STANFORD
UNIVERSITY
MEDICAL CENTER

Stanford Hospital & Clinics
Lucile Salter Packard Children's Hospital

CODE OF CONDUCT

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MESSAGE FROM OUR CHIEF EXECUTIVE OFFICER

As an organization, we are committed to honest and ethical behavior, and to conducting our business with integrity. The practice of behaving honestly, ethically and with integrity is an individual responsibility. We make decisions about how to conduct ourselves every day as we go about our work. Each of us is accountable for the actions that we decide to take.

The Lucile Packard Children's Hospital and Stanford Hospital and Clinics *Code of Conduct* is the keystone of its corporate integrity philosophy and communicates its ethical business standards. The *Code of Conduct* serves as a cultural compass for staff, management, vendors, volunteers and others who interact with the hospitals. It is an essential element of our Compliance Integrity Program. The Compliance Department was created to oversee our Compliance Integrity Program and to demonstrate our commitment to conducting our business with integrity. The Compliance Integrity Program is a partnership among all of us to make the right business choices.

The *Code of Conduct* is a vital part of how we achieve our mission and vision. It provides guidance to ensure that our work is accomplished in an ethical and legal manner. It emphasizes our common culture of integrity and our responsibility to operate with the highest principles and ethical business standards as we strive to care for our patients and each other with respect, honesty, compassion, teamwork and excellence.

At Stanford Hospital and Clinics and Lucile Packard Children's Hospital, we are each guardians of our reputation for ethical business practices and our standing as a leader in the academic medical center community. We are committed to delivering the highest quality patient care in compliance with our *Code of Conduct*.

Christopher G. Dawes
President and Chief Executive Officer
Lucile Packard Children's Hospital

Amir Dan Rubin
President and Chief Executive Officer
Stanford Hospital and Clinics

OUR COMPLIANCE INTEGRITY PROGRAM

The *Code of Conduct* is a vital part of how we achieve our mission and vision

- *The mission of Lucile Packard Children's Hospital is to serve our communities as an internationally-recognized pediatric and obstetric hospital that advances family-centered care, fosters innovation, translates discoveries, educates health care providers and leaders, and advocates on behalf of children and expectant mothers. Our vision is to drive innovation in the most challenging areas of pediatrics and obstetrics to improve the quality of life for children and expectant mothers and those who love and care for them.*

Compliance Integrity Program was created to ensure that we conduct our business with integrity and in accordance with applicable laws and our policies, as well as to provide a safe environment for raising compliance concerns and questions. The Compliance Department oversees the Compliance Integrity Program and ensures compliance with our *Code of Conduct*. Our Compliance Integrity Program outlines what we do as an organization to comply with legal and ethical requirements, including the following:

- Setting integrity standards through written policies, procedures and our *Code of Conduct*;
- Communicating standards through awareness, education and training programs;
- Providing a process for reporting potential violations of laws, policies or our *Code of Conduct*;
- Conducting ongoing auditing and monitoring activities;
- Identifying, investigating and responding to potential compliance problems;
- Performing routine sanctions checking to ensure we are not conducting our business with individuals and entities ineligible to participate in federal healthcare programs;
- Enforcing integrity standards and disciplining non-compliant actions;
- Maintaining an organizational structure that supports the furtherance of the Compliance Integrity Program, including establishment of appropriate Compliance Committees and appointment of a Chief Compliance Officer who has an independent reporting relationship to the Audit and Compliance Committees of the hospitals' Boards of Directors.

The standards set forth in our *Code of Conduct* apply to Lucile Packard Children's Hospital and Stanford Hospital and Clinic staff, faculty, health care professionals with hospital privileges, trainees, agents, officers, directors, volunteers, representatives, contractors, vendors and any other person or organization engaged to provide products or services. The *Code of Conduct* standards require us to follow all applicable laws, rules, regulations and hospital policies as related to the scope of our duties and responsibilities for Lucile

- We do not wear political campaign clothing, buttons or symbols representing a political candidate or cause, excluding health initiatives or those defined as "protected activities" by the National Labor Relations Board.

Contact the Lucile Packard Children's Hospital Government Relations Department or the Stanford Hospital and Clinics Government and Community Relations Department for additional guidance.

