In accordance with Tampa General Hospital policy (HR-38), and current Joint Commission guidelines, individuals requesting authorization to perform any functions related to patient care at TGH are required to complete an authorization application with the following supporting documentation, and must comply with the Tampa General Hospital Code of Conduct. This authorization gives Tampa General Hospital the authority to obtain certain information about you and/or release certain information to your employer upon its/their request.

Documentation that must be submitted with this packet includes:

- Completed application and acknowledgement forms
- Confidentiality and Security Agreement
- Resume/CV
- Copy of valid Driver's License
- Copy of valid license and/or certification (if applicable)
- Proof of health/drug screen (set up upon receiving application)
- Proof of Human Subjects Education (for research)
- Proof of TGH online hospital orientation (set up upon receiving application)
- Proof of Liability Insurance (Licensed personnel only)
- Reference letters (3 of them)
- Supervising Physician/TGH Supervisor Statement
- Background Release completed through PreCheck (instructions attached)
- **Please turn in completed application as it will not start being processed until all forms are included. Turn into to HR directly or email to kcathcart@tgh.org**

Please note that completed forms must be submitted to Human Resources, 2nd Floor, East Pavilion or emailed to kcathcart@tgh.org. The authorization process includes a review of these forms, a background check and drug screening.

Final authorization approval will be granted by the Human Resources Authorization Committee (HRAC) for non-nursing personnel, and by the Professional Nursing Credentialing and Authorizing Committee (PNCAC) for nursing personnel. Approval is conditional upon satisfactory completion of the authorization process. A TGH badge will be issued upon receipt and approval of all documentation. Badges must be worn at all times while on hospital premises.

Tampa General Hospital

APPLICATION FOR NON-EMPLOYEE AUTHORIZATION

To assure compliance with current Joint Commission guidelines, please complete all of the information below, and return this application to Human Resources for processing and approval.

PERSONAL INFORMATION

Prefix (Mr./Mrs./Dr.): _____

Name:_____
(First) (MI) (Last)

Suffix (Jr./Sr./IV): _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Gender: _____ DOB: _____

City of Birth: _____

Social Security Number: _____

Primary E-Mail Address: _____

Home phone: _____

Cell phone: _____

Tampa General Hospital

PROFESSIONAL INFORMATION

Affiliation: _____
(Name of employer or group. Include department name, if applicable.)

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Work phone: _____

Current Title: _____

Length of time in current position: _____

Please indicate your credentials:

___ RN
___ BSN
___ BS/BA
___ AS/AA
___ CCRC
___ other (please specify): _____

Please list the Supervising Licensed Independent Practitioner (LIP)/TGH Department Director that you intend to work under:

_____

Please indicate the types of duties that you expect to be involved in:

___ Chart Review
___ Observational
___ Clinical Research
___ Rounding
___ Other (please specify): _____
_____
_____
_____

I understand that my involvement with patient care at TGH is a privilege that is to be conducted under the ethical principles of respect for all persons, beneficence, and justice. I am committed to protecting the privacy of patient health information and abiding by the TGH Code of Conduct during any patient care duties that I am responsible for, and I am committed to minimizing risk for any patients that I care for. I am also authorizing TGH to conduct a background screening which includes a criminal background check and drug screening.

Furthermore, I understand, agree and consent that the results of such criminal background check, and/or positive drug screen may be released to my Supervising Licensed Independent Practitioner (i.e., my employer), and/or TGH Department Director and TGH's Human Resources personnel who need to know with or without my knowledge at the time and/or separate prior consent. This signed consent is sufficient and constitutes my full consent and authority allowing Tampa General Hospital the right to provide the results of any background screening and/or drug test to the individuals identified herein including my direct employer if a request by that employer is made. In accordance with the Tampa General Hospital Drug Free Workplace Policy (#HR-80), I further understand that all prospective employees, travel nurses, employees and other designated persons will be required to submit to a urine drug screen prior to starting work. Persons with a positive pre-placement drug screen, as determined by the Medical Review Officer, will be ineligible to reapply for one year from the date of the positive drug screen.

I also understand that as a Research Associate or Research RN, I will be required to provide proof of four (4) research education courses annually to the TGH Office of Clinical Research.

I have read and understand all of the statements outlined above.

_____
Name (please print)

_____ _____
Applicant Signature Date

Tampa General Hospital Release Form Instructions

1. Go to https://weborder.precheck.net/Release/release1.aspx?clno=9118

   Or go to www.precheck.com, and select "Release Form" link on the right-hand side near the top of the screen. Enter **9118** as the 4-digit code.

2. Fill out the entire form, entering as much information as possible.

3. Provide your signature on page 6 of the release form, by using your computer mouse to sign your name.

4. If you make a mistake while signing your name and would like to sign again before submitting, click on the icon to erase and start over.

5. Once you are satisfied with your signature, mark the box below that confirms that you have read and understood the Terms of Service.

6. Finally, click **Submit** to finish and submit the release.

Tips for optimum use of the online release:

- Use a supported browser, as listed above
- Install Adobe Flash Player, if needed: http://get.adobe.com/flashplayer/
- Complete each page/form in less than 30 minutes to avoid session timeout
- If you wish to view a copy of your release form, you will need Adobe Reader. You can obtain it here, if needed: http://get.adobe.com/reader/

For questions or problems regarding the online release form, please email info@PreCheck.com.

Para informacion en espanol, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20006.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20006.**

• **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

• **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

- a person has taken adverse action against you because of information in your credit report;
- you are the victim of identify theft and place a fraud alert in your file;
- your file contains inaccurate information as a result of fraud;
- you are on public assistance;
- you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

• **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

• **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

• **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed

or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

• **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

• **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

• **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

• **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.

• **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

• **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over $10 billion and their affiliates.	a. Bureau of Consumer Financial Protection 1700 G Street NW Washington, DC 20006
b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the Bureau:	b. Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above:	
a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050
b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and insured state branches of foreign banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act	b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480
c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations	c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106
d. Federal Credit Unions	d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Department of Transportation 400 Seventh Street SW Washington, DC 20590
4. Creditors Subject to Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 1925 K Street NW Washington, DC 20423
5. Creditors Subject to Packers and Stockyards Act	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 406 Third Street, SW, 8th Floor Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F St NE Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357

Tampa General Hospital

HIPAA Acknowledgement

To assure compliance with HIPAA Federal regulations regarding patient privacy, in addition to the HIPAA educational booklet provided to staff upon hire, TGH has in place several policies to hold our healthcare providers accountable for maintaining respect for patient privacy. As a reminder to you, these policies include:

- Policy RI-46 Photography/ Videography/Audio Recordings: "Under no circumstances are other patients or staff to be photographed without *(written)* consent." Pictures may only be taken **FOR EDUCATIONAL** purposes by those who are approved to utilize for case reviews, and again with written consent. This includes the taking of any picture or x-ray, even if it has no patient identifier and/or face included.
- TGH Code of Conduct Standard 3.1 - Patient Relationship/Protection: "Protection of the well-being and privacy of patients is expected at all times. Neglect and/or mistreatment of patients, patients' reputations, or unauthorized removal or disclosure of patient records, whether verbal, written or electronically transmitted, are prohibited." Any posting on a social networking site (i.e. *Facebook* or *MySpace,* etc.) regarding patient encounters are prohibited. Additionally, you are prohibited from accessing any patient chart (either electronic or physical chart or components of the medical record) unless you are specifically involved with that patient's care, required audit, or have management responsibility for that patient.

It is the expectation that all staff will monitor compliance with these policies, and intervene when someone is not in compliance. Maintaining patient privacy is everyone's responsibility. Violation of patient privacy will result in disciplinary action, up to and including termination.

I have read and understand my responsibilities regarding the Health Insurance Portability and Accountability Act (HIPAA), and also acknowledge that I have received training in HIPAA provisions related to my position at Tampa General Hospital during my orientation process.

Print Name	Signature	Date

Tampa General Hospital

Appendix 1

Drug-Free Workplace Statement

1. Drug-Free Workplace Policy

All Tampa General Hospital employees, contract/agency staff, prospective job applicants and other healthcare workers are responsible for reading and understanding the Tampa General Hospital "Drug-Free Workplace Policy" (policy HR-80). The Drug-Free Workplace policy is available for all employees on the TGH Employee Portal. A copy of the policy may be requested from Employee Health Services at no charge.

The policy states, in part: "Tampa General Hospital is committed to an environment free from the effects of alcohol and/or the uses of drugs. We have a zero tolerance philosophy regarding the unlawful manufacture, distribution, dispensation, possession, or use of illegal drugs and alcohol in the workplace. A healthcare worker who abuses drugs/alcohol creates a grave risk of serious danger to the safety, security, and health of not only himself, but innocent coworkers, patients, and members of the public. Tampa General Hospital will take all reasonable steps to ensure that drug or alcohol abuse does not occur in the workplace or while performing work for the hospital.

Tampa General Hospital's Drug-Free Workplace policy prohibits:

1. Manufacturing, distributing, dispensing, selling, possessing, or using alcohol or illegal drugs while at work on Tampa General Hospital property, in designated parking areas, in hospital vehicles, or while off the premises performing work for the hospital.

2. Reporting for work or performing work under the influence of alcohol or illegal drugs.

3. Reporting for work under the influence of prescription or over-the-counter drugs that impair the healthcare worker's ability to satisfactorily perform his/her job duties.

4. Diversion of controlled and/or other drugs for personal use or illegal purposes to include, illegal removal of drugs for personal use via means such as medication dispensing systems; taking controlled drug waste; writing illegal prescriptions/orders; taking drugs from inventory or removing drugs from disposal containers.

5. Non-compliance with hospital and/or departmental policies and procedures on administration, documentation, waste, storage or handling of controlled and/or other drugs.

2. Drug and Alcohol Testing At Tampa General Hospital

- **Preplacement Testing:** All prospective employees and designated contract/agency healthcare workers will be required to submit to a urine drug screen prior to starting work as a condition of employment. Persons with a positive preplacement drug screen, as determined by the Medical Review Officer, will be ineligible for hire and cannot reapply for one year from the date of the positive drug screen.

- **Reasonable Suspicion Testing:** Tampa General Hospital will require drug and/or alcohol testing based on "reasonable suspicion" which is a belief based on objective facts, observations or reliable information that an employee/healthcare worker is using, diverting, in possession of, or impaired by illegal drugs, controlled drugs and/or alcohol while at work.

- **Follow-up Testing:** Employees/healthcare workers in recovery and/or under contractual agreement with TGH will be periodically tested for drugs and/or alcohol as a condition of employment as specificed in the TGH Work Agreement.

