Code of Conduct
for The University of Vermont Medical Center Community

The heart and science of medicine.
This Code of Conduct (the “Code”) provides guidance to all members of The University of Vermont Medical Center community.

It helps to ensure that we carry out our responsibilities with integrity and in accordance with all applicable laws and our own policies.

The Code applies to all employees, medical staff, students, volunteers, vendors and other members of The University of Vermont Medical Center community (referred to collectively as “Employees”).
I. Mission, Vision, Values

OUR MISSION
UVM Medical Center’s mission is to improve the health of the people in the communities we serve by integrating patient care, education and research in a caring environment.

OUR VISION
Working together, we improve people’s lives.

OUR VALUES
- We respect the dignity of all individuals and are responsive to their physical, emotional, spiritual and social needs and cultural diversity.
- We are just and prudent stewards of limited natural and financial resources.
- We foster a climate that encourages both those receiving and providing care to make responsible choices.
- We strive for excellence in quality and care and seek to continuously learn and improve.
- We acknowledge a partnership with the community to ensure the best possible care at the right time, in the right place, and by the right provider.
- We are caring and compassionate to each other and to those we serve.
- We communicate openly and honestly with the community we serve.

UVM Medical Center strives to act in a manner that (i) promotes UVM Medical Center’s mission, (ii) is consistent with UVM Medical Center’s values, and (iii) complies with all applicable laws, regulations, organizational policies and accreditation standards, as outlined in this Code and other policies.

The Code of Conduct is a critical component of our Compliance and Privacy Program, which seeks to promote a culture of integrity and compliance at UVM Medical Center and helps maintain a health care, educational and business environment that is committed to integrity and ethical conduct.
II. Quality Patient Care

We are committed to providing patients with high-quality care in a safe and respectful environment. Everyone has a responsibility to participate in the Patient Safety Program and support a culture that is continuously improving, non-punitive and data-driven. We focus on system and process improvements and seek to assist, rather than discipline, those who may have contributed to an error or adverse outcome.

It is important to report potential hazards or adverse events at the time they are identified or occur. Report adverse and “near miss” events through the online S.A.F.E. reporting system. All information reported through the S.A.F.E. system and information related to any root cause analysis is considered confidential and protected under the State of Vermont’s peer review privilege. If you have any questions about patient safety or event reporting, contact the Patient Safety department.

PATIENT RIGHTS

We honor a patient’s right to obtain treatment, make decisions regarding treatment, and maintain privacy. We seek to have open communication between patients and caregivers, and to meet each patient’s reasonable expectations. We are committed to providing care to all members of the community without regard to age, race, color, sex, sexual orientation, gender identity or expression, ethnicity, culture, place of birth, national origin, HIV status, religion, marital status, language, socioeconomic status, physical or mental disability, protected veteran status or obligation for service in the armed forces.

EMERGENCY TREATMENT

UVM Medical Center follows the Emergency Medical Treatment and Labor Act (EMTALA) and provides emergency medical screening and necessary stabilization to all patients, regardless of ability to pay. We will not delay emergency screening and necessary stabilizing treatment in order to seek financial and demographic information. Patients with emergency medical conditions should be transferred to another facility only at the patient’s request or if the patient’s medical needs cannot be met at UVM Medical Center and appropriate care is known to be available at another facility.

ADVANCE DIRECTIVES

Patients have the right to prepare an advance directive and, as appropriate, UVM Medical Center will provide information and education for patients about advance care planning. In an Advance Directive, a patient can specify which treatments he or she wants (or doesn’t want) and can name a family member or friend as their health care proxy (agent), someone who would make medical decisions for them if they weren’t able to do so on their own. A patient’s advance directive will be honored as required by law and within the capabilities of UVM Medical Center. When an advance directive is received by UVM Medical Center, it will be incorporated into the patient’s medical record.
RESEARCH, INVESTIGATIONS, AND CLINICAL TRIALS

We are bound to protect our patients and respect their rights during research, investigations, and clinical trials. All research participants are given a full explanation of alternative services that might prove beneficial to them. They are also given a full explanation of the risks, expected benefits, and alternatives. A patient’s refusal to participate in a research study will not limit access to services. Prior to starting a research study, investigators must obtain approval from UVM Medical Center’s Institutional Review Board (IRB). All staff involved in the conduct of an approved research study or clinical trial must adhere to all IRB related requirements.