Anti-Trust Laws

Lucile Packard Children's Hospital and Stanford Hospital and Clinics compete fairly and comply with Anti-Trust Laws. We do not engage in activities or negotiate agreements that restrain or obstruct competition or illegally share proprietary information with competitors. The illegal obtainment or use of proprietary information from competitors is also strictly prohibited.

Antitrust violations may subject our organization to severe civil and criminal monetary fines, civil liability for treble damages, and injunctions that could impair our ability to compete effectively. Anti-Trust violations may also subject us individually to imprisonment, personal liability, and substantial monetary fines.

We are required not only to comply with the law but also to avoid activities which, though not illegal, may pose unnecessary risks of litigation, government investigation, or injury to our reputation. The following limitations on information exchanges with competitors are designed to aid compliance with Anti-Trust laws and protect our competitive, financial, ethical and reputational interests.

Except with legal advice from the Office of General Counsel, we do not communicate with a competitor, either directly or indirectly, about the following:

- We do not communicate about prices charged for goods or services, including physician services;
- We do not communicate about costs of goods, supplies, equipment, or services, including physician services;
- We do not communicate employee salaries, wages, or benefits, compensation policies, staffing policies or terms of collective bargaining agreements, employment contracts or severance agreements;
- We do not communicate terms of managed care contracts;
- We do not communicate terms of equipment, supply or service contracts;
- We do not communicate allocation of customers, services or territories among competitors;
- We do not communicate exclusion of any existing or potential competitor or supplier from the market; and
- We do not communicate joint bidding or joint venture arrangements.

Conflict-of-Interest

A conflict-of-interest involves any circumstance where your personal activities or interests are advanced at the expense of Lucile Packard Children's Hospital or Stanford Hospital and Clinics. These circumstances may be financial or involve some other type of personal interest that conflicts with your professional responsibilities. Since our patients and community expect us to make decisions that are not biased by personal interests, actual or perceived conflicts-of-interest may compromise our ability, and the ability of our organizations, to provide patient care, transact business or make purchasing decisions. They may also pose a risk to the operations and reputation of the hospitals.

Conflicts-of-interest can often be avoided or mitigated when Lucile Packard Children's Hospital or Stanford Hospital and Clinics is aware of potential conflicts. We are required to follow the *Conflict-of-Interest and Commitment Policy* and disclose at the time of hire, promotion or transfer, and no less than annually thereafter, all information about any actual or perceived conflict-of-interest using our Conflict-of-Interest Disclosure Statement form.

We are also required to submit an updated Conflict-of-Interest Disclosure form within ten business days of a material change in our situations that may create an actual or perceived conflict-of-interest. All reported actual or perceived conflicts-of-interest are reviewed on a case-by-case basis. Failure to disclose a conflict-of-interest may result in disciplinary action, up to and including termination. The following information provides general guidance on several common potential and actual conflicts-of-interest.

***Consulting and Speaking Conflicts-of-Interest*:** We must follow the Consulting/Speaker Guidelines set forth in the *Conflict-of-Interest and Commitment Policy* before accepting or engaging in compensated or uncompensated consulting and/or speaking activities for outside companies, organizations and vendors.

***Purchasing Conflicts-of-Interest*:** We must follow the *Purchasing Conflicts-of-Interest Policy* and disclose any actual or perceived conflicts-of-interest involving the purchases of goods, equipment and services. We must avoid situations where we have actual or perceived conflicts-of-interest between our purchasing decisions and our personal interests.

***Industry Interactions*:** We must follow the *Stanford Industry Interactions Policy* and the *Vendor Management Policy* when engaging in business activities with pharmaceutical, biotech, medical device, equipment or supply companies and organizations. These manufacturers and suppliers are known as "Industry" vendors. It is a conflict-of-interest to accept travel or entertainment from any "Industry" vendor. Additionally, there are significant limitations regarding our acceptance of complimentary onsite and offsite education from "Industry" vendors. Meals or other types of food directly funded by "Industry" vendors may not be provided at Lucile Packard Children's Hospital or Stanford Hospital and Clinics. Contact the Compliance Department for additional guidance.

