LAC+USC MEDICAL CENTER POLICY

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Subject: CODE OF ORGANIZATIONAL ETHICS AND PROFESSIONAL BEHAVIOR		Original Issue Date:		Policy #		
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Departments Consulted:	Reviewed & Approved by:		Approved by:			
Ethics Resource Committee	Attending Staff Association		(Signature on File)			
Fetus/Infant/Child Ethics	Executive Corr	nmittee	Chief Medical Officer			
Committee	Senior Executive	Council				
Health Information Management			(Signature on File)			
Nursing Services			Chief I	Chief Executive Officer		

<u>PURPOSE</u>

To ensure that patient care activities and administrative operations are conducted within a consistent ethical framework.

<u>POLICY</u>

All employees, attending staff, and volunteers shall at all times put the patients' health and well being first and shall conduct patient care and all administrative operations in an ethical manner consistent with the mission, vision, values, strategic plan, goals, and related policies of the LAC+USC Medical Center.

RESPONSIBILITY

The ethical integrity of the Medical Center depends upon each employee, attending staff, and volunteer regardless of title or job description, assuming his or her responsibility to demonstrate ethical behavior; reporting illegal activities to his or her supervisor and/or the Los Angeles County Sheriff's Department (LASD); referring ethical issues or concerns to supervisor, administrator, and/or the Medical Center Ethics Committees.

Ethical behavior encompassed by this Code may be categorized in the following areas:

- Patient Rights
- Quality of Services
- Legal Requirements
- Human Resources
- Use of Assets
- Treatment and Work Environment
- Public Relations
- Conflict of Interest
- Integrity of Clinical Decision Making
- Accountability

Patient Rights

 Ensure the rights of patients to inquire about, and be informed of, the existence of organizational and contractual relationships among the hospital, educational institutions, other health care providers, payers, and other Medical Centers that may influence the patient treatment or care. • Ensure compliance with laws, regulations, standards, and policies regarding patient rights.

Quality of Services

- Maintain the integrity and quality of job performance, and always give the best effort in the performance of duties
- Comply with all applicable laws, regulations, and standards.
- Assure that only qualified individuals practice in facilities and programs.
- Uphold sound standards of professional practice.
- Provide appropriate service by assessing the needs and requirements of patients and seeking patient and family input.

Legal Requirements

- Uphold all laws, regulations, and standards.
- Prepare and maintain all data, records, and reports accurately and truthfully, adhering to applicable standards.
- Preserve the confidentiality of all data, where applicable.
- Preserve and retain records for required time periods.
- Never use classified information for personal gain or gain for others.

<u>Human Resources</u>

- Show respect and consideration for one another, regardless of position, station, or relationship.
- Recognize and respect the diversity of employees, staff, patients, and communities.
- Prohibit discrimination on the basis of gender, age, disability, economic status, educational background, race, color, religion, ancestry, national origin, sexual orientation, gender identity, or marital status, veteran status, or any characteristic.
- Create a workplace free of sexual harassment and violence.
- Observe the standards of each profession, and exercise judgement and objectivity.
- Take advantage of opportunities to develop skills, knowledge, and understanding of the job, within available resources.
- Encourage fellow employees to develop their potential.
- Create a work environment where ethical concerns may be raised and discussed openly.
- Be a good citizen in every environment in which services are provided or administrative matters are conducted.

Use of Assets

- Protect patient property and handle all such property according to established policy.
- Protect proprietary information entrusted by actual and potential vendors, referral sources, contractors, service providers, and others.
- Preserve assets, property, facilities, equipment, and supplies.
- Establish procedures to ensure accountability for the assets of others and authorize only the correct use of these assets.

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• Dispose of surplus or obsolete property, or property in disrepair, according to established policies and procedures.

Treatment and Work Environment

- Maintain a safe and healthy patient care and work environment, which fosters privacy, security, and comfort for everyone.
- Ensure the development and implementation of policies and procedures to reduce hazards to the health and safety of patients, employees, volunteers, and the public.
- Uphold all policies, procedures, laws, regulations, standards, and reporting requirements applicable to buildings, property, laboratory processes, chemicals, medical equipment, and products.
- Give patient safety issues high priority by ensuring that processes, functions, and services minimize and prevent errors.
- Ensure that drugs and pharmaceuticals are safely and legally stored and inventoried, and that
 missing supplies are reported promptly.
- Dispose of medical waste, environmentally sensitive materials, and hazardous materials in compliance with laws, regulations, standards, and policy.

Public Relations

- Ensure that all policies relating to public relations, media access, marketing, advertising, and public statements are complied with at all times.
- Conduct all public relations and associated practices with truth, accuracy, and fairness to patients, the community, and the public, ensuring the fundamental value, privacy, and dignity of patients and staff, and the freedom of speech, assembly, and the press.

Conflict of Interest

• Ensure compliance with laws, regulations, and standards regarding conflict of interest.

Integrity of Clinical Decision Making

• Ensure that quality of care and clinical decisions, including tests, treatments, and other interventions are based solely on health care needs, and are not compromised by concerns for revenue generation or financial risk.

Accountability

- Medical Center administration, attending staff, housestaff, allied health professionals, nursing staff, all employees, volunteers, and students are accountable for the implementation of this Code.
- Oversight of utilization management (over and under utilization) to monitor service use to ensure medical necessity shall be maintained.
- Medical Center leaders shall take appropriate action when issues are identified, or recommendations are made and shall develop and implement plans to ensure the adherence to the organizational and ethical goals of related policies.

• Each facility is responsible for maintaining systems that implement and monitor all (but not limited to) aspects of this Code.

Ethics Committees

In accordance with Attending Staff Association Bylaws the Ethics Committees are available to assist patients, family members, or employees in the resolution of difficult or ethical decisions and problems, including any that arise in the implementation of this Code. These committees are also available to facilitate discussions and participate in the resolution of issues related to Organizational Ethics.

There are two Medical Center Ethics Committees:

- 1. The Fetus/Infant/Child Ethics Committee and
- 2. The Ethics Resource Committee

Each Ethics Committee shall meet as often as necessary at the call of its chairperson, but at least ten times per year; shall maintain a permanent record of its proceedings and actions; and shall submit reports to the Attending Staff Association Executive Committee on its activities.

Institutional Review Board

All research involving human participants must be reviewed and monitored by the Institutional Review Board (IRB). The IRB has the authority to approve, require modifications in, or disapprove any research involving human participants. IRB membership must meet federal policy requirements for knowledge in issues affecting the research participants, diversity, and representation from the public. The IRB process is designed to protect the rights and welfare of human participants of research by safeguards such as minimizing risks, selecting participants equitably, obtaining informed consent, and ensuring privacy and confidentiality. IRB policies and procedures are governed by the Code of Federal Regulations (45 CFR 46) in accordance with the Institutional Multiple Project Assurance of Compliance with the Department of Health and Human Services.

REFERENCES

45 Code of Federal Regulations Part 164, Security and Privacy [Health Insurance Portability and Accountability Act of 1996 (HIPAA)] Joint Commission Standards (Rights and Responsibilities of the Individual) Relevant Professional Codes of Ethics

REVISION DATES

September 1, 1995; November 13, 1998; April 9, 2002; February 22, 2005; September 30, 2008; January 13, 2015; July 14, 2015; July 23, 2021