PRIVACY AND SECURITY OF PATIENT INFORMATION

We recognize that patients and their families trust us with private information in order to obtain quality care. Accordingly, we have adopted the following Principles for Patient Confidentiality.

It is a privilege to be entrusted with a patient’s personal health information, and all members of the UVM Medical Center community have important obligations that accompany that privilege.

Maintaining a patient’s privacy is the responsibility of every Employee. You have a duty to actively avoid and prevent privacy violations, as well as a duty to report privacy violations and to assist in mitigating any resulting harm. These rules apply to all types of patient information, including financial information, and all forms of information: spoken, written or electronic.

General Principles

I. You may only access or disclose patient information to further patient care, conduct hospital operations, promote quality improvement and enhance education, and not out of curiosity or for personal interests.

II. Care coordination, financial operations and educational efforts require that patient information be shared with those with a need to know, but those sharing and receiving information must follow the principles of minimum necessary and respect for privacy and patient choice.

III. When an Employee becomes a patient, the separate roles of patient and Employee should remain clear and distinct.

IV. When discussing patient information with others involved in the patient’s care, you must take reasonable precautions to minimize the chance that information will be overheard by individuals not involved in that patient’s care.

V. Communications technology is valuable to enhance patient care and coordinate care, but must be used carefully to avoid the risk of widespread dissemination of private information.
Particular Circumstances

I. Access to a Patient’s Record

You may access and use patient information only as needed for your work or educational program. In particular:

a. **Anticipating Care:** Accessing patient information for coordination or continuity of patient care is appropriate when you are part of the care team, but accessing records should not be used in lieu of established patient admission and placement workflows. Each Department should establish a workflow for patient placement and staffing that avoids duplicative or unnecessary access and disclosure of patient information. If you have any questions about whether your role may require you to access patient information in anticipation of patient care, please contact your supervisor or the Compliance & Privacy Office. You may only access the minimum necessary amount of patient information needed to do your job.

b. **Following a Patient:** Clinicians who have been actively involved in a patient’s care may follow that patient’s progress if doing so would provide significant educational or quality information. In these cases, clinicians should be mindful of the “minimum necessary” standard. In addition, there are some cases where continued access may not be appropriate, such as when a patient is your co-worker, family member, or friend. If you have any questions as to whether or not post-treatment access to a patient’s record is appropriate, talk with your supervisor or call the Compliance & Privacy Office. Clinicians should use established educational and quality forums (grand rounds, morbidity and mortality conferences, etc.) when they are available to follow the progress of patients.

c. **Your Own Record:** Processes for patients to access their own health information have been developed with the goal of optimizing the quality of care provided. To optimize the quality of your own care as a patient, you may not access your own medical record through your standard workplace access to EPIC. You may access your information via the online “MyChart” portal or obtain a copy of your record from Health Information Management. Your health care provider can review your health information with you in a meaningful way and in a supportive environment. You may not, under any circumstances, alter, edit or make entries to your own information in the electronic medical record or other system containing patient information, including updating demographic information or scheduling appointments.

d. **Your Family Members:** A patient’s privacy – whether the person is someone you know or not – is of paramount importance. In order to maintain the highest level of confidentiality for all patients, you may not directly access the medical records or financial information of your family members, minor children, friends, staff members or other individuals for personal or non-work related purposes, even if oral authorization has been given. Patients may elect to grant proxy access to their MyChart Online accounts to a family member or friend by submitting the appropriate authorization form.

e. **When Employees are Patients:** Employees have the same privacy rights as other patients, and may be particularly concerned about their health information being shared with co-workers.

