

DEKALB REGIONAL HEALTH SYSTEM

2701 North Decatur Road
Decatur, GA 30033

POLICY NUMBER PRB-6000

- DeKalb Medical at North Decatur
- DeKalb Medical at Downtown Decatur

- DeKalb Medical at Hillandale
- DeKalb Medical Physicians Group

CODE OF CONDUCT:

PROFESSIONAL AND ETHICAL BEHAVIOR, STANDARDS OF CONDUCT, AND DRESS CODE

I. PURPOSE/OBJECTIVE

DeKalb Regional Health System and all of its affiliates and subsidiaries (collectively, “DeKalb Medical”) is committed to its Vision of being the healthcare provider of choice for its patients by delivering a superior patient experience every time in partnership with the best physicians, employees, volunteers, and vendors. That Vision is reflected in the everyday Mission of earning our patients’ trust through our uncompromising commitment to quality expressed through our **IREACH Standards of Behavior**.

II. POLICY

In support of the DeKalb Medical Mission and Vision, the organization and its staff commit to conduct business and patient care practices in an honest and professional manner in compliance with federal and state, laws, rules and regulations, as well as ethical and business standards, in all areas including relationships and interactions with patients, visitors, other employees and healthcare providers, payors and other organizations that interact with DeKalb Medical. While this Code of Conduct does not address every possible situation, it defines the core Values of DeKalb Medical – including those of its Compliance Program and its Standards of Behavior. In all circumstances, DeKalb Medical staff will engage in interactions in a trustful, respectful, compassionate way and with a genuine commitment to listen to and respond to the needs of others. The organization and staff commit to the **IREACH Standards of Behavior: Integrity, Respect, Excellence, Accountability, Compassion, and Helping Hands**. All DeKalb Medical staff will carry out their responsibilities utilizing the following framework:

THE IREACH STANDARDS OF BEHAVIOR

- A. **INTEGRITY** – Integrity is the foundation on which we uphold the trust that our patients place in us to provide care for them. Each DeKalb Medical representative will:
 - 1. “Do the right thing” by always providing care and conducting DeKalb Medical’s business in a legal and ethical manner – when in doubt, ask questions!
 - 2. Be truthful and accurate in all interactions. This includes, but is not limited to, interactions with patients, families, and third parties, as well as in documentation, public advertising and sharing of information.
 - 3. Disclose to patients and families available information regarding rights and responsibilities, services, admission, discharge, transfer, delays, and complaint/grievance processes.
 - 4. Make and accept referrals in the best interest of each patient.
 - 5. Avoid activities that lead to an actual or apparent conflict of interest including, but not

limited to, receiving inappropriate gifts or monetary compensation from outside parties such as vendors, medical staff members, or even patients and their families.

6. Assure that services are not compromised for financial reasons.
7. Report any and all concerns regarding any legal, compliance, operational, patient safety, or any other issue to the appropriate parties and leadership will ensure that such employees are not retaliated against for reporting.

B. **RESPECT** – Respect honors the diversity of our community and embodies our appreciation for the individual dignity of all persons we work with and serve. Each DeKalb Medical representative will:

1. Respect and honor the inherent dignity of each individual we work with and those we serve.
2. Remain sensitive to, and appreciative of, the ethnic, cultural, and lifestyle diversity of patients, their families and other DeKalb Medical representatives.
3. Determine and, to the extent possible, honor the wishes, concerns, priorities, and values of patients and their families.
4. Support, affirm, and empower authorized individuals as caregivers when it is in the best interest of the patient.
5. Respect and protect the privacy of patients and families by keeping patient information confidential and being careful about the setting of where patient conversations occur.
6. Attend and end scheduled commitments, events, and meetings on time.
7. Resolve conflicts and misunderstandings in a professional manner that seeks the best possible compromise or solution, utilizing those skilled in resolving conflict and the chain of command as appropriate.
8. Respect leadership and the chain of command and will not engage in any behavior that is rude, impolite, argumentative, or in any way unprofessional when interacting with leadership or coworkers.
9. Not engage in any behavior that diminishes the reputation of DeKalb Medical or is disrespectful of any other DeKalb Medical representative.