Business Courtesies and Entertainment from Non-Industry Vendors: **We must follow the *Vendor Management Policy* and the *Purchasing Conflicts-of-Interest Policy*** when engaging in business activities with non-"Industry" vendors. It is a potential conflict-of-interest to accept travel, entertainment or complimentary education from a non-"Industry" vendor or organization that does, or is seeking to do, business with Lucile Packard Children's Hospital or Stanford Hospital and Clinics when you can influence the decision to purchase such items or services. Contact the Compliance Department for additional guidance.

Gifts

We maintain high ethical standards regarding the offering and acceptance of gifts. Offering or accepting personal gifts may influence our decisions or the decisions of others and may constitute a conflict-of-interest. The appropriateness of offering or accepting gifts depends on the specific circumstances of the gift and who is offering and receiving it. The following information provides general guidance on this topic. Consult with the Compliance Department for specific advice if you are offered a gift or are considering giving a gift.

***Gifts from Patients/Family Members to Our Organization*:** Lucile Packard Children's Hospital and Stanford Hospital and Clinics may accept grateful giving or charitable contributions from our patients and their family members. Please refer patients and their family members who wish to make grateful giving or charitable contributions to either the Lucile Packard Foundation for Children's Health or the Stanford Hospital and Clinics Office of Hospital Development.

***Gifts from Patients/Family Members to Us Personally*:** There are significant ethical limitations regarding the acceptance of personal gifts from patients or their family members. We do not accept personal gifts of cash, cash equivalents, gift cards or merchandise from patients or their family members. Additionally, we never solicit personal gifts from patients or their family members. We may accept perishable items of modest value, such as food or flowers, provided that it is shared with our entire department or unit.

***Gifts from Our Organization to Patients/Family Members*:** Lucile Packard Children's Hospital and Stanford Hospital and Clinics may not induce Medicare, Medi-Cal or other federal or state health care beneficiaries to use our services by offering gifts that would likely influence these beneficiaries to obtain services from our organization. Inexpensive gifts of nominal value that are not cash or cash-equivalents are permitted. Federal guidelines define "inexpensive" as having a retail value of no more than $10 per item or $50 in aggregate per patient annually.

***Gifts from Our Organization to Us Personally*:** Lucile Packard Children's Hospital and Stanford Hospital and Clinics may offer reasonable gifts purchased with organizational budget funds to us personally. Gifts given by Lucile Packard Children's Hospital or Stanford Hospital and Clinics that exceed a total value of

$75 per year become personal taxable income for the recipient of the gift and must be reported to the Payroll Department by the individual or department giving the gift. Contact the Payroll Department for additional guidance.

***Gifts from Our Organization to Physicians and Other Referral Sources*:** Lucile Packard Children's Hospital and Stanford Hospital and Clinics never offer gifts to physicians or other referral sources in exchange for patient referrals or any other business. Limited gifts to physicians and other referral sources that are not cash or cash equivalents must be given in compliance with federal and state laws, as well as organizational policies. All applicable provisions of the *Physician Referrals Stark Law Compliance Policy*, *Business Courtesies to Physicians and Immediate Family Members Policy*, and *Anti-Kickback Compliance Policy* must be met before offering gifts to physicians or other referral sources. Contact the Compliance Department for additional guidance.

***Gifts from Physicians and Other Referral Sources to Our Organization*:** Lucile Packard Children's Hospital and Stanford Hospital and Clinics never accept gifts from physicians or other referral sources in exchange for patient referrals or any other business. All gifts and other donations from physicians and other referral sources should be referred to the Lucile Packard Foundation for Children's Health or the Stanford Hospital and Clinics Office of Hospital Development. The Foundation and Hospital Development will process gifts as donations in compliance with applicable laws and policies.

***Gifts from "Industry" and Other Vendors to Us Personally*:** There are significant ethical limitations regarding the acceptance of personal gifts from "Industry" and other vendors. "Industry" vendors are pharmaceutical, biotech, medical device, equipment or supply companies or organizations. We do not accept personal gifts of any kind from "Industry" vendors. For non-"Industry" vendors, we do not accept cash, cash equivalents or gift cards offered to us personally. We may accept items of modest value from non-"Industry" vendors, such as food or flowers, provided that the gift is shared with our entire department or unit. All applicable provisions of the *Stanford Industry Interactions Policy*, the *Conflict of Interest and Commitment Policy* and the *Purchasing Conflicts-of-Interest Policy* must be met before accepting gifts from "Industry" or other vendors. Contact the Compliance Department for additional guidance.

