PROGRAM: Orientation		LOCATION		
CLASS TITLE: Legal and Ethical Considerations		LENGTH OF TIME:		
INSTRUCTOR:		AUDIENCE:		
PERFORMANCE STANDARD/ OBJECTIVE	COURSE CONTENT	TEACHING METHODS	EVALUATION	
After this program the attendee will be able to:  • Define the terms "Legal" and "Ethical"  • Identify one (1) specific act of legal negligence • Identify one (1) specific act an ethical consideration	Introduction to Legal and Ethical Considerations/Compliance  Video https://youtu.be/ZLZj43PK-Pg  Definitions:  1. Legal requirements is a law enforced by the Federal and State government which all individuals must obey  2. Ethical consideration is a system of moral principles governing conduct in which and individual has a choice.  3. Code of Conduct: See employee handbook Legal (some examples)  4. Abuse: all types  5. Negligence  6. Theft of resident or facility property  7. Fraud- License, SSN etc.	Lecture/Discussion  QAPI handout  Handbook signature page  Arbitration signature page  ANTI-KICKBACK AND FALSE CLAIMS acknowledgment  Video  https://youtu.be/ZLZj	Q&A  Define the terms "Legal" and "Ethical"  Identify one (1) specific act of legal negligence  Identify one (1) specific act of ethical consideration	
	Ethical (some examples)	43PK-Pg		

8.	Resident	choice	of tube	feeding	or not
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9. Resident choice of CPR

HIPAA video

#### **Ethical Behavior Toward Residents:**

- 10. Treat residents with respect
- 11. Perform your duties with a standard of excellence
- 12. Respect resident choices even when they are different from yours
- 13. Respond resident's needs- quickly
- 14. Be professional
- 15. Be positive
- 16. Remember the resident's wellbeing is your top priority

## **Alternative Dispute Resolution (see handbook)**

• In an effort to eliminate employer/employee grievances, a signed Alternative Dispute Resolution Form, (ADR), is required by each employee as a condition of employment. An ADR form is an agreement signed by employee and employer agreeing to arbitration as a method of resolving differences.

Employees are encouraged to notify the facility administration or call the employee 800 number if they believe any employee or the employer is violating a state or federal statue or violating or not complying with local, state or federal rule or regulation.

Examples of activities that the facility incorporates to identify areas of noncompliance.

1. Medicare Audit-An internal peer review in IDT fashion of Medicare Part A and B claims. Trends that are identified have action plans developed to address those trends.

HIPAA acknowledgment

- 2. Facility Quality Review is facility peer review that identifies trends in compliance with action plans to address those trends. Best practices are also shared with the facility and facility staff.
- 3. Facility Quality Improvement Process (CQI). Also called QAPI or QA.
  - a. QAPI is the merger of two complementary approaches to quality management, Quality Assurance (QA) and Performance Improvement (PI). Both involve using information, but differ in key ways: PI (also called Quality Improvement QI) is a pro-active and continuous study of processes with the intent to prevent or decrease the likelihood of problems by identifying areas of opportunity and testing new approaches to fix underlying causes of persistent/systemic problems. PI in nursing homes aims to improve processes

• Teamwork is a core component of QAPI. Leadership is expected to build effective teams among the departments and caregivers. Schedules are to be modified so that Certified Nursing Assistants can participate in Resident care plan conferences. Certified Nursing Assistants will be asked to participate in quality improvement projects to help identify the root cause of problems or in problem solving.

## **Policy Against Submission of False Claims**

False Claims act (See the location of the current California and Federal Employment Notices located in the break room) Review employee handbook.

Submitting false claims of any type is expressly prohibited. Any employee found to participate in any way in the submission of false claims will be subject to appropriate discipline up to and including termination.

Both the state and the federal governments have enacted laws called the "False Claims Act" that prohibit individuals or organizations who receive reimbursement from the state and/or federal government from submitting a request for payment knowing that it contains false information. The California False Claims Act differs slightly from the federal False Claims Act; however, most of the provisions overlap. The following are common to both laws and are relevant to employment with the Company.

Under both laws, "knowing," "knowingly," or "knowledge" means that the person or organization:

- 1. Has actual knowledge; or
- 2. Acts in deliberate ignorance of the truth or falsity of the information; or
- 3. Acts in reckless disregard of the truth or falsity of the information

Individuals or organizations who knowingly submit a false claim can be assessed fines of between \$5,500 and \$11,000 per claim submitted. In addition to the per-claim fines that may be assessed, both laws permit the federal and/or state government to collect up to three (3) times the total amount of damage sustained.