3. Drug and Alcohol Testing Methods

All required drug and alcohol testing will conform to federal and state guidelines. All positive drug and alcohol test results will be reviewed and interpreted by a certified Medical Review Officer (licensed physician) who will make the final determination for positive or negative results. Employees and applicants will be given 72 hours from the time of the Medical Review Officer notification to request a retest of the original positive specimen. Requests must be directed to the Medical Review Officer and will be at the employee/healthcare worker's expense.

Please turn over ▶

4. Conviction Under Criminal Drug Statute

- Any employee who is arrested for a drug or alcohol offense, including DUI, while employed at Tampa General Hospital must notify his/her manager or Human Resources within 48 hours of the arrest. Failure to do so is considered falsification and may result in disciplinary action up to and including discharge.

- Licensed employees are required to report all drug and alcohol related convictions, including DUI, to the Florida Department of Health. The Florida Board of Nursing requires notification within 30 days of a drug or alcohol related conviction, including a DUI.

- Failure to notify the hospital of a criminal drug statue arrest or conviction, including a DUI, may be grounds for disciplinary action, up to and including discharge.

- Employees convicted of a criminal drug statute violation, including a DUI, regardless of a violation of this policy, will have his/her case reviewed by TGH to determine if the employee will be permitted to return to work. The employee may be required to have a substance abuse assessment completed through an approved treatment provider and, if recommended, participate in a rehabilitation program and/or IPN/PRN as a condition of continued employment.

5. Refusal to Submit to Drug and/or Alcohol Testing

An employee, applicant or healthcare worker who refuses to submit to a drug and/or alcohol test as required, or does not complete the drug/alcohol testing in the required time frame, or attempts to adulterate or tamper with the specimen sample, will be immediately discharged from employment or denied eligibility for employment.

6. Disciplinary Action

Any employee, applicant or healthcare worker who violates any aspect of Tampa General Hospital's Drug-Free Workplace policy will be subject to disciplinary action, up to and including discharge from employment. Violation of this policy may also result in notification to law enforcement agencies, the Florida Department of Health, the Intervention Project for Nurses, Professionals Resource Network, and any other agency required to be notified under state and federal laws. Criminal prosecution may be pursued at the discretion of Tampa General Hospital.

7. Confidentiality

Results of the drug/alcohol tests will be released to TGH Employee Health Services and Human Resources and will be kept confidential except on a need to know basis by administrative staff, or as required to be reported by law.

I have carefully read the above information on Tampa General Hospital's Drug-Free Workplace program and drug testing policy. I have also been given the opportunity to read Tampa General's Drug-Free Workplace policy in its entirety. I understand that compliance with this policy is a condition of my employment and continued employment.

I hereby certify that I am not a current user of illegal drugs. I also understand that I am prohibited from being under the influence of a prescribed drug (i.e. narcotic/controlled substance) that may impair my ability to perform my job.

_____	_____
Employee/Healthcare Worker Signature	Last six of social security number
_____	_____
Print Name	Date

Tampa General Hospital

Core Values

Mission

Tampa General Hospital is committed to serving all residents of West Central Florida. We provide comprehensive health services, ranging from wellness and primary care to the most complex specialty care and post-acute services. Our care reflects a patient-centered approach, and our services are delivered in an exceptional manner, with benchmark performance in clinical outcomes, care processes, cost-effectiveness, and patient experience. With our unique blend of academic and other healthcare partners, we play a special role in supporting medical education and research in our region.

Vision

Tampa General Hospital will be a leader of a clinically integrated network of providers serving West Central Florida. We will continue to be recognized as a leading medical center in Florida and one of the best in the nation. We will work with a network of community and academic providers to be at the forefront of care delivery, care coordination, and population health management in our region.

Values

1. Respect, caring, courtesy, dignity, and a sense of fairness must be shown to all individuals including patients, families, visitors, employees, trainees, students, volunteers, and healthcare professionals. Due sensitivity must be shown to the needs of individuals from diverse backgrounds related to gender, race, age, disability, nationality, sexual orientation, and religion.
2. Mutual understanding must define all communications between team members. Communication must be open, respectful, and direct in order to optimize health services.
3. All individuals must be supported in their attempts to assert themselves in pursuit of patient safety and optimal quality of care.
4. Conflict resolution must proceed in a non-threatening, constructive, and private manner.
5. Teaching, research, and patient care must be subject to the highest ethical standards, intellectual honesty, and competence.
6. Properly report to supervisors any individual who has been observed to be impaired in his ability to perform assigned duties, whether the cause is emotional issues, substance abuse, etc.
7. Adverse event reporting and potential safety hazard reporting should proceed promptly, and all individuals are expected to encourage their colleagues to report such events.
8. Full cooperation is expected in investigations and briefings related to adverse events.
9. The privacy and confidentiality of all individuals is to be respected. All TGH and HIPAA regulations regarding personal health information must be strictly observed.
10. Uphold the rules, regulations, and policies of TGH.
11. Properly and responsibly utilize all TGH facilities and property, including computer facilities and telecommunications assets.
12. Maintain education and training standards required to perform job duties.
13. Be fit for duty during work time, including during on-call time.

Signature:_____ Printed name:_____ Date:_____

Tampa General Hospital

CODE OF CONDUCT

ACKNOWLEDGEMENT FORM

As a healthcare partner of Tampa General Hospital, I understand that TGH is committed to providing a compassionate and caring environment to those who come to us for health care. I agree to this commitment without reservation. All information regarding patients that I learn from working at TGH will be kept in strict confidence by me and shared with only those who need to know. I further understand that due to the nature of services provided, an exceptional record of attendance, promptness, and dependability is required of all healthcare partners.

I agree to comply to and be bound by all policies and procedures of TGH. I understand that I have been hired at the will of the employer and that my employment/partnership may be terminated at will, at any time, with or without cause, except if specifically prohibited by law. I may terminate my employment/partnership at any time by providing sufficient notice.

I, the undersigned, have received the **Code of Conduct Policy.** I agree to read, review, and comply with the **TGH Code of Conduct.** I have been notified that any questions that I may have will be answered by my manager.

I understand that if I have questions regarding my status as a healthcare partner, I may speak to my immediate supervisor, my supervisor's supervisor, or my employee relations' specialist in Human Resources.

Signature	Date
Print Name	Last Six of Social Security Number

TGH Tampa General Hospital

Security and Confidentiality Agreement

TGH* has a legal responsibility to safeguard the confidentiality and security of our patients' protected health information (PHI) as well as operational, proprietary, and employee information. This information may include, but is not limited to, patient health records, human resources, payroll, fiscal, research, and strategic planning and may exist in any form, including electronic, video, spoken, or written. This agreement applies to all members of the workforce, including but not limited to employees, volunteers, students, physicians, and third parties, whether temporary or permanent, paid or not paid, visiting, or designated as associates, who are employed by, contracted to, or under the direct control of TGH. This agreement also applies to users of TGH information systems and the information contained therein, whether the user is affiliated with TGH or not, and whether access to or use of information systems occurs locally or from remote locations. I hereby agree as follows:

- I acknowledge that TGH has formally stated in policy its commitment to preserving the confidentiality and security of health information in any format. I understand that I am required, if I have access to such health information, to maintain its confidentiality and security.
- I understand that access to health information created, received, or maintained by TGH or its affiliates is limited to those who have a valid business, medical, or professional need to know the information. I understand that TGH has implemented administrative, technical, and physical safeguards to protect the confidentiality and security of PHI, and I agree not to bypass or disable these safeguards.
- I understand that I will be given a unique User ID and password to access electronic health, operational, proprietary, employee or other confidential information. I understand that my User ID and password are confidential, that I am responsible for safekeeping my password, that I am also responsible for any activity initiated by my User ID and password, and that in certain circumstances my User ID and password may be equivalent to my legal signature. If I suspect that my User ID or password has been compromised, I should immediately contact TGH Information Technology (IT).
- I have no expectation of privacy when using TGH's information systems. TGH shall have the right to record, audit, log, and/or monitor access to or use of its information systems that is attributed to my User ID. I agree to practice good workstation security measures on any computing device that uses or accesses a TGH information system. Good security measures include, but are not limited to, maintaining physical security of electronic devices, never leaving a device unattended while in use, and adequately shielding the screen from unauthorized viewing by others.
- I understand that only encrypted and password protected devices may be used to transport PHI or other Restricted Data.
- I understand that smartphones and other mobile devices used to access TGH information systems must be configured to encrypt any Restricted or Sensitive Data, including photographs and videos, in persistent storage. I understand that I may access and/or use TGH confidential or Restricted Data only as necessary to perform my job-related duties and that I may disclose (i.e., share) confidential or Restricted Data only to authorized individuals with a need to know that information in connection with the performance of their job functions or professional duties.
  1. *Restricted Data:* Data in any format collected, developed, maintained, or managed by or on behalf of TGH, or within the scope of TGH's activities, that are subject to specific protections under federal or state law or regulations or under applicable contracts (e.g., medical records, Social Security numbers, credit card numbers, Florida driver licenses, and export controlled data).
  2. *Sensitive Data:* Data whose loss or unauthorized disclosure would impair the functions of TGH, cause significant financial or reputational loss, or lead to likely legal liability (e.g., financial information, salary information, hospital policies, research work in progress, and copyrighted or trademarked material).
- I understand that upon termination of my employment / affiliation / association with TGH, I will immediately return or destroy, as appropriate, any confidential or Restricted Data in my possession. I understand that my confidentiality obligations under this Agreement will continue after the termination of this Agreement and after termination of my employment or affiliation with TGH.
- I agree to immediately report any known or suspected violation of the confidentiality or security of PHI of patients of TGH to either TGH IT or to the TGH Privacy Office.
- I understand that violations of this Agreement may result in revocation of my user privileges and/or disciplinary action, up to and including termination, and that TGH may seek any civil or criminal recourse and/or equitable relief.

☐ By signing or by entering my name and other identifying information on this Agreement, I acknowledge that I have read this Agreement and agree to comply with all the terms and conditions stated above.

