



Service Area: Compliance - General	YALE NEW HAVEN HEALTH SYSTEM POLICY & PROCEDURES	
Title: Non-Retaliation and Non-Retribution for Reporting		
Date Approved: 11/14/05, 05/18/15, 09/30/2016	Approved by: Board of Trustees: Yale New Haven Health Services Corporation	
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Distribution: MCN Policy Manager	System Policy Type (I or II): Type I	
Supersedes: N/A		

PURPOSE

The purpose of this Policy is to establish guidelines for the development of policies and procedures for achieving and maintaining ethical and compliant organizations; encouraging reporting of clinical, administrative, and fiscal issues; promoting problem solving and quality improvement as a means of dealing with potential compliance issues; and protecting those who report such issues.

Good faith reports of non-compliance or potential non-compliance, in and of themselves, do not constitute intentional wrongdoing or inadequate performance, and therefore may not be punished. This policy does not excuse false or malicious reports of non-compliance or any pattern of reports which indicates intent to embarrass or harass the target of the allegations. The protections of this policy address reports of non-compliance and are not meant to justify intentional wrongdoing or inadequate performance.

APPLICABILITY

This policy applies to YNHHS, and each of its affiliated entities, its affiliated hospitals (Bridgeport Hospital, Greenwich Hospital, Yale New Haven Hospital, Lawrence + Memorial Hospital, Westerly Hospital, and any other hospital that affiliates with YNHHS), its affiliated providers (including but not limited to Northeast Medical Group and Visiting Nurse Association of Southeastern Connecticut), and each of their subsidiary entities.

POLICY

Non-Retaliation and Non-Retribution for Reporting

It is the policy of Yale New Haven Health System (YNHHS) Delivery Networks (DNs) to prohibit any acts of retribution, discrimination, harassment, intimidation or retaliation against any employee who, in good faith, provides information or otherwise assists in an investigation or proceeding regarding any conduct which the employee reasonably believes to be in violation of any laws, regulations, or standards.

A good faith report means one where the employee believes or perceives to be true the information they report and where the report is not made for the sole purpose of harming the standing or reputation of the System, the Hospital, or of another employee or staff member. Reports of misconduct may not be punished. However, depending on the circumstances, the conduct which is the subject of the report may be punished by sanctions up to and including discharge from employment.

The protections of this policy do not apply:

- To untruthful or unfounded allegations of wrongdoing;
- To any allegations whose nature or frequency indicates an intent to harass or embarrass the hospital, the System, or their employees or affiliates;
- In instances where employees report their own lapses or complicity in unacceptable conduct. In such instances, the act of reporting will not be subject to sanctions, but the underlying conduct may still be subject to disciplinary action up to and including discharge from employment.

PROCEDURES

Each YNHHS Delivery Network shall establish and maintain procedures to implement policies that meet the guidelines described by this Policy.

Reporting Mechanisms Employees have a variety of reporting options; however, they are encouraged to take advantage of internal reporting mechanisms. These might include reports to Human Resources, Risk Management, Quality Management/Quality Improvement, Internal Audit, and Corporate Compliance. The Main OPCC number is (203) 688-8416. The Hotline Number is 1-888-688-7744.

Confidentiality Anyone who investigates errors, adverse events, near misses, unsafe conditions, and suspected instances of inappropriate conduct or activities shall maintain the confidentiality of those involved to the extent permitted by law and regulation and by the circumstances of the incident. Such information will be shared only with those persons with a need to know about the event.

RESPONSIBILITY

All employees are responsible for compliance with this policy.

Non-Retaliation and Non-Retribution for Reporting

REFERENCES

N/A

RELATED POLICIES

- Yale New Haven Health System Code of Conduct;
- Affirmative Action/EEO;
- Terminations Policy;
- Sanctions;
- Occurrence, Adverse Event and medical Device Reporting; YNHH Policy
- Non-Punitive Policy for Reporting Errors; BH Policy
- Non-Discrimination, Anti-Harassment, Non-Retaliation Policy and Complaint Procedure; BH Policy
- Discipline and Rules of Conduct GH HR policy
- Non-Punitive Policy for Reporting Errors; GH Administrative Policy

SOURCES

Federal and state laws and regulations, including, but not limited to, the Age Discrimination in Employment Act, Americans with Disabilities Act, Civil Rights Act, Employee Retirement Income Security Act, Fair Labor Standards Act, Family and Medical Leave Act, Occupation Safety and Health Act, National Labor Relations Act, False Claims Act, Public Health Service Act, and the Connecticut Labor Code.