



*A Brighter Future for
youth and families*

Jefferson Hills Corporate Compliance Program

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Adopted by the Board of Directors on February 17, 2011

Jefferson Hills
CORPORATE COMPLIANCE PROGRAM

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COMPLIANCE POLICY STATEMENT

In recognition of the responsibility of Jefferson Hills (JH) to children, youth and families, employees, contractors and the communities we serve, this Corporate Compliance Program has been developed to provide a framework for a policy of compliance with all standards. It is the fundamental policy of JH that all of its business and other practices be conducted at all times in compliance with all applicable laws and regulations of the United States, the state of Colorado, and all other local laws and ordinances.

JH is dedicated to maintaining excellence and integrity in support of its mission and all aspects of our operations and professional and business conduct. Our Business Standards of Conduct (the Standards) as outlined later in this document serves as the foundation for our Corporate Compliance Program (the Program).

Compliance means meeting all requirements that govern our business including laws, rules, regulations, contract requirements and internal policies and procedures. While certain aspects of the Program are specific to JH employees, we are committed to fostering an environment of compliance that extends beyond the employees to include subcontractors, consultants, members of the Board of Directors, and anyone acting on behalf of JH. The Program is designed to establish a culture that promotes prevention, detection, and resolution of instances that do not conform to laws, regulations, policies, and established procedures.

The governing body of JH, including the Chief Executive Officer, Executive Director, Board of Directors, and Executive Management, are tasked with the responsibility to provide ethical leadership to ensure that adequate systems are in place to facilitate compliant conduct and conform to the written policies and procedures.

PURPOSE OF COMPLIANCE PROGRAM

The JH Corporate Compliance Program (the Program) is intended to provide reasonable assurance that JH:

- ◆ Complies in all material respects with all federal, state and local laws and regulations that are applicable to its operations;
- ◆ Satisfies the conditions of participation in the Medicaid Integrity Plan as a Medicaid provider and Centers for Medicaid;
- ◆ Prevents, detects and reports known or suspected fraud and abuse or other forms of misconduct that might expose JH to significant criminal or civil liability;
- ◆ Promotes self-auditing and self-policing, and provides for voluntary disclosure of violations of laws and regulations; and
- ◆ Establishes, monitors, and enforces high professional and ethical standards.

SCOPE OF COMPLIANCE PROGRAM

The provisions of the Program apply to all clinical, billing and claims processing, business, and legal activities performed by JH employees and other members of the community as applicable. The obligations for compliance include to:

- ◆ Comply with the JH mission statement and the Business Standards of Conduct;
- ◆ Become familiar with the purpose and applicable elements of the Program;

- ◆ Perform professional roles in a manner which demonstrates commitment to compliance with all applicable laws and regulations;
- ◆ Report known or suspected compliance issues to the Corporate Compliance Officer or by calling or emailing the Corporate Compliance Hotline and participate in investigations to the point of resolution of an alleged violation; and
- ◆ Strive to prevent errors and provide suggestions to reduce the likelihood of errors.

COMPLIANCE PROGRAM ELEMENTS

In addition to JH policies and procedures, the JH Board of Directors authorized the development and implementation of an effective compliance program which includes the following elements:

- ◆ **Business Standards of Conduct** – The development and distribution of the Standards, as well as the development and distribution of new or revised written policies and procedures that further promote JH’s commitment to compliance. Policies referenced in this document or as attachments should be considered an integral part of the Program and related training;
- ◆ **Designations** – The designations ensure the ongoing development and review of corporate compliance materials and programming;
- ◆ **Education, Training and Implementation** – Training to provide general compliance information to the employees and other members of the JH community, as applicable, as well as focused technical training for those functional areas that have the potential to put JH at a greater degree of risk exposure;
- ◆ **Effective Lines of Communication and Receipt of Complaints** – Open lines of communication to receive complaints confidentially and to provide retaliation protection to all individuals who report concerns;
- ◆ **Investigations and Reporting** – Methods to follow up reported concerns and management of corporate compliance information;
- ◆ **Auditing and Monitoring** - Performance improvement and other quality activities as needed to identify potential compliance issues and conduct ongoing compliance monitoring of potential problem areas;
- ◆ **Corrective Action Plans and Sanctions** - The remediation of identified systemic problems and the development of appropriate corrective action plans to resolve such problems. The enforcement of appropriate sanctions or disciplinary actions against employees and other members of the JH community, as applicable, who violate compliance policies, ethical standards, and applicable laws and regulations;

