

Our Lady of Lourdes Health Care Services, Inc. & Affiliates including  
Our Lady of Lourdes Medical Center  
Lourdes Medical Center of Burlington County  
Administrative and General Policy

**POLICY NUMBER:** LHS AS0005CCP

**NURSING CODE:** \_\_\_\_\_

**PAGE NUMBER:** 1

**TITLE:** Corporate Compliance Structure

**ACCOUNTABILITY:**

President and Chief Executive Officer

**OBJECTIVES:**

**RELATION TO MISSION:**

Our Lady of Lourdes, a Catholic Health System – a member of Catholic Health East - dedicated to its Franciscan Tradition of serving all, will demonstrate the value of **Integrity** by fostering an ethical and moral environment where the behavior of associates is positively impacted by the services of the Corporate Compliance Program.

**RELATION TO OPERATION:**

The Corporate Compliance Program provides guidance to all of Our Lady of Lourdes Health Care Services, Inc. and Affiliates (OLLHCS, Inc.) trustees, officers, leadership associates, managers, supervisors, associates, medical staff, house staff, contractors, volunteers, students and others and assists us in carrying out our daily activities within appropriate ethical and legal standards.

**POLICY:**

OLLHCS, Inc. is committed to maintaining an organizational and accountability structure which assures compliance with governmental laws, rules and regulations, and supports OLLHCS, Inc.'s ethical standards, code of conduct and zero tolerance for fraud, abuse and waste.

**1) Board of Trustees**

The overall accountability for OLLHCS, Inc.'s Corporate Compliance Program rests with the Board of Trustees. The duties of the Board of Trustees relative to compliance efforts are as follows:

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- a) To set the standard for OLLHCS, Inc. for corporate compliance through its explicit and implicit adherence to its ethical standards, code of conduct and zero tolerance of fraud, abuse and waste in business and personnel dealings.
- b) To appoint a multi-disciplinary Corporate Compliance Committee to implement the Corporate Compliance Plan approved by the Board of Trustees.
- c) To appoint a Chief Compliance Officer who is responsible for the day-to-day oversight of the Corporate Compliance Program.
- d) To appoint a Corporate Compliance Sub-Committee to assist the Chief Compliance Officer with the implementation of and the day-to-day oversight of the Corporate Compliance Program.
- e) To take action on the Corporate Compliance Program (including all Corporate Compliance Policies) and any revisions recommended by the Corporate Compliance Committee to the Board of Trustees.
- f) To receive reports as outlined in the Corporate Compliance Program from the Corporate Compliance Committee and Chief Compliance Officer.
- g) To take timely and appropriate actions as warranted and outlined in the Corporate Compliance Program on issues which may arise from daily operations, monitoring activities or external factors.

**2) Composition and Duties of the Corporate Compliance Committee (CCC)**

- a) Composition:
  - i) Board of Trustees members
  - ii) President and Chief Executive Officer Lourdes Health System
  - iii) Chief Financial Officer
  - iv) Chief Compliance Officer
  - v) Outside Counsel
- b) The duties of the CCC include, but are not limited to the following:

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- i) To review and, if necessary, revise and then recommend to the Board of Trustees for approval the Corporate Compliance Program (including all Corporate Compliance Policies) as presented by the Chief Compliance Officer;
- ii) To review and, if necessary, revise the procedures, work programs and protocols developed by the Chief Compliance Officer and Sub-Committee which operationalize the Corporate Compliance Program;
- iii) To review and, if necessary, revise the training methods and materials as developed by the Chief Compliance Officer and the Sub-Committee;
- iv) To review the findings of the on-going analyses of OLLHCS, Inc.'s business, industry and legal risks as submitted by the Sub-Committee,
- v) To prepare a report, at least quarterly, to the Board of Trustees which may include a summary of compliance efforts, results of new initiatives, and proposed changes to the compliance programs that would enhance the compliance efforts and annual plans for the program for the up-coming year.