***Gifts from Industry and Other Vendors to Our Organization*:** Lucile Packard Children's Hospital and Stanford Hospital and Clinics may accept donations or other charitable contributions from "Industry" or other vendors. The organization never accepts gifts from "Industry" or other vendors in exchange for any business. All gifts and other donations from "Industry" and other vendors should be referred to the Lucile Packard Foundation for Children's Health or the Stanford Hospital and Clinics Office of Hospital Development. The Foundation and Hospital Development will process gifts as donations in compliance with applicable laws and policies.

Excluded Parties

Lucile Packard Children's Hospital and Stanford Hospital and Clinics do not hire employees, accept volunteers, contract with or bill for services rendered by individuals or organizations excluded from participating in federal or state healthcare programs. This includes exclusion from those programs administered by the U.S. Department of Health and Human Services, U.S. General Services Administration and the California Department of Health Care Services.

We conduct initial excluded parties checks on potential employees, medical staff, vendors and volunteers, as well as periodic excluded parties checks after the commencement of the relationship to ensure continued eligibility to participate in federal and state healthcare programs. You have a duty to immediately report any change in your eligibility status to the Compliance Department.

Visiting Observers

Lucile Packard Children's Hospital and Stanford Hospital and Clinics permit approved individuals to observe patient care and administrative functions outside of our formal training programs. Our *Visiting Observer Policy* outlines the requirements that allow such activities to occur within our organization.

- Visiting Observers are not allowed to participate in any patient care activities;
- Visiting Observers must be accompanied and supervised by a hospital or School of Medicine employee and/or a physician with current Medical Staff privileges at all times;
- Visiting Observers must be at least eighteen years old or in a hospital approved structured program;
- Visiting Observers must complete the Observer Attestation Agreement, obtain a visitor badge from Security, check-in with Operating Room and Catheterization-Angiography Administration prior to the observation, when applicable, and follow all hospital policies;
- Patient authorization is required when the observation is not for official training purposes of Lucile Packard Children's Hospital or Stanford Hospital and Clinics; and
- Visiting Observer forms must be submitted to the Compliance Department for approval.

Common examples of Visiting Observer interactions include:

- Visiting professors and/or medical personnel who are not involved in hospital research or volunteer activities;
- Individuals who are interested in a medical or residency/fellowship program at the hospitals; and
- Individuals observing clinical or administrative operations who are not enrolled in an official training program.

Contact the Compliance Department for additional guidance.

Contact with the Media

We must contact the Lucile Packard Children's Hospital News and Communications Department or the Stanford Hospital and Clinics Office of Communications before responding to any media inquiries or initiating contact with the media. Additionally, communications with media involving patient information must comply with federal and state privacy laws in order to fulfill our legal and ethical duty to protect patient privacy.

Contracting

Lucile Packard Children's Hospital and Stanford Hospital and Clinics negotiate and enter into fair and equitable contractual arrangements with reputable vendors and individuals that meet the needs of our organizations. All arrangements must comply with applicable federal and state laws. Prior to executing arrangements for items and services, we verify that all contracted parties are eligible to participate in federal and state-funded healthcare programs. All contracts with patient referral sources must be in-writing, as well as reviewed and approved by the Office of General Counsel. The *Contract Administration Policy* provides additional guidance on the contracting process.

Accuracy of Records/Document Retention and Destruction

It is our duty to create and maintain accurate and complete records, as well as only destroy organizational records, in compliance with federal and state laws and applicable policies. Lucile Packard Children's Hospital and Stanford Hospital and Clinics policies provide guidance on the proper creation, amendment, maintenance, retention and destruction of organizational records and documents. Contact the Compliance Department for additional guidance.