BUSINESS STANDARDS OF CONDUCT

The JH Business Standards of Conduct (the Standards) provide the guiding standards for our business actions and decisions. Although the Standards of Conduct can neither cover every situation in the daily conduct of the varied activities nor substitute for common sense, individual judgment or personal integrity, it is the obligation of each employee, contractor, Board of Directors and other members of the JH community, as applicable, to adhere to the principles set forth below.

- ◆ **Follow the Business Standards of Conduct**
 - Use the Business Standards of Conduct principles as integral to the operation of JH and all of its activities. They exist for the benefit of JH, its employees and other members of the community and as a document that augments, but does not limit, specific policies and procedures. All parties are encouraged to suggest changes or additions to the Standards;

- It is the obligation of each employee of JH and other members of the community to uphold the standards set forth in the Business Standards of Conduct and to report violations by following the reporting procedures established by the Program;
 - Officers, managers and all employees of JH have a special duty to adhere to the principles set forth in the Business Standards of Conduct, to support other business associates in their adherence to the Standards, to recognize and detect violations of the Standards, and to enforce the standards set forth in support of the Standards;
 - It is a violation of the Business Standards of Conduct to take any action in reprisal against anyone who reports, in good faith, suspected violations of the Standards or other JH policies and procedures;
 - Alleged violations of the Business Standards of Conduct or other policies and procedures of JH will be investigated by persons designated by, and pursuant to established procedures;
 - Disciplinary action for violations of the Business Standards of Conduct and other JH policies and procedures shall be enforced through the disciplinary policies and procedures. Disciplinary actions will be determined on a case-by-case basis and may include dismissal from employment. JH will cooperate with law enforcement authorities, as allowable, in connection with the investigation and prosecution of any staff or member of the JH community who violates a law governing the activities of JH;
- ◆ **Comply With All Applicable Laws**
- Uphold all applicable, local, state and federal laws and regulations that govern the conduct of its business activities. All employees and other members of the JH community must be aware of the legal requirements and restrictions applicable to their respective positions, duties, and roles. JH expects each of its community members to refrain from engaging in activity which may negatively impact the status of the organization, including, but not limited to, unacceptable lobbying and political activities;
 - Questions about the legality or propriety of any actions undertaken by or on behalf of JH should be referred immediately to one's supervisor and the Corporate Compliance Officer (CCO). To enhance such communication and reporting, JH has implemented the Corporate Compliance Hotline, a confidential telephone service that can be reached by dialing 303-996-3868. Any member of the staff or community who wishes to report violations or discuss ethical concerns may do so through the Corporate Compliance Hotline or with direct contact with the CCO;
- ◆ **Conduct Its Affairs in Accordance With the Highest Ethical Standards**
- JH's employees and other members of its business community shall strive to conduct all activities in accordance with the highest ethical standards of the community and their respective professions at all times and in a manner which shall uphold its reputation and standing;
 - We will strive to accurately represent ourselves and our capabilities;
 - Annual performance evaluations of staff will involve a review of corporate compliance concerns
 - All potential staff will agree to a prudent background check including, but not limited to, review of information concerning criminal activity, licensing, suspension, disbarment, or exclusion from participation in a federal program
- ◆ **Avoid Conflict of Interest**
- A conflict of interest arises when individuals have a financial or other interest that could influence their judgment or actions on behalf of JH. The appearance of a conflict may be just as harmful as an actual conflict. We are obligated to avoid situations or conduct that could influence (or appear

to influence) objective decisions in the performance of assigned duties and responsibilities or that could raise questions as to the honesty and integrity of JH or negatively impact its reputation

- Members of any governing bodies are required to sign the Conflict of Interest Disclosure Statement.