If you learn that a co-worker is a UVM Medical Center patient, you may want to know more or contact the patient out of genuine concern. However, your co-worker deserves to have his/her information safeguarded like any other patient. If you are not directly involved in the co-worker’s care, do not access the co-worker’s information unless there is a job-related reason to do so. Do not ask caregivers for information – even out of concern. Keep the fact that the co-worker is a patient to yourself unless the co-worker has authorized you to share this information.
In general, where your job would require you to access the health information of a co-worker, relative, or an individual with whom you have a close personal relationship, you should transfer the task if you can reasonably do so without disrupting your department’s workflow.

If you are directly involved in the co-worker’s care, only access the minimum necessary information to care for the patient/co-worker. Do not share any information, including the fact that the co-worker is a patient, with anyone unless it is necessary to do your job.

II. Disclosing Patient Information

a. **Patient’s Family Members and Friends:** If the patient agrees, you may share health information with a patient’s family member, friend or other individuals identified by the patient as being involved in his/her care. If the patient is not available to agree or object or is incapacitated, you must exercise your professional judgment to determine whether it is in the patient’s best interest to share information.

b. **Communicating with Patients with Visitors Present:** Patients may not want their health information shared with family members or visitors, even if they are present. Before discussing health information with a patient who has a friend or family member present, you should ask the patient if he/she wants the visitor(s) to be present during the communications. You may also wish to document this in the patient’s record so that other Employees are aware of the patient’s preferences.

c. **Restricted Patients:** A patient has the right to request that information regarding his/her admission to the hospital not be made available to callers or visitors by notifying the Registration staff that he/she does not want to be listed in the patient directory. You should not release any information about these patients to a caller or visitor, and should respond “I have no information available on this person.” In situations where a patient has given permission to share health information with only certain or limited individuals, you should consider setting up a code word as an extra measure of protection of the patient’s privacy.

d. **Conversations involving Patient Information:** In order to maintain the highest level of confidentiality for all patients, avoid discussion of patient information in settings where that discussion may be overheard by other patients or visitors such as cafeterias, elevators, shuttle buses, and other public areas. When discussing a patient’s condition over the phone, speak quietly. When having conversations about a patient’s condition or treatment in the patient’s semi-private room, you may consider asking the other patient’s visitors/family to leave or pull the curtain and speak quietly. Do not discuss patient information with others who do not have a job-related need to know.

e. **Educational Presentations:** Providers may use patient information to conduct training programs in which Employees learn under supervision to practice or improve their skills as health care providers. Employees who are using patient information for training or educational purposes must use the least amount of identifiable information necessary to accomplish the training. Any identifiable patient information used for education and training may not be disclosed outside of UVM Medical Center. If you wish to publish a case study or conduct a lecture that will include identifiable patient information, you must obtain authorization from the patient. Please keep in mind that we live in a small community where many residents know the details of each other’s lives. Sharing details about a patient such as a rare disease diagnosis, traumatic injury or general characteristics such as a job title, criminal history or community activities could be considered identifiable information.
f. **Research**: Privacy rules impact a researcher’s ability to access and collect patient information for research purposes. You must take certain procedural steps prior to using or sharing health information for research. This is true whether or not the researcher is an Employee of UVM Medical Center. Please refer to specific UVMMC Privacy policies on Research.

### III. Technology, Social Media and Photographs

a. Cell phones and other related communications technology may be valuable in enhancing coordination of care and communication among health care providers. You must follow UVM Medical Center policies on security of data and devices, including password protection, encryption and data storage. Patient information must not be stored on any personal devices or in the cloud. Please refer to Information Security Policy 001.

b. You may not comment on or post on social media any information you learned about a patient through your work. Note that the nature or timing of a patient’s injuries or hospitalization may make the patient “identifiable” in a post even if his or her name is not disclosed.

c. Photographs may be taken for patient care purposes and included in a patient’s medical record, and must be protected in accordance with privacy and security policies. “Patient care purposes” include identification, diagnosis and treatment of the patient. Photographs of patients should be taken with UVM Medical Center approved equipment and/or software applications, and may not be stored on personal devices.