C. **EXCELLENCE** – Excellence embodies our vision of delivering a superior patient experience every time and our Mission to deliver care with an uncompromising commitment to quality. Each DeKalb Medical representative will:

1. Be dedicated to clinical excellence and hold one another accountable for adhering to our expected standards of professionalism, service and clinical care.
2. Recruit, orient, educate, and evaluate each DeKalb Medical representative with a focus on a commitment to excellent service and quality.
3. Provide value to our patients, customers, and their families through prudent management of resources and documentation of quality care.
4. Carry out job responsibilities with pride and a positive attitude while working collaboratively with others to achieve DeKalb Medical's goals.
5. Demonstrate uncompromising professionalism at all times when representing DeKalb Medical.

D. **ACCOUNTABILITY** – Personal and organizational accountability is the way we hold ourselves responsible for our actions in achieving the goals of DeKalb Medical. Each DeKalb Medical representative will:

1. Execute job responsibilities in an ethical manner and in compliance with all policies and rules.
 2. Report concerns, violations, and potential problems of all types up the chain of command, through the SAFE reporting system, or to the Corporate Compliance Hotline.
 3. Have a sense of urgency and ownership in their work, demonstrated by prompt attention to matters assigned, diligently following through with assignments, and conducting themselves with appropriate professional standards and decorum.
- E. **COMPASSION** – Compassion shows our patients and our colleagues that we care about them as individuals. Each DeKalb Medical representative will:
1. Show we care through words, actions, body language and tone of voice.
 2. Provide an environment of healing by acknowledging and responding with sensitivity to the interruption of privacy that is necessitated by care.
 3. Provide quality services in a timely manner to all of our patients and customers, regardless of insurance coverage or ability to pay.
 4. Recognize the stresses inherent in health care service and provide access to ongoing support mechanisms as needed.
 5. Listen and take verbal cues from patients regarding their personal needs and consider this when prioritizing care or delivery of services.
- F. **HELPING HANDS** – Providing high quality, high service health care is a team sport. Only by working together as a team can we accomplish our Mission, Vision and Goals. Each DeKalb Medical representative will:
1. Support, affirm, and empower ourselves, colleagues, staff, volunteers, patients, and families in the delivery of care.
 2. Offer assistance to team members before being asked.
 3. Celebrate successes publically and address concerns in the appropriate setting.
 4. Be flexible in your role with a positive attitude in order to optimally support patient care.

COMPLIANCE RESPONSIBILITIES

III. **RESPONSIBILITIES**

- A. Education, Training and Certification
1. During General Orientation, each new employee will receive information about this Code of Conduct, the IREACH Standards of Behavior, and the Compliance Program. Every employee will sign an acknowledgment form confirming their receipt of information about DeKalb Medical's Code of Conduct, certifying that they understand their role in upholding the organization's Compliance Program and will abide by the IREACH Standards of Behavior. This certification will be reaffirmed on an annual basis and will be part of the employee education record.
- B. Behavioral and Ethical Standards and Following Compliance Policies
1. All DeKalb Medical staff will perform their responsibilities in a manner consistent with the IREACH Standards of Behavior. The IREACH Standards of Behavior are minimum

