

ELLENVILLE REGIONAL HOSPITAL

TITLE: Whistleblower Policy	Page 1 of 2
DEPARTMENT: Administration	
APPROVED BY: John Gavaris, Director of Support Services & Corporate Compliance Officer	EFFECTIVE: 1/09
REVIEWED: 1/10, 7/11, 5/14, 9/15, 7/16, 7/19, 7/20	REVISED: 1/11, 9/12, 7/13, 9/13, 7/17, 7/18

Statement and Purpose:

To provide an avenue for employees to raise concerns about issues that are deemed illegal and/or dishonest. Employees have the reassurance that they will be protected from reprisals or victimization for whistleblowing.

Policy:

Ellenville Regional Hospital (ERH) demands the highest ethical conduct from its employees, medical staff, Board of Trustees, Foundation Board of Directors, students, volunteers, representatives and contractors, including compliance with all federal, state and local laws and ERH's own policies and procedures. If any of the above are aware of any such breach or potential breach of such law, policy or procedure with respect to ERH, they should bring such problem to the attention of the Corporate Compliance Officer. In the event that Corporate Compliance Officer is unable to address the issue satisfactorily, individuals can ask to speak with the Chief Executive Officer. ERH will not tolerate any form of retaliation against an individual who avails him/herself of this procedure. The procedure should not be construed, however, as preventing, limiting or delaying ERH from taking any disciplinary action against any individuals, where ERH deems disciplinary action is appropriate.

Definitions/Examples:

A whistleblower as defined by this policy is an employee of Ellenville Regional Hospital who reports an activity that they consider to be illegal or dishonest to one or more of the parties specified in this Policy. The whistleblower is not responsible for investigating the activity or for determining fault or corrective measures; Corporate Compliance Officer is charged with these responsibilities.

Examples of illegal or dishonest activities are violations of federal, state or local laws; billing for services not performed or for goods not delivered; and other fraudulent financial reporting.

Safeguards:

Harassment or Victimization - Harassment or victimization for reporting concerns under this policy will not be tolerated. Human Resources and the Corporate Compliance Officer will be responsible to monitor and ensure harassment or victimization does not occur.

Confidentiality - Every effort will be made to treat the complainant's identity with appropriate regard for confidentiality.

Anonymous Allegations - This policy encourages employees to put their names to allegations because appropriate follow-up questions and investigation may not be possible unless the source of the information is identified. Concerns expressed anonymously will be explored appropriately, but consideration will be given to:

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- The seriousness of the issue raised;
- The credibility of the concern; and
- The likelihood of confirming the allegation from attributable sources.

Bad Faith Allegations - Allegations in bad faith may result in disciplinary action.

Procedure:

Process for Raising a Concern

Reporting- The whistleblowing procedure is intended to be used for serious and sensitive issues. Such concerns, including those relating to financial reporting, unethical or illegal conduct, may be reported directly to the Corporate Compliance Officer using one or more of the following methods:

- Call the Confidential Compliance Hotline at 845 647-6400 extension 400
- Writing a letter
- In-person visit
- Sending an e-mail to compliance@ellenvilleregional.org

Employment-related concerns should continue to be reported through your normal channels such as your Supervisor, Manager, Department Head or the Vice President of Human Resources.

Timing - The earlier a concern is expressed, the easier it is to take action.

Evidence - Although the employee is not expected to prove the truth of an allegation, the employee should be able to demonstrate to the person contacted that the report is being made in good faith.

How the Report of Concern Will be Handled

The action taken by ERH in response to a report of concern under this policy will depend on the nature of the concern. The Board of Trustees of ERH shall receive information on each reported concern and follow-up information on actions taken.

Initial Inquiries - Initial inquiries will be made to determine whether an investigation is appropriate, and the form that it should take. Some concerns may be resolved without the need for investigation.

Further Information -The amount of contact between the complainant and the person or persons investigating the concern will depend on the nature of the issue and the clarity of information provided. Further information may be sought from or provided to the person reporting the concern.