



WELCOME TO MARIN COMMUNITY CLINICS!

STUDENT INTERN/EXTERN PACKET

Extern: Short term assignment, Medical/Dental student from High School, Boston Reed College or other MA program.

Intern: Long term assignment, Medical/Dental student from College University or Post-Graduate program

Name: _____

Are you completing an **Internship** or **Externship**? _____

Who referred you to MCC? _____

Department where you will complete assignment: _____

Location where you will complete assignment: _____

Are you related to anyone at MCC, if yes who? _____

Will you have direct patient contact at MCC? _____

Instructions:

Please fill out packet and attach proof of immunizations.

*** Required immunization records must be attached with completed packet for Human Resources review.
Please note that MCC does not pay for the cost of any required immunizations.**

Return packet to:

Human Resources

By Email: hr@marinclinic.org

By Fax: 415-798-3180

By Mail: Human Resources

Marin Community Clinics

6090 Redwood Blvd., Suite G

Novato, CA 94945

For HR use only:

- _____ Student Intern/Extern Personal Data Sheet
- _____ Student Intern/Extern HIPAA confidentiality agreement
- _____ Required copies of immunizations
- _____ Student Intern/Extern Application
- _____ Code of Conduct Acknowledgment
- _____ Sexual Harassment Acknowledgment (Brochure)



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Student Intern/Extern Personal Data Sheet

Student Name:

Last

First

Middle Initial

Home Address:

Street

City

State

Zip

Telephone:

Home

Cell/Pager

Email Address:

Emergency Contact Information

Contact 1:

Name

Phone Number

Relationship

Contact 2:

Name

Phone Number

Relationship

Signature

Date



HIPAA STUDENT INTERN/EXTERN CONFIDENTIALITY AGREEMENT

I understand that as a student intern of Marin Community Clinics, the use and disclosure of patient information is governed by the rules and regulations established under HIPAA, the Health Insurance Portability and Accountability Act of 1996. I acknowledge that during the course of performing my assigned duties at Marin Community Clinics I may have access to, use, or disclose confidential health information. I hereby agree to handle such information in a confidential manner at all times during and after my employment and commit to the following obligations:

- A. I will use and disclose confidential health information only in connection with and for the purpose of performing my assigned duties.
- B. I will request, obtain or communicate confidential health information only as necessary to perform my assigned duties and shall refrain from requesting, obtaining or communicating more confidential health information than is necessary to accomplish my assigned duties.
- C. I will take reasonable care to secure confidential health information on my computer and will take steps to ensure that others cannot view or access such information. When I am away from my workstation or when my tasks are completed, I will log off my computer or use a password-protected screensaver in order to prevent access by unauthorized users.
- D. I will refrain from using portable storage devices such as floppy disks, jump or flash drives, CDs, DVDs, Zip drives unless specifically authorized in writing by the CFO.
- E. I will not email any individually identifiable patient information outside of the Marin Community Clinics network.
- F. I will not disclose my personal password(s) to anyone without the express written permission of my Supervisor, or record or post it in an accessible location and will refrain from performing any tasks using another's password.
- G. I will use and disclose confidential health information solely in accordance with all state and federal laws and Marin Community Clinics' policies set forth above or elsewhere. I also agree to familiarize myself with any periodic updates or changes to such policies in a timely manner.
- H. I will immediately report any unauthorized use or disclosure of confidential health information that I become aware of to the appropriate supervisor.
- I. All patient data, email, and other data gathered or used during my employment is the sole property of Marin Community Clinics.

I also understand and agree that my failure to fulfill any of the obligations set forth in this Agreement and/or my violation of any terms of this Agreement shall result in my being subject to appropriate disciplinary action.

Student Intern Signature

Date

Human Resources Director Signature

Date



The mission of the Department of Fair Employment and Housing is to protect the people of California from unlawful discrimination in employment, housing and public accommodations, and from the perpetration of acts of hate violence.

Employers' Obligations

All employers must take the following actions against harassment:

- Take all reasonable steps to prevent discrimination and harassment from occurring. If harassment does occur, take effective action to stop any further harassment and to correct any effects of the harassment.
- Develop and implement a sexual harassment prevention policy with a procedure for employees to make complaints and for the employer to investigate complaints. Policies should include provisions to:
 - Fully inform the complainant of his/her rights and any obligations to secure those rights.
 - Fully and effectively investigate. The investigation must be thorough, objective, and complete. Anyone with information regarding the matter should be interviewed. A determination must be made and the results communicated to the complainant, to the alleged harasser and, as appropriate, to all others directly concerned.
 - Take prompt and effective corrective action if the harassment allegations are proven. The employer must take appropriate action to stop the harassment and ensure it will not continue. The employer must also communicate to the com-

plaint that action has been taken to stop the harassment from recurring. Finally, appropriate steps must be taken to remedy the complainant's damages, if any.

- Post the Department of Fair Employment and Housing (DFEH) employment poster (DFEH - 162) in the workplace (available through the DFEH publications line [916] 478-7201 or Web site).
- Distribute an information sheet on sexual harassment to all employees. An employer may either distribute this pamphlet (DFEH 185) or develop an equivalent document that meets the requirements of Government Code section 12950(b). This pamphlet may be duplicated in any quantity. **However, this pamphlet is not to be used in place of a sexual harassment prevention policy, which all employers are required to have.**
- All employees should be made aware of the seriousness of violations of the sexual harassment policy and must be cautioned against using peer pressure to discourage harassment victims from complaining.
- Employers who do business in California and employ 50 or more part-time or full-time employees *must* provide at least two hours of sexual harassment training every two years to each supervisory employee and to all new supervisory employees within six months of their assumption of a supervisory position.