Confidential Business Information

Confidential information about our organization's strategy and operations is a valuable asset. Although you may use confidential business information as necessary to perform your job, it must not be shared with others outside the organization or internally with those who do not need to know about the information to perform their jobs. Confidential and proprietary business information covers anything related to our business or operations that is not publically known, such as personnel files, wage and salary information, financial information, billing and pricing information, cost data, strategic plans, marketing strategies, projected earnings, techniques, employee lists, information related to investigations, disciplinary actions, supplier and contractor information, information related to acquisitions or joint ventures, policies and procedures, clinical and patient information, computer and system login IDs and passwords, emails, and proprietary computer software.

Even when you are no longer working here, you are still bound to maintain the confidentiality of information viewed, received or used during the course of your relationship with the organization. Copies or electronic files of any confidential or proprietary information in your possession when you leave the organization must be returned at the end or your employment or relationship with the organization.

In addition to proprietary and confidential information, it is our duty to abide by all laws, regulations and our policies related to intellectual property. Intellectual property includes patents, trademarks, copyrights and trade secrets. Stanford University's intellectual property must be protected from unauthorized use.

If you are provided with an email account to facilitate business communications within and outside the organization, all your emails are the property of Stanford Hospital and Clinics or Lucile Packard Children's Hospital. Management has the right to review your emails and to terminate your email account. You are responsible for the appropriate use of your email account.

Some tips on complying with our confidential business information policies include:

- Make sure you have the right to copy and distribute copyright material before you do so;
- Consult the relevant policies or contact the Compliance Department before you use the hospitals' or University's logo on any printed materials;
- Consult with the Compliance Department before you share any of our policies and procedures outside the organization; and
- Make sure you have authorization to download any software onto your workstation before doing so.

Use common sense to help prevent accidental disclosure of confidential information. Remember that you can be overheard in public places such as elevators, hallways, cafeterias and restaurants. Do not discuss confidential or proprietary information with family or friends, as they may not understand its significance or its confidential nature. You could be held responsible for the inadvertent disclosure of such information by a family member, friend or acquaintance.

If you are in doubt about whether information you are being asked to share is confidential or proprietary, or if you know it is confidential and proprietary but are not sure about whether the request is legitimate, contact your supervisor or the Compliance Department before you act.

Requests for Information Pursuant to an Investigation or Legal Proceeding

We promptly and appropriately respond to requests for information pursuant to a government investigation or legal proceeding. These requests may come in the form of a subpoena, summons, warrant, letter or verbal request. Only certain people are authorized to accept them on behalf of the organization.

Accepting or acting on these requests may expose the organization, and sometimes you as an individual, to significant fines or other types of criminal, civil or administrative penalties. If you are asked to accept a legal document or to share information of any kind for any reason, immediately consult with your supervisor, the Compliance Department, the Risk Management Department, or the Office of General Counsel.

INTEGRITY WITH REFERRAL SOURCES

Anti-Kickback Laws

The federal Anti-Kickback Law prohibits individuals and organizations, like Lucile Packard Children's Hospital and Stanford Hospital and Clinics, from knowingly or willfully offering or paying, directly or indirectly, any form of remuneration in return for, or to induce, the referral of any patient or business that is covered by Medicare, Medi-Cal or any other federal or state health care financing program. Remuneration includes kickbacks, bribes or rebates.

Similarly, the California Anti-Kickback law prohibits individuals and organizations from offering or paying, directly or indirectly, any form of remuneration as compensation or inducement for referring patients, clients or customers to our facilities regardless of the payor.

If one purpose or reason for a financial transaction or arrangement with an individual or organization is to induce that individual or organization to refer patients or business to Lucile Packard Children's Hospital or Stanford Hospital and Clinics, or to recommend the services of either organization, then such transaction or arrangement constitutes a violation of the anti-kickback laws.

All agreements involving patient referral sources, including physicians, hospitals, ambulance services, managed care organizations and other health care organizations and service providers, must be reviewed and approved by the Office of General Counsel prior to execution. The *Contracts Administration Policy* provides additional guidance.