Examples of knowingly submitting a false claim include, but are not limited to:

- 1. Submitting a claim for services that were not rendered or provided as claimed;
- 2. Submitting duplicate claims for the same service;
- 3. Submitting claims for equipment, medical supplies and services that are medically unnecessary; and
- 4. Coding a service or a patient's diagnosis as "more complex" than documentation supports in order to receive higher reimbursement.

Both the California and the federal False Claims Act have "qui tam" or "whistleblower" provisions. These provisions allow an individual with knowledge of the submission of a false claim to bring a lawsuit on behalf of the state or federal government. If the lawsuit is successful, an individual may share in the percentage of fines collected.

The qui tam provisions under both laws provide protection to employees who may be fired, demoted, harassed or otherwise threatened by an employer because of an employee's participation in a qui tam lawsuit.

#### Measures to Detect, Prevent and Report Fraud, Waste and Abuse

The Company expects its employees to help prevent, detect, and report violations of state and federal law, including, but not limited to, the state and federal False Claims Acts. The following is a summary of our Compliance Program and the measures and processes that the Company has in place to accomplish this:

- The Company has appointed a Compliance Officer to investigate compliance and ethics concerns including concerns of fraud and abuse;
- The Company has established a hotline for employees to report concerns anonymously;
- The Company has created a Code of Conduct to educate employees on appropriate conduct expected of all employees;
- The Company screens employees to ensure an individual excluded from participation in state and/or federal health care programs is not hired;
- The Company conducts clinical quality and billing oversight monitoring and auditing activities;
- The Company investigates and responds to concerns reported;
- The Company develops and implements corrective action plans, policies and procedures and training, as necessary; and
- The Company disciplines employees for non-compliant activities.

# Reporting Compliance and Ethics Concerns (See employee handbook)

• All employees, management, agents and contractors are required

to report potential compliance and ethical violations, including reporting incidents of mistreatment, neglect, or abuse of residents and injuries of unknown sources. Such violations may also include management, employees and/or contractors violating Company policies and procedures, the Company's Code of Conduct, state and/or federal laws and regulations, or accreditation standards, including potential fraud and abuse violations and quality of care standards.

- Potential violations or concerns should be reported to your immediate supervisor, company Supervisor, Sun Mar Healthcare's Compliance Officer or anonymously via the compliance hotline at 1-888-225-7363.
- Compliance and ethics concerns reported will be evaluated and investigated. Appropriate disciplinary and/or corrective action will be taken when allegations are substantiated, or other compliance concerns, as appropriate. Retaliation for reporting concerns is not tolerated.

# HIPAA/Confidential Information (See employee handbook)

• The information employees work with is confidential and protected by law. All information obtained by virtue of your employment by the Company must be held in strict confidence and should not be revealed to unauthorized persons. In accordance with HIPAA guidelines, employees are not permitted to give out any information concerning the condition of a patient, his or her doctors' orders, or nursing care received. All questions regarding this information shall be directed to the charge nurse on duty and/or in turn to the Director of Nursing and the Supervisor.

Do not give information to the newspapers, magazines, or television or radio reporters. Direct such inquiries to the Supervisor.

### **Conflicts of Interest (see employee handbook)**

• A conflict of interest is a conflict between the private interests and the official responsibilities of a person in a position of trust with the Company. Employees are expected to devote their full efforts, energies, and loyalty to the Company.

It is the Company's policy that employees may not engage in activities that would result in direct competition with their employer. Due to the importance of this requirement, the Company strictly prohibits any outside employment or other activities or relationships that create any actual, potential or apparent conflict of interest.

### **Cell Phones (see handbook)**

• In order to give our residents the best possible care and due to the potential for issues such as invasion of privacy (employee and resident), employees may not take, distribute, or post pictures, videos, or audio recordings while on working time. Employees may also not take pictures or make recordings of work areas. Further, in order to protect the confidentiality of our residents, no cell phones with recording devices, such as cameras or audio/video recorders, shall be used in resident areas by employees. In addition, using a cell phone to make personal calls, texts, or emails, and/or to post on social media is prohibited in resident areas, regardless of whether the employee is on or off duty. An exception to the rule concerning pictures and recordings of work and resident areas would be to engage in

activity protected by the National Labor Relations Act including, for example, taking pictures of health, safety and/or working condition concerns or of strike, protest and work-related issues and/or other protected concerted activities.		
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