Print Name	Entity or Department	
Signature	Date	Badge # or ID #
E-mail		

*For purposes of this agreement, TGH includes the Florida Health Sciences Center, Inc.'s Board of Directors, Florida Health Sciences Center, Inc., Iminary Healthcare Staffing and The Surgery Center at TGH Brandon HealthPlex

Supervising Licensed Independent Practitioner (LIP)/TGH Supervisor
Non-Employee Authorization Statement

Applicant Name: _____

Applicant Credentials (if any): _____

Name of Supervising (LIP) or TGH Supervisor: _____

Credentials of (LIP) or TGH Supervisor: _____

Directions: Please provide a statement detailing the duties that the above listed applicant will be performing under your direction at TGH:

___ Chart Review
___ Observational
___ Rounding
___Clinical Research
___ other (specify below)

_____
_____
_____
_____
_____

For RESEARCH ONLY, please check all that apply:

- ☐ Screening for potential research subjects.
- ☐ Obtaining informed consent/HIPAA authorization from subjects or their families.
- ☐ Obtaining data from subjects' medical records (access to Epic).
- ☐ Monitoring study subjects throughout study duration (including during TGH hospitalization).
- ☐ Scheduling tests and/or procedures per the approved protocol.
- ☐ Ordering labs and/or procedures per the approved protocol.
- ☐ Obtaining labs and performing other necessary tests/procedures per the approved protocol.
  Define tests/procedures: _____
- ☐ Liaison for residents/physicians regarding research process and required patient care specific to research study.

- ☐ Providing inservices to TGH staff on study material.
- ☐ Preparing, maintaining, and submitting regulatory paperwork for TGH and IRB review.
- ☐ Preparing, maintaining, and submitting TGH enrollment and billing forms to ensure proper notification and billing of tests/procedures related to the research study.
- ☐ Monitoring of study subjects for adverse events.
- ☐ Transportation of study drug or device from pharmacy or office to subject.
- ☐ Administration of study medications per the approved protocol, and within the scope of their License and competency/training.
- ☐ Assist the PI with placement of a device such as an HUD/HDE, IDE, etc. (licensed personnel only).
- ☐ Other: _____

Approval:

☐ Recommended ☐ Not Recommended

☐ Recommended with the following stipulations:

_____

_____

_____

_____

Reviewed by (please print): _____
Supervising Physician/TGH Supervisor name

Signature: _____ Date: _____
Supervising Physician/TGH Supervisor (Required)

Contact Number of Supervising Physician/TGH Supervisor Providing Statement: (Required)

_____ Email address (Required): _____

Tampa General Hospital

ALLIED HEALTH PROFESSIONAL (AHP)
Confidential Professional Reference

Name of Applicant: _____ *When complete, please seal in provided envelope and return to the requesting AHP.*

The professional identified above has applied for permission to provide patient care services, as an Allied Health Professional at Tampa General Hospital, as a non-employee.

The information you will provide is being collected on behalf of the Tampa General Hospital's Human Resources Authorization Committee (HRAC). This information will only be used for evaluation by the HRAC.

How long have you known the applicant? _____

My knowledge of the applicant's professional competence is based on:

_____ **Personal knowledge from close working relationship**

_____ **As a teacher**

_____ **Long-time observation**

_____ **Short-time observation**

_____ **Other (describe)** _____

Please describe your knowledge of the applicant's professional competence. This should be based on demonstrated competence compared to that reasonably expected a peer professional with similar level of training, experiences and background.

	Favorable	Unfavorable	Unknown
Understanding his/her field			
Common sense in his/her field			
Dedication			
Humaneness and compassion to patients			
Availability to patients			
Professional judgment			
Technical skills			
Citizenship			
Relationship to others			
Current clinical competence			
Sense of responsibility			

Please check one of the below:

_____ **Recommend without reservations**

_____**Recommend with the following exceptions:** _____

_____

_____ **Do not recommend**

Additional Comments:

_____

_____

_____

_____

_____
Signature of person completing this form *

_____
Print name and title/credentials

_____
Telephone

***<u>Please return this form to Applicant directly.</u>**

Tampa General Hospital

ALLIED HEALTH PROFESSIONAL (AHP)
Confidential Professional Reference

Name of Applicant: _____ ***When complete, please seal in provided envelope and return to the requesting AHP.***

The professional identified above has applied for permission to provide patient care services, as an Allied Health Professional at Tampa General Hospital, as a non-employee.

The information you will provide is being collected on behalf of the Tampa General Hospital's Human Resources Authorization Committee (HRAC). This information will only be used for evaluation by the HRAC.

How long have you known the applicant? _____

My knowledge of the applicant's professional competence is based on:

_____ **Personal knowledge from close working relationship**

_____ **As a teacher**

_____ **Long-time observation**

_____ **Short-time observation**

_____ **Other (describe)** _____

Please describe your knowledge of the applicant's professional competence. This should be based on demonstrated competence compared to that reasonably expected a peer professional with similar level of training, experiences and background.

	Favorable	Unfavorable	Unknown
Understanding his/her field			
Common sense in his/her field			
Dedication			
Humaneness and compassion to patients			
Availability to patients			
Professional judgment			
Technical skills			
Citizenship			
Relationship to others			
Current clinical competence			
Sense of responsibility			

Please check one of the below:

_____ **Recommend without reservations**

_____**Recommend with the following exceptions:** _____

_____

_____ **Do not recommend**

Additional Comments:

_____

_____

_____

_____

_____
Signature of person completing this form *

_____
Print name and title/credentials

_____
Telephone

***Please return this form to Applicant directly.**

Tampa General Hospital

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***<u>Please return this form to Applicant directly.</u>**

ALL POLICIES AND FORMS REFERRED TO IN THIS POLICY ARE AVAILABLE ON THE TGH PORTAL

Code of Conduct

TABLE OF CONTENTS

PAGE

PURPOSE/POLICY 3

TGH MISSION 3

TGH VISION 3

TGH CORE VALUES 3

PRINCIPLES AND STANDARDS 4

Principle 1 – Leadership Responsibilities 4
Standard 1.1 – Guidelines 4

Principle 2 – Workplace Conduct and Employment Practices 5
Standard 2.1 – Availability for Work 5
Standard 2.2 – Adherence to Work Schedules 5
Standard 2.3 – Employee Etiquette 5
Standard 2.4 – Property of Others/Personal Use of TGH Property 5
Standard 2.5 – Signing of Personnel Documents 6
Standard 2.6 – Falsification 6
Standard 2.7 – Safety 6
Standard 2.8 – Controlled Substances 6
Standard 2.9 – Substance Abuse and Mental Acuity 6
Standard 2.10 – Solicitation 6
Standard 2.11 – Smoking 6
Standard 2.12 – Inside Information 7
Standard 2.13 – Harassment and Workplace Violence 7

Principle 3 – Business Ethics 7
Standard 3.1 – Patient Relationship/Protection 7
Standard 3.2 – Honest Communication 8
Standard 3.3 – Misappropriation of Proprietary Information/Copyrights 8
Standard 3.4 – Marketing Practices 8
Standard 3.5 – Research 9

Principle 4 – Confidentiality 9
Standard 4.1 – Patient/Family Information 9
Standard 4.2 – Proprietary Information 9
Standard 4.3 – Confidentiality of Information 9
Standard 4.4 – Personnel Actions/Decisions 9

Principle 5 – Business Relationship 10
Standard 5.1 – Gifts and Gratuities 10
Standard 5.2 – Workshops, Seminars, and Training Sessions 10
Standard 5.3 – Relationships with Subcontractors/Suppliers 10
Standard 5.4 – Relationship with Other Healthcare Partners 11
Standard 5.5 – License and Certification Renewals 12
Standard 5.6 – Business Inducements 12

Principle 6 – Protection of Assets 12
Standard 6.1 – Internal Control 12
Standard 6.2 – Financial Reporting 12
Standard 6.3 – Travel and Entertainment 12
Standard 6.4 – Personal Use of Corporate Assets. 12
Standard 6.5 – Computers, E-mail and Electronic Communications 13
Standard 6.6 – Accurate Retention and Disposition of Records 13

Principle 7 – Legal Compliance 13
Standard 7.1 – Antitrust 13
Standard 7.2 – Tax 13
Standard 7.3 – Lobbying/Political Activity 13
Standard 7.4 – Fraud and Abuse 14
Standard 7.5 – Environmental 14
Standard 7.6 – Discrimination 14
Standard 7.7 – Emergency Treatment 15
Standard 7.8 – Dealing with Accrediting Bodies 15
Standard 7.9 – Regulatory Compliance 15
Standard 7.10 Summary of Selected Federal and State Regulations 16

Principle 8 – Conflict of Interest 17
Standard 8.1 – Outside Financial Interests 17
Standard 8.2 – Services for Competitors/Vendors 17
Standard 8.3 – Participation on Boards of Directors/Trustees 17
Standard 8.4 – Compensated Outside Activities and Employment 18

ADMINISTRATION OF THE CORPORATE CODE OF CONDUCT 18

FORMS RELATED TO THIS POLICY - Available on the TGH Portal

Core Values – Signature Form (Form #C1709)
Code of Conduct Acknowledgement Form (Form #H124)
Conflict of Interest Certification Statement (Form #C131)

PURPOSE/POLICY

This Code of Conduct, which reflects our tradition of caring, provides guidance to ensure our work is done in an ethical and legal manner. It emphasizes the shared common values and culture that guide our actions. It also contains resources to help resolve any questions about appropriate conduct in the work place. Your adherence to its spirit, as well as its specific provisions, is absolutely critical to our future.

TGH has a rich heritage of values and traditions, which are reflected in our Vision and Mission Statements and in this Code of Conduct. We are equally committed to ensuring that our actions consistently reflect our words. In this spirit, we expect all of our healthcare partners' actions to reflect the high standards set forth in this Code of Conduct.

Definitions:

TGH healthcare partner: For the purpose of this policy, a healthcare partner is defined as an employee, volunteer, or member of the medical staff who holds a medical staff office, or who serves on any medical staff or TGH committee, or who is compensated for services by TGH.

Key leaders: For the purpose of this policy, a key leader includes senior management, department directors, and other managers who are identified as members of the Leadership Group.

This Code of Conduct contains principles articulating the policy of TGH and standards, which are intended to provide additional guidance to our healthcare partners. These standards are neither exclusive nor complete. All healthcare partners are responsible for ensuring their behavior and activity is consistent with this Code of Conduct while on hospital premises or conducting TGH business off site.

Additionally, residents, students, contractors, vendors, and other individuals or entities, who may have a business relationship with TGH, are expected to adhere to the principals espoused in this policy.

Violations of any of the following minimum expectations of behavior by TGH partners may lead to disciplinary actions, up to and including termination of employment or relationship with TGH. In the case of residents, students, contractors, vendors, and other non-employees, the affiliation or relationship with TGH may be terminated.

TGH MISSION

Tampa General Hospital is committed to providing the residents of West Central Florida with excellent and compassionate health care, ranging from the simplest to the most complex medical services. As a teaching facility, Tampa General partners with academic and community institutions to support both their teaching and research missions. As the region's leading safety net hospital, we reaffirm our commitment to providing high-quality health services to all residents.

TGH VISION

Tampa General Hospital will be recognized as a leading medical center in Florida and one of the best in the nation. We will be at the forefront of clinical services, medical research and education. With our physician and university partners, we will create, teach, and deliver tomorrow's breakthroughs in medical science.