- expectations. Failure to follow the IREACH Standards of Behavior shall be grounds for disciplinary action up to, and including, termination.
2. All managers are responsible for knowing and abiding by the IREACH Standards of Behavior and for ensuring that their employees also know and follow the IREACH Standards of Behavior. Managers are accountable for the actions of their employees.
 - i. All levels of management at DeKalb Medical have the responsibility of setting the standard for professional behavior. DeKalb Medical expects all leaders to formally communicate the importance of compliance and adherence to the IREACH Standards of Behavior. Managers should strive to maintain an "open door" of communication between themselves and employees for discussion of questions, concerns, and suggestions voiced by employees.
 - ii. Managers have the responsibility of ensuring that their employees are provided adequate opportunities to receive required compliance education.
 - iii. Managers are expected and encouraged to contact the Chief Compliance Officer if an answer is not immediately known -- or to refer the employee to the Chief Compliance Officer.
 3. Every employee must be aware of the DeKalb Medical Compliance Program in general and in specific those procedures, governmental laws, and organizational standards which relate to the employee's functions within DeKalb Medical. All employees are encouraged to seek guidance and assistance from the Chief Compliance Officer or Compliance Department.
 4. DeKalb Medical will continuously promote compliance with applicable federal and state laws and regulations, federal health care program requirements, licensure, accreditation and certification requirements. DeKalb Medical will cooperate with and be truthful in connection with any government inquiries, requests and investigations. The Chief Compliance Officer should be contacted before DeKalb Medical staff speak to any government agents or respond to any requests from government agents for documents.
 - i. DeKalb Medical staff may not engage in any conduct that violates any federal and state fraud and abuse laws.
 - ii. DeKalb Medical and DeKalb Medical staff are strictly prohibited from giving or receiving any form of payment, anything of value, or a kickback to encourage the referral of patients. DeKalb Medical does not pay anyone, including DeKalb Medical staff, for referring patients to DeKalb Medical. Patient referrals must be accepted based solely on patient's medical needs and DeKalb Medical's ability to provide the services.
 - iii. DeKalb Medical strives to provide truthful and accurate billing to all payors consistent with federal and state laws and regulations. DeKalb Medical staff is prohibited from knowingly presenting inaccurate, false or fraudulent claims to payors. DeKalb Medical will implement appropriate oversight and safeguards to prevent the submission of false or fraudulent claims.
 - iv. DeKalb Medical will comply with federal and state laws regarding cost reports filed with any governmental health care program and will review such reports to ensure that they are accurate and complete.
- C. Reporting Actual or Suspected Compliance Issues or Violations of the IREACH Standards of Behavior

1. Every employee must report all reasonably suspected compliance issues, including violations of the IREACH Standards of Behavior. Compliance issues are any actual or possible violation of any state or federal law, rule, or regulation. The issues or incidents are to be submitted to the Compliance Hotline or to the Chief Compliance Officer. The Compliance Department will maintain an “open door” policy to support reporting of all concerns at all levels of the organization. All communication will remain as confidential as possible. Additionally, managers are expected to be accessible to their employees who wish to report a compliance issue.
2. Every employee must hold him or herself and all other DeKalb Medical staff and volunteers accountable to the IREACH Standards of Behavior. If an employee witnesses another staff member or DeKalb Medical representative violate the Standards of Behavior, he or she is encouraged to address the violation directly with the staff member or representative in a spirit of growth and collaboration to improve overall performance. Repeated or major violations of the IREACH Standards of Behavior should be reported to leadership as appropriate.
3. DeKalb Medical forbids retaliation by management or other employees against any employee who makes an honest report of a suspected compliance issue. Managers are also responsible for ensuring that none of their employees are retaliated against, or harassed in any way, for reporting a compliance issue in good faith. Any individual who retaliates against an individual who reports a compliance issue in good faith will be subject to disciplinary action. Reporting of a knowingly false allegation of non-compliance will not be tolerated. An employee reporting an issue which he or she knows to be false will be subjected to disciplinary action.
4. If an employee is unsure of his or her compliance obligations, he or she should seek clarification from his or her supervisor or directly from the Chief Compliance Officer. An employee's failure to fulfill his or her compliance obligations could result in termination or other disciplinary action. Claims of being unaware of the organization's expectations will not be valid excuses to avoid disciplinary action.
5. The Chief Compliance Officer will collaborate with the Vice President of Human Resources, department managers, and senior management to ensure that disciplinary action is uniformly administered among all employees, without favoritism being shown toward any employee.