d. When taking a photograph for patient care purposes, you must ensure that the photograph contains the minimum necessary amount of image required for the intended purpose. If identifiable characteristics of the patient are not required, the photograph should not contain those characteristics.

e. Photographs that are taken for non-patient care purposes, including educational purposes, require patient consent. Please refer to Privacy40 - Audiovisual Capture or Recording of Patients and Employees.

f. In general, photographs of Employees are not permitted without the individual Employee’s permission.
Remedies and Corrective Action

I. **Monitoring:** In order to proactively protect patient privacy, UVM Medical Center monitors Employee access to patient information on both a routine and as-needed basis. If a monitoring report indicates an Employee’s access may be inconsistent with these Principles or specific privacy policies, the Compliance & Privacy Office will investigate the access in collaboration with Human Resources, the appropriate leader and Information Security, if applicable.

II. **Privacy Incident Notification:** In the event that you become aware of a privacy incident, you must notify the Compliance & Privacy Office and take appropriate steps to mitigate any improper disclosure. UVM Medical Center will conduct a privacy breach analysis and, as applicable, notify the affected patient(s) and the HHS Office for Civil Rights or other entity of a privacy breach, as required by applicable law.

III. **Corrective Action:** Any Employee who violates these Principles or specific privacy policies will be subject to corrective action, up to and including termination. The type of corrective action applied will depend on a number of factors, including the deliberateness and purpose of the Employee, the nature and amount of information accessed or disclosed, and the number of patients affected. Please refer to the policy on Reporting and Responding to Privacy Violations.

Employees or others with concerns regarding privacy or security of patient information should contact the UVM Medical Center Compliance and Privacy Officer or Information Security Officer.
III. Integrity in the Workplace

EXPECTATIONS OF ALL EMPLOYEES

We care about one another and the patients and families we serve. We know that our actions and behaviors can elevate the experience of others. Individually and collectively we choose to treat others with respect, compassion, empathy and understanding to create a supportive environment for patients and families. We are committed to a culture of safety, high reliability and quality where the work environment supports teamwork and respect for all. We know that excellent customer service and excellent clinical care go hand in hand.

A foundation of excellent patient care and an environment of healing require us all to:

- Act courteously (for example, if a family member or visitor asks for directions and you are rushed, you still need to act courteously)
- Tell the truth (for example, never falsify a medical record)
- Respect and value our patients and their families, and one another (for example, never make a disparaging remark about a patient)
- Take personal responsibility for others’ privacy and confidentiality (for example, if you see unattended patient information, return it to the department that generated it)
- Ask for help if you do not know what to do (for example, don’t guess whether you’ve completed a form correctly; check with your leader)
- Correct and report mistakes, do not cover them up (for example, if you made a documentation error, notify your leader)
- When confronted with a choice, do the right thing (for example, follow all safety instructions, even if no one is watching)

The following behaviors can undermine our culture of safety and excellence and are unacceptable:

- Slamming or throwing objects in anger or disgust
- Willful disregard of a hospital policy
- Criticizing others’ performance or competency in a manner not aimed at improving the patient experience
- Deliberate acts done with intent to harm or deceive
- Disrupting the delivery of high-quality patient care
- Retaliating against anyone who addresses or reports unacceptable behavior
- Being unfit for duty for any reason, including because of the use or possession of alcoholic beverages or other drugs
FOLLOWING THE RULES

We are committed to acting in full compliance with all applicable laws, regulations, and organizational policies, as well as standards for accreditation established by The Joint Commission and other applicable accrediting authorities. Employees are required to know and follow the laws, regulations, policies and procedures that apply to their jobs, and to ask for more information about rules or policies they don’t understand. Failure to do so could result in exclusion from participation in federal or state health care programs, civil monetary penalties and loss of licensure, and could subject an Employee to corrective action by UVM Medical Center, up to and including termination.

