GOOD SAMARITAN COLLEGE OF NURSING AND HEALTH SCIENCE
CINCINNATI, OHIO

POLICY TITLE: PROBLEM REPORTING & NON-RETALIATION

Good Samaritan College of Nursing and Health Science being a subsidiary organization to TriHealth, Inc. and Good Samaritan Hospital adopts the TriHealth, Inc. Corporate Policy on Problem Reporting and Non-Retaliation. (Hereafter College represents TriHealth, Good Samaritan Hospital and Good Samaritan College)

The Policy is applicable to members of the Board of Trustees, Administrative Officers of the College and all employees.

PURPOSE

GSC recognizes that a critical aspect of its compliance program is the establishment of a culture that promotes prevention, detection and resolution of instances of conduct that do not conform to Federal and state laws, regulations and policies; federal and state and private payor healthcare program requirements, as well as GSC's ethical and business policies. To promote this culture, GSC has established a problem resolution process and a strict non-retaliation policy to protect employees who report problems and concerns in good faith from retaliation. Retaliation can undermine the problem resolution process and result in a failure of communication channels in the organization.

POLICY/PROCEDURE

1. All employees are responsible for reporting misconduct, including actual or potential violations of law, regulation, policy, procedure, or the Code of Ethical Business and Professional Behavior.
2. An "open-door policy" will be maintained at all levels of management to encourage employees to report problems and concerns.
3. Employees will be encouraged to proceed up the chain-of-command or communicate with the TriHealth's Corporate Compliance Officer if their problem or concern is not resolved.
4. Employees may also utilize the hotline, known as the "Alertline," if they wish to remain anonymous. (NOTE: Employees are strongly encouraged to report problems and concerns via their supervisors, managers, or with the Corporate Compliance Officer before resorting to the Alertline. However, this communication channel is always available if special circumstances exist or their issue is not being properly addressed).
5. Retaliation against any employee who reports a perceived problem or concern in good faith is strictly prohibited. "Good faith" means that an employee actually believes or perceives that the information reported is true.
6. Any employee who commits or condones any form of retaliation will be subject to appropriate performance counseling, up to, and including, termination.

7. Employees cannot exempt themselves from the consequences of their own misconduct by reporting the issue, although self-reporting may be taken into account in determining the appropriate course of action.

PROCEDURES

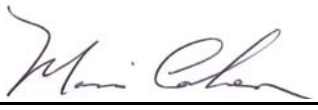
ALL EMPLOYEES

1. Knowledge of misconduct, including actual or potential violations of law, regulation, policy, procedure, or the Code of Ethical Business and Professional Behavior must be immediately reported to management, the Corporate Compliance Officer, or the Alertline.
2. Knowledge of a violation or potential violation of this policy must be reported directly to the Corporate Compliance Officer or the Alertline.
3. Concerns regarding any issue should be addressed to management in the following order: (a) immediate supervisor, (b) department manager, (c) department head/director, and d) senior administrative officer of the organization.
4. If an employee's concern or problem cannot be satisfactorily resolved or special circumstances exist, the employee should report to the Corporate Compliance Officer or the Alertline.

MANAGEMENT (includes the President, Deans, Department Chairs, Directors, Managers, and Supervisors) Management must support this policy and encourage the reporting of problems and concerns

TRIHEALTH'S CORPORATE COMPLIANCE OFFICER

1. The Corporate Compliance Officer is responsible for the investigation and follow-up of any reported retaliation against an employee.
2. The Corporate Compliance Officer will report the results of an investigation into suspected retaliation to the Board of Trustees, whichever such committee is deemed appropriate.

Approved By:  Date: 06/15/10

Effective Date: February 22, 2010

Review/Revision Dates: _____

Responsible Committee: Administration, Board of Trustees