



Procedure Title: Compliance Issue Resolution

Objective: To establish a framework for managing and responding to compliance issues reported to the Compliance Office.

Scope: Organizational

Definitions:

SHORE - Shore Memorial Health System, its not-for-profit subsidiaries, including Shore Memorial Hospital, D/B/A Shore Medical Center (“SMC”), Shore Memorial Health Foundation, D/B/A Shore Medical Center Foundation, Shore Health Services Corporation; and its for-profit subsidiaries, including Shore Health Enterprises and Shore Physicians’ Group (SPG)

CCO – Corporate Compliance Officer

CEO – Chief Executive Officer

CP - Compliance Program

PROCEDURE:

Employees may use any communication channel they deem appropriate to report issues. Retaliation or retribution for reporting issues in good faith is prohibited.

1. While the CCO is responsible for resolving compliance-related issues only, employees should not be discouraged from using compliance communication channels to report their non-compliance concerns. The CCO should redirect non-compliance related calls to the appropriate entity or department or redirect employees to the appropriate manager.
2. Any compliance issues related to the operation of the compliance program should be referred directly to the CCO.
3. To the extent practical or allowed by law, the CCO must maintain the confidentiality or anonymity of an employee when requested.
4. Issues received by the CCO or the CCO’s designee, including those reported through the Hotline, will be reviewed by the CCO or the CCO’s designee or referred to the appropriate SHORE entity or department for response.
5. The CCO will ensure that the following administrative steps are taken within one business day of receipt, or as soon as practical to ensure that all matters, including Hotline calls, will be resolved in a timely manner:
 - a. Assign a unique file number to facilitate management of the issue to resolution;

- b. Log the matter into a tracking system to facilitate tracking the issue to resolution and reporting to oversight bodies;
 - c. Assign for review or other action as appropriate;
 - d. Establish and track deadlines to ensure timely resolution; and
 - e. File in a manner that facilitates security, maintenance and retrieval of information.
6. As a general rule, issues should be resolved within ten business days. If the matter cannot be resolved within ten business days, an interim response should be prepared within the 10-day timeframe. The interim response should include what actions are planned for reviewing the concern and an estimate of when the matter will be resolved.
7. Upon report or notice of suspected noncompliance with any criminal, civil or administrative law, the CCO will conduct an “Initial Inquiry” into the alleged misconduct.
8. If, during the Initial Inquiry, the CCO determines that there is sufficient basis to warrant further investigation, the issue should be referred to legal counsel in anticipation of litigation and a memorandum to this effect should be executed.
9. The CCO should involve various members of the management and employee population when appropriate to resolve issues.
10. For compliance-related issues, the CCO or the CCO’s designee will conduct or oversee an initial inquiry that may include document review, interviews, audit or other appropriate investigative techniques. The CCO or designee should:
 - a. Conduct a fair and impartial review of all relevant facts;
 - b. Restrict the inquiry to those necessary to resolve the issue;
 - c. Conduct the inquiry in a manner that respects confidentiality and anonymity as requested.
11. The CCO should ensure that the following are accomplished:
 - a. Fully debrief complainant when available;
 - b. Notify appropriate internal parties;
 - c. Identify cause of problem, desired outcome, affected parties, applicable guidelines, possible regulatory or financial impact;
 - d. Determine the necessary corrective action measures (e.g., training/education, policy changes, operational changes, system changes, personnel changes)
 - e. Develop a complete list of findings and recommendations;
 - f. Document the inquiry;
 - g. Ensure that recommended corrective action has been considered by management and appropriate action taken in a timely manner;
 - h. Independently verify completion of recommended and agreed upon correction action; and
 - i. All inquiry records are maintained securely in accordance with the Compliance Office Records Management policy.

- j. If the person who filed the compliance concern does not agree with the determination of the investigation they may submit an appeal to the Chairman of the Compliance & Ethics Committee.

Reference:

SHORE is committed to an organizational culture that promotes prevention, detection and resolution of misconduct. Communication channels for employees to report problems and concerns are important elements of an open culture and of the compliance program. Employees are encouraged to report issues via the normal chain of command, to Human Resources, the Hotline or directly to the Corporate Compliance Officer. The CCO is responsible for facilitating resolution of issues and problems arising from expressed employee concerns, complaints, and allegations (hereafter “complaints”). For confirmed complaints, the CCO is also responsible for determining whether the problems are systemic and warrant additional examination or broader action.