- A program to eliminate sexual harassment from the workplace is not only required by law, but is the most practical way for an employer to avoid or limit liability if harassment should occur despite preventive efforts.

Employer Liability

All employers, regardless of the number of employees, are covered by the harassment section of the FEHA. Employers are generally liable for harassment by their supervisors or agents. Harassers, including both supervisory and non-supervisory personnel, may be held personally liable for harassing an employee or coworker or for aiding and abetting harassment.

Additionally, the law requires employers to take "all reasonable steps to prevent harassment from occurring." If an employer has failed to take such preventive measures, that employer can be held liable for the harassment. A victim may be entitled to damages, even though no employment opportunity has been denied and there is no actual loss of pay or benefits.

In addition, if an employer knows or should have known that a **non-employee** (e.g. client or customer) has sexually harassed an employee, applicant, or person providing services for the employer and fails to take immediate and appropriate corrective action, the employer may be held liable for the actions of the non-employee.

An employer might avoid liability if

- the harasser is not in a position of authority,



The definition of sexual harassment includes many forms of offensive behavior.

- such as a lead, supervisor, manager or agent;
- the employer had no knowledge of the harassment;
- there was a program to prevent harassment; and
- once aware of any harassment, the employer took immediate and appropriate corrective action to stop the harassment.

Filing a Complaint

Employees or job applicants who believe that they have been sexually harassed may file a complaint of discrimination with DFEH within **one year** of the harassment.

DFEH serves as a neutral fact-finder and attempts to help the parties voluntarily resolve disputes.

If DFEH finds sufficient evidence to establish that discrimination occurred and settlement efforts fail, the Department may file a formal accusation. The accusation will lead to either a public hearing before the Fair Employment and Housing Commission or a lawsuit filed by DFEH on behalf of the complaining party.

If the Commission finds that discrimination has occurred, it can order remedies including:

- Fines or damages for emotional distress from each employer or person found to have violated the law
- Hiring or reinstatement
- Back pay or promotion
- Changes in the policies or practices of the involved employer

Employees can also pursue the matter through a private lawsuit in civil court after a complaint has been filed with DFEH and a Right-to-Sue Notice has been issued.

For more information, see publication DFEH-159 "Guide for Complainants and Respondents."

For more information, contact DFEH toll free at (800) 884-1684

Sacramento area & out-of-state at (916) 478-7200
TTY number at (800) 700-2320
or visit our Web site at www.dfeh.ca.gov

In accordance with the California Government Code and ADA requirements, this publication can be made available in Braille, large print, computer disk, or tape cassette as a disability-related, reasonable accommodation for an individual with a disability. To discuss how to receive a copy of this publication in an alternative format, please contact DFEH at the numbers above.



State of California
Department of Fair Employment & Housing

DFEH-185 (11/07)



Department of Fair Employment and Housing

Sexual Harassment

The Facts About Sexual Harassment

The *Fair Employment and Housing Act (FEHA)* defines sexual harassment as harassment based on sex or of a sexual nature; gender harassment; and harassment based on pregnancy, childbirth, or related medical conditions. The definition of sexual harassment includes many forms of offensive behavior, including harassment of a person of the same gender as the harasser. The following is a partial list of types of sexual harassment:

- Unwanted sexual advances
- Offering employment benefits in exchange for sexual favors
- Actual or threatened retaliation
- Leering; making sexual gestures; or displaying sexually suggestive objects, pictures, cartoons, or posters
- Making or using derogatory comments, epithets, slurs, or jokes
- Sexual comments including graphic comments about an individual's body; sexually degrading words used to describe an individual; or suggestive or obscene letters, notes, or invitations
- Physical touching or assault, as well as impeding or blocking movements



I have received the Sexual Harassment Brochure from the Department of Fair Employment and Housing.

I have received the Marin Community Clinics Code of Conduct.

Intern/Extern Signature: _____

Date: _____



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STUDENT INTERN/EXTERN APPLICATION

Please attach resume

Marin Community Clinics

Phone: (415) 755-2546

Fax: (415) 755-2550

Email: volunteer@marinclinic.org

First Name _____	Last Name _____	Date _____
Home Address _____	Home phone _____	
City & Zip Code _____	Business phone _____	
E-mail address _____	Cell phone _____	
Male <input type="checkbox"/> Female <input type="checkbox"/>	Pager _____	

<u>Education</u> (mark last year)		
High School 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> Where _____	College 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> Where? _____	
Graduate 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> Where _____		

Previous work experience _____

Are you presently employed? No Yes if yes, how many hours worked per week? _____

Where do you work? _____

Special skills, training, interests or hobbies _____

Previous volunteer jobs _____

What kind of volunteer jobs are you interested in? _____

What are your volunteer goals? _____

What languages, other than English, do you speak? (Please indicate level of proficiency for each) _____

What time do you have available?

Total hours per week available _____

Days available _____

Days not available _____

Preferred hours _____

Preferred Days _____

Dates Available from _____ to _____

Please give us any further information or comments you might wish to offer: _____

EMERGENCY INFORMATION

Please PRINT clearly

Volunteer Name _____

Volunteer Signature _____

(Parent or guardian signature if under 18 years old)

Please list three people who can be contacted in case of emergency:

Name	Relationship	Cell phone #	Home phone #	Work phone #
1.				
2.				
3.				