◆ **Strive to Attain the Highest Standards for All Aspects of Children, Youth and Family Care**

- All employees and other members of the JH community must support the mission to provide services of the highest quality that respond to the needs of our children, youth and their families, and the community as a whole
- The care provided must be reasonable and necessary to the care of each child, youth and their families, as appropriate to their needs, and such care must be provided by properly qualified and credentialed individuals and organizations
- All such care must be properly documented as required by law and regulation, reimbursement requirements and professional standards.

Provide Equal Opportunity, Respect, Courtesy, and Dignity to All Who Provide and Receive Services

- JH is committed to providing services related to its Mission for all persons and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status in any of its activities or operations. These activities include, but are not limited to recruitment, hiring, and termination of staff, recruitment and selection of volunteers, selection of vendors, and provision of services
- JH is committed to maintaining an environment that respects the dignity of each individual in the community
- Discrimination in any form or context is prohibited and will not be tolerated

◆ **Maintain the Appropriate Levels of Confidentiality for Information and Documentation**

- Employees and other members of the JH community might have access to medically and clinically sensitive personal, proprietary information, the confidentiality of which must be protected. Adherence to all applicable laws and regulations, including applicable provisions of the Health Insurance Portability and Accountability Act (HIPAA) along with applicable policies and procedures to ensure that confidential information is properly maintained and inappropriate or unauthorized release is prevented
- JH and its community members will create and keep records and documentation that conform to legal, professional and ethical standards. Additional references and standards are included in the Provider Manual and the JH Confidentiality Statement

◆ **Maintain a Relationship of Integrity With Respect to Payment for Services.**

- JH staff and other members of the JH community, as applicable, shall ensure that all requests for payment of services are reasonable, necessary and appropriate, provided by properly qualified persons, and the claims for such services are billed in the correct amount and supported by appropriate documentation
- JH is required to take appropriate disciplinary and enforcement action against employees, providers, subcontractors, consultants, and agents of JH found to have committed Medicaid fraud. JH is also required to take appropriate corrective actions to prevent further offenses through systems and process changes

- All employees, providers, subcontractors, consultants, and agents of JH are responsible for reporting potential and/or suspected incidents of Medicaid fraud, abuse, misuse or misutilization, including actual or potential violations of law or regulation. The following methods may be utilized to report such incidents:
 - Contact the Corporate Compliance Officer (CCO) at (303) 996-3886.
 - Call the confidential Corporate Compliance Hotline at (303) 996-3868.
 - Email the confidential Corporate Compliance Hotline at jhcorporatecompliance@jcmh.org.
 - For cases of Medicaid the CCO initially reports instances of suspected fraud and abuse to the Executive Director and to the Department of Healthcare Policy and Financing within thirty (30) days as appropriate.
- JH is heavily regulated and required to participate in the prevention, detection, reporting and correction of potential incidents of fraud, abuse, misuse, and misutilization. The following definitions are taken from State and Federal guidelines:
 - Fraud - An intentional (willful or purposeful) deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to him/herself or some other person. It includes any act that constitutes fraud under applicable Federal or State law
 - Abuse or Misuse - Practices that are inconsistent with sound fiscal, business or medical practices, and that result in an unnecessary cost to the Medicaid program, or in seeking reimbursement for goods or services that are not medically necessary or that fail to meet professionally recognized standards for healthcare
 - Misutilization - The incorrect, improper or excessive utilization of medical care and services which are not medically necessary at the recipient's insistence or request
 - Of particular significance in efforts to prevent and detect Medicaid fraud, waste, and abuse are the provisions contained in the Federal False Claim Act (The Act) and related protections for whistleblowers. The Act accomplishes this by making it possible for the Federal Government to bring civil actions against to recover damages and penalties when healthcare providers submit false claims. Penalties can include up to three (3) times actual damages and an additional \$5,500 to \$10,000 per false claim
 - The Act prohibits, among other things:
 - Knowingly presenting or causing to be presented to the federal government a false or fraudulent claim for payment or approval;
 - Knowingly making or using, or causing to be made or used, a false record or statement in order to have a false or fraudulent claim paid or approved by the government;
 - Conspiring to defraud the government by getting a false or fraudulent claim allowed or paid; and
 - Knowingly making or using, or causing to be made or used, a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the government.
 - The Act also contains a qui tam (or whistleblower) provision which allows a private person to bring civil actions for violations of the Federal False Claim Act on behalf of the federal government. These persons are entitled to receive percentages of monies obtained through settlements, penalties, and/or fines collected
 - Persons bringing these claims are granted certain protections under the law. Specifically, any whistleblower who is discharged, demoted, suspended, threatened, harassed, or in any other

manner discriminated against by his or her employer because of reporting violations of the Federal False Claim Act will be entitled to reinstatement with seniority, double back pay, interest, special damages, and attorney's fees and costs sustained as a result of discriminatory treatment.