TGH CORE VALUES

"Core Values - Signature Form" (Form #C1709) will be signed by new TGH healthcare partners, upon hire and/or appointment.

1. Respect, caring, courtesy, dignity, and a sense of fairness must be shown to all individuals, including patients, families, visitors, employees, trainees, students, volunteers, and healthcare professionals. Due sensitivity must be shown to the needs of individuals from diverse backgrounds related to gender, race, age, disability, nationality, sexual orientation, and religion.

2. Mutual understanding must define all communications between team members. Communication must be open, respectful, and direct in order to optimize health services.

3. All individuals must be supported in their attempts to assert themselves in pursuit of patient safety and optimal quality of care.

4. Conflict resolution must proceed in a non-threatening, constructive, and private manner.

5. Teaching, research, and patient care must be subject to the highest ethical standards, intellectual honesty, and competence.

6. Properly report to supervisors, any individual who has been observed to be impaired in his ability to perform assigned duties, whether the cause is emotional issues, substance abuse, etc.

7. Adverse event reporting and potential safety hazard reporting should proceed promptly; and all individuals are expected to encourage their colleagues to report such events.

8. Full cooperation is expected in investigations and briefings related to adverse events.

9. The privacy and confidentiality of all individuals is to be respected. All TGH AND HIPAA regulations regarding personal health information must be strictly observed.

10. Uphold the rules, regulations, and policies of TGH.

11. Properly and responsibly utilize all TGH facilities and property, including computer facilities and telecommunications assets.

12. Maintain education and training standards required to perform job duties.

13. Be fit for duty during work time, including during on-call time.

PRINCIPLES AND STANDARDS

Principle 1 – Leadership Responsibilities
While TGH healthcare partners are obligated to follow the TGH Code of Conduct, we expect our key leaders to set the example and to be a model in every respect.

TGH key leaders must ensure that those on their team have sufficient information to comply with law, regulation, and policy, as well as the resources to resolve ethical dilemmas. They must help to create a culture within TGH that promotes the highest standards of ethics and compliance. This culture must encourage everyone in the organization to raise concerns when ethical issues arise. We must never sacrifice ethical and compliant behavior in the pursuit of business objectives.

Standard 1.1 - Guidelines
The conduct of any healthcare partner that interferes with the effective operation of TGH's business is prohibited. The behavior standards listed below and others, which may be established from time-to-time, are not all-inclusive. Rather, they are published to provide a general understanding of what TGH considers to be the minimum acceptable levels of behavior or conduct. The behavior standards are merely examples of the types of conduct to which a healthcare partner is expected to adhere.

TGH may impose disciplinary action in those instances involving employees where management decides it is appropriate. Disciplinary actions include, but are not limited to, verbal warnings, written warnings, suspensions without pay, and discharge. TGH retains the right to determine what discipline will be imposed in each individual situation. See "Demotions" (HR-73) and "Disciplinary Action" (HR-72) policies for further details.

Principle 2 - Workplace Conduct and Employment Practices
TGH is dedicated to high standards of business conduct and will not engage in any activity that unfairly or illegally impacts our patients, healthcare partners, suppliers, or competitors. We encourage a teamwork approach, sound business fundamentals, innovation, and hard work to establish and maintain our leadership position in the markets we serve.

If you learn about a violation of this Code of Conduct or a violation of law taking place at TGH, you must inform your Manager, Director, or the Chief Compliance Officer (CCO) as soon as possible. You may also call the Compliance Line (1-800-352-6875). Calls to the Compliance Line will be treated confidentially and may, at the caller's request, be anonymous. We assure you that anyone who, in good faith, reports a suspected violation will be protected from retaliation or punishment, even if it turns out that there was no actual violation. We want to know about possible problems so that we can address them.

Standard 2.1 - Availability for Work
Acceptable attendance by performing your job duties, in appropriate dress or uniform, each scheduled workday, is expected. Sleeping or being under the influence of alcohol or other drugs, except by prescription, during work time, is prohibited. Refer to Standards 2.7 and 2.8 below for additional requirements.

Patterns of unacceptable attendance will be taken into consideration for disciplinary purposes. One shift no-call/no-show will result in immediate suspension without pay. Consecutive shifts no-call/no-show is considered job abandonment and will result in immediate discharge. Refer to policy "Attendance & Tardiness" (HR-79) for additional requirements.

Standard 2.2 – Adherence to Work Schedules and Clocking In /Out
Hourly (non-exempt) staff members are expected to punch-in, and punch-out, at their assigned time clocks in accordance with their approved schedule unless they have been assigned a Kronos Timestamp license and the ability to remotely access and record their time by computer (ie. those working remotely). Deviations from an employee's approved schedule, as well as missed punches, require authorization and documented approval from management. Patterns of missed punches and /or deviations from the approved schedule which require manual input time-keeping transactions, may delay the timely payment of relevant wages and/or be subject to disciplinary action if repetitive, give the appearance of avoiding tardiness monitoring, or are not a true representation of the work performed.

Non-exempt employees are not permitted to do any work without being clocked in. Each employee is responsible for clocking in and out with his/her own badge. Clocking in or out for another employee is grounds for termination. Each employee is required to be at his/her workstation at their schedule work time.

Standard 2.3 - Employee Etiquette/Behavior that Undermines a Culture of Safety
TGH has created a culture of safety by setting expectations, and subsequent consequences, for actions that could potentially compromise the well being of our patients. Interaction with patients, visitors, physicians, and co-partners, in a respectful manner, is expected. Profanity, vulgar gestures, loud talking, being discourteous, fighting, or other inappropriate behavior is prohibited. Any assigned duties not completed must be reported to your supervisor within an appropriate time frame. Refusal to comply with requests from management or showing disrespect to any member of management or designee is prohibited.

Each TGH healthcare partner is also expected to make every effort to maintain the appearance of TGH and its grounds. This means that every TGH healthcare partner is responsible for picking up trash (as an example). It is also an expectation that TGH healthcare partners will always assist customers who appear lost or confused by giving directions or taking the person to their destination. See "Physician Disruptive Behavior" policy (HR-92), for medical staff etiquette.

All TGH healthcare partners' actions that should not be viewed or overheard by customers/guests/other TGH healthcare partners, such as personal conversations, cell phone calls, etc., should be kept within the "Off Stage" areas.

Personal cell phones are not to be used while in an "On Stage" area; and are to be set on "silent alert or vibrate" at all times, so that patient care is not disrupted.

Healthcare partners posting information on personal internet blogs and social networking websites, such as, but not limited to, *Facebook, MySpace, Twitter*, etc. may not have a reasonable expectation of privacy in what they do, say, or post. In certain instances, Tampa General Hospital (TGH) may have legitimate business concerns resulting from healthcare partners' outside/off-duty activities that can be considered disruptive to TGH business operations.

Information that may be considered disruptive to TGH's health care mission, when posted on internet sites, includes, but is not limited to: threats of violence or harassment; references to ongoing, illegal drug use or other illegal activity; references to a non-disclosed conflict of interest; sexually explicit material; racist or other discriminatory remarks; disclosure of confidential or proprietary information belonging to TGH; disclosure of confidential patient information, including any digital images with or without patient identifiers; use of TGH's name or logo without permission; representing personal opinions as those of TGH; and anything else that violates TGH policies.

Standard 2.4 - Property of Others/Personal Use of TGH Property
Treating the property of others and TGH with respect is expected. Unauthorized possession, conversion, destruction, removal or defacing of the property of others or TGH is prohibited. It is the responsibility of all TGH healthcare partners to preserve the organizational assets, including time, material, supplies, equipment, and information.
As a general rule, the personal use of any TGH asset without the prior approval of your supervisor is prohibited.

Standard 2.5 - Signing of Personnel Documents
Signing TGH documents, such as performance appraisals and disciplinary forms, is expected. Signing a document does not necessarily mean you agree with its contents. However, refusal to sign is considered insubordination.

Standard 2.6 – Falsification
Documenting true and accurate entries on TGH records, patient medical records, forms, or other documents, is expected. Falsification of employment applications, employment records, time sheets (including clocking in or out for another employee), hospital records, forms, or other documents, are prohibited. Supplying false information verbally is also prohibited.

Standard 2.7 – Safety
Compliance with all safety and security rules, such as parking away from fire lanes, is expected. Possession and/or control of weapons, such as guns, knives, or sticks, not used for work purposes, as well as possession and/or control of illegal drugs and substances, is prohibited. Healthcare partners with firearms on TGH property, for any purpose, is prohibited. This includes healthcare partners who have a Florida Concealed Weapons License. In addition, all healthcare partners are required to submit to inspection of personal items, such as bundles, packages, briefcases, and handbags, by security personnel or management. TGH property, such as lockers and desks, are also subject to inspection by TGH at any time.

To further enhance the security of TGH Healthcare partners, a complete background check is conducted on all new employees prior to being hired. In order to maintain that level of security, any employee who is arrested while employed at Tampa General Hospital must notify their manager within 48 hours of the arrest. Failure to do so is considered falsification and may result in disciplinary action up to and including discharge.

Standard 2.8 – Controlled Substances
Some of our healthcare partners routinely have access to prescription drugs, controlled substances, and other medical supplies. Many of these substances are governed and monitored by specific regulatory organizations and must be administered by physician order only. It is extremely important that these items be handled properly and only by authorized individuals to minimize risks to us and to patients. If it is discovered that the diversion of drugs from the organization has occurred, a report of the incident should be made immediately. See "Drug Free Workplace" policy (HR-80) for further details.

Standard 2.9 – Substance Abuse and Mental Acuity
To protect the interests of our healthcare partners and paticuts, TGH is committed to an alcohol- and drug-free work environment. All TGH healthcare partners must report for work free of the influence of alcohol and illegal drugs. Reporting to work under the influence of any illegal drug or alcohol, having an illegal drug in your system; or using, possessing, or selling illegal drugs while on TGH work time or property, may result in immediate termination. Drug testing may be used as a means of enforcing this policy.

It is also recognized that individuals may be taking prescription drugs, which could impair judgment or other skills required in job performance. If questions arise about the effect of such medication on performance, consult with a supervisor. See "Drug Free Workplace" (HR-80) and "Physician Disruptive Behavior" (HR-92) policies for further details.

Standard 2.10 – Solicitation
Solicitation and distribution or circulation of printed material on TGH property is prohibited when the persons soliciting or the person being solicited is on working time. Working time means the time employees are expected to be working and does not

include rest, meal, or other authorized breaks. Distribution of literature by healthcare partners on TGH's property in non-working areas during working time is prohibited. Distribution of literature by healthcare partners on TGH's property in working areas is also prohibited. Solicitation and distribution by non-employees is subject to approval by the Vice President of Human Resources. See "Solicitation, Distribution, and Loitering" policy (HR-63) for further details.

