CP017 Misconduct Disclosure Policy

Policy Type : Administrative/Operations Responsible Administrator : Peter Navarro, Chief Compliance Officer Responsible Office : Office of Compliance

Approved b y:

Originally Issued : September 21, 2020 Revision Date: N/A Training Required : No LCME Required: No

Marc J Kahn, MD, Dean

Date: Month DD, YYYY

Definitions

Misconduct: Misconduct does not only apply to perceived actions that may be in violation of state or

Retaliation : Any materially adverse action or threat of a materially adverse action taken by one individual against another individual for: (1) making a good faith disclosure of misconduct; (2) reasonably participating in the inquiry or investigation of an alleged incident(s) of misconduct; (3) reasonably objecting to or resisting misconduct; or (4) being a close associate of someone who makes or may make a good faith disclosure of misconduct.

Statement of Purpose

The purpose of this policy is to:

- 1) Provide a mechanism for individuals to report good faith concerns about improper, illegal or unethical conduct without retaliation; and
- Require individuals who receive reports of alleged misconduct to properly report those concerns to the KSOM Office of Compliance.

Entities Affected By This Policy

All KSOM departments, employees, volunteers and students.

Required Acknowledgement

All KSOM employees, volunteers, and students.

Policy

The KSOM requires employees, volunteers, and students to disclose suspicion of alleged misconduct promptly to the proper individuals for assessment, inquiry and/or investigation.

It is not your responsibility to determine if a situation indeed constitutes misconduct, but it is your personal responsibility to disclose those concerns. The KSOM has a responsibility to assess, review and adjudicate each disclosure of alleged misconduct in accordance with the requirements of the law, our ethical commitments, and the values of the KSOM.

Reporting

- A. All individuals affected by this policy should promptly report all misconduct concerns or issues involving violations of law, regulation, policy, or procedure through the following proper channels:
 - 1. KSOM management staff and leadership;
 - 2. Their supervisor or another supervisor in their chain of command;
 - 3. The UNLV SOM Human Resources Department (e.g., for general workplace issues); or
 - 4. The Office of Compliance: https://www.unlv.edu/medicine/compliance
 - a) In-person;
 - b) By telephone: (702) 895-1634;
 - c) Via the anonymous (Ethics Point) hotline: (844) 665-2938;
 - d) Via email to compliance.som@medicine.unlv.edu; or
 - e) By mail to: Chief Compliance Officer UNLV Health

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B. Where a disclosure of alleged misconduct is received by a KSOM employee, student, or volunteer, the individual receiving the disclosure is required to notify the Office of Compliance of the alleged misconduct with 48 hours of receipt.

is to protect the integrity of assessment, inquiry and investigation and provide for those who only have a "need to know" with additional follow up.

I. However, where an inquiry and/or investigation has concluded, the Office of Compliance will work to ensure that notice is provided to disclosers/complainants that the inquiry/investigation has finished. As applicable, the Office of Compliance may also inform disclosers/complainants whether the matter had been forwarded to a supervisor and/or senior leadership for further action/assessment.

J.