Please list three references (academic or professional):

Name	Relationship	Cell phone #	Home phone #	Work phone #
1.				
2.				
3.				

REQUIRED COPIES OF IMMUNIZATIONS
(Attached your records to this page)

If you are an intern/extern who will have patient contact you must provide the following copies of immunizations to Human Resources.

- 1____ Proof of negative TB Screening (PPD –Skin Test) no more than a year old.
- 2____ TDap Vaccine
- 3____ Measles, Mumps and Rubella (MMR)
- 4____ Varicella Vaccine
- 5____ Hepatitis B

I have attached copies of the above required immunizations:

Signature: _____

Date: _____

If you are an intern/extern who will not have patient contact you must provide the following copies of immunizations to Human Resources.

- 1____ Proof of negative TB Screening (PPD –Skin Test) no more than a year old.
- 2____ TDap Vaccine
- 3____ Measles, Mumps and Rubella (MMR)
- 4____ Varicella Vaccine

I have attached copies of the above required immunizations:

Signature: _____

Date: _____



THE MARIN COMMUNITY CLINICS' CODE OF CONDUCT

The Marin Community Clinics' Code of Conduct

Introduction

For over 40 years, the Marin Community Clinics (MCC) has provided a healthcare safety net and cared for those individuals who have fallen through the cracks of private sector health coverage. Formed in the early 1970's, the Clinics evolved from free episodic care for uninsured, often transient citizens to expanded primary medical and dental services to a more stable patient base.

MCC is a non-profit organization and now the largest provider of quality primary healthcare to low-income and uninsured individuals in Marin County. Our mission is to provide accessible and culturally responsive quality healthcare services to Marin residents regardless of their ability to pay.

The reputation of MCC is critical to its continued success in the County's healthcare service delivery arena. The continuing soundness of this reputation is predominantly dependent on the MCC Workforce and Board of Directors.

Commitment

Individually and as an organization, MCC and officers, employees, independent contractors, and volunteers (collectively referred to as MCC's Workforce) and the Board of Directors, join to improve the health of our patients and community by providing high quality, cost-effective, culturally sensitive, patient-centered health care and share in a commitment to legal, ethical and professional conduct in everything we do. Collectively, we support these commitments in our work each day, whether we care for patients, order supplies, provide care, keep records, pay bills or make decisions about the future of our organization. MCC's success as a provider of healthcare services depends on us - our personal and professional integrity, our responsibility to act in good faith, and our obligation to do the right things for the right reasons.

The Compliance Program was created as a structure to teach, support and monitor these commitments, and helps to apply MCC's standards of excellence to a specific job. It provides principles, standards, training and tools to guide us in meeting our mission to our community and our legal, ethical and professional obligations.

As a member of MCC's Workforce or Board of Directors, we are responsible for supporting the Compliance Program in every aspect by our workplace behavior. Our regular performance reviews include understanding and adhering to the Compliance Program as it applies to our jobs.

Code of Conduct

The Code of Conduct is the foundation of the Compliance Program. The Code of Conduct is a guide to appropriate workplace behavior. It will help us to make the right decisions if we are

not sure how to respond to a situation. The Code of Conduct applies to everyone at MCC from entry-level members of the Workforce, Senior Leadership, Officers and Board of Directors. The Code of Conduct supplements the MCC Employee Handbook and specific policies and procedures that apply to each position held at MCC. The Code of Conduct discusses the importance of:

- *Care Excellence*: providing quality, compassionate, respectful and clinically appropriate care to patients.
- *Professional Excellence*: maintain ethical standards of healthcare and business practices.
- *Regulatory Excellence*: complying with federal and state laws, regulations and guidelines that govern the healthcare services that we provide.

To confirm that each of us understands and accepts responsibility for abiding by the MCC's *Code of Conduct*, every Workforce member and the Board of Directors are required to read this document, sign and return the Commitment to Compliance on the last page. The signed Commitment to Compliance will become part of your MCC file.

Of course, no single resource can answer every question or cover every concern you may encounter. We all should be guided by our own good judgment and professional pride, as well. If you have concerns about the Code of Conduct or any moral, legal or ethical issue, you understand that you can talk with the Compliance Officer without harassment, retaliation or adverse employment consequences. MCC has a Compliance Hotline (415) 755-2533 that you may call to discuss compliance concerns. You may leave an anonymous message.

A Shared Responsibility

Because we're in the business of providing care to others, it is critical that each of us adheres to appropriate standards of behavior. As individuals and as an organization, we are responsible to many different groups. We must act ethically and responsibly in our relations with:

- Our patients and their families
- Our colleagues and co-workers
- Physicians and Clinicians
- Nonaffiliated colleagues and customers
- Healthcare payers, including federal and state governments
- Regulators, surveyors and monitors
- Agencies
- Vendors and suppliers
- Donors
- The community we serve

Any compromise in our standards could harm our patients, our coworkers, our organization and

reputation. Like every healthcare organization, we must do business under very strict regulations and oversight. Fraud and abuse are serious issues. Sometimes even an innocent mistake can have significant penalties to our organization and to us.

Because the Compliance Program affects every MCC workforce member and the Board of Directors and every job or task we do, it is critical that we all know and understand our responsibilities. MCC workforce members participate in education and training about the compliance responsibilities of their jobs. In addition, this Code of Conduct is to be adhered to when setting policy on behalf of MCC or otherwise managing the organization's affairs. The written policies and procedures define specific tasks so members understand MCC's performance standards and exhibit day to day a culture of compliance. Supervisors and managers must consistently reinforce these policies and procedures and make sure that MCC's Workforce comply with the state and federal laws.

