



## COMPLIANCE: EDUCATION AND TRAINING

### **Purpose:**

To establish requirements for distributing the Boulder Community Health (“BCH” or “Hospital”) Code of Conduct (“Code”), collecting Code acknowledgements, and conducting orientation and annual compliance training for BCH staff.

### **Scope:**

Applies to all BCH staff at all BCH locations.

### **Policy Statements:**

- Code Distribution:
  - Within 90 days of being hired, each new employee receives a copy of or be provided the opportunity to electronically review the Code; acknowledge such review; acknowledge that the Code represents mandatory policy; and agree to abide by the Code.
- Orientation Compliance Training:
  - Each new employee receives one hour of Compliance Orientation training within 90 calendar days of becoming a new employee using materials provided by the Compliance Department.
  - Should an employee fail to receive Orientation Code Training within ninety (90) calendar days of becoming a new employee, the employee must receive the training immediately, and the fact that the employee did not receive the training in a timely fashion and the name of the employee’s supervisor and an action plan for resolution must be reported to Human Resources and the Compliance Department.
  - All volunteers receive compliance education as part of their volunteer orientation.
- Annual Refresher Training:
  - BCH “Annual Training” curriculum includes a compliance module and is required to be completed by all employees and selected groups of non-employees (trainees, affiliates, clinical or business contractors).
- BCH shall ensure that all employees, including management, along with BCH’s contracted staff, are provided with information regarding the federal and state false claims statutes, BCH’s own anti-fraud policies, and the role of such laws and policies in preventing and detecting fraud, waste, and abuse in federal and state health care programs.
- Staff in identified compliance high risk areas may receive more specific training related to their job function and responsibilities as part of their BCH orientation process and on and on-going basis.
- Completion of compliance training is a condition of continued work at BCH.

### **Procedural Guideline Statements:**

1. Orientation Compliance Training
  - a. Employees:

- i. New employees will be required to attend an education program regarding the Hospital's compliance program and shall be informed of the Hospital's compliance standards and policies.
    - ii. Copies of the compliance policies shall be available in all departments of the Hospital via the Scoop.
  - b. Contracted Staff:
    - i. Contracted staff shall receive the same compliance training as employees unless determined by the CO that such individuals receive substantially similar training through their employer.
  - c. This general education and training program shall include, but not be limited to, the following topics:
    - i. The Hospital's compliance philosophy and general commitment to compliance.
    - ii. General compliance policies and standards applicable to all employees.
    - iii. The employee's obligation to adhere to all applicable laws, regulations and Hospital standards of conduct and the consequences for violations.
    - iv. The employee's obligation to report any suspected illegal or improper conduct and the procedures for making such reports.
    - v. Identification of the Compliance Officer and his or her authority and responsibility and identification of other persons in the Hospital and the employee's department responsible for overseeing compliance.
  - d. The general education program shall be conducted by the Compliance Officer or a designee of the Compliance Officer who has sufficient knowledge and training to conduct the program.
  - e. The Orientation Compliance Training completion will be tracked by Human Resources and the Code acknowledgment form will be maintained in the employee's file.
2. Specific Compliance Training and Education
  - a. In addition to the general compliance education and training all employees receive, employees who are required to adhere to specific compliance standards or perform duties which require specific compliance training shall receive additional training and education in the relevant areas.
  - b. Specific training and education shall be conducted in each department annually, and more frequently if necessary. Circumstances which may warrant more frequent training and education include changes in applicable laws or regulations, identification of specific risk areas, issuance of new government directives or discovery of areas of noncompliance.
  - c. The Compliance Officer shall be responsible for overseeing the training and education of Hospital employees and agents with respect to compliance issues. Training and Education for Physicians, and Contracted Staff.
  - d. The Compliance Officer, in consultation with members of senior management and the department directors, shall identify those subcontractors and other agents of the Hospital who are required to adhere to specific Hospital compliance standards or perform duties on behalf of the Hospital which require specific compliance training. These individuals shall receive education and training regarding the Hospital's general compliance standards and the specific compliance standards applicable to the duties the individuals perform for the Hospital.

- e. The Compliance Officer shall coordinate with the Department of Medical Affairs and the leadership of the Medical Staff to provide education and training to members of the medical staff and other credentialed practitioners who perform duties which affect compliance. Physicians who are employees or independent contractors of the Hospital shall receive specific education and training with respect to the functions they perform on behalf of the Hospital.
3. Requirements for Training and Education
    - a. The following requirements shall apply to all training and education conducted pursuant to this policy:
      - i. The person(s) responsible for conducting a training and education program shall document the attendance at the program, as well as the topics covered. Any written materials provided at the program shall be retained and attached to the attendance list.
        1. A copy of the attendance list and training materials shall be maintained.
      - ii. The training and education may take place using publications, through lectures, videos, and other interactive activities designed to effectively communicate the information to employees and agents of the Hospital. Training materials shall be designed to be understandable by all levels of employees who receive the materials.
      - iii. Training instructors shall be knowledgeable in the specific area and may come from inside or outside the Hospital.
      - iv. In lieu of internal training programs regarding specific compliance issues, employees may attend external training seminars with the approval of the department director and/or Compliance Officer.
      - v. All training materials shall be reviewed and updated as necessary at least annually by the director of the applicable department and/or the Compliance Officer.
  4. The training and education required by this policy is a condition of employment or contractual relationship with the Hospital. No employee or agent shall perform functions which require adherence to compliance standards without receiving the required training, unless written permission is obtained from the Compliance Officer.

**Definitions:**

1. **Contracted Staff:** Agency staff or other individuals who provide services to BCH through a contractual arrangement.

**Resources:**

[Code of Conduct](#)

[Compliance: Program Structure and Responsibilities](#)

[Compliance: Reporting Issues and Concerns](#)

[Compliance: Investigations and Response to Compliance Issues](#)

[Government Authorities: Cooperation With](#)

[Government Investigation: Employee Response](#)

[Compliance: Auditing and Monitoring](#)

**References:**

Policies:

Employees: Required Education

**Key Words:**

Compliance education, computer based training, BCH University

**Content Reviewers:**

Audit Committee of the Board of Directors

Compliance Committee

Executive Compliance Committee

**Final Approval:**

David P. Gehant, President and CEO

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