Except in the case of Medical Staff members, who undergo compliance training as part of their two-year credentialing cycle, Employees are required to undergo annual training on applicable laws, regulations, policies and the Compliance and Privacy Plan.

Members of UVM Medical Center’s Board of Trustees are required to be educated about the Board’s responsibility for oversight of compliance risk areas, the content and operation of UVM Medical Center’s Compliance program, and the process for reporting integrity and compliance issues to the Board. Physicians, other billing providers, and staff involved in billing must annually complete additional coding and billing training sessions.

Vendors are required to undergo a certification process, which includes being educated about the requirements in this Code, in order to be able to do business with UVM Medical Center.

Speaking Up If Something Isn’t Right

Employees have an affirmative obligation to report in good faith any known or suspected violation of a rule or policy, or other misconduct. Employees are encouraged to work through their supervisor or manager first to report these issues. Reports may also be made to the Compliance and Privacy Officer. All Employees have the right to use the Compliance Hot Line at (802) 847-9430 or (800) 466-7131.

Reports will be treated confidentially. UVM Medical Center is committed to our policy of non-retaliation against Employees and professional staff who report suspected violations in good faith. UVM Medical Center also expects all Employees and health care providers who care for patients in any of its facilities to report medical errors, “near misses” and patient safety concerns using the UVM Medical Center patient safety reporting system (S.A.F.E.).
PROTECTING UVM MEDICAL CENTER’S RESOURCES

Employees should strive to make prudent and effective use of UVM Medical Center’s assets and resources, including time, supplies, equipment, space and information. Employees are responsible for ensuring that assets and resources such as telephones, computers, copiers, and equipment are not improperly or unreasonably used. This includes the use of UVM Medical Center funds for travel and entertainment-related expenses. As a general rule, Employees should not use UVM Medical Center’s resources without prior approval. Occasional personal use of items such as telephones and computers is allowed so long as that use is consistent with UVM Medical Center’s policies. Any use of UVM Medical Center’s assets or resources for personal financial gain is prohibited.

FREEDOM FROM DISCRIMINATION AND HARASSMENT

We provide a workplace that practices non-discrimination and equal opportunity. All qualified persons, regardless of race, color, sex, sexual orientation, gender identity, ancestry, place of birth, HIV status, national origin, religion, marital status, age, physical or mental disability, protected veteran status or obligation for service in the armed forces, or any other characteristic protected by law, are offered equal employment opportunities.

We are committed to diversity. Employees should respect the diverse opinions, beliefs, and cultural differences of our staff, patients and visitors.

We do not tolerate harassment or unfair discrimination and treat such actions as a form of misconduct. Those who choose to file a complaint through UVM Medical Center do not lose their right to file with an outside enforcement agency.

To file a complaint with UVM Medical Center, please contact the Director of Human Resources, any other member of management, or any Human Resources Business Partner.

We do not tolerate bullying or unwelcome behavior that insults, humiliates or intimidates another individual or group. Anyone who is aware of such behavior should report it to their supervisor or
WORKPLACE HEALTH AND SAFETY
To promote good health and protect patients and Employees, smoking is not permitted on any UVM Medical Center property.

Prescription and controlled medications and supplies must be handled properly and only by authorized individuals to minimize risks to patients, family members and Employees. Employees who become aware of inadequate security of drugs or controlled substances or the diversion of drugs from the organization must report the incident immediately.

To ensure that all Employees work in a safe environment, we follow federal and state laws and regulations regarding occupational safety. Employees who notice a potential or actual violation of occupational safety rules should report this to their supervisor or the Office of Environmental Health and Safety.

PROTECTING THE ENVIRONMENT
We continually strive to reduce our energy consumption, waste stream and carbon footprint, and to increase the use of healthy, locally-produced foods. At a minimum, UVM Medical Center is committed to complying with all environmental laws and regulations that relate to our operations. We operate our facilities with the necessary permits, approvals and controls. We diligently use proper procedures to handle and dispose of hazardous and bio-hazardous waste. Employees must understand how their job duties may impact the environment and follow all requirements for the proper handling of hazardous materials. Anyone aware of the improper release of a hazardous substance, improper disposal of medical waste, or any situation that may potentially damage the environment must immediately notify the appropriate supervisor.