As we each are responsible for following the *Code of Conduct* in our daily work, we are also responsible for enforcing it. This means that we are expected to report any problems we observe. If you observe or suspect a situation that you believe may be unethical, illegal, unprofessional or wrong, or if you have any clinical, ethical or financial concern, you **MUST** report it. In fact, if you suspect a violation and do not report it you could face disciplinary action up to and including termination.

Marin Community Clinics has a specific communication and reporting process for compliance issues:

1. Talk to a supervisor, he or she is most familiar with the laws, regulations and policies that relate to your work.
2. If you are not comfortable talking with your supervisor or are not satisfied with the response you receive, contact the Clinic Director or Site Medical Director.
3. If none of the above steps resolve your questions or concerns, contact the Compliance Officer. You may report anonymously via interoffice envelope to the Compliance Officer or leaving a voice message on the Compliance Hotline at (415) 798-3100.

Care Excellence - Our First Priority

At MCC, our most important job is providing quality care to our patients. This means offering compassionate support to our patients and working towards the best possible outcomes, while following all healthcare rules and regulations. We care for people who are especially vulnerable; they may have a language barrier, legal status issues, financial inabilities, physical restrictions because of illness, injury or disease or other vulnerabilities. It is our responsibility to respect, protect and care for them with compassion and skill.

1) Patients' Rights

Patients receiving healthcare services have clearly defined rights. To honor these rights, we must:

- a. Provide the same quality care to everyone regardless of race, color, age, religious creed, national origin, sex, gender identity, sexual orientation, ability to pay or

- disability;
- b. Treat all patients with compassion, courtesy, professionalism and respect;
- c. Protect all aspects of the patient's privacy and confidentiality;
- d. Provide care in a culturally sensitive manner. Respect the differences and beliefs of other cultures and communicate in the client's preferred language;
- e. Obtain written permission from the patient or their legal representative before releasing personal, financial or medical information to anyone outside MCC unless otherwise authorized by federal and state law;
- f. Limit access to medical and other records only to the workforce members, physicians or other healthcare professionals who need the information to do their job;
- g. Respect the rights of patients to participate in decisions about their care;
- h. Respect the right of patients to access their medical records as requested; and
- i. Recognize that patients have the right to consent to or refuse care.

2) Providing Quality Care

As workforce members and as an organization, our primary commitment is to provide the care, services and products necessary to help the patient reach or maintain his or her highest possible level of physical, mental and psychological well-being. To meet this standard of care, we:

- a. Develop interdisciplinary plans of care for all patients;
- b. Constantly assess goals to ensure that the ongoing needs of our patients are being met;
- c. Provide only medically necessary services and products;
- d. Confirm that services and products are within accepted standards of practice for the patient's medical condition;
- e. Ensure that services and products are reasonable in terms of frequency, amount and duration;
- f. Measure clinical outcomes and patient satisfaction to confirm that quality care goals are met;
- g. Provide accurate and timely clinical and financial documentation and record keeping; and
- h. Ensure that only properly licensed and credentialed providers with the appropriate background, experience and expertise give patient care.

3) Gifts from Patients

It is MCC's policy that MCC's Workforce and Board of Directors should refuse all personal

monetary gifts, gratuities or tips from patients and return them if they are given. However, the Workforce may receive and share with their department a gift of food, baskets, flowers, etc. Monetary donations in the form of cash, check, money order, or gift card are acceptable to the organization; but not as an individual gift to any one member of MCC's Workforce or Board of Directors.

4) Workforce Relations

To maintain an ethical, comfortable work environment, the entire Workforce must:

- a. Refrain from any form of sexual harassment or violence in the workplace;
- b. Treat all colleagues and coworkers with equal respect, regardless of their race, religious creed, color, age, sex, sexual orientation, gender identity, national origin, religion, marital status, medical condition, disability, military service, pregnancy, childbirth and related medical conditions, or any other classification protected by federal, state, and local laws and ordinances;
- c. Diligently do their utmost to consistently maintain a harassment free and safe environment. MCC has a zero tolerance for harassment of any kind; and
- d. No member of MCC's Board of Directors or any director's child, parent, step-parent, brother, sister, step-brother or step-sister, or other relatives shall be a workforce member, except as approved by the Board of Directors.

Relatives of present workforce members may be hired only if (a) the decision to hire the relative is not made by a related party and (b) neither the present workforce member nor the relative will directly supervise the other. No relative of management shall be hired without prior approval of the Board of Directors.

The Workforce and Board of Directors may not have any direct or indirect financial interest in any agreement or contract between MCC and a third party unless approved by the Board.

5) Confidential Information

In the performance of duties, the MCC Workforce and Board of Directors will encounter highly confidential information concerning patients, providers, funders, and workforce members. Individuals providing this information have the legitimate expectation that such information will remain confidential. In accordance with MCC's policy on confidentiality, such information must be kept strictly confidential and must never be disclosed to persons whom do not have a legitimate business need for this information. All written, audio or video records, photographs, or the like may not be removed from the grounds of MCC without written permission by the patient. Any personal and confidential information needed, by a workforce member or Board of Directors or otherwise affiliated with MCC services, for the conduct of services may only be disclosed within the limits of the law and professional ethics. Anyone inappropriately disclosing such information is subject to disciplinary action up to and including termination. You are required to read and sign a statement indicating you will abide by confidentiality rules. Refer to the HIPAA Confidentiality Agreement. Failure to honor this confidentiality requirement may result in disciplinary action up to and including termination.