### 3) Composition and Duties of the Sub-Committee

a) Composition:

- i) Members of Lourdes Health System Management Council
- ii) Chief Compliance Officer

b) Duties of Sub-Committee:

- i) To develop and then recommend to the CCC for approval the Corporate Compliance Program (including all Corporate Compliance Policies);
- ii) To review and, if necessary, revise the procedures, work programs and protocols developed by the Chief Compliance Officer which operationalizes the Corporate Compliance Program;
- iii) To work with the Chief Compliance Officer and other associates, as necessary, to develop effective on-going training methods and materials;

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- iv) To monitor the on-going analyses of OLLHCS, Inc.'s business, industry and legal risks and assure appropriate steps undertaken to address these risks in a timely manner;
- v) To prepare a report, at least quarterly, to the CCC that will include a summary of compliance efforts, results of new initiatives, and proposed changes to the compliance programs that would enhance the compliance efforts and annual plans for the program for the up-coming year.

#### 4) Chief Compliance Officer

The Chief Compliance Officer serves as the focal point for compliance activities. The Director of Compliance and Privacy Officer has direct access to the Board of Trustees. The primary duties of the Director include but are not limited to the following:

##### **Planning, Organizing, Decision Making**

- Sets forth to establish a culture of openness, responsiveness, inclusion, honesty and integrity as components of a just culture.
- Responsible for design, implementation and monitoring of the Compliance Program and the integration of compliance responsibilities throughout Lourdes System entities.
- Ensures that the Compliance Program effectively prevents and/or detects violation of law, regulations, policies, or the Code of Conduct.
- Analyzes responsibilities considering system policies, accreditation requirements, regulatory requirements, etc. and establishes priorities among key objectives.
- Develops initiates, maintains, and revises policies and procedures for the general operation of the Compliance Program and its related activities to prevent illegal, unethical or improper conduct. Manages day-to-day operation of the program.
- Sets short term and long term objectives which maximize system effectiveness utilizing defined human and fiscal resources.
- Leads and enhances the compliance program of Lourdes Health System
  - Develops programs so that all associates are aware of their legal, ethical and professional responsibilities.

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- Serves as a resource for CEO, Corporate Compliance Committee, leadership and staff who have questions and need guidance concerning their compliance responsibilities.
- Enhances the skills of directors and managers so that they can ensure compliance in their departments or areas of responsibility.
- Together with the Corporate Compliance Committee is authorized to implement all necessary actions to ensure achievement of the objectives of an effective compliance program.
- Advises Oversight Committee regarding compliance issues including regulatory, fiscal, and operational policies.
- Acts as an independent review and evaluation body to ensure that compliance issues and concerns within the organization are being evaluated, investigated and resolved appropriately.
- Leads the management of the Corporate Compliance Program. Reviews and revises the Program to meet the changing needs of LHS in its business and regulatory requirements.
  - Oversees the resolution of department-specific compliance issues and plans with appropriate management personnel to assure compliance with current federal regulations and guidelines.
  - Coordinates background checks of excluded or debarred individuals and organizations
  - Conducts an annual risk assessment. Develops annual workplan and ensures workplan completion. Regularly reviews the Compliance Program and recommends appropriate revisions and modifications, including advising administrative leadership and the Board of Directors of potential compliance risk areas.
  - Develops and periodically reviews and updates Standards of Conduct to ensure continuing currency and relevance in providing guidance to management and associates.

**Communications**

- Communicates effectively and promotes integrity in words and actions. Timely, attentive, respectful and clear communications, whether verbal, written or body language. Displays control and calmness in all situations. Shares only what others need to know and only in appropriate places, not in public areas or near others without a need to know.
- Effectively conveys system policy, explains procedures and disseminates information to employees, relevant administrators, medical staff members and other system personnel in a timely manner.