ADDITIONAL LEADERSHIP RESPONSIBILITIES
Leaders are expected to foster a culture that promotes the highest standards of ethics and compliance. Everyone in the organization with supervisory responsibility is expected to be a role model for these standards and values, and should never sacrifice ethical and compliant behavior in the pursuit of business objectives.

Leaders should encourage staff to raise concerns and propose ideas free from the fear of retaliation or retribution. UVM Medical Center does not tolerate retaliation against Employees or professional staff who report suspected violations in good faith. Leaders are also responsible for ensuring that staff members have adequate information and resources to comply with laws, regulations, and policies, as well as access to resources to help resolve ethical dilemmas.
IV. Accurate and Ethical Billing, Reporting and Financial Matters

ACCURATE CLAIM SUBMISSION AND DOCUMENTATION
We are committed to ensuring that bills to government programs, commercial payers and patients comply with laws, rules and contractual commitments. Every Employee has a responsibility to assist UVM Medical Center in submitting complete and accurate claims for payment. No one should intentionally or carelessly submit false claims for payment, including using the wrong billing codes, falsifying the medical record, or billing for services that are not provided or are not medically necessary. Physicians and other providers are obligated to provide complete, accurate and timely information in the patient’s medical record to support the services rendered.

FINANCIAL REPORTING
We are committed to maintaining complete and accurate financial records. Every Employee is expected to be honest, complete and accurate in documentation and recordkeeping. We are required by laws and regulations to submit certain reports of our operating costs and other financial and quality information. We are committed to maintaining and filing complete and accurate cost reports and other data submissions. Because of the complex nature of these requirements, all issues related to cost reports must be communicated to the Revenue Finance & Reimbursement Department.

UVM Medical Center complies fully with Vermont’s Certificate of Need (CON) laws, which require health care providers to obtain a CON before taking certain actions, such as committing to large capital expenditures or undertaking new services. We seek to maintain a cooperative and open relationship with state regulatory agencies and to provide Employees of UVM Medical Center with education and training on the CON laws. Any project that is potentially subject to a CON must be reviewed and approved by the General Counsel before the project is initiated.

PHYSICIANS AT TEACHING HOSPITALS
UVM Medical Center is an academic medical center and teaching is an important aspect of our mission. Some of our teaching efforts are reimbursed through federal health care payment programs. These programs have specific rules regarding documentation and billing by teaching physicians. UVM Medical Center’s teaching physicians will comply with the physical presence and documentation requirements of those programs.

EDUCATION ABOUT FALSE CLAIMS RECOVERY
As required by law, UVM Medical Center’s False Claims Recovery Education policy provides detailed information to Employees about (a) the federal False Claims Act and Program Fraud Civil Remedies Act (and similar state legislation), (b) “whistleblower” protections under both federal and state law, and (c) our policies and procedures to prevent, detect and remedy fraud, waste and abuse.
Examples of the types of activities that would risk violating laws designed to prevent health care fraud include:

- Filing a claim for services that weren’t provided or weren’t provided as described on the claim;
- Filing a claim for services without documentation to substantiate the performance of those services;
- Submitting a claim containing information known to be false;
- Adding false diagnoses or using a past diagnosis to represent the patient’s current condition; and
- Billing for and accepting reimbursement for services that were not medically necessary.

If Employees have any doubts or questions about whether any billing situation is correct, they should notify their supervisor or the Compliance and Privacy Officer.

**THOSE EXCLUDED FROM FEDERALLY-SPONSORED PROGRAMS**

UVM Medical Center does not hire or engage as contractors any person or entity who (1) is ineligible to participate in federal health care programs; or (2) has been convicted of a criminal offense related to the provision of health care items or services. All Employees and applicants are required to disclose whether they are ineligible persons before they start working at UVM Medical Center. We routinely screen Employees against the government lists of such excluded and ineligible persons.