Standard 2.11 – Smoking
TGH is a smoke-free environment. Smoking is prohibited in any building on the TGH campus or in TGH vehicles. Smoking is only permitted in designated staff areas. See "Smoking Management" policy (EC-25) for further details.

Standard 2.12 – Inside Information
Non-public, material information may include plans for mergers, marketing strategy, financial results, or other business dealings. Discussion of this type of information with anyone outside of the organization is prohibited. Within the organization, discussion of this information should be on a strictly "need-to-know" basis only with other healthcare partners who require this information to perform their jobs.

Standard 2.13 – Harassment and Workplace Violence
Each TGH healthcare partner has the right to work in an environment free of harassment. TGH will not tolerate harassment by anyone based on the diverse characteristics or cultural backgrounds of those who work with us. Degrading or humiliating jokes, slurs, intimidation, or other harassing conduct is not acceptable in the workplace.

Any form of sexual harassment is strictly prohibited. This prohibition includes unwelcome sexual advances or requests for sexual favors in conjunction with employment decisions. Moreover, verbal or physical conduct of a sexual nature that interferes with an individual's work performance or creates an intimidating, hostile, or offensive work environment, is strictly prohibited.

Harassment also includes incidents of workplace violence. Workplace violence includes robbery and other crimes, stalking cases, violence directed at the employer, terrorism, and hate crimes committed by current or former healthcare partners. Healthcare partners who observe or experience any form of harassment or violence, should report the incident to their supervisor, the Human Resources Department, the Safety Director, a member of management, the CCO or the Compliance Line, 1-800-352-6875. See "Harassment" policy (HR-62) for further details.

Principle 3 - Business Ethics
In furtherance of TGH's commitment to the highest standards of business ethics and integrity, all TGH healthcare partners will accurately and honestly represent TGH and will not engage in any unethical activity or scheme.

Standard 3.1 - Patient Relationship/Protection
Protection of the well-being and privacy of patients is expected at all times. Neglect and/or mistreatment of patients, patients' reputations, or unauthorized removal or disclosure of patient records, whether verbal, written, or electronically transmitted, are prohibited.

Patient Rights: The mission of TGH is to provide quality healthcare to all our patients. All patients are treated with respect and dignity and provided care that is both necessary and appropriate. No distinctions are made in the admission, transfer or discharge of patients, or in the care provided, based on diverse characteristics or cultural backgrounds. Clinical care is based on identified patient healthcare needs.

Upon admission, each patient is provided with a written statement of patient rights. This statement includes the rights of the patient to make decisions regarding medical care and conforms to all applicable state and federal laws.

Patients' involvement in all aspects of their care and obtaining informed consent for treatment is assured. As applicable, each patient or patient representative is provided with a clear explanation of patient care. It includes, but is not limited to, diagnosis, treatment plan, right to refuse or accept care, care decision dilemmas, advance directive options, estimates of treatment costs, and organ donation and procurement. Also, an explanation is provided of the risks and benefits associated with each available treatment option. Patients have the right to request transfers to other facilities. In such cases, the patient will be given an explanation of the benefits, risks, and alternatives.

Patients are informed of their right to make advance directives. Patient advance directives will be honored within the limits of the law and the organization's mission, philosophy, and capabilities.

Patients and their representatives will be accorded appropriate confidentiality, privacy, security and protective services, opportunity for resolution of complaints, and pastoral counseling. Any restrictions on a patient's visitors, mail, telephone, or other communications must be evaluated for their therapeutic effectiveness and fully explained to and agreed upon by the patient or patient representative.

Patients are treated in a manner that preserves their dignity, autonomy, self-esteem, civil rights, and involvement in their own care. TGH healthcare partners must clearly understand their role in supporting patient rights. Compassion and care are part of TGH's commitment to the patients it serves. It is expected that personal conversations among TGH healthcare partners will not take place in the presence of customers.
TGH strives to provide health education, health promotion, and illness-prevention programs as part of its efforts to improve the quality of life of its patients and communities.

Standard 3.2 - Honest Communication
TGH requires candor and honesty from individuals in the performance of their responsibilities and in communication with individuals and/or entities conducting business and other activities with the organization, such as attorneys and auditors. Legal or Media inquiries should be directed to the appropriate department. No TGH healthcare partner shall make false or misleading statements to any patient, person, or entity doing business with TGH, about other patients, persons, or entities doing business or competing with TGH, or about the products or services of TGH or its competitors.

Standard 3.3 - Misappropriation of Proprietary Information/Copyrights
TGH healthcare partners shall not misappropriate confidential or proprietary information belonging to another person or entity, nor utilize any publication, document, computer program information, or product in violation of a third party's interest in such a product. All TGH healthcare partners are responsible for ensuring that they do not improperly copy, for their own use, documents or computer programs in violation of applicable copyright laws or licensing agreements. TGH healthcare partners shall not utilize or provide others confidential business information obtained from competitors, including customer lists, price lists, contracts, or other information in violation of a covenant not to compete, prior employment agreements, or any other information likely to provide an unfair competitive advantage to TGH.

TGH healthcare partners may only make copies of copyrighted materials pursuant to the organization's policy on such matters. Refer to "Copyright" policy (LD-85) for additional requirements.

Standard 3.4 - Marketing Practices
Antitrust: Antitrust laws are designed to create a level playing field in the marketplace and to promote fair competition. These laws could be violated by discussing TGH business with a competitor, such as how prices are set, disclosing the terms of supplier relationships, allocating markets among competitors, or agreeing with a competitor to refuse to deal with a supplier. Competitors are defined as other health systems and facilities in markets where TGH operates.

At trade association meetings, be alert to potential situations where it may not be appropriate for participation in discussions regarding prohibited subjects with competitors. Prohibited subjects include any aspect of pricing, TGH's services in the market, key costs, such as labor costs and marketing plans. If a competitor raises a prohibited subject, end the conversation immediately. Document refusal to participate in the conversation by requesting the objection be reflected in the meeting minutes and notify the Compliance Department of the incident.

Gathering Information about Competitors: It is not unusual to obtain information about other organizations, including our competitors, through legal and ethical means, such as public documents, public presentations, journal and magazine articles, and other published and spoken information. However, it is not acceptable to obtain proprietary or confidential information about a competitor through illegal means. It is also not acceptable to seek proprietary or confidential information when doing so would require anyone to violate a contractual agreement, such as a confidentiality agreement with a prior employer.

Marketing and Advertising: TGH may use marketing and advertising activities to educate the public, provide information to the community, increase awareness of our services, and to recruit healthcare partners. Presentation of only truthful, fully informative, and non-deceptive information in these materials and announcements will be made. All marketing materials will reflect services available and the level of licensure and certification.

Personal: The central part of the TGH mission is a commitment to excellent and compassionate health care for the community that TGH serves. It is expected that all TGH healthcare partners display behavior that reflects the TGH environment of healing. At all times, each TGH healthcare partner should show utmost respect for the hurts/problems/joys our patients and families may be experiencing. The TGH culture is to make the patient, the patient's family, and all guests feel as though the patient is always in the best possible hands for care.

Each TGH healthcare partner contributes to the positive TGH culture of healing. It is your responsibility as a TGH healthcare partner to maintain the required criteria for your position, including licenses, professional training, any other specific requirements, as well as uphold all local, state, and federal laws. Any violation of these requirements is a negative reflection on the TGH environment of care.

The TGH healthcare partner should be aware of his/her behavior on both the main and off-site campus locations.

Standard 3.5 – Research

High ethical standards in any research, conducted by our physicians and professional staff, will be followed. Intentional research misconduct will not be tolerated. All research conducted at TGH requires review by the Administrative Research Review Committee and approval by the appropriate USF Institutional Review Board (IRB) prior to initiation. The IRB has ultimate responsibility for the protection of human subjects.

All patients asked to participate in a research project are given a full explanation of alternative services that might prove beneficial to them. They are also fully informed of potential discomforts and are given a full explanation of the risks, expected benefits, and alternatives. The patients are fully informed of the procedures to be followed, especially those that are experimental in nature. Refusal of a patient to participate in a research study will not compromise their access to services.

See "TGH Feasibility Committee" policy (RI-57) for further details.

Principle 4 - Confidentiality

All TGH healthcare partners shall strive to maintain the confidentiality of patient and other confidential information in accordance with applicable legal and ethical standards.

TGH healthcare partners are in possession of and have access to a broad variety of confidential, sensitive, and proprietary information. Inappropriate release of this information could be injurious to individuals, the TGH business partners, and TGH itself. Every TGH healthcare partner has an obligation to protect and safeguard confidential, sensitive, and proprietary information in a manner designed to prevent the unauthorized disclosure of information. Refer to the TGH Confidentiality policies for related information.

Standard 4.1 - Patient/Family Information

All TGH healthcare partners have an obligation to conduct themselves in accordance with the principle of maintaining the confidentiality of patient and family information in accordance with all applicable laws and regulations. Access to patient care information is limited to TGH healthcare partners involved in providing services to that patient. TGH healthcare partners shall refrain from revealing any personal or confidential information concerning patients or family members, unless legally required or there is a valid release for patient care purposes. If questions arise regarding an obligation to maintain the confidentiality of information or the appropriateness of releasing information, TGH healthcare partners should seek guidance from their manager or the CCO.

Standard 4.2 - Proprietary Information

Information, ideas, and intellectual property assets of TGH are important to organizational success. Information pertaining to TGH's competitive position or business strategies, payment and reimbursement information, and information relating to negotiations with employees or third parties, should be protected and shared only with TGH healthcare partners having a need to know such information in order to perform their job responsibilities. TGH healthcare partners should exercise care to ensure that intellectual property rights, including patents, trademarks, copyrights, and software, are carefully maintained and managed to preserve and protect their value.

Standard 4.3 - Confidentiality of Information

As providers of health care, TGH healthcare partners have access to highly confidential information concerning patients. TGH healthcare partners also have access to highly confidential information regarding other TGH employees, Medical Staff members, and allied health professionals. All TGH healthcare partners must conduct themselves in a manner that will maintain the confidentiality of such information. TGH healthcare partners will only access information that they need to know in order

to perform their duties and responsibilities, as set forth in their job description or contract. TGH healthcare partners will not reveal any personal or confidential information concerning patients, employees, Medical Staff members, or others, unless it is done with proper written consent or through other appropriate legal channels.