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- Exists as a channel of communication to receive and direct compliance issues to appropriate resources for investigation and resolution.
- Implements and operates retaliation-free reporting channels, including an anonymous telephone reporting system available to all associates, agents, affiliated providers or others working with the hospital.
- Develops and coordinates appropriate compliance training and education programs for all associates. Reviews training and monitoring with the respective training departments or operating departments to assure that associates receive timely and accurate information. Ensures understanding of the company's commitment to complying with all laws, regulations, company policies, and ethical requirements applicable to the conduct of the business. Assess the need for additional training and education and develop appropriate compliance programs.
- Oversees implementation of an educational program (including online written materials) for LHS personnel and physicians to ensure the understanding of federal and state laws and regulations involving ethical and legal business practices.
- Maintains a document control system for all reports and operations of the Compliance Committee including minutes of meetings, audit and monitoring reports, corrective actions, disciplinary actions, investigations, disclosures, government inspections, training and educational activities.
- Institutes and maintains an effective compliance communication program for the organization, including:
  - Management and promotion of the compliance Hotline
  - Heightened awareness of Standards of Conduct
  - Ensuring an understanding of new and existing compliance issues and related policies and procedures
- Ensures proper reporting of violations or potential violations to duly authorized enforcement agencies as appropriate and/or required.
- Provides reports on a regular basis, and as directed or requested, to keep the Corporate Compliance Committee and senior management informed of the operation and progress of compliance efforts.
- Collaborates with other departments to direct compliance issues to appropriate existing channels for investigation and resolution.
- Can serve as a final internal resource with which concerned parties may communicate after other formal channels and resources have been pursued.
- Promotes a positive image for LHS in contacts with both internal and external customers and potential customers; models professional communication and works with staff to demonstrate the same standards.

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**Utilizing Human Resources and other department contacts**

- Shows consistency with applicable policies and procedures in administering and/or recommending decisions related to compliance and audit.
- Works cooperatively with Human Resources on administrative/associate issues that have compliance involvement.
  - To review the coordination of billing, personnel, contracting and other department-specific compliance issues and plans with appropriate leadership associates, managers and supervisors to assure compliance with the Corporate Compliance Program and compliance issues;

**Performance & Process Improvement**

- Takes ownership of events/issues. Investigates and resolves complaints in a timely and respectful manner. Provides ongoing monitoring as needed to ensure compliance.
- Handles inquiries and reviews complaints, concerns or questions relative to compliance issues. Ensures that the system has high visibility and that allegations of non-compliance are investigated and responded to promptly and handled uniformly.
  - Investigates any information or allegation concerning possible unethical or improper business practices and oversees the implementation of any resulting corrective actions.
  - Coordinates as appropriate with legal counsel or outside legal counsel, conducting or authorizing and overseeing investigations of matters that merit investigation under the Compliance Program.
  - Assures that a confidential communications process exists for the solicitation, evaluation and response to complaints and problems.
- Arranges and coordinates internal and external audit procedures for the purpose of monitoring and detecting any misconduct or non-compliance with applicable laws and Compliance Program requirements.

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- If any misconduct or non-compliance is detected, there will be a recommendation of a solution and follow-up to ensure the recommendations have been implemented.
- Directs Compliance Audits.
- Conducts annual risk assessment and oversees that internal auditing and monitoring standards meet the needs of the Corporate Compliance Program..
- Sets priorities for audits based on compliance as well as OIG focus, CHE recommendations and internal audits.
- Ensures the completion of the audits and the requested follow-up management actions.
- Develops annual work plans to be undertaken based on policies, perceived areas of risk and government focus on compliance issues with the Corporate Compliance Committee.
- Monitors the effectiveness of the Compliance Program on a regular basis, including a comprehensive review conducted at least annually and makes changes as needed.
- Continually improves the Compliance Program, and implements any necessary changes on an ongoing basis to improve the prevention and detection of any non-compliance and takes appropriate steps to improve effectiveness.
- Oversees follow-up and as applicable, resolution to investigations and other issues generated by the Compliance Program, including development of best practices to remedy problems identified through audits with the appropriate director or manager.
- Monitors and coordinates compliance activities of other departments to remain abreast of the status of all compliance activities and to identify trends.
- Identifies potential areas of compliance vulnerability and risk. Develops and implements corrective action plans for resolution of problematic issues and provides general guidance on how to avoid or deal with similar situations in the future.
- Maintains knowledge base of laws and regulation and keeping abreast of best practices in the industry to ensure that LHS is in compliance with current Federal laws and regulations in an effective and efficient manner.