- ◆ **Conduct All Business With Honesty and Integrity** - All business practices of JH must be conducted with honesty and integrity and in a manner that promotes its reputation with children, youth and families, service providers, competitors and the communities we serve. All employees and other members of the JH community, as applicable, will conduct business relations at arms' length and:
 - Adhere to proper and legally accepted business practices and federal and state fraud, abuse and referral prohibitions in dealing with providers and referral sources;
 - Conduct business transactions free from offers or solicitation of gifts, favors or other improper inducements;
 - Conform to all applicable antitrust laws and regulations, and ensure that JH does not violate laws and regulations with respect to pricing or other sale terms or conditions, improper sharing of competitive information, or non-permissible exclusion of others from economic activities;
 - Maintain and protect the property and assets of JH, including intellectual property and proprietary information, equipment and supplies, and funds and refrain from converting JH assets to personal use;
 - Maintain the confidentiality of proprietary information belonging to other persons or entities doing business with JH;
 - Prepare accurate financial reports, accounting records, reports, expense accounts, time sheets and other documents so that they completely and accurately represent the relevant facts and true nature of all JH business transactions; and
 - Comply with the record and documentation requirements under federal, state, and local laws, third party payer and regulatory guidelines including, but not limited, to policies established according to Medicaid, and HIPAA regulations.

CORPORATE COMPLIANCE OFFICER AND COMPLIANCE COMMITTEE DESIGNATIONS

The Program is directed by the Corporate Compliance Officer (CCO) and the Corporate Compliance Committee (CCC).

The Corporate Compliance Officer will be an employee appointed by the Executive Director with the approval of the Board of Directors. The CCO shall be a high-level employee of JH. The CCO shall report directly and be responsible to the Executive Director and to the Board of Directors. The CCO's duties will be to:

- ◆ Oversee and monitor JH's compliance activities and coordinate with internal auditing functions;
- ◆ Report on a periodic basis to the Executive Director, the CCC and the Board of Directors on the progress of the Program;
- ◆ Monitor the Corporate Compliance Hotline to ensure that employees and other members of the JH community are able to report suspected improprieties without fear of retribution, and implement processes to investigate, resolve and document all issues reported through the Corporate Compliance Hotline;

- ◆ Assist the Executive Director, the CCC and the Board of Directors in establishing methods to improve JH's efficiency and quality of services, and to monitor its vulnerability to fraud and abuse;
- ◆ Periodically review the Program to evaluate and recommend revisions as necessary to meet changes in the business and regulatory environment;
- ◆ Develop, coordinate and participate in an educational and training program that focuses on the elements of the Program, and seek to ensure that all employees and other members of the JH community are knowledgeable of and comply with all applicable aspects of the Program;
- ◆ Ensure that independent contractors and agents who furnish medical services to JH are aware of the requirements of the Program, including but not limited to, coding, billing, and marketing;
- ◆ Work closely with legal counsel to review and update the education, training and standards of conduct to reflect the current federal, state and local laws;
- ◆ Receive and investigate reports of possible illegal conduct or other conduct that violates the Business Standards of Conduct. To independently investigate and act on matters related to compliance, including the flexibility to design and coordinate internal investigations (for example, responding to reports of problems or suspected violations) and any resulting corrective action with all JH departments;
- ◆ Develop policies and programs which encourage staff to report suspected fraud and other improprieties without fear of retaliation;
- ◆ Ensure that the Plan has been effectively communicated to all employees, volunteers, board members, and other members of the JH community, as appropriate;
- ◆ Establish and administer a communication system that is available to all employees and other members of the JH community to report any suspected illegal conduct or other conduct that violates the Business Standards of Conduct;
- ◆ Oversee corporate compliance for all payers including Medicaid, other federal programs, state and local funds, and other payers
- ◆ Notify the appropriate law enforcement agency of possible illegal misconduct if so directed by the Executive Director and legal counsel; and
- ◆ Maintain a log of all Corporate Compliance calls, other incidents, corrective action plans and report the results of investigations and continued monitoring at least annually to the Executive Director and Board of Directors to identify any significant trends or patterns.
- ◆ Review written policies and procedures every three (3) years to ensure adequacy of documents.