Physician Self-Referral Law

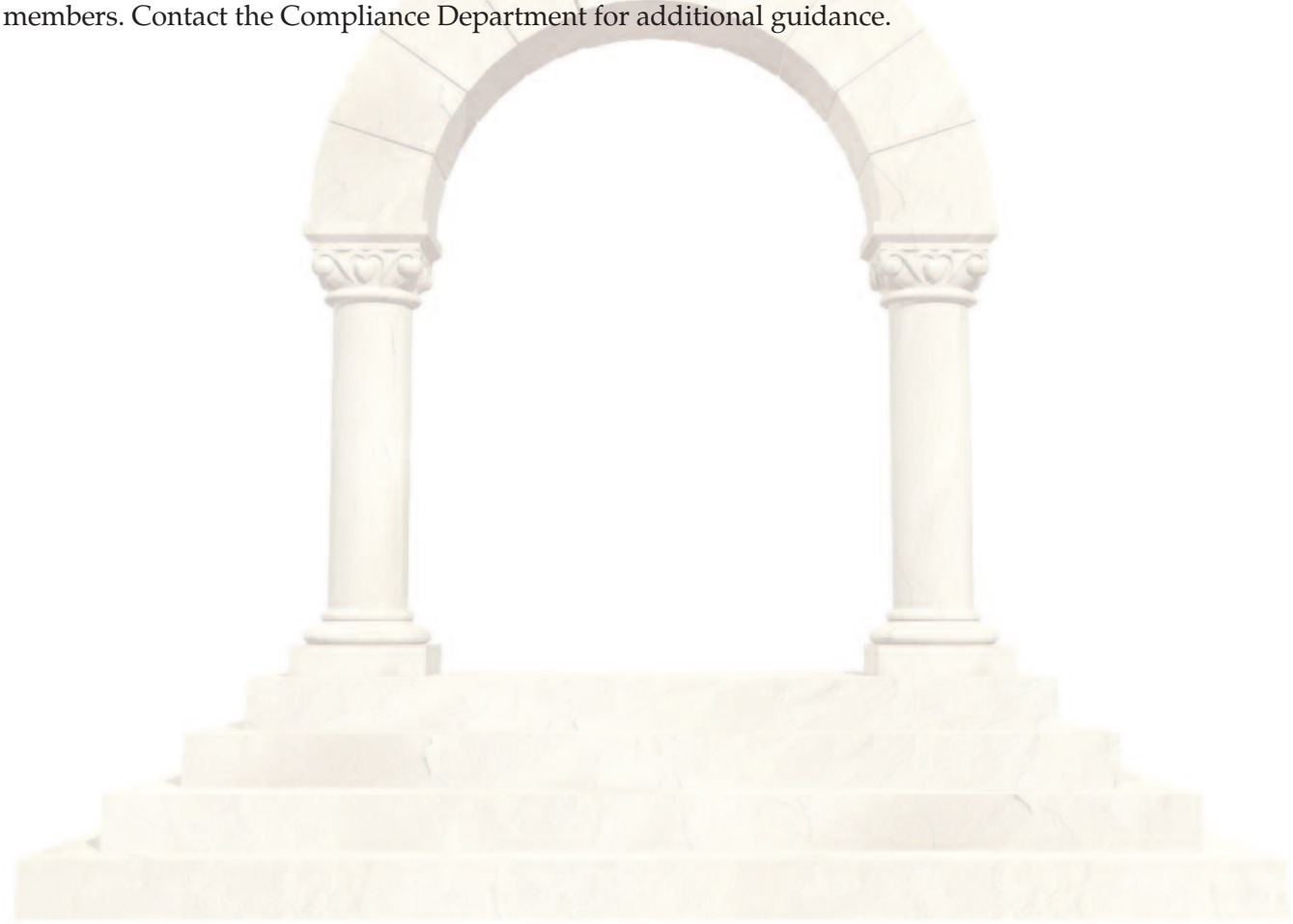
We conduct all of our business practices with physicians in conformity with the federal Physician Self-Referral or "Stark" Law. The Stark Law prohibits referrals for certain Medicare items and services furnished by an organization with which the referring physician, or his or her immediate family member, has a financial relationship, unless a specific legal exception applies.

It is a violation of our *Physician Referral Stark Law Compliance Policy* and other organizational policies for us to enter into arrangements with or accept referrals from physicians that would violate the Stark Law. We are required to immediately report all known or suspected violations of any of these policies to the Compliance Department.

