



COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES

Christina R. Ghaly, M.D.

Director

Los Angeles County Department of Health Services

Policy & Procedure Title:		DHS Compliance Program/Code of Conduct	
Category:	1000-1099 Compliance	Policy No.:	1000.00
Originally Issued:	1/9/2007	Update (U)/Revised (R):	08/01/2019
DHS Division/Unit of Origin:	Patient Safety, Risk Management and Compliance		
Policy Contact – Employee Name, Title and DHS Division:			
Arun Patel, M.D., Director, Patient Safety, Risk Management and Compliance			
Contact Phone Number(s):	(213) 288-8283		
Distribution: DHS-wide	<input checked="" type="checkbox"/>	If not DHS-wide, other distribution:	

PURPOSE:

The purpose of this policy is to establish the Department of Health Services' (DHS) structure and standard practices pertaining to a Department-wide Compliance Program. The DHS Chief Compliance Officer has the responsibility and full authority to administer, direct, and enforce the DHS Compliance Program.

POLICY:

The purpose of this policy is to establish the Department of Health Services' (DHS) structure and standard practices pertaining to a Department-wide Compliance Program. The DHS Chief Compliance Officer has the responsibility and full authority to administer, direct, and enforce the DHS Compliance Program.

The DHS Compliance Program has been established as a comprehensive strategy to ensure that the Department meets the highest standards for all relevant Federal, State, and County laws, regulations, rules, policies and the DHS Code of Conduct.

As DHS workforce members, we have the duty to conduct ourselves with the highest ethical standards, integrity, and compassion.

The Compliance Program will continue to develop and refine the processes necessary for detecting and correcting noncompliant conduct, including fraud, waste, and abuse.

The DHS Compliance Program consists of the following elements:

- I. A Chief Compliance Officer and Compliance Committee.

The mission of the Los Angeles County Department of Health Services is to ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

Revision/Review Dates: 01/08/2007 08/01/2019

Department Head/Designee Approval:

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- II. A Code of Conduct, as well as compliance policies and procedures
 - III. Education and training programs for all members of the DHS workforce
 - IV. Effective lines of communication, including a hotline to report compliance-related complaints and suspected or actual violations.
 - V. A system to respond to allegations of improper/illegal activities and to develop effective corrective action plans, as necessary
 - VI. Audits and other evaluation techniques to monitor and ensure compliance
 - VII. Consistent and equitable enforcing through appropriate disciplinary action

The overall goal of the DHS Compliance Program is to ensure that DHS establishes a culture that promotes the prevention, detection, and resolution of any activities that do not conform to all relevant Federal, State, and County laws, regulations, rules, and policies. The Compliance Program provides a framework for distributing information and establishes mechanisms for investigating potential noncompliance. By supporting a business culture of compliance, employees are encouraged to further the DHS mission of ensuring access to high-quality, patient-centered, cost effective health care to Los Angeles County residents.

The seven preceding program elements will be implemented per the following processes:

I. Chief Compliance Officer and Compliance Committee

The Chief Compliance Officer is a senior member of DHS management, who provides annual reports to the Board of Supervisors on compliance matters and reports directly to the Director, DHS, or designee. Additionally, each DHS hospital and the Ambulatory Care Network (ACN) has a senior manager serving as the Local Compliance Officer to assist in coordinating and directing the Compliance Program. The Local Compliance Officers are responsible for leading and implementing compliance-related activities at each of their respective facilities.

The Chief Compliance Officer is responsible for overseeing, implementing and monitoring the DHS Compliance Program. The Chief Compliance Officer leads the Compliance Program activities including policy development/revision, audits/investigations, risk assessments, staff training, updating the Code of Conduct, serving as liaison between DHS and outside auditors, and other related actions. This role also has direct access to DHS executive leadership where Compliance-related projects, concerns, and information will be shared on a regular basis.

A Compliance Committee, comprised of the Chief and Local Compliance Officers and other representatives from key areas of DHS and the County such as Finance, physicians, nursing, operations, the Audit and Compliance Division, and County Counsel meets periodically (at least quarterly) and is responsible for guiding and assisting in the implementation of the Compliance Program, development of Compliance policies, risk assessments, work

plans/schedules and mitigation plans. Some of the responsibilities of the Compliance Committee include:

- Actively analyze changes in the health care environment and the legal requirements and sharing new insights with the Committee. Presentations may include an overview of legal matters and recommendations for DHS compliance actions.
- Actively analyze potential areas of compliance risk, lead discussions, recommend corrective actions, and resource allocation based on these risks. Consider use of third-party experts for audits and investigations of specialized areas.
- Actively participate in the development of policies to promote compliance with applicable laws and regulations.