The CCO will chair the Corporate Compliance Committee, which will be comprised of JH's Executive Management Team or other individuals who have broad backgrounds and expertise in clinical operations or administration, monitoring quality, service delivery and legal/regulatory compliance. The CCC advises the CCO and assists in the development, implementation and monitoring of the Program. The CCC's function will be to:

- ◆ Monitor changes in the health care environment, including regulatory changes with which JH must comply, and identifying the impact of such changes on specific risk areas;
- ◆ Work with other committees within JH to determine the appropriate approach/strategy to promote compliance with the Plan and detection of any potential violation;
- ◆ Monitor the revision of policies and procedures, as needed, so that such policies support the Business Standards of Conduct or recommendations of changes to the Corporate Compliance Program; and
- ◆ Monitor, through summary reports shared by the CCO, the nature of written or verbal reports, the types of Hotline calls coming through the Corporate Compliance Hotline, identifying trends or

patterns; and evaluating the adequacy of the investigation, follow up and resolution of such calls and reports.

EDUCATION, TRAINING AND IMPLEMENTATION

The JH policy on the dissemination and implementation of the Program and other compliance education and training initiatives will be to:

- ◆ Introduce and train all JH employees and other members of the JH community as applicable in the Program and the Business Standards of Conduct. The orientation and training will reinforce the need for strict compliance with all applicable laws and policies and procedures and will advise employees that any failure to comply will be documented on the employees' performance evaluation and may result in disciplinary action;
- ◆ Train new employees during orientation in the Business Standards of Conduct, the Program and the manner that they may access the CCO and the Corporate Compliance Hotline service;
- ◆ Provide focused in-service training to employees and managers according to their assignment of responsibilities within JH;
- ◆ Provide ongoing informal communications concerning corporate compliance;
- ◆ Maintain an open door policy for employee access to the CCO which includes answering routine questions regarding compliance or ethics issues;
- ◆ Provide compliance materials and orientation to contractors and other members of the JH community, as applicable, and use its best efforts to obtain their acknowledgement of their awareness of the basics of the Program and their commitment to compliance; and
- ◆ Document attendance or excused absences at all corporate compliance training programs for employees.

LINES OF COMMUNICATION AND RECEIPT OF COMPLAINTS

JH recognizes that an open line of communication between the CCO, employees and other members of the community is critical to the success of the Program. To maintain communication about the Program, JH will:

- ◆ Strongly encourage, in addition to using the Corporate Compliance Hotline, staff and members of the JH community to report incidents, anonymously if desired, of potential fraud or to seek clarification regarding legal or ethical concerns directly from the CCO at 303-996-3886, through the Corporate Compliance Hotline at 303-996-3868, by mail to Corporate Compliance Officer, Jefferson Hills 421 Zang St., Lakewood, CO 80228; or by email at jhcorporatecompliance@jcmh.org;
- ◆ Not subject employees and providers who, in good faith, report possible compliance violations to retaliation or harassment as a result of their reports. Retribution related to reporting of compliance concerns is prohibited as a provision of the Federal False Claim Act and anyone who engages in such prohibited activity will be subject to disciplinary action. Concerns about possible retaliation or harassment should be reported to the CCO;
- ◆ Keep communications confidential, as much as possible, but there may be times when the reporting individual's identity may become known or may have to be revealed if governmental authorities become involved; and
- ◆ Seek advice and guidance, when needed, for the CCO and/or members of the CCC directly from legal counsel to assist in the investigation of fraud and abuse reports concerning members of the JH community who may have participated in illegal or unethical conduct.