6) Appearance and Personal Conduct

Courtesy and graciousness in dealing with patients and the public at large are part of our commitment to customer service. These same attitudes are expected in all business contacts, whether with fellow workforce members or other individuals contacted in the course of business.

Dress, grooming and personal cleanliness standards contribute to the morale of all workforce members and affect the business image presented to the public. The current dress code for MCC is described as “business casual”. Workforce members are expected to dress appropriately to their duties for the day. Workforce members with external contact should wear appropriate attire. Workforce members who don’t regularly meet the public or do not expect to meet with the public on a particular day i.e., administrative days, should follow basic requirements of safety and comfort. On these occasions, workforce members are still expected to present a neat appearance.

Certain workforce members may be required to meet special dress, grooming and hygiene standards including the wearing of uniforms/scrubs and closed toe shoes.

Your supervisor will advise you of this if it applies to your position.

We encourage a fragrance-free environment in order to be respectful of other workforce members and patients.

No workforce member shall engage in any activity that is in conflict with or adversely affects their ability to perform their duties and responsibilities with MCC.

Acceptable	Not Acceptable
Professional, well-fitting, clothing	Worn, torn clothing or suggestive attire (mid-riff, low-cut clothing). Undergarment t-shirts/muscle shirts/tank tops.
	Short shorts
Dress sandals (professional looking)	Flip flop or sport sandals
Small logos, i.e., pocket emblems are acceptable	Visible large logos and printed messages
Jeans (Fridays only)	Torn, worn, frayed jeans

7) Drug and Alcohol Abuse

MCC is required by law to provide a safe and healthy work environment for the Workforce. In addition, it is MCC’s goal to provide the best service possible to its customers. To achieve these goals, MCC has the following rules about the use, possession, and sale of drugs and alcohol by its workforce members.

The illegal use, being under the influence of, sale, distribution, or possession of narcotics, drugs, or controlled substances while on the job or on MCC property will result in immediate disciplinary action up to and including termination. In addition, alcohol cannot be consumed on MCC property unless at an authorized social function sponsored by the MCC and the use of alcohol during working hours or reporting to work under the influence of alcohol is strictly prohibited.

The use of controlled substances prescribed to you by a licensed physician or those available over the counter is not prohibited by this policy. However, if a physician has prescribed medication that requires any accommodation, please notify your supervisor, Clinic Director or the Director of Human Resources to discuss what accommodations are necessary.

Report any drug or alcohol related criminal conviction to the Director of Human Resources within 5 days of the conviction (in most cases the date of conviction will be the date of a plea of guilty or nolo contendere or the date a jury or judge returns a guilty verdict). Please note: a conviction is only one type of evidence of inappropriate use of drugs or alcohol. MCC may take appropriate action prior to, or even absent a conviction.

MCC encourages workforce members with drug or alcohol problems to voluntarily seek professional counseling and rehabilitation. In some cases, treatment may be covered under MCC medical benefits plan. An Employee Assistance Program (EAP) is available for initial assistance. MCC will try to provide either PTO or unpaid leave to allow employees to participate in treatment or rehabilitation programs.

8) Use of MCC Property

When using MCC property, the Workforce members and Board of Directors are expected to exercise care, perform required maintenance, and follow all operating instructions, safety standards and guidelines. Supervisors should be notified if any equipment or machines appear to be damaged, defective, or in need of repair and workforce members are expected to place damaged or defective equipment out of service immediately. Prompt reporting of damages, defects, and the need for repairs could prevent deterioration of equipment and possible injury. Please ask direct supervisors if there are any questions about span of responsibility for maintenance and care of equipment used on the job.

Workforce members and the Board of Directors are responsible for all MCC property, materials, or written information issued to them or in their possession. All MCC property must be returned on or before a workforce member's last day of work.

MCC name, letterhead, supplies, copy services, and postage meter are for MCC business and must not be used for personal needs. The reputation and influence of MCC can be adversely affected by the way in which the letterhead is used. MCC letterhead may not be taken off the premises and may not be used for correspondence of a personal nature.

9) Telephone and Cell Phones in the Workplace

Use of MCC phones for long distance personal calls is prohibited unless other arrangements have been made with the accounting department in advance. Unauthorized use of MCC

phones is grounds for disciplinary action up to and including termination. Workforce members are expected to limit all personal calls to occur during established break times, unless it is an emergency, so as not to interfere with work and charge long-distance personal calls to a personal calling card.

For many of us, cell phones have become a necessity for life. We use mobile phones in our everyday life for calls, texting, calendar, directory, alarm clock, and more. While at work, however, we are expected to exercise the same discretion in using our personal cell phones as we would use with the regular old fashioned desk (LAN Line) phones. Please follow the following guidelines for cell phone use in the workplace:

- a. Excessive personal calls or texting during the work day, regardless of the phone used, interfere with workforce productivity and safety and are distracting to others.
- b. Workforce members should restrict personal calls and/or texting during work time, and should use personal cell phones only during scheduled breaks or lunch periods in non-working areas.
- c. Workforce members should ensure that their friends and family members are instructed regarding this policy.
- d. Workforce members who must have the use of cell phones at work, should as a general courtesy either set their phones to vibrate to signal in-coming calls and/or text messages, or set the ring volume low enough not to be heard beyond their assigned immediate area.
- e. California State law includes an absolute ban on texting while driving. Use of cell phones for phone calls without a hands free device while driving, is prohibited at all times. Using cell phones for work related calls behind the wheel increases the risks of distracted driving and accidents, which may result in workers' comp and other legal liabilities. Please avoid using the cell phone for work related calls while driving.
- f. Camera phones can present risks and potentially compromise sensitive information, HIPAA law, and the privacy of other workforce members and our patients. Video voyeurism law prohibits the recording or sharing of images without consent, when the recording was made in a location that the person expected would be private (e.g., exam rooms, restrooms, break rooms, work areas, waiting areas, lab areas, etc.).