In addition to services provided by faculty physicians and fellows under the hospitals' contract for services with the School of Medicine, the hospitals may directly engage faculty physicians, fellows, and community physicians to provide certain services, such as on-call coverage, moonlighting, training, consulting or administrative services, and pay these physicians directly for such services. In such arrangements, there is a direct compensation relationship between the hospital and the physician and we must consult with the

Office of General Counsel to execute a personal services agreement with the physician. We must strictly follow the *Contract Administration Policy* any time we enter into any business arrangement with physicians or their immediate family members, including services agreements, lease agreements and equipment agreements.

We must also strictly follow our organizations' *Business Courtesies to Physicians and Immediate Family Members* policies when offering non-monetary compensation or incidental benefits to physicians or their immediate family members. These policies discuss the guidelines that apply to all business courtesies, such as meals, tickets, gifts, seminars, and events, offered to medical staff and outside physicians or their immediate family members. Contact the Compliance Department for additional guidance.



INTEGRITY IN THE WORKPLACE

Diversity and Equal Employment Opportunity

We promote diversity in our workforce at all levels of the organization. We are committed to providing an inclusive work environment where everyone is treated with fairness, dignity and respect. We make ourselves accountable to one another for the manner in which we treat one another and for the manner in which people around us are treated. We strive to create and maintain a setting in which we celebrate cultural and other differences and consider them strengths of the organization.

Lucile Packard Children's Hospital and Stanford Hospital and Clinics is an equal opportunity workforce and no one shall discriminate against any individual with regard to race, color, religion, sex, national origin, age, disability, sexual orientation, veteran status or any other classification protected by law, with respect to any offer, term or condition, of employment. We make reasonable accommodations to the known physical and mental limitations of qualified individuals with disabilities. In all of our personnel actions, we comply with applicable laws and regulations related to nondiscrimination.

Workplace Harassment

As an organization, we are committed to maintaining an environment that is free of unlawful harassment and intimidation. Harassment includes any behavior or conduct that is based on a protected characteristic and that unreasonably interferes with an individual's work performance or creates an intimidating, hostile or offensive work environment.

Some examples of harassment are:

- Disparaging or abusive words or phrases;
- Persisting in the use of any name or term which you know may be offensive to that individual; or
- Sabotaging someone's work.

Harassment includes sexual harassment. The determination of what constitutes sexual harassment may vary with the particular circumstances. In general, unwelcome sexual advances, requests for sexual favors, and other verbal, visual or physical conduct of a sexual nature may constitute sexual harassment when:

- Submission to such behavior is made a term or condition of employment;
- Submission to or rejection of such behavior is used as a basis for making employment decisions; or
- Such conduct unreasonably interferes with someone's work performance or creates an intimidating, hostile, or offensive work environment.

Some examples of sexual harassment may be:

- Making sexual comments about a person's body;

- Repeatedly asking for a date after that person has said no;
- Discussing someone's sex life, including your own;
- Staring at someone;
- Making facial expressions, like winking, throwing kisses, licking lips; or
- Looking a person up and down.

The organization will take appropriate action to prevent unlawful harassment, including sexual harassment. People who engage in such behavior will be subject to corrective action, up to and including termination. If you believe you are being harassed, or witness behavior you feel is harassment, you should contact one of the following:

- Your immediate supervisor or, in cases involving behavior of your immediate supervisor, the next-level supervisor or manger;
- Employee and Labor Relations in the Human Resources Department; or
- The Compliance Hotline, including reporting concerns anonymously.

Workplace Violence and Workplace Safety

Lucile Packard Children's Hospital and Stanford Hospital and Clinics have zero tolerance for threats or acts of violence in the workplace. Workplace violence includes physical assaults or actions or statements that give us reasonable cause to believe that our personal safety or the safety of others may be at risk. Employees or medical staff who engage in physically abusive and/or violent behavior (even those made in jest) shall be subject to disciplinary action up to and including removal from SHC facilities, termination of employment and/or referral to appropriate law enforcement agencies. If you perceive a certain behavior as physically threatening or intimidating, you should immediately report it to

- Your immediate supervisor or, in cases involving behavior of your immediate supervisor, the next-level supervisor or manger;
- Employee and Labor Relations in the Human Resources Department; or
- The Compliance Hotline, including reporting concerns anonymously.