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DEKALB MEDICAL DRESS CODE STANDARDS

IV. POLICY

DeKalb Medical will provide an environment that helps patients feel comfortable and at ease. To meet this goal, employees of DeKalb Medical should dress with the intent of presenting what most people would consider as a professional image to the public and patients.

DeKalb Medical representatives should not be focused on dressing in a way that draws excessive attention to their particular style of dress or fashion. If unsure, employees should check with their supervisors first and err on the side of presenting what most would describe as a traditional business image.

This policy applies to all DeKalb Medical representatives, including employees, physicians, volunteers, and vendors acting on behalf of the organization (i.e., contract staff), regardless of the amount of public or patient contact.

V. IMPLEMENTATION

The following is an outline of the health system dress code. Department specific uniforms may be established by the department director with approval from the Administration team. Seasonal scrub tops may be allowed at the direction of the Chief Nursing Officer.

All employees must comply with the following:

1. Head phones
The use of head phones, ear buds, collar- or ear-mounted Bluetooth headsets, or any similar device (cell phone or music) is prohibited in public and patient areas for all employees in any DeKalb Medical facility.
2. Jewelry
 - a. Jewelry should not interfere with job performance or safety.
 - b. No more than two earrings may be worn in each ear at the same time. Earrings should be modest in size and length.
 - c. No other body piercing jewelry should be visible (i.e. no nose rings, tongue rings, eye brow rings, etc.).
 - d. Only the following buttons/pins or stickers are approved to wear:
 - 1) DeKalb Medical service pins
 - 2) DeKalb Medical Foundation participation pins
 - 3) School pins given as a result of graduating from a healthcare-related program
 - 4) Pins awarded as a result of receiving advanced certification in a healthcare field
 - 5) Buttons/pins or stickers given by DeKalb Medical or other items as approved by DeKalb Medical Administration
3. Fingernails
 - a. Nails should be well-manicured, clean, short or moderate in length (as determined by department leadership) and should not interfere with job performance or safety.
 - b. Nail color, polish and design should be neat, moderate in color and not draw excessive attention as determined by management. Dangling nail jewelry is not allowed.

4. Tattoos that are visible must be small and inoffensive. No large, offensive, insulting, lewd, crude tattoos or tattoos that portray or represent nudity, vice or crime, contain profanity or reflect a negative image will be permitted.
5. Perfumes – no strong or offensive perfumes, colognes, after-shaves, oils or lotions should be worn.
6. Hair (including facial hair) and head wear –
 - a. Hair should not interfere with job performance or safety.
 - b. Facial hair cannot impede fit testing, infection control, nor any other requirements pertaining to performance or safety.
 - c. Hair (including braids, weaves, extensions, locks or similar styling) must be clean, neat, well-groomed, and professional in look and style. This means being combed or styled in an orderly, well organized, and systematic way.
 - d. Hair should not be (or have highlights that are) an extremely “loud” or unnatural looking color as determined by department leadership and Administration (ex. no bright, unusual or primary colors such as green, blue, or red).
 - e. Long hair that interferes with job performance or safety must be pulled back into a ponytail and kept secured.
 - f. Although in many cases long hair will be allowed, department leadership has the option and authority to restrict or not allow unusually/extremely long or large hair styles (as determined by management to be less professional in appearance).
 - g. Hat/head wear is restricted to:
 - 1) Coverings worn as a requirement for an established religion.
 - 2) Protective equipment provided by the organization.
 - 3) Items used to hold hair back, such as in a ponytail. Decorative items such as beads and shells (or other similar items) are not allowed.
7. Body odor – hygiene should be such to eliminate body odors.
8. ID Badge – must be clipped at shoulder level or chest level, with photo and name clearly visible; being attached at or dangling at the waist is not acceptable. Wearing a badge around the neck with a lanyard is prohibited in areas where lanyards present safety concerns.
9. Uniforms/Clothing
 - a. Uniforms and clothing should be clean and in good condition.
 - b. No jeans/denim clothing is allowed unless approved by HR for a special event.
 - c. No T-shirts without advanced approval are allowed. T-shirts will generally only be allowed for special events such as Leadership Work Days. Exception – Employees are permitted to wear their PEACH Foundation T-Shirts one (1) Friday per month.
 - d. No undergarments should be visible; T-shirts worn under scrubs should be “tucked in” so that the bottom of the T-shirt does not become visible or hang below the scrubs.
 - e. No transparent, excessively tight, formfitting or revealing garments (including scrubs), as determined by management, are allowed.
 - f. No low cut shirts or blouses, tank tops, sleeveless shirts, spaghetti straps, or exposed cleavage/midriff/waist are allowed.
 - g. Skirt lengths should be no shorter than the two and one half inches (2.5”) above the top of the knee.
 - h. Sweat pants, warm up suits or shorts are prohibited unless specified otherwise in department-specific dress code.
 - i. The following are prohibited:
 - 1) Spandex/formfitting pants
 - 2) Leggings, stirrup pants