MCC is not liable for the loss of personal cell phones brought into the workplace.

Workforce members who do not conform to these guidelines will be subject to performance counseling up to and including termination of employment, contract or agreement.

10) Privacy and Security

Each person providing health care service to MCC's patients must maintain due diligence to protect each and every patient's health information. The HIPAA Procedure Manual and the

Privacy and Security policies and procedures address the HIPAA Rules in full. In summary, the Privacy and Security requirements are:

- a. Access patient information only for the purpose of fulfilling your job requirements and duties;
- b. Access and transmit only the minimum information required;
- c. Transmit patient's information on secure devices or by encryption outside of the MCC server and always using a cover sheet;
- d. Gain proper authorization to use portable devices, such as laptops, cell phones, tablets and any other device, e.g. home computer, remotely. See your direct supervisor or the Compliance, Privacy and Security Officer for the proper documentation. It is paramount the HIPAA Privacy and Security Rules are adhered to at all times while at work, home or at other remote location.
- e. Only grant access to patient's information according to federal and state guidelines; and
- f. Report any Protected Health Information or Security breach of HIPAA Privacy and Security Rules to the Compliance, Privacy and Security Officer within 24 hours.

11) Information Systems and Electronic Mail (Email)

MCC provides the Workforce and the Board of Directors with a variety of electronic technologies and services, including computers, E-Mail, Voice Mail and Internet services. These technologies and services are intended to be used for business purposes only and are meant to assist the Workforce and the Board of Directors in completing job responsibilities as effectively as possible. Personal use of these technologies and services is prohibited.

It is imperative that the Workforce and the Board of Directors not abuse or misuse these technologies and services. The Workforce and the Board of Directors must ensure that only business related information is contained or maintained on MCC systems or devices. This is particularly important when using e-mail, the World Wide Web, or any other part of the Internet. At a minimum, the Workforce and the Board of Directors must be guided by common sense when using the computer technologies. Given the ever-changing nature of these technologies, it is impossible to catalogue all possible abuse or misuse. Nevertheless, the Workforce and the Board of Directors are strictly prohibited from using any technology to:

- a. Upload or download MCC documents/software onto/or from the Internet.
- b. View, listen to or communicate offensive, defamatory or disruptive content. Such content includes, but is not limited to, material of a sexual or sexually suggestive nature, racial, ethnic or gender-specific slurs, or any other visual/audio/verbal content that offends or is intended to offend a Workforce member or a Board of Director because of his or her race, religious creed, color, age, sex, sexual orientation, gender identity, national origin, religion, marital status, medical condition, disability, military service, pregnancy, childbirth and related medical conditions, or any other classification protected by federal, state, and local laws and ordinances.

- c. The Workforce and the Board of Directors cannot use either internal or external e-mail or the Internet for soliciting signatures, support of political or organizing activities, soliciting for commercial ventures, religious or personal causes, or other similar non-job related solicitations.
- d. The Workforce and the Board of Directors may not use e-mail or the Internet to distribute advertising materials or handbills electronically and should honor copyright law.
- e. The Workforce and the Board of Directors may not post any publicly available material onto any website from the MCC premises or from a MCC computer without prior permission.
- f. The Workforce and the Board of Directors may not download any computer programs for personal use onto their MCC computer.

MCC policies regarding no solicitation and no harassment apply to the e-mail and Internet systems.

The equipment, services, and technology that comprise our computer and e-mail systems and that provide access to the Internet remain at all times the property of MCC. MCC may periodically, without notice, audit its systems, including e-mail and Internet access, to determine whether there is evidence of abuse or misuse. Workforce members should have no expectation of privacy with respect to computers, files, e-mails & voice mails. Workforce members who abuse or misuse any MCC technology and property in violation of these guidelines will be subject to disciplinary action up to and including termination.

Upon termination of employment, agreement or contract Workforce members will lose access to all MCC technologies and services.

12) Social Networking

MCC recognizes that Social Networking (such as personal websites, blogs, Facebook, Myspace, Twitter, online group discussions, text messaging, message boards, chat rooms, etc.) is used by many of our Workforce members. MCC respects the right of our Workforce members to maintain a blog or post a comment on social networking sites. However, MCC is also committed to ensuring that the use of social media serves the needs of our business by maintaining MCC's identity, integrity and reputation. In addition, in light of the nature of our business, there are also risks for HIPAA violations whenever anyone posts any information which may be prohibited by law. Further, MCC has a business interest in protecting its logo, company name, and other intellectual property and in making sure that its Workforce members and Board of Directors do not violate criminal or civil law or patient privacy or rights. Please make sure that you are aware of your obligations in this regard.