## 5) Senior Management

While the Board of Trustees, Corporate Compliance Committee, Sub-Committee and Chief Compliance Officer hold significant roles in assuring OLLHCS, Inc.'s compliance activities, adherence to OLLHCS, Inc.'s Corporate Compliance Program is the responsibility of all trustees,

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officers, leadership associates, managers, supervisors, associates, medical staff, house staff, contractors, volunteers, students and others. Members of Senior Management have specific duties related to compliance including:

- a) To support and maintain on a daily basis OLLHCS, Inc.'s culture as one of compliance to laws and regulations, open communication and zero tolerance of fraud, abuse and waste;
  - b) To work closely with and support the efforts of those with specific responsibility for the oversight and monitoring of the Corporate Compliance Program;
  - c) To support requirement for annual education;
  - d) To fairly evaluate leadership associates, managers and supervisors relative to their dealings with associates on Corporate Compliance efforts and to only promote those leadership associates, managers and supervisors who have demonstrated their support in this area; and,
  - e) To participate openly and on a timely basis with requests for information or investigations.
- 6) Because of the nature of the Corporate Compliance efforts, members of the Board of Trustees, Corporate Compliance Committee and designated Senior Leadership, along with the Chief Compliance Officer and Sub-Committee sign a confidentiality statement (See Exhibit A) to help assure confidentiality in dealings related to the Corporate Compliance Program and issues.
- 7) Other associates within OLLHCS, Inc., whether or not in a leadership position, are expected to act on a daily basis in a manner which indicates recognition and support of OLLHCS, Inc.'s Corporate Compliance efforts including adherence to the Code of Conduct, overall Corporate Compliance policies and specific departmental or issue-related policies.

**APPROVED BY:** \_\_\_\_\_  
Alexander J. Hatala, President and Chief Executive Officer

**ORIGINAL & REVISION DATE(s):** 03/22/00, 07/24/02, 07/27/05,

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7/31/08, 07/31/11

**NEW EFFECTIVE DATE:** 07/31/14

**REQUIRES REAUTHORIZATION IN:** 07/31/17

AS0005CCP  
Corporate Compliance Structure

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EXHIBIT A

**CORPORATE COMPLIANCE PROGRAM  
CONFIDENTIALITY STATEMENT**

I certify that I have read and understand the Corporate Compliance Structure Policy (OLLHCS, Inc. policy number A0005CCP) and agree to abide by it during the entire term of my employment or appointment as a Trustee. I acknowledge that I have a duty to keep confidential information obtained in dealings related to the Corporate Compliance Program and its issues.

It is the policy of OLLHCS, Inc. that all confidential information pertaining to patients, associates or OLLHCS, Inc. matters be held in strict confidence at all times. The release of such information will only be made with appropriate authorization without exception. Any trustee, officer, leadership associate, manager, supervisor, associate, medical staff, house staff, contractor, volunteer or student who improperly disseminates confidential information will be subject to immediate disciplinary action up to and including discharge. (See OLLHCS, Inc.'s policy "Confidentiality and Privacy" A0059ADM for further details)

Please check the appropriate box:

I certify that this is my first review of this policy following either initial adoption of this policy or my initial employment or appointment as a member of the Board of Trustees.

I certify that this is my annual review of this policy.

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Position

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