



Implementation 04/2022

Last Reviewed 04/2022

Effective 04/2022

Last Revised 04/2022

Next Review 04/2027

Owner **David Lane: Chief Compliance Officer**Policy Area **Compliance**Applicability **Providence Systemwide + PGC**

## PSJH-RIS-736 Compliance Hotline Policy

Executive Sponsor:	Sheryl Vacca, SVP Chief Risk Officer
Policy Owner:	David Lane, Chief Compliance Officer
Contact Person:	Karen Mihelic, Exec. Director Physical Security, Incident Response

### Scope:

This policy applies to the not-for-profit, non-profit entities of Providence and its Affiliates [\[i\]](#) (collectively known as "Providence") and their workforce members (caregivers, volunteers, trainees, interns, apprentices, students), independent contractors, vendors and all other individuals working at the ministry, whether they are paid by or under the direct control of the facility; employees of affiliated organizations (collectively, "workforce members"). Where an organization is not wholly or majority owned, exceptions may apply.

☒ Yes ☐ No Is this policy applicable to Providence Global Center (PGC) caregivers?

This is a management level policy reviewed and recommended by the Policy Advisory Committee for approval by senior leadership which includes vetting by Executive Council with final approval by the President, Chief Executive Officer or appropriate delegate.

### Purpose:

All workforce members have a duty to report suspected wrongdoing as soon as reasonably possible. This policy establishes one mechanism for such reporting, the *Compliance Hotline*. The purpose of this policy is to outline the process for reporting and responding to concerns and allegations against Providence's Code of Conduct, policies, and any relevant regulations. Reports may be made confidentially and without fear of retaliation for reporting concerns in good faith.

# **Definitions:**

**Anonymous Report:** A *Compliance Hotline* matter in which the reporter's identity and contact information is unknown.

**Compliance investigation:** The investigation completed when a *Compliance Hotline* report contains allegations that are of high significance, including, but not limited to, the subject's position within Providence (i.e., senior leader), and/or the nature of the allegations (i.e., more than one region; vendor issues; attorney-client privileged matters; or significant financial, legal, operational, information security or reputational impact).

**Investigator:** The person or persons, Risk & Integrity Services (RIS) or non-RIS, assigned to investigate, or gather additional information for, an integrity/risk matter.

**Reporter:** The person who reports a concern to the *Compliance Hotline*. The reporter may be anonymous.

# **Policy:**

Providence has implemented a 24/7/365 toll-free telephone line (*Compliance Hotline*) that is accessible to all workforce members for reporting compliance and risk concerns and questions. This reporting mechanism is also known as the *Hotline*, or the *Integrity Hotline*. The *Compliance Hotline* allows anonymous reporting (if the reporter desires). All workforce members will be trained to the existence of the *Compliance Hotline* and the requirements of our Standards/Code of Conduct upon hire, annually, and by posting the information in prominent common areas.

Centralization of the reporting process enables RIS to monitor for patterns of non-compliance, compliance risk or other problems. When such patterns appear, further investigation occurs and processes, procedures, policies, or controls are implemented or revised as appropriate.

Providence fosters and supports a safe, non-threatening environment where individuals may ask questions about integrity and compliance matters and report their concerns.

As part of the Providence commitment to the mission and core values, and our culture of excellence, anyone who has a concern about the integrity, compliance or ethics of our organization has an opportunity to report those concerns confidentially and without fear of retaliation. Concerns may be submitted:

- Anonymously (a personal identification number (PIN) to retrieve information about their report is provided when using the *Compliance Hotline*);
- Confidentially (such requests are honored to the extent allowed by law); or
- Privately (the reporter reveals his/her/their identity and allows it to be used as needed).

Providence encourages workforce members to first speak with their manager or supervisor about their concerns. Other workforce members (e.g., Board members, volunteers, and students) are encouraged to speak with their primary Providence contact. If any workforce member is uncomfortable or unsure about how to make a report, Providence compliance program staff

members at the local, regional and system level are available to help. Workforce members can also contact staff in other support functions, such as risk management, legal or human resources, whichever is most appropriate.

Providence prohibits retaliation against any workforce member for making a good-faith report of their concerns about actual or potential wrong-doing – including violations of Providence’s Integrity and Compliance Program. Retaliation is also prohibited against any workforce member who in good faith assists in the investigation of any reported concern. Concerns about possible retaliation or harassment stemming from a compliance report may be reported to the *Compliance Hotline*, any integrity and compliance office or staff member, or to human resources.

## **Duty to Respond:**

The Providence Investigation team, which operates under the direction of the SVP/Chief Risk Officer, oversees and manages the *Compliance Hotline*. When a report has been made through the *Compliance Hotline*, workforce members can expect a prompt review, acknowledgement, triage and objective investigation of each report using internal investigative criteria. Investigators may bring in additional team members, such as Human Resources, Medical Staff, Physical Security, etc., to assist in the investigations.

If the report was filed online at [www.providence.org/IntegrityOnline](http://www.providence.org/IntegrityOnline), the investigation team will use the response mechanism to acknowledge receipt of a report, request additional information, provide status updates if appropriate, and, additionally, advise when an investigation has been closed. Investigators will attempt to provide updates and responses, however, if the reporter has chosen to remain anonymous, this may not be possible.

Investigators will continue to work through reports to the completion of each investigation, including facilitating any sanctions and/or corrective actions taken in response. Investigators are responsible for adequately documenting each investigation and the outcome in the *Compliance Hotline* reporting tool.

## **References:**

- [PSJH Code of Conduct](#)
- [PSJH-RIS-700 Compliance Program Policy](#)
- [PSJH-RIS-722 Code of Conduct Policy](#)
- [PSJH-RIS-733 Non-Retaliation](#)
- [PSJH-RIS-734 Privacy Sanctions](#)
- [PSJH-RIS-735 Investigations Policy](#)
- HR Confidentiality Policy, available on the HR Portal
- HR Counseling and Corrective Action Policy, available on the HR Portal

### **Applicability:**

[i] For purposes of this policy, “Affiliates” is defined as any not-for-profit or non-profit entity that is wholly

owned or controlled by Providence St. Joseph Health (PSJH), Providence Health & Services, St. Joseph Health System, Western HealthConnect, Kadlec, Covenant Health Network, Grace Health System, Providence Global Center, NorCal HealthConnect, or is a not-for-profit or non-profit entity majority owned or controlled by PSJH or its Affiliates and bears the Providence, Swedish Health Services, St. Joseph Health, Covenant Health, Grace Health System, Kadlec, or Pacific Medical Centers names (includes Medical Groups, Home and Community Care, etc.).

---

## Attachments

[Integrity Hotline-FAQ-2020\\_30306.pdf](#)

## Approval Signatures

Step Description	Approver	Date
PSJH President/CEO	Cynthia Johnston: Sr Compliance Spec PSJH	04/2022
PSJH Executive Council	Cynthia Johnston: Sr Compliance Spec PSJH	04/2022
PSJH Policy Advisory Committee	Cynthia Johnston: Sr Compliance Spec PSJH	04/2022

## Standards

No standards are associated with this document