Standard 4.4 - Personnel Actions/Decisions
Compensation, benefits, and other personal information relating to TGH healthcare partners shall be treated as confidential. Personnel files, credential files, compensation information, disciplinary matters, and similar information shall be maintained in a manner designed to ensure confidentiality in accordance with applicable laws. TGH healthcare partners must exercise due care to prevent the release or sharing of information beyond those persons who need to know such information to fulfill their job responsibilities

Principle 5 - Business Relationship
Business transactions with vendors, contractors, and other third parties shall be transacted free from offers or solicitation of gifts and favors or other improper inducements in exchange for influence or assistance in a transaction.

It is the intent of TGH that this policy be construed broadly to avoid even the appearance of improper activity. If there is any doubt or concern about whether specific conduct or activities are ethical or otherwise appropriate, the CCO should be contacted.

Standard 5.1 - Gifts and Gratuities
It is TGH's desire, at all times, to preserve and protect its reputation and to avoid the appearance of impropriety. Nothing in this standard shall prohibit a department manager from establishing stricter rules relating to the acceptance of gifts, gratuities, or other things of value from vendors.

Gifts from Patients or Family Members: TGH healthcare partners are prohibited from soliciting tips, personal gratuities, or gifts from patients and family members, and from accepting monetary tips or gratuities (valets are exempted from this requirement). TGH healthcare partners may accept non-monetary gifts of a nominal value from patients and family members. If a patient or another individual wishes to present a monetary gift to TGH, he/she should be referred to the Tampa General Hospital Foundation.

Gifts Influencing Decision-Making: TGH healthcare partners shall not accept gifts, favors, services, entertainment, or other things of value, to the extent that decision-making or actions affecting TGH might be influenced. Acceptance of perishable gifts, other gifts, or entertainment of nominal value may be ethically accepted if the gift would not influence, or reasonably appear to be capable of influencing, the healthcare partner's business judgment in conducting TGH business. Similarly, the offer or giving of money, services, or other things of value, with the expectation of influencing the judgment or decision-making process of any purchaser, supplier, customer, government official, or other person, by TGH, is absolutely prohibited. Any such conduct must be reported immediately to the CCO.

Gifts from Existing Vendors: TGH healthcare partners may retain gifts from vendors, which have a nominal value. TGH has made no attempt to define "nominal" as a specific dollar value. Rather, TGH expects its healthcare partners to exercise good judgment and discretion in accepting gifts. If a TGH healthcare partner has any concern whether a gift should be accepted, he/she should consult with his/her manager. To the extent possible, these gifts should be shared with co-partners. TGH healthcare partners shall not accept excessive gifts, meals, expensive entertainment, or other offers of goods or services which have more than a nominal value; nor may they solicit gifts from vendors, suppliers, contractors, or other persons.

If circumstances seem to dictate either acceptance or solicitation of gifts of more than nominal value from vendors, suppliers, contractors or other persons, prior approval from an appropriate VP must be obtained. Such prior approval, along with a reason for the gift, must be documented.

Vendor-Sponsored Entertainment: At a vendor's invitation, an individual may accept reasonable meals or refreshments at the vendor's expense. Occasional attendance at a local theater or sporting event, or similar entertainment at vendor expense, may also be accepted. In most circumstances, a regular business representative of the vendor should be in attendance with the TGH healthcare partner.

Standard 5.2 - Workshops, Seminars, and Training Sessions

Attendance at local, vendor-sponsored workshops, seminars, and training sessions is permitted. Attendance at out-of-town seminars, workshops, and training sessions, *at vendor expense*, is permitted only with the approval of an employee's supervisor and Vice President. Prior approval must be obtained and documentation provided on how the seminar, workshop, or training session will benefit TGH. See "Vendor Promotional Training" policy LD-5, for further details.

Standard 5.3 – Relationships with Subcontractors/Suppliers
TGH must manage its subcontractor and supplier relationships in a fair and reasonable manner, consistent with all applicable laws and good business practices. TGH promotes competitive procurement to the maximum extent practicable. Selection of subcontractors, suppliers, and vendors will be made on the basis of objective criteria, including quality, technical excellence, price, delivery, and adherence to schedules, service, and maintenance of adequate sources of supply. Purchasing decisions will be made on the supplier's ability to meet TGH's needs and not on personal relationships and friendships.

The highest ethical standards in business practices will always be employed in source selection, negotiation, determination of contract awards, and the administration of all purchasing activities. TGH will not communicate to a third-party, confidential information given by suppliers, unless directed in writing to do so by the supplier. Contract pricing and information to any outside parties will not be disclosed.

TGH healthcare partners may not utilize "insider" information for any business activity conducted by or on behalf of TGH. All business relations with contractors must be conducted at arm's length, both in fact, and in appearance, and in compliance with TGH policies. TGH healthcare partners must disclose personal relationships and business activities with contractor personnel who may be construed by an impartial observer as influencing the individual's performance or duties.
TGH healthcare partners have a responsibility to obtain clarification from management on questionable issues which may arise; and to comply, where applicable, with TGH's policy on Conflict of Interest, per Principle 8, shown below.

Standard 5.4 – Relationships with Other Healthcare Partners

Affiliated Physicians: Any business arrangement with a physician must be structured to ensure precise compliance with legal requirements. Such arrangements must be in writing and approved by outside legal counsel.

In order to ethically and legally meet all standards regarding referrals and admissions, TGH will adhere strictly to two primary rules:

1. Referrals are not paid for. Acceptance of patient referrals and admissions are based solely on the patient's clinical needs and TGH's ability to render the needed services. Payment or offer of payment is not made to anyone for referral of patients. Violation of this policy may have grave consequences for the organization and the individuals involved, including civil and criminal penalties, and possible exclusion from participation in federally funded healthcare programs.

2. Payments are not accepted for referrals that are made. No TGH healthcare partner is permitted to solicit or receive anything of value, directly or indirectly, in exchange for the referral of patients. Similarly, when making patient referrals to another healthcare provider, the volume or value of referrals that the provider has made (or may make) is not taken into account.

University of South Florida (USF): The TGH-USF Affiliation Agreement defines both parties' roles and TGH's retention of the responsibility for the quality of patient care.

Third-Party Payors:

Coding and Billing for Services: Great care will be taken to ensure that all billings to government and to private insurance payors reflect truth and accuracy and conform to all pertinent federal and state laws and regulations. Any TGH healthcare partner is prohibited from knowingly presenting or causing the presentation of claims for payment or approval which are false, fictitious, or fraudulent.

TGH will operate oversight systems designed to verify that claims are submitted only for services actually provided and that services are billed as provided. These systems will emphasize the critical nature of complete and accurate documentation of services provided. As part of the documentation effort, TGH will maintain current and accurate medical records.

Any subcontractors engaged to perform billing or coding services must have the necessary skills, quality assurance processes, systems, and appropriate procedures, to ensure that all billings for government and commercial insurance programs are

accurate and complete. TGH prefers to contract with such entities that have adopted their own ethics and compliance programs. Third-party billing entities, contractors, and preferred vendors that will be considered, must be approved consistent with the corporate policy on this subject.

Cost Reports: Our business involves reimbursement under government programs that require the submission of certain reports of our costs of operation. TGH will comply with federal and state laws relating to all cost reports. These laws and regulations define what costs are allowable and outline the appropriate methodologies to claim reimbursement for the cost of services provided to program beneficiaries. Given their complexity, all issues related to the completion and settlement of cost reports must be communicated through, or coordinated with, the Reimbursement Department.

Standard 5.5 - License and Certification Renewals
TGH healthcare partners and individuals retained as independent contractors in positions which require professional licenses, certifications, or other credentials, are responsible for maintaining the current status of their credentials and shall comply at all times with Federal and State requirements applicable to their respective disciplines. To ensure compliance, TGH may require evidence of the individual having a current license or credential status.

TGH will not allow any healthcare partner or independent contractor to work without valid, current licenses or credentials.

Standard 5.6 - Business Inducements
TGH healthcare partners shall not seek to gain any advantage through the improper use of payments, business courtesies, or other inducements. Offering, giving, soliciting, or receiving any form of bribe or other improper payment is prohibited.

Appropriate commissions, rebates, discounts, and allowances are customary and acceptable business inducements, provided they are approved by TGH management and do not constitute illegal or unethical payments. Any such payments must be reasonable in value, competitively justified, properly documented, and made to the business entity to which the original agreement or invoice was made or issued. Such payments should not be made to individual employees or agents of business entities.

In addition, TGH healthcare partners may provide gifts, entertainment, and meals of nominal value to TGH customers, current and prospective business partners, and other persons when such activities have a legitimate business purpose, are reasonable, and consistent with all applicable laws.

Principle 6 - Protection of Assets
All TGH healthcare partners will strive to preserve and protect TGH's assets by making prudent and effective use of TGH resources and properly and accurately reporting its financial condition.

Standard 6.1 - Internal Control
TGH has established control standards and procedures to ensure assets are protected and properly used and financial records and reports are accurate and reliable. All TGH healthcare partners share the responsibility for maintaining and complying with required internal controls.

Standard 6.2 - Financial Reporting
All financial reports, accounting records, research reports, expense accounts, time sheets, and other documents, must accurately and clearly represent the relevant facts and the true nature of a transaction. Improper or fraudulent accounting, documentation, or financial reporting is contrary to the policy of the Hospital and may be in violation of applicable laws. Refer to Leadership (LD), Human Resources (HR), and Management of Information (IM) sections of the TGH Policy Manual for specific policies related to financial reporting.

Standard 6.3 - Travel and Entertainment
Travel and entertainment expenses should be consistent with job responsibilities and TGH's needs and resources. It is TGH's policy that a TGH healthcare partner should not suffer a financial loss nor receive a financial gain as a result of business travel and entertainment. TGH healthcare partners are expected to exercise reasonable judgment in the use of TGH assets and to comply with TGH policies relating to travel and entertainment expenses. See "Travel and Expense Reimbursement" (LD-

7); and "Reimbursement of Expenses Related to Voluntary Leadership Service by Physicians and Designated Medical Directors" (LD-87) policies for further details.

Standard 6.4 - Personal Use of Corporate Assets
All TGH healthcare partners are expected to refrain from converting assets of TGH to personal use. All property and business of TGH shall be handled in a manner designed to further TGH's interest, rather than the personal interest of an individual. TGH healthcare partners are prohibited from the unauthorized use or taking of TGH open and/or used equipment and supplies, materials, or services. TGH healthcare partners shall obtain the approval of their manager or director prior to engaging in either of the following activities: (1) activities on TGH time which will result in remuneration to the TGH healthcare partner, or (2) the use of TGH open and/or used equipment and supplies, materials, or services for personal or non-work related purposes.

