

Arkansas Children's Hospital

Policies and Procedures



P04 - Code of Ethical Behavior

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Distribution:	All Holders of Administrative Policy & Procedure Manual
Approved By:	Jonathan Bates, M.D., President/CEO
Recommended By:	David T. Berry Senior Vice President/COO
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POLICY

The Arkansas Children's Hospital, its Board of Directors, Medical and Affiliated Staff, and employees conduct patient care and all other business operations in an ethical manner consistent with its mission, vision/values, strategic plan, and those guiding policies referred to in the following sections. Such ethical practices include but are not limited to all areas of patient rights; billing practices, marketing practices; admission, transfer, and discharge practices; and avoidance of conflict of interest in contractual relationships.

PROCEDURE

A. Guiding Documents

Overall Ethical behavior is guided by the following organizational documents developed with organization-wide input and approval by the Board of Directors:

- * Corporate Compliance Program
- * Mission
- * Vision and Values
- * Strategic Plan
- * Performance Improvement Plan
- * ACH Code of Conduct

The Patient Rights Policy (Admin. Policy #J1) supports the right of the patients to ask and be informed of the existence of business relationships among the hospital, educational institutions, other healthcare providers, payers, or networks that may influence the

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patient's treatment and care. The hospital provides those services compatible with its mission and values. All clinical decisions are based solely on patient health care needs.

New services and technology shall be consistent with the hospital mission. Such services and technological care are based on safety, efficacy, efficiency, costs, known experience, availability from other sources, number of individuals who benefit, and the effect on the institutional ability to provide other needed services as well as the documented competence and qualifications of staff to provide services/technology.

B. Patient Rights

Ethical relationships with patients and their significant others are described in the Administrative Policy as noted above.

The Patient Rights Policy is implemented through:

- 1) making it a focus in employee orientation
- 2) periodic continuing education formats
- 3) regular employee newsletter articles
- 4) regular medical staff newsletter
- 5) publication in the patient handbook
- 6) posting in common areas
- 7) patient representative visits
- 8) closed circuit television programs
- 9) public forums and assemblies for community education about advance directives and other topics related to patient rights
- 10) listed in employee handbook
- 11) Bioethics Committee

Rehabilitative services (including substance abuse, cognitive and communicative disorders, developmental disabilities; vision/hearing and physical disabilities) for individual patients safeguard the respect; dignity; autonomy; positive self-esteem and regard; civil rights; and involvement in his/her care, includes the patient's perceptions of his/her strengths/weaknesses, resources, relevant demands of his/her environments (housing, vocational, education, recreational or social); and are requirements/expectations for participation by the patient and provider.

Patients or families are not asked or required to perform tasks in or for the hospital.

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Related implementing and supporting policies should be referred to as follows:

- * Patient Rights
- * Advance Directives
- * Comfort Care
- * Confidentiality
- * Informed Consent
- * Patient Restraint/Seclusion
- * Organ and Tissue Donor Policy
- * Communication Assistance for visual and hearing impaired and non-English speaking families
- * Credentialing for New Procedures and Technologies Policy
- * Bioethics
- * Access to protective services
- * Employee Notification of Conflict of Interest
- * Patient/Parent Complaint Reporting System

C. Billing Practices

The following policies establish and implement mechanisms which ensure that patients are billed only for those services and care provided to the patient in accordance with the Corporate Compliance Policy:

- 1) All initial patient billing is itemized and includes dates of service;
- 2) When a patient or payer has a question about a charge, that inquiry is reviewed expeditiously and related conflicts or complaints are handled through mechanisms without real or perceived harassment as per policy;
- 3) General credit/collection procedures are conducted according to the Fair Debt Collection Practices Act (P.L. 95-109) and the following billing policies:
 - * Credit and Collection Policy
 - * Time Pay Accounts
 - * Write-off to Bad Debt and Charity Care
 - * Self-Pay Collection
 - * Billing Third Party Payers
 - * Medicaid/Medicare Secondary Payer
- 4) Conflicts regarding patient billing will be addressed by the Patient/Family Representative, or the Customer Service Representative in Patient Accounts.

D. Marketing and Public Relations Practices

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Marketing practices are conducted by the Arkansas Children's Hospital with truth, accuracy, fairness and responsibility to patients, community, and the larger public, holding to the principles of the fundamental value and dignity of the individual, and the freedom of speech, assembly, and the press. In the spirit of communication, understanding, and cooperation among individuals, groups, and institutions, the Arkansas Children's Hospital adheres to the articles of the Code of Professional Standards for the practice of public relations as adopted by the Governing Assembly of the Public Relations Society of America.

Marketing materials reflect only those services available; the level of licensure and accreditation; and comply with applicable laws and regulations of truth in advertising and non-discrimination under Title VI and Title XVI of the Public Health Service Act and 45.C.F.R. implementing section 504 of the Rehabilitation Act of 1973.

E. Admission, Transfer, and Discharge Practices

Admission, transfer, and discharge policies are not based on patient ability to pay, or current hospital fiscal conditions. Patients whose specific condition or disease cannot be safely treated are diverted or transferred to an accepting organization only under such circumstances and/or in accordance with the policies below.

Admission, transfer, and discharge are conducted in an ethical manner and in accordance with applicable local, state, and federal regulations and the following implementing policies:

- * Patient Rights
- * Discharge Planning Policy
- * Transfer of Patients
- * Definition of Services Available
- * ICU Admission/Discharge Criteria
- * Medical Staff Rules and Regulations
- * International Patients Policy
- * Out-of-State Transport Policy
- * Research Institute's Conflict of Interest and Conflict of Commitment Policy
- * Clinical Research at ACH Policy

F. Conflicts of Interest in Contractual Relationships

Potential conflicts of interest in contractual relationships are inherent in the conduct of business. The Board of Directors and hospital leadership review relationships carefully vis-a-vis the potential harm

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to its patients and community. Those circumstances which may result in potential conflict of interest are defined and addressed by the following policies:

- * Board of Directors' Conflict-of-Interest Statement (requirement to sign annually)
- * Senior Management Conflict-of-Interest Statement (requirement to sign annually)
- * Authority to Enter into Contracts
- * Gratuities/Vendor Relationships
- * Prudent Buyer Concept
- * Use of Local Vendors

Revised: 2/99, 09/01, 10/02, 2/08