In the event of an emergency situation, you should pull a 'Panic Alarm' if one is available and accessible. In cases of imminent danger of bodily harm, call the Security Department at 211 and then call a second person to assist, as needed. Reported events will be investigated and, if warranted, appropriate support will be provided to the victim(s). The hospitals will track these reports and evaluate trends to develop and implement precautionary measures.

As part of our overall commitment to maintain a healthy and safe environment for our patients, employees and others, we strive to keep our facilities physically secure. We are issued photo ID badges that must be worn above the waist at all times. It is your responsibility to keep your badge in your possession and not let any other person borrow it. If it is lost or stolen, notify the Security Office immediately. In addition, be aware of your surroundings and report any suspicious person or activity to your supervisor or the Security Office.

Workplace Health and Safety

In our continuing commitment to an environment of healing and good health, both hospital campuses are smoke free. As leaders in healthcare, we have an obligation to assert strongly the demonstrable risks of smoking. Smoking is not permitted anywhere inside the hospital buildings and outside anywhere within the geographic area bounded by Welch Road, Quarry Road and Campus Drive West.

The use of illegal drugs and abuse of controlled substances in the workplace is prohibited. As a condition of employment, any involvement in the unlawful use, sale, manufacture, distribution or possession of controlled substances, illicit drugs and/or unauthorized use of alcohol in the workplace or working under the influence of such substances is prohibited. We encourage employees with alcohol or drug dependencies to seek treatment and/or rehabilitation. For further details, please contact your supervisor or consult the *Substance Abuse-Free Workplace Policy* in the Human Resources Manual.

We have an extensive safety program to reduce the risk of injury for patients, staff and visitors and to assure compliance with applicable federal, state and local codes and regulations, as applied to the buildings we inhabit and services we provide. It includes making sure that our department heads and managers have appropriate information and training to develop safe working conditions and safe work practices within their areas of expertise; using knowledge or safety principles to educate staff, design appropriate work environments, purchase appropriate equipment and supplies and monitor the implementation of the processes and policies; and regularly evaluating the environment for work practices and hazards to respond to identified risks, hazards and regulatory compliance issues. Our individual role in this endeavor is to learn and follow job and task specific procedures for safe operations. If you have questions about specific policies that apply to your job or task, please speak with your supervisor.

Hiring of Current and Former Government Employees

Complex legal and ethical limitations exist in the recruitment and employment of current or former federal government employees. If we hire former Fiscal Intermediary, Carrier, or Medicare Administrative Contractor personnel, we are required in certain instances to notify the U.S. Department of Health and Human Services within 30 days of the first day of employment. Each situation should be evaluated on an individual basis to ensure that we comply with this and other U.S. Government Conflict-of-Interest laws. Human Resources should be consulted before any discussions of employment with these individuals may occur.

INTEGRITY IN DECISION MAKING

Our *Code of Conduct* helps us to make ethical business decisions. However, it is not designed to address every issue. You may face a situation where the right course of action is unclear. Ask yourself the following questions when you are unsure of what to do:

- Is it inconsistent with our mission and values?
- Is it illegal?
- Is it unethical?
- Could it harm patients?
- Could it harm our co-workers, colleagues, or physicians?
- Could it harm government programs?
- Could it harm our financial health?
- Would our organization be compromised or embarrassed if it became public knowledge?
- Would we be uncomfortable reading about it in the newspaper?
- Is it unfair or inappropriate?
- Could it adversely impact our organization if everyone did it?
- Is it inconsistent with our policies or our Code of Conduct?

If you are still unsure what decision to make or what action to take, talk to your supervisor or consult with the Compliance Department.

It is critical that our Compliance Integrity Program is effectively communicated throughout all levels of the organization. Compliance is the responsibility of each of us. The Compliance Department welcomes constructive input regarding its Compliance Integrity Program and our *Code of Conduct*. If you have comments, suggestions or questions, please submit them to the Compliance Department.

Compliance Department
650-724-2572
ComplianceOfficer@stanfordmed.org
PrivacyOfficer@stanfordmed.org
24 hour Hotline, including making anonymous calls 800-216-1784

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