**PROTECTION OF BUSINESS RECORDS**

UVM Medical Center protects its data and business records from accidental or intentional modification, disclosure, destruction or use that is not authorized or appropriate. UVM Medical Center Employees may only access and use confidential information on a “need-to-know” basis to perform their particular duties, and must take appropriate measures to protect the confidentiality of UVM Medical Center records. Employees and others may disclose confidential information only to authorized individuals/third parties, and must report any violations of this policy to their supervisor, the Information Security Officer or the Compliance and Privacy Officer.
V. Ethical Business Relationships

NO PAYMENTS FOR REFERRALS
A patient’s choice of health care provider should be based on quality and convenience for the patient, not on financial benefit to the provider. UVM Medical Center does not pay for referrals or accept payment for any referrals we make. Federal and state laws prohibit payments in exchange for patient referrals or other business. “Payments” can be anything of value, such as a trip to a conference or free equipment. If Employees are aware of any inappropriate payments or gifts being offered or solicited, they should report the incident to their supervisor or the Compliance and Privacy Officer.

GIFTS
UVM Medical Center expects all Employees to uphold the highest ethical standards when interacting with vendors and patients and to avoid any arrangement that could improperly influence decision-making or patient care. In addition, federal and state laws place restrictions on the exchange of gifts or other benefits among UVM Medical Center, its vendors, and its patients. At UVM Medical Center, no personal gifts of any kind from vendors are permitted. Employees may not solicit, offer, or accept gifts to or from patients, vendors or others doing business with UVM Medical Center, except as permitted by our Gifts policy.

CONFLICTS OF INTEREST
UVM Medical Center has a responsibility to maintain the public’s trust. Our patients and community expect us to make unbiased decisions in providing patient care, choosing vendors or business partners, and hiring Employees. A conflict of interest may occur if an Employee’s outside interests influence - or appear to influence his or her job-related decisions or responsibilities. Our Conflict of Interest policy explains how Employees and other members of the UVM Medical Center community must disclose any relationship that could inappropriately impair that person’s judgment in work-related decisions.

COMMUNICATIONS WITH GOVERNMENTAL AGENCIES, REGULATORY AUTHORITIES AND THE MEDIA
It is UVM Medical Center’s policy to cooperate with all governmental agencies, regulatory authorities and accrediting bodies in a direct, open and honest manner. Employees should never mislead representatives of a governmental agency, regulatory authority or accrediting agency.

UVM Medical Center formally participates in social media communities to help educate our potential patients, current patients and their families about UVM Medical Center and the services and programs we provide. Only Employees designated by UVM Medical Center have the authority to speak on behalf of the organization in these channels. All Employees must abide by UVM Medical Center’s policy regarding Governance of UVM Medical Center’s Presence in Social Media, protect the confidentiality of patient and business information, and use social media responsibly.
VI. Additional Resources

POLICIES
UVM Medical Center has a number of policies to guide Employee behavior. Policies are available on the UVM Medical Center intranet site: intranet.uvmhealth.org/Pages/Home.aspx

If you are unable to locate a policy, or have concerns that a policy does not address, feel free to contact the Compliance and Privacy Department:

- Phone: (802) 847-2667
- Email: Compliance@UVMHealth.org

PEOPLE AND DEPARTMENTS
The following individuals and offices are also available to answer questions and provide guidance:

- Compliance and Privacy Officer: (802) 847-2667
- Information Security Officer: (802) 847-8100, Option 2
- Clinical Ethics: (802) 847-4848
- Human Resources: (802) 847-2825
- Patient and Family Advocacy: (802) 847-3500
- Patient Safety: (802) 847-2468
- Employee and Family Assistance Program: (802) 847-2827
COMPLIANCE & PRIVACY
95 Saint Paul Street
Burlington, VT 05401

PHONE
(802) 847-2667

EMAIL
Compliance@UVMHealth.org