To protect MCC's identity, integrity and reputation, Workforce members and Board of Directors must adhere to the following rules:

- a. Workforce members and Board of Directors may not post on a blog or social networking site during their working time or at any time using MCC's equipment

or property. MCC's electronic communication systems are for business use only.

- b. If a Workforce member or Board of Director identifies himself or herself as a member of the Workforce or Board of Directors of MCC on any social networking site, the communication must include a disclaimer that the views expressed are those of the author and do not necessarily reflect the views of MCC.
- c. All rules regarding confidential business information apply in full to blogs and social networking sites. Confidential business information includes items such as trade secrets, technical or non-technical data, a formula, pattern, compilation, program, device, method, technique, drawing, process, financial data or list of actual or potential customers or suppliers.
- d. Any conduct which is impermissible under the law if expressed in any other form or forum is impermissible if expressed through a social networking site. For example, posted material relating to MCC and its Workforce that is discriminatory, defamatory, libelous or malicious is not permitted. MCC's policies prohibiting discrimination, retaliation, and/or harassment based on race, religious creed, color, age, sex, sexual orientation, gender identity, national origin, religion, marital status, medical condition, disability, military service, pregnancy, childbirth and related medical conditions, or any other classification protected by federal, state, and local laws and ordinances ,as well as, MCC's Workplace Violence policies (see item 14 below) apply equally to Workforce members and Board of Directors comments concerning MCC and its Workforce members and Board of Directors on social networking sites, even if done on nonworking time. Employees are encouraged to review those sections of the MCC Employee Handbook for further guidance.
- e. Workforce members and Board of Directors are prohibited from misappropriating or using without permission MCC's corporate logo and intellectual property on any social networking site or other online forum. Workforce members and Board of Directors are reminded that there are civil and criminal penalties for posting copyrighted material without authorization.

Any Workforce member who violates this policy may be subject to disciplinary action up to and including termination. MCC reserves the right to monitor all public blogs and social networking forums for the purpose of protecting its interests and maintaining compliance with this policy.

If you have any questions at all regarding this, please feel free to contact the Human Resources Department.

13) Solicitation and Distribution

Because MCC wants to minimize work interruptions and promote security, solicitation and distribution of literature during work time and on MCC property is prohibited. Work time is all time when workforce member duties require a workforce member to be engaged in work tasks. Work time does not include personal time, such as meal periods, scheduled breaks and when a workforce member is not clocked in.

Solicitation includes such activities as:

- a. Distribution by Workforce members of advertising material, handbills or printed and written literature of any kind in working areas is prohibited at all times. Distribution of literature by non-workforce members on MCC premises, including parking structures, is prohibited at all times.
- b. Using MCC stationery, supplies or equipment (including e-mail) for solicitation is also prohibited.
- c. Refer requests from outside people or organizations to sell merchandise, solicit contributions, distribute literature, arrange displays or use MCC facilities to Human Resources.
- d. Requests for signatures, contributions for charities.
- e. Support of political organizing activities.
- f. Merchandise purchases and requests for donation.
- g. Solicitation by one workforce member of another is prohibited if either workforce member is on work time or it interrupts others who are supposed to be working.
- h. Solicitation by non-workforce members on MCC premises is prohibited at all times.

These rules will be strictly enforced. If a workforce member is in doubt concerning the application of these rules, they should consult with their supervisor, the Clinic Director or Human Resources.

14) Workplace Violence

MCC is firmly committed to providing a workplace that is free from acts of violence or threats of violence. In keeping with this commitment, MCC has established a strict policy that prohibits any member of the Workforce or Board of Directors from threatening or committing any act of violence in the workplace, while on duty, while on MCC-related business, or while operating any vehicle or equipment owned or leased by MCC.

MCC has zero tolerance for any Workforce member or Board of Director, paid or volunteer, newly hired, senior leadership, executive management or officer, who makes threats, engages in threatening behavior, or commits acts of violence against Workforce members, Board of Directors, visitors, guests, or other individuals. Threats include those done during business hours or non-business hours, in person, or remotely by phone or electronic media, such as, emails and social media.

Workforce members are required to report without fear of retaliation of any kind (see the following **Non-retaliation** section), as follows:

- a. Immediately report any incident involving a threat of violence or act of violence to your direct supervisor, Clinic Director, Human Resources, Compliance Officer or the Chief

Executive Officer. The matter will be immediately investigated and appropriate corrective action may include disciplinary action, up to and including termination.

- b. Immediately report any security hazard to your direct supervisor; Clinic Director; Director of Facilities; Compliance, Privacy and Security Officer; or the Chief Executive Officer.
- c. Suggestions for increasing security in the workplace are to be presented to your direct supervisor, Clinic Director, Director of Facilities, Compliance, Privacy and Security Officer or the Chief Executive Officer.

Compliance with this policy is every member's responsibility. It is important for the MCC to be aware of any potential danger in our workplace. Indeed, it is MCC's goal to take every precaution to protect everyone from the threat of a violent act by a workforce member or anyone else.

15) Weapons

For the safety of patients, the Workforce and the Board of Directors, no one, other than law enforcement persons on official duty, shall be permitted to bring any guns, knives or other items which could be used as weapons onto MCC premises. MCC reserves the right to prohibit Workforce members from carrying any items which management, in its sole discretion, deems to be dangerous or potentially dangerous.

16) Right to Inspect

MCC provides a limited number of lockers in which to store personal belongings. All lockers and desks remain the sole property of MCC. MCC reserves the right to open and inspect lockers and desks, as well as any contents, effects or articles that are in lockers or desks. Such an inspection can occur at any time, with or without the advance notice or consent of Workforce members. Such an inspection may be conducted before, during, or after working hours, by any supervisor or security personnel designated by MCC.