- j. Mid-calf or ankle length professional dress pants are acceptable.
 - k. Scrubs or clothing from other organizations or with logos from other healthcare organizations are prohibited. Specifically, scrubs or clothing from other hospital systems are prohibited.
10. Shoes/Hosiery
- a. Shoes should be clean, professional, modest and an appropriate style as determined by each department manager.
 - b. Casual shoes such as flip flops are not allowed; heels higher than 4" are not allowed.
 - c. Appropriate hosiery, socks or stockings will be determined by each department.

In addition to the guidelines above, employees who provide direct patient care are also subject to the following:

1. Fingernails – All forms of artificial nails (tips, gel, gel overlay, acrylic, etc.) and all types of nail polish are prohibited for all direct care providers. Natural nail tips must be less than ¼" in length. See IC-8010 Hand Hygiene Policy and Procedure.
2. Hair that touches shoulders must be pulled back into a ponytail and kept secured.
3. Artificial eyelashes are prohibited.
4. Jewelry –
 - a) Should not interfere with patient care or dangle in a way that may touch or hang in front of patients or cause a safety risk.
 - b) Earrings should be the size of a quarter or smaller.
5. Shoes should have a closed toe, a closed top and a closed heel.
6. All patient care employees may wear scrub jackets matching their scrub color (see below).
7. All patient care employees may wear solid-colored turtlenecks, long sleeve T-shirts and short sleeve T-shirts without logos underneath their scrubs; socks should coordinate with the shoe or scrub color; all patient care employees wearing skirts should wear white, black, navy or skintone-colored hose.
8. Inpatient Units/Emergency Department/DTC:
 - a) RNs and LPNs - Solid navy blue and/or white scrubs all in one color or in any combination of navy and white
 - b) Techs and Secretaries - Solid hunter green scrubs
 - c) Operation Support Associates (OSA)
 - 1) Black pants or skirt
 - 2) Any color top except black
 - 3) **May not wear** – multi-color scrubs with prints/designs or scrubs that other positions wear, i.e. navy or royal blue, hunter green, wine, red
9. Surgery/PACU/SPD: All employees: Solid royal blue scrubs
10. OP Surgery/SAC:
 - a) RNs and LPNs Solid navy blue and/or white scrubs all in one color or in any combination of navy and white
 - b) Techs and Secretaries - Solid ceil blue scrubs
 - c) Operations Support Associates (OSA)
 - 1) Black pants or skirt
 - 2) Any color top except black
 - 3) **May not wear** – multi-color scrubs with prints/designs or scrubs that other positions wear, i.e. navy or royal blue, hunter green, wine, red