Standard 6.5 - Computers, E-Mail, and Electronic Communications
TGH's electronic devices, such as computers, facsimile machines, copiers, beepers, and telephonic communications systems are the property of TGH and are to be used solely for job-related purposes and for occasional personal necessities, i.e., any critical communications, medical appointments, emergency situations, etc. Personal cell phones are not to be used while in an "On Stage" area and are to be set on "silent alert or vibrate" at all times, so that patient care is not disrupted.

All information related to, transmitted to or from, or stored in these devices (including passwords) are also the property of TGH. Healthcare partners are not permitted to use a password to access, alter, copy, or retrieve any stored communications unless authorized to do so. TGH retains the right to monitor any and all systems at its discretion, including listening to and/or reading voice mail, E-mail messages, and Internet web sites. Specifically, access to inappropriate media sites, such as pornographic sites, is prohibited. Any other use requires permission from management. A member of Leadership (Manager, Director, or Vice President) must approve all "Everyone" emails originating in their department.

TGH provided electronic devices and computer software, such as, but not limited to, telephone and similar communications devices and systems, email/webmail, TGH Employee Portal, pagers, patient care applications, business intelligence applications, financial applications and departmental applications, represent TGH's primary forms of business communication and recordkeeping. As such, utilizing these forms of communication and record keeping, in accordance with TGH's standard practice or established policy, is required of all healthcare partners. It is each healthcare partner's responsibility to report faulty devices or systems, immediately, to ensure effective communication and record keeping is facilitated and maintained.

Standard 6.6 - Accurate Retention and Disposition of Records
Each TGH healthcare partner is responsible for the integrity and accuracy of the organization's documents and records; not only to comply with regulatory and legal requirements, but also to ensure that records are available to defend TGH's business practices and actions. No one may alter or falsify information on any record or document.

Medical and business documents and records are retained in accordance with the law and TGH's "Record Retention - Clinical and Non Clinical" policy (IM-35). Medical and business documents include paper documents, such as letters and memos; computer-based information, such as email or computer files on disk or tape; and any other medium that contains information about the organization or its business activities. It is important to retain and destroy records appropriately, according to TGH's policy. Tampering with, removing, or destroying records, prior to the specified date, is prohibited.

Principle 7 - Legal Compliance
TGH will strive to ensure that all activity, by or on behalf of TGH, is in compliance with applicable laws.

TGH healthcare partners are required to comply with all applicable laws, whether or not specifically addressed in these standards. If questions regarding the existence, interpretation, or application of any law arise, the TGH CCO should be contacted.

Standard 7.1 – Antitrust
All TGH healthcare partners must comply with applicable antitrust and similar laws which regulate competition. Examples of conduct prohibited by law include: (1) agreements to fix prices, bid rigging, and collusion (including price sharing) with competitors; (2) boycotts, certain exclusive dealing, and price discrimination agreements; and (3) unfair trade practices, including bribery, misappropriation of trade secrets, deception, intimidation, and similar unfair practices. TGH healthcare

partners are expected to seek advice from the TGH's CCO when confronted with business decisions involving a risk of violation of the antitrust laws.

Standard 7.2 – Tax
As a nonprofit entity, TGH has a legal and ethical obligation to act in compliance with applicable laws, to engage in activities in furtherance of its charitable purpose, and to ensure its resources are used in a manner which furthers the public good, rather than the private or personal interests of any individual. Consequently, TGH will avoid compensation arrangements in excess of fair market value, will pay only for those services actually provided, will accurately report payments to appropriate taxing authorities, and will file all tax and information returns in a manner consistent with applicable laws.

Standard 7.3 - Lobbying/Political Activity
All TGH healthcare partners are expected to refrain from engaging in activity which may jeopardize the tax-exempt status of the organization, including a variety of lobbying and political activities.

No TGH healthcare partner may make any agreement to contribute money, property, or services of an officer or employee at TGH's expense, to any political candidate, party, organization, committee, or individual, in violation of any applicable law. TGH healthcare partners may personally participate in and contribute to political organizations or campaigns, but they must do so as individuals, not as representatives of TGH, and they must do so using their own funds.

Where its experience may be helpful, TGH may publicly offer recommendations concerning legislation or regulations being considered. In addition, it may analyze and take public positions on issues that have a relationship to the operations of TGH, when TGH's experience contributes to the understanding of such issues. Prior to publication, Senior Management must approve any such public position.

TGH has many contacts and dealings with governmental bodies and officials. All such contacts and transactions shall be conducted in an honest and ethical manner. Any attempt to influence the decision-making process of governmental bodies or officials, by an improper offer of any benefit, is absolutely prohibited. Any requests or demands by any governmental representative for any improper benefit should be immediately reported to the CCO.

Any TGH healthcare partner, acting on behalf of TGH as a lobbyist, must be properly registered. TGH healthcare partners, who are not registered as lobbyists, are prohibited from lobbying activities.

Standard 7.4 - Fraud and Abuse
TGH expects TGH healthcare partners to refrain from any conduct which may violate fraud and abuse laws, with respect to all federally funded programs. These laws prohibit, with respect to all payments made under any federally funded program:

(1) Direct, indirect, or disguised payments in exchange for the referral of patients; (2) the submission of false, fraudulent or misleading claims to any government entity or third-party payor, including claims for services not rendered, claims which characterize the service differently than the service actually rendered, or claims which do not otherwise comply with applicable program or contractual requirements; and (3) making false representations to any person or entity in order to gain or retain participation in a program or to obtain payment for any service.

Standard 7.5 - Environmental
It is the policy of TGH to manage and operate its business in a manner which respects our environment and conserves natural resources. TGH healthcare partners will strive to utilize resources appropriately and efficiently, to recycle where possible, and otherwise dispose of all waste in accordance with applicable laws and regulations, and to work cooperatively with the appropriate authorities to remedy any environmental contamination for which TGH may be responsible. Refer to TGH's Safety policies on hazardous waste for related information.

In helping TGH comply with environmental laws and regulations, TGH healthcare partners must understand how their job duties may impact the environment. There must be adherence to all requirements for the proper handling of hazardous materials. Any situation regarding the discharge of hazardous substance, improper disposal of medical waste, or any other situation which may be potentially damaging to the environment, must be immediately reported.

Standard 7.6 - Discrimination
TGH believes that the fair and equitable treatment of TGH healthcare partners, patients, and other persons is critical to fulfilling its mission and goals.

It is the policy of TGH to enroll subscribers and treat patients without regard to age, race, color, creed, religion, national origin, disability, or any other classification prohibited by law.

It is the policy of TGH to recruit, hire, train, promote, assign, transfer, layoff, recall, and terminate employees, based on their own ability, achievement, experience, and conduct; without regard to age, race, color, creed, religion, national origin, disability, or any other classification prohibited by law. Refer to TGH's employment policies for related information.

No form of harassment or discrimination on the basis of age, race, color, creed, religion, national origin, disability, or any other classification prohibited by law, will be permitted. Harassment is defined as unwelcome or unsolicited verbal, non-verbal, printed, electronic mail, or physical conduct which substantially interferes with an employee's job performance or which creates an intimidating, hostile, or offensive work environment. Each allegation of harassment or discrimination will be promptly investigated in accordance with applicable TGH policies.

Standard 7.7 - Emergency Treatment

TGH follows the Emergency Medical Treatment and Active Labor Act ("EMTALA") in providing emergency medical treatment to all patients, regardless of ability to pay. Provided TGH has the capacity and capability, anyone with an emergency medical condition is treated and admitted, based on medical necessity. In an emergency situation or if the patient is in labor, financial and demographic information will be obtained only after an appropriate medical screening, examination, and necessary stabilizing treatment (including treatment for an unborn child). TGH does not admit, discharge, or transfer patients simply on their ability or inability to pay.

All TGH healthcare partners have a responsibility to understand that their role in ensuring that all people who request medical assistance, within the buildings or any place on the premises, are directed or taken to the Emergency Department or clinic registration desk.

Patients will only be transferred to another facility at the patient's request or if the patient's medical needs cannot be met at TGH (e.g., TGH does not have the capacity or capability) and appropriate care is knowingly available at another facility. Patients may only be transferred in strict compliance with the EMTALA guidelines.

Standard 7.8 - Dealing with Accrediting Bodies

TGH will deal with all accrediting bodies in a direct, open, and honest manner. No action should ever be taken in relationships with accrediting bodies that would mislead the accreditor or its survey teams, either directly or indirectly.

The scope of matters related to the accreditation of various bodies is extremely significant and broader than the scope of this Code of Conduct. The purpose of the Code of Conduct is to provide general guidance on subjects of wide interest within the organization. Accrediting bodies may be focused on issues, both of wide and somewhat more focused interest.

In any case, where TGH determines to seek any form of accreditation, obviously, all standards of the accrediting group are important and must be followed.

Standard 7.9 - Regulatory Compliance

TGH provides varied healthcare services. These services, generally, may be provided only pursuant to appropriate federal, state, and local laws and regulations. Such laws and regulations may include subjects, such as certificates of need, licenses, permits, accreditation, access to treatment, consent to treatment, medical record-keeping, access to medical records and confidentiality, patient's rights, terminal care decision-making, medical staff membership and clinical privileges, and Medicare and Medicaid regulations. The organization is subject to numerous other laws in addition to these healthcare regulations.

TGH will comply with all applicable laws and regulations. All TGH healthcare partners must be knowledgeable about and ensure compliance with laws and regulations affecting their work at TGH. The TGH administrative polices, as well as additional departmental policies, are available in each TGH healthcare partner's department. If a TGH healthcare partner is unsure of how laws, regulations, or policies apply to their job, they should contact their manager, director, or the Corporate Compliance Officer. Any suspected violations of any laws, regulations, or TGH policies should be immediately reported to a manager, director, the Corporate Compliance Officer, or the Corporate Compliance Line (1-800-352-6875). In support of The Joint Commission (TJC) requirements, TGH employees always have the right to contact The Joint Commission directly without contacting TGH first.

TGH will be forthright in dealing with any billing inquiries. Requests for information will be answered with complete, factual, and accurate information. TGH healthcare partners will cooperate with, and be courteous to, all government inspectors and provide them with the information to which they are entitled during an inspection.

During a government inspection, concealment, destruction, or alteration of any documents; lies or misleading statements made to the government representative, are prohibited. Attempts to cause another healthcare partner to fail to provide accurate information or obstruct, mislead, or delay the communication of information or records relating to a possible violation of law, should not be made.

TGH will provide its healthcare partners with the information and education needed to comply fully with all applicable laws and regulations.