II. Code of Conduct

The DHS Code of Conduct specifies acceptable behavior standards under which DHS conducts its very diverse business. Each workforce member has a personal responsibility to know and comply with all relevant Federal, State, and County laws, regulations, rules, and policies and the Code of Conduct, as applicable to his/her job functions. It's also important that workforce members, report any activity that appears to violate these laws, regulations, rules, policies or the Code of Conduct.

All workforce members are to receive the Code of Conduct at the start of service. At the completion of the Compliance Awareness Training (discussed in Section III below), each workforce member will sign an attestation stating that they will abide by the Code of Conduct as it relates to their job responsibilities and that they understand that non-compliance with the Code of Conduct can subject them to corrective action up to and including discharge from service. Compliance Awareness Training is not a substitute for the Code of Conduct.

The Compliance Program will review the Code of Conduct annually and will revise it, as needed, to ensure that its contents remain current with Federal, State, and County laws, regulations, rules, and policies and best practices.

III. Education and Training

All workforce members are required to complete the Compliance Awareness Training within 60 days of their start of service. The DHS Orientation/Re-Orientation Training will provide annual refresher trainings.

These trainings will ensure that workforce members are aware of compliance issues they may encounter on the job and enable them to understand their respective role(s) in the Compliance Program. Additionally, compliance-related education on various topics (e.g., Electronic Health Records, coding, billing, information security, HIPAA, etc.), will be provided on an as needed basis.

IV. Effective lines of communication, including a hotline to report compliance-related complaints and suspected or actual violations

Workforce members have several resources they can use to obtain guidance on ethics or compliance issues or to report a suspected violation. These resources include his/her supervisor or manager, the Local Compliance Officer, the Audit and Compliance Division or the DHS Compliance Hotline.

The Audit and Compliance Division manages the toll free DHS Compliance Hotline (800) 711-5366. Additionally, workforce members can seek information or make a report to the Audit and Compliance Division at (213) 240-7901. Reporters have the option to remain completely anonymous when submitting a report and every attempt will be made to maintain the reporter's confidentiality, within the limits of the law and the practical necessities of conducting the investigation. Due to these limitations, DHS cannot guarantee confidentiality.

The Los Angeles County Fraud Hotline at (800) 544-6861 is maintained by the Auditor-Controller and it serves as another site to make reports of compliance violations. This site also allows anonymous reports.

Non-Retaliation—DHS will not retaliate against anyone who reports a suspected violation in good faith. Workforce members are protected from retaliation by County Code Section 5.02.060, as well as by the State of California and federal "whistle-blower" protections.

V. A system to respond to allegations of improper/illegal activities and to develop effective corrective action plans, as necessary

DHS will investigate all reports of alleged improper/illegal activities to determine their validity and will treat all reports seriously and appropriately.

Generally, the Audit and Compliance Division will investigate suspected compliance violations. They may refer a case for investigation to the County Equity Oversight Panel/County Intake Specialist Unit, relevant DHS facility/program, County Counsel, the Office of County Investigations or other unit with appropriate specialty skills and/or responsibilities

County Code Section 9.040, addresses investigations of possible criminal activity within County government and it requires allegations of compliance violations involving criminal conduct be reported to the Auditor-Controller's Office of County Investigations (OCI) prior to DHS initiating internal actions. DHS will manage such cases per OCI's disposition along with County Counsel's guidance, as needed.

The Audit and Compliance Division will maintain records of the nature and results of any completed investigations. A report of the result of the investigation and recommended corrective actions (e.g., disciplinary actions, operational changes, repayments, self-disclosures, etc.) will be forwarded to appropriate management.

VI. Audits and other evaluation techniques to monitor and ensure compliance

The Audit and Compliance Division, in consultation with the DHS Compliance Committee, periodically conducts a risk-assessment and develops an annual Compliance Work Plan to validate compliance with various laws, regulations and DHS policy. In addition, each DHS facility monitors for compliance in various areas, as part of their ongoing management and oversight activities.

VII. Consistent and equitable enforcement of standards through appropriate corrective action

Where there are violations of law, regulation, policy, or the Code of Conduct, particularly those relating to health care business practices, DHS will ensure appropriate corrective action is taken in accordance with its Discipline Manual and Guidelines.

Corrective actions will be administered within the context of a Just Culture protocol by hiring managers and Human Resources to ensure that reasonability, respect, dignity, and appropriateness are embedded in the process and outcome.

REFERENCE(S)/AUTHORITY:

Department of Health and Human Services
Office of the Inspector General, Compliance Program Guidance
Deficit Reduction Act of 2005
County Code Section 5.02.060
County Code Section 9.040