11. Inpatient Wound Care:
 - a) RNs - Solid purple scrubs
12. Rehabilitation:
 - a) Therapy employees - Solid wine scrubs OR wine colored polo shirt with khaki pants
 - b) Techs and Secretaries - Solid hunter green scrubs OR solid hunter green polo shirt with khaki pants
 - c) Operations Support Associates (OSA)
 - 1) Black pants or skirt
 - 2) Any color top except black
 - 3) **May not wear** – multi-color scrubs with prints/designs or scrubs that other positions wear, i.e. navy or royal blue, hunter green, wine, red
 - d) RNs and LPNs - Solid navy blue and/or white scrubs all in one color or in any combination of navy and white
13. Cardio-Vascular Services:
 - a) All Employees
 - 1) Solid red scrubs, all in red or in any combination of red and black
 - 2) Nurses can add white, but always must include red in outfit
 - b) Therapy employees - Solid wine scrubs OR wine colored polo shirt with khaki pants
14. Imaging Services:
 - 1) All Employees - Solid royal blue scrubs
15. Other departments: determined by the department manager

VI. RESPONSIBILITIES:

1. The employee is expected to:
 - a. Present a professional and traditional appearance as previously described.
 - b. Realize we have only one chance to make a first impression; therefore, strive to make the best impression.
 - c. Purchase and provide upkeep of uniforms/clothing.
 - d. Adhere to all guidelines set forth in this policy as well as any department-specific dress code requirements.
2. The supervisor, manager and/or director is responsible for:
 - a. Enforcing the dress code policy and any department-specific guidelines in a consistent manner.
 - b. Following a performance improvement/discipline process when dealing with issues of non-compliance.
 - c. Implementing department-specific dress code requirements that support this policy.
 - d. Establishing stricter department guidelines when the manager thinks there is a safety issue or business case to support the stricter guidelines.
 - e. Submitting for review/approval any department-specific dress code requirements with safety or infection control implications to the following:
 - 1) Infection control issues – Infection Prevention Management Committee
 - 2) Safety issues – Environment of Care Committee

3. All leaders:
 - a. Are expected to set a good example and be a positive role model for the image DeKalb Medical wants to provide. This includes wearing traditional professional business attire when interacting with the public. Exceptions will be made for leaders in direct patient care areas as described above.
4. Exceptions to this policy due to established religious practices may be made by Administration.
5. **Notwithstanding the guidelines above, Administration and department Directors have discretion to make case by case decisions regarding proper appearance and attire.**

REFERENCES AND ASSOCIATED POLICIES

The following documents operationalize the DRHS Code of Ethical Behavior and Dress Code Policy:

- Directive on Marketing Ethics
- Advance Directives
- Conflict of Interest Directive
- Discrimination, Abuse, and Harassment
- Mechanism for Staff Rights
- Confidentiality of Patient Information
- Patient Rights and Responsibilities
- Consideration of Ethical Issues
- Informed Consent
- Eye, Organ and Tissue Donation
- Do Not Resuscitate (DNR) Orders
- Withdrawal of Life-Sustaining Treatment
- Transfer of Patients
- New Partner Orientation and Initial Competency Assessment
- PRB-5434 Identification Badges
- IC-8010 Hand Hygiene Policy and Procedure

DATES:

- d. Department: Corporate Compliance
- e. Policy Sponsor: Chief Compliance Officer
- f. Policy Custodian: Management level employees designated by Sponsors
- g. Approved By: DRHS Audit and Compliance Committee July 7, 2004
DRHS Administrative Team August 9, 2004
DRHS Board of Directors August 12, 2004
- h. Reviewed/Revised: DRHS Standards of Behavior Committee June 21, 2016
DRHS Administrative Team June 29, 2016
DRHS Board of Directors July 2016
- i. Effective Date: September 1, 2016
- j. Replaces Policy Date: July 12, 2004