when an incident occurs.

## EXAMPLES OF MISCONDUCT:

- 1 Taking photos of a resident without written consent
- 2 Taking videos of a resident without written consent
- 3 Taking or sending Snapchats including any parts of a residents body
- 4 Taking a photo or video of another employee mistreating or degrading a resident and not reporting it to your direct supervisor immediately
- 5 Posting photos to any Social Media platform with a recognizable resident in them

**WITHOUT WRITTEN CONSENT OF A RESIDENT AND APPROVAL FROM YOUR SUPERVISOR, PHOTOS OR VIDEOS OF RESIDENTS ARE STRICTLY PROHIBITED BY STAFF.**

## IF AN INCIDENT OCCURS:

- 1 North Central Health Care will immediately fill out a misconduct incident report, perform an investigation and may notify police if necessary
- 2 North Central Health Care will forward all findings to the Office of Caregiver Quality (OCQ)
- 3 OCQ will review the misconduct report and may launch further investigation
- 4 If OCQ determines Caregiver misconduct occurred the accused staff will be placed on the Wisconsin Caregiver Misconduct Registry

**WHEN PLACED ON CAREGIVER MISCONDUCT REGISTRY, INDIVIDUALS CAN NO LONGER WORK AS A CAREGIVER IN A WI DHS REGULATED HEALTHCARE FACILITY.**

# THE PATIENT'S RIGHT TO FILE A GRIEVANCE

**Many patient complaints** can be addressed quickly. When complaints cannot be resolved quickly and easily, patients have the right to file a grievance. A grievance is a formal complaint. Patients have the right to complain about the quality of their healthcare. Common causes for complaints include:

WAITING TIME

OPERATING HOURS

CONDUCT OF STAFF

ADEQUACY OF STAFF

## HANDLING A GRIEVANCE

Please refer to the policy "**Complaints and Grievances**" in UKG Learning for details.

- During the admission staff will inform individuals, verbally and in writing of their rights which includes their right to make complaints and grievances and the process to do so.
- A complaint is considered resolved when the complainant is satisfied with the actions taken or the explanation given.
- If the staff present is able to resolve the patient complaint at the time, it is not a grievance.
- Staff shall encourage individuals to express complaints or concerns to the individual involved or present. These may be resolved by the individual involved or by an appropriate staff member/manager/supervisor.
- If the individual presents complaint to persons other than direct care staff and has not tried to resolve the issue with involved department, the contacted staff should immediately call the dept. involved so that the concern/ complaint may be addressed.
- Complaint resolution will be documented in the individual's electronic health record.

### A NOTE ON NON-RETALIATION

A patient/client/resident, surrogate decision-maker, or any person acting on their behalf (including a NCHC staff member) may initiate/file a complaint or grievance without discrimination or the fear of reprisal.

## OUR MISSION

Langlade, Lincoln and Marathon Counties partnering together to provide compassionate and high-quality care for individuals and families with mental health, recovery and long-term care needs.

## OUR VISION

Lives Enriched and Fulfilled.



# North Central Health Care

Person centered. Outcome focused.



[www.norcen.org](http://www.norcen.org)