INVESTIGATIONS AND REPORTING

The CCO has the authority and responsibility to investigate any potential compliance issue directly and will:

- ◆ Promptly initiate an investigation of a potential compliance issue to make a case-by-case determination as to whether a violation has occurred. The CCO will either personally conduct the investigation or refer the complaint to a more appropriate area within JH or outside, such as internal or outside legal counsel, auditors or health care consultants with needed expertise. The CCO may request assistance in the investigation from the person or persons who filed a complaint, other personnel or external sources, as appropriate;
- ◆ Report all instances of suspected non-compliance involving Medicaid fraud and abuse initially to the Executive Director and to the Department of Healthcare Policy and Financing within 30 days if appropriate;
- ◆ Request legal counsel to participate in the investigation and provide legal advice in any such matter, as appropriate. In any investigation involving legal counsel, the fact gathering is to be conducted under counsel's direction and control;
- ◆ Prepare a log report of each investigation which will include documentation of the issue and, as appropriate, a description of the investigative process, copies of interview notes and key documents, a log of the witnesses interviewed and the documents reviewed, the results of the investigation, any disciplinary action and the corrective action implemented to prevent recurrence; and
- ◆ Report violations of criminal, civil or administrative law to the appropriate federal and/or state authority within a reasonable time period after determining that there is credible evidence of such violation.

AUDITING AND MONITORING

One of the principal responsibilities of the CCO is to oversee and monitor the implementation of the Program. The CCO works with the CCC to track and monitor implementation of the Compliance Program. Progress reports of the ongoing monitoring activities, including identification of suspected noncompliance, will be maintained by the CCO and shared annually with the Executive Director and the Board of Directors. Monitoring techniques that may be used as applicable include:

- ◆ Compliance audits, independent of the management team when applicable, focused on those areas within JH that have potential exposure to government enforcement actions for example in Special Fraud Alerts issued by the Office of Inspector General (OIG), OIG Annual Work Plan, initiatives or requests from the Health Care Policy and Financing and law enforcement initiatives;
- ◆ Bench marking analyses which provide operational snapshots from a compliance perspective that identify the need for further assessment, study or investigation;
- ◆ Survey terminating staff about any observed violations of the compliance program during their tenure at JH;
- ◆ Periodic reviews in the areas of Program dissemination, communication of JH's compliance standards and Business Standards of Conduct, availability of the Corporate Compliance Hotline and adequacy of compliance training and education to ensure that the Program's compliance elements have been satisfied; and

- ◆ Subsequent reviews to ensure that corrective actions have been effectively and completely implemented.

SANCTIONS AND CORRECTIVE ACTION PLANS

Jefferson Hills will enforce standards through well-publicized disciplinary guidelines. An important aspect of the Program is that disciplinary action is appropriate for employees who have failed to comply with JH's policies and procedures, including Federal, state, and local laws, or those who have otherwise engaged in wrongdoing that has the potential of impairing JH's status as a reliable, honest, and trustworthy health care provider.

A Corrective Action Plan will be developed when a compliance issue has been identified that requires remedial action. The CCO and/or designee will:

- ◆ Develop a corrective action plan specifying the tasks to be completed, completion dates and responsible parties. Legal counsel and other appropriate personnel will be consulted as appropriate. Each corrective action plan must be approved by the Executive Director or his/her designee prior to implementation;
- ◆ Establish corrective action plans that may require compliance issues be handled in a designated way, that relevant training takes place, that restrictions be imposed on particular employees, or that the matter be disclosed externally; and
- ◆ Recommend for sanctions or discipline, in accordance with the standard disciplinary policies and procedures of JH.

Sanctions for employee noncompliance will be initiated by the appropriate management personnel who must notify the CCO in accordance with the standard disciplinary policies and procedures. Enforcement will be administered by the parties identified by the CCO in consultation with the immediate supervisor and, if appropriate, Human Resources. Disciplinary actions will be determined on a case-by-case basis and will be taken appropriately, equitably and consistently, given the underlying circumstances and the degree of non-compliance, financial harm, negligence or reckless conduct. Other members of the JH community will be sanctioned as applicable under the terms and conditions of the business or contractual relationship established with JH.