Standard 7.10 -Summary of Selected Federal and State Regulations
There are numerous federal and state regulations that govern the healthcare industry. At the federal and state level, there has been, over many years, a focus on healthcare fraud abuse. Each employee should be familiar with some of the key regulations that follow:

Federal False Claims Act
Any person who knowingly presents or causes to be presented to the U.S. government, a false or fraudulent claim for payment or approval; knowingly makes, uses, or causes to be made or used, a false record or statement to get a false or fraudulent claim paid or approved by the government; or conspires to defraud the government, by getting a false or fraudulent claim allowed or paid, violates the Act. Violations of this law can result in Civil and Criminal Penalties.

Florida False Claims Act
Similar to the Federal False Claims Act, it prohibits false claims and other fraudulent activities, prohibits knowingly submitting false or fraudulent claims which causes the Florida government to pay claims that are false, and violations of this law can result in Civil and Criminal Penalties.

Staff members who lawfully report false claims or other fraudulent conduct or who otherwise assist in an investigation, action, or testimony, are protected from retaliation under both state and federal laws. In addition, TGH's Code of Conduct, Principle 2 states, "anyone who ... reports a suspected violation will be protected from retaliation or punishment, even if it turns out that there was no actual violation."

Both the federal and state laws also have provisions that allow employees and others to report directly to the respective levels of government suspected false or fraudulent activities.

Federal and Florida Anti-kickback Laws
Both the federal and state laws prohibit the payment, receipt, offer, or solicitation of money in exchange for the referrals, recommendations, or generation of healthcare goods or services; prohibits any direct or indirect economic benefit. This would include: money, tangible objects, subsidized rent, staff, business opportunities, etc. The laws expressly prohibit kickbacks and provide civil and criminal penalties for such actions.

Federal Stark I and II - Physician Referral Laws

Stark I
Prohibits physicians from referring Medicare and Medicaid patients to clinical laboratories with which the physician or a family member has a financial interest.

Stark II
Expanded Stark I to cover Medicaid patients and ten additional Health Services:
Physical Therapy, Occupational Therapy, Radiology, Radiation Therapy, durable medical equipment and supplies, parenteral and enteral nutrients, equipment and supplies, prosthetics and orthotics, home health, outpatient prescription drugs, and inpatient and outpatient hospital services. Please note that there are certain "Safe Harbor" arrangements that are appropriate.

Florida Patient Self-Referral Act
- This act applies to both public and private sector services.

- No Florida-licensed physician or practitioner may refer a patient to any entity providing "designated health services" in which the provider is an investor or has an investment interest.
- No Florida-licensed physician or practitioner may refer a patient for any health care item or service to an entity in which the provider is an investor, unless the investment interest meets conditions comparable to those for the large and small entity safe harbors in the federal safe harbor regulations.
- The statute also prohibits cross-referral schemes designed to circumvent the self-referral prohibitions.
- Sanctions for violations include the requirement to refund payments received pursuant to prohibited referrals, civil penalties, and disciplinary action by the practitioner's board.

Emergency Medical Treatment and Active Labor Act (EMTALA)
Refer to Standard 7.7. The Federal EMTALA anti-patient dumping laws require a hospital to provide emergency medial treatment to all patients, regardless of ability to pay. This would include, among other requirements, a medical screening examination, stabilizing the medical condition, obtaining acceptance to transfer, and imposes specific hospital and physician responsibilities.
Florida Access to Care
- Similar to the Federal EMTALA regulations, with a few differences.
  - Requires that, when applicable, the patient be transferred to the geographically closest, most appropriate hospital, with the capability and capacity.
  - Applies to inpatient situations
- The Agency for Health Care Administration (AHCA) provides an inventory list of hospital emergency services provided by each hospital in the State.
- Requires that the transferring hospital receive the patient back, once the emergency condition has been resolved.
- AHCA may deny, revoke, or suspend a license, or impose an administrative fine.

Principle 8 - Conflict of Interest
Individuals or companies with which TGH does business must be chosen solely on the basis of the best interests of TGH. All TGH healthcare partners should avoid any action, investment, interest or association that might interfere, or be perceived to interfere, with your independent exercise of judgment in the interests of TGH. This means that a TGH healthcare partner must not be in a position where personal outside business interests could affect decisions made on behalf of TGH.

All TGH healthcare partners are expected to regulate their activities so as to avoid actual impropriety and the appearance of impropriety, which might arise from the influence of those activities on business decisions of TGH, or from disclosure or private use of business affairs or plans of TGH.

Standard 8.1 - Outside Financial Interests
While not all-inclusive, the following will serve as a guide to the types of activities by the TGH healthcare partner or household member of the healthcare partner, which might cause a conflict of interest:
- Ownership in, or employment by, any outside concern which does business with TGH. This does not apply to stock or other investments held in a publicly held entity, provided the value of the stock or other investments does not exceed 5% of the entity's stock or other ownership interest. TGH may, following a review of the relevant facts, permit ownership interests which exceed these amounts, if management concludes such ownership interests will not adversely impact TGH's business interest or the judgment of the TGH healthcare partner.
- Representation of TGH by a TGH healthcare partner in any transaction in which he/she or a household member has a substantial personal interest.
- Disclosure or use of confidential, special, or inside information, of or about TGH; particularly for personal profit or advantage of the TGH healthcare partner or a household member.
- Competition with TGH by a TGH healthcare partner, directly or indirectly, in the purchase, sale, or ownership of property or property rights or interests, or business investment opportunities.

Standard 8.2 - Services for Competitors/Vendors
TGH healthcare partners, including those employees who are members of the Medical Staff, should not perform work or render services in a management, director, officer, or shareholder position for any competitor of TGH or for any organization with which TGH does business or seeks to do business outside the normal course of his/her employment with TGH without appropriate approval (employee – Vice President; physicians – Chief Medical Officer). Nor shall any TGH healthcare partner permit his/her name and the TGH title to be used in any fashion that would tend to indicate a business connection with such organization.

Standard 8.3 - Participation on Boards of Directors/Trustees
All TGH healthcare partners must obtain appropriate approval prior to serving as a member of the Board of Directors/Trustees of any organization that may impact TGH.

Any TGH healthcare partner participating on a Board must abstain from voting on any issue which may impact TGH.

All fees/compensation (other than reimbursement for expenses arising from Board participation) that are received by a TGH employee for Board services provided during normal work time, shall be paid directly to TGH.

TGH healthcare partners must disclose all Board of Directors/Trustees activities in the annual Conflict of Interest disclosure statement.

TGH retains the right to prohibit membership on any Board of Directors/Trustees where such membership might conflict with the best interest of TGH.

Questions regarding whether or not Board participation might present a conflict of interest should be discussed with the TGH healthcare partner's approving authority or the CCO.

Standard 8.4 – Compensated Outside Activities and Employment
TGH employees are encouraged, with the permission of their manager, to participate as faculty and speakers at educational programs and functions. However, any honoraria shall be turned over to TGH unless the TGH employee is either unpaid, not scheduled to work, or uses eligible benefit hours to attend that portion of the program for which the honoraria is paid. Honoraria received, regardless of whether earned on working time or non working time, may not exceed twenty-five percent of an employee's base annual rate or $50,000 in any calendar year. Employees must notify Human Resources of honoraria received in excess of this threshold. In cases where annual honoria exceed the threshold, a review of the circumstances surrounding the excess outside compensation will be conducted by the employee's Vice President.

TGH employees are prohibited from acting as a consultant or expert witness in any capacity for the Plaintiff's Bar. This involves, but is not limited to, consultation/review of medical records to establish standards of practice, signing of affidavits, and any written or sworn testimony.

ADMINISTRATION OF THE CORPORATE CODE OF CONDUCT

TGH expects each person to whom this Code of Conduct applies to abide by the principles and standards set forth herein and to conduct the business and affairs of TGH in a manner consistent with these principles and standards.

Failure to abide by this Code of Conduct, or the guidelines for behavior which the Code of Conduct represents, may lead to disciplinary action, up to and including termination of one's employment or affiliation with TGH. For alleged violations of the Code of Conduct, TGH will weigh relevant facts and circumstances. The extent to which the behavior was contrary to the express language or general intent of the Code of Conduct, the level of egregious behavior, the person's history with the organization, as well as other factors which TGH deems relevant to the situation, will be considered. Nothing in this Code of Conduct is intended to, nor shall be construed as, attempting to provide any additional rights to employees or other persons.

New TGH healthcare partners will sign a "Code of Conduct Acknowledgement Form" (Form #H124); "Conflict of Interest Certification Statement" (Form #C131); and "Core Values - Signature Form" (Form #C1709) upon hire and/or appointment. All TGH healthcare partners will be required to sign the Code of Conduct Acknowledgement Form for verification of review and understanding of the Code of Conduct, the TGH Core Values Signature Form, and Conflict of Interest Certification Statement. Thereafter, the TGH Core Values Signature Form will be signed by all TGH healthcare partners once a year; and only the key leaders and certain healthcare partners, as deemed necessary, will be required to complete the Conflict of Interest Certification Statement once a year, at a time designated by Human Resources. These forms will be maintained in the employee's file in Human Resources. A separate policy "Conflict of Interest" LD-40 and attestation form (Annual Disclosure Statement Regarding Conflict of Interest Policy - part of policy LD-40) is used for all TGH board members.

THIS POLICY REPLACES THE FOLLOWING POLICY: Conflict of Interest (HR-75)

APPROVED BY SENIOR MANAGEMENT TEAM: 9/7/09

APPROVED BY:

Sally Houston, M.D., Senior Vice President/CMO	Date	Anthony Escobio, Vice President, Patient Financial Services	Date
Thomas Bernasek, M.D., Chief of Staff, TGH	Date	Chris Roederer, Senior Vice President, Human Resources	Date
Janet Davis, Senior Vice President/CNO	Date	Mark Campbell, Vice President, Materials Management.	Date
Maureen Ogden, Vice President, Cardiovascular Services	Date	David Robbins, Vice President, Professional Services	Date
Cheryl Eagan, Senior Vice President, Support Services	Date	Judith M. Ploszek, Senior Vice President, Finance	Date
Veronica Martin, Associate CNO	Date	Steve Short, Executive Vice President/CFO	Date
John Bond, Vice President, Surgical Services	Date	Jean Mayer, Senior Vice President, Strategic Services	Date
Amy Paratore, Vice President, ED/Trauma Services	Date	Deana Nelson, Executive Vice President/COO	Date
Robin DeLaVergne, Senior Vice President Executive Director of TGH Foundation	Date	Scott Arnold, Vice President, Information Technologies	Date
Elizabeth Lindsay-Wood, Senior Vice President CIO, Information Technologies	Date	Jana Gardner, Vice President, Ambulatory Services	Date
Richard Paula, M.D., Vice President/CMIO	Date		