



STATE OF CONNECTICUT
Department of Mental Health & Addiction Services



Commissioner's Policy Statement and Implementing Procedures

SUBJECT:	Agency Whistleblower Protection/Non-retaliation Policy
P & P NUMBER:	Chapter 3.10
APPROVED:	Miriam Delphin-Rittmon, Commissioner Date: 10/15/2015
EFFECTIVE DATE:	October 15, 2015 <i>Miriam Delphin-Rittmon</i>
REVISED:	11/1/2009
REFERENCES:	Agency Compliance Plan
FORMS AND ATTACHMENTS:	

STATEMENT OF PURPOSE: The purpose of this policy is to establish a standard of whistleblower protection and a non-retaliation environment for any individual willing to report or disclose misconduct.

POLICY: DMHAS supports and promotes a culture that prevents, detects and resolves instances of conduct that do not conform to State, Federal and Ethics laws and policies. It is the policy of the Department of Mental Health and Addiction Services (DMHAS) that any person (hereinafter known as “whistleblower(s)”) is free to lawfully disclose whatever information supports a reasonable belief of misconduct as defined in this policy. Individuals are forbidden from preventing or interfering with whistleblowers who make good faith disclosures of misconduct. Finally, the DMHAS will exercise reasonable efforts to:

- Investigate any complaints of retaliation or interference made by whistleblowers;
- Discipline any person associated with the DMHAS found to have retaliated against or interfered with a whistleblower

All employees have an affirmative duty and responsibility for reporting perceived misconduct, including actual or potential violations of laws, regulations, policies, procedures, or this organization’s code of conduct. An “open door policy” will be maintained at all levels of leadership to encourage employees to report problems and concerns. Employees may proceed up the chain of command or communicate with the Human Resources Department or Compliance Officer if their problem or concern is not resolved. Any form of retaliation against an employee who reports a perceived problem or concern in good faith is strictly prohibited.

DMHAS shall make this policy available to its entire staff by posting it on its website along with other Commissioner's policies.

PROCEDURE: Retaliation/Interference Reporting Process

- 1) Filing a Report – Anyone may file a confidential report with the DMHAS and Integrity Officer at (860) 418-6800, their supervisor or Human Resources alleging retaliation or interference. Reports filed under this policy must be filed no later than 180 days from the date the whistleblower became aware, or should have become aware of the alleged adverse action. Individuals are encouraged to contact the Compliance Office, their supervisor or their Human resource Representative.
- 2) Contents of the Report – The report must be in writing and should include specific information and pertinent documentation supporting the whistleblower's allegation of retaliation. It should include:
 - An explanation of the alleged interference with the filing of such report or retaliation;
 - The nature and date of the alleged retaliation or interference or discovery of the same;
 - The name of the person who allegedly took the action;
 - The name, address and phone number of the whistleblower, or whistleblower's representative, if any; and
 - A sworn statement, which the contents of the written complaint are true, or are believed by the whistleblower to be true.
- 3) Report and Review and Acknowledgement to the Whistleblower –
 - a) The Agency Compliance and Integrity Officer (ACIO) will respond to the whistleblower within 10 business days of receipt of the whistleblower's allegation. The ACIO shall:
 1. review the allegation;
 2. determine whether an investigation is justified;
 3. notify the whistleblower in writing of the following:
 - a. The date the allegation was received by the ACIO
 - b. Whether the allegation is complete and provides sufficient information to permit an adequate investigation
 - c. The mechanism for resolving the complaint of retaliation/interference including the whistleblowers right, requirements, process of investigation
 - d. The whistleblower may, within 5 working days, raise concerns about the proposed resolution. The ACIO shall exercise reasonable efforts to address those concerns
 - e. The whistleblower must file any supporting documentation within 10 business days from the initiation of an investigation.
- 4) Confidentiality of all participants in the investigation shall be maintained to the maximum extent possible throughout the investigation.
- 5) All appropriate participants will be informed of the final outcomes of the investigation.

COMPLIANCE ALERT LINE LINK

860-418-6991
1-800-277-9471

The DMHAS Compliance Alert Line Link (C.A.L.L.) is an anonymous phone line that currently receives calls into a voice mail box and is available to employees and others who suspect an illegal act or improper conduct has occurred. This line will be monitored daily Monday through Friday during normal work hours, 8 a.m. to 4:30 p.m.

The Compliance e-mail address is compliancealertlink.org

Individuals, who report in good faith possible compliance issues, will be accorded confidentiality and/or anonymity to the extent possible under the law. There is no obligation on the behalf of the individual to disclose his or her identity, although the reporting individual's identity may become known during the normal course of the investigation and this possibility will be discussed with the individual by the ACIO. Should this occur the complainant's identify should remain confidential.

Some examples of reportable activities include:

1. Suspected Fraudulent billing/coding/documentation.
2. Hiring of Excluded individuals
3. Potential Conflicts of Interest
 - a. A DMHAS Employee working for DMHAS contractors
 - b. Gifts from Vendors/Contractors, i.e. pharmaceuticals, labs, etc.
4. Misuse of client data
5. Breach in Confidentiality
6. Falsifying or Misrepresentation of Cost Reports
7. Unauthorized access or improper disclosure of Protected Health Information
8. Breach of Data Integrity/Security
9. Violation of Client Rights e.g. Civil Rights
10. Substandard Quality of Care
11. Inappropriate Behavior towards employee or client by any individual within the DMHAS system of care
12. Inappropriate use of Agency owned equipment and supplies

As stated in "Reporting a Compliance Concern policy", the act of making a compliance report will not exempt the reporter from the consequence of their own participation in unethical or illegal conduct and does not relieve the reporter of the obligation to file other mandated reports, such as incident reports required by the DMHAS.