Prohibited materials, including weapons, explosives, illegal drugs and alcohol, may not be placed in a locker or desk. If a Workforce member fails to cooperate with any inspection, he or she will be subject to disciplinary action up to and including termination.

17) Personal Belongs

MCC will not be responsible or liable for any personal property of an individual that is lost, stolen, or damaged. It is the responsibility of the Workforce member to safeguard, replace, or repair personal property lost, stolen, or damaged while on MCC premises or in a MCC-owned vehicle. Consequently, MCC recommends Workforce members not bring personal property to work.

18) Non-retaliation

MCC is committed to having a safe and progressive working environment for all. Towards this goal, it is vital to allow persons to freely report suspected errors or behaviors seen that are not aligned with this Code of Conduct. Confidential and anonymous reporting can be made on the

Compliance Hotline by calling (415) 798-3100. Any person(s) who report in good faith suspected violations are not to receive disassociation, harassment, retaliation or adverse employment consequences. Any persons found retaliating are in direct violation of federal and state laws and are subject to disciplinary action up to and including termination. In addition, legal, civil and, or criminal action may be taken.

19) Conflict of Interest

Conflict of Interest are situations that can arise when personal or financial interests influence or may be viewed by others as having the potential to influence, job related judgment or decision making.

MCC shall avoid any actual or potential conflict of interest and wishes to follow best practices with respect to any transactions involving directors, officers and key employees (Interested Persons). MCC wants to make decisions objectively and fairly, so if an Interested Person has any actual connection or possible conflict of interest the person must:

- a. Disclose the existence of the financial interest; and
- b. Be given the opportunity to disclose all material facts to the Board of Directors of MCC, or their designee and exclude themselves from any associated decision.

20) Billing of Services

MCC is committed to ethical, honest billing practices, and the expectation is for all MCC Staff to be vigilant in maintaining these standards at all times. MCC will not tolerate any deliberately false or inaccurate billing. Any Workforce member who knowingly submits a false claim, or provides information that may contribute to submitting a false claim, to any payer – public or private – is subject to disciplinary action up to and including termination. In addition, legal, civil and or criminal action may be taken.

Even an innocent misunderstanding, careless mistake or accidental error can have serious consequences for the organization. Therefore, we must always be extra careful when we prepare billing documentation, and follow all procedures and instructions from regulatory agencies, fiscal intermediaries and insurance carriers. For Workforce members who are not directly involved in billing activities, maintaining regulatory compliance includes providing accurate, timely and complete documentation of the services provided so that claims are based on the correct information.

False or fraudulent claims may include:

- a. Billing for services that were not provided or costs that were not incurred;
- b. Duplicate billing – that is, billing for the same item or service more than once;
- c. Billing for items or services that are not medically necessary;
- d. Changing a code to increase reimbursement i.e., upcoding;
- e. Providing false or misleading information to Medicare about a patient's condition or eligibility;

- f. Failing to identify and refund credit balances; or
- g. Submitting bills without supporting documentation.

You are to understand that if anyone suspects or observes that false claims are being submitted, it is your responsibility to immediately report the situation to a supervisor or Compliance Officer.

21) Referrals and Kickbacks

MCC's Workforce and Board of Directors often have close associations with other local healthcare providers and referral sources. To demonstrate ethical business practices, we must make sure that all relationships with these professionals are open, honest and legal.

MCC accepts patient referrals based solely on clinical needs and our ability to provide the services required by the patient. MCC makes referrals based solely on the clinical needs. We never solicit, accept or offer kickbacks of any kind.

A kickback is an item or service of value that is received in exchange for a business decision, such as a patient referral. Kickbacks can include any item or service of value, including cash, goods, supplies, gifts, freebies or bribes. Accepting kickbacks is against the law, as well as prohibited by MCC's own policies and procedures.

MCC's Workforce and Board of Directors cannot request, accept, offer, or give any item or service that is intended to influence - or even appears to influence - a healthcare service paid for by any private or commercial healthcare payer, or federal or state healthcare program, including Medicare, Medi-Cal, and Partnership.

Note: There are select legal exceptions to this rule. Please see the Compliance Officer if you have further questions.

22) Stewardship of Our Resources

We hold in highest regard the will of all those who contribute to MCC. We have a fiduciary responsibility to ensure that all contributions, grants, and patient related revenues are utilized fully to ensure access to primary care services in Marin County.

In dealing with our donors, grantors and patients, we must:

- a. Make full and fair disclosure of information;
- b. Avoid accepting contributions for the express direct or indirect benefit of political groups or causes when such a grant would jeopardize MCC's non-profit status; and
- c. Avoid linking acceptance of contributions to any stipulation to transact business with any party.

23) Vendor Relations

Vendors must be treated fairly to avoid favoritism, discrimination or the appearance of impropriety. We must:

- a. Afford all vendors reasonable opportunity to offer their products or services on a competitive basis; and
- b. Conduct all competitive bidding in a fair and professional manner, giving no special preference or advantage to any vendor or volunteer.

24) Public Accountability

The MCC Workforce and Board of Directors are accountable to its donors, grantors, patients, and to the community at large. Strong internal controls and complete and precise accounting of all transactions in accordance with generally accepted accounting principles consistently applied is essential to control the organization's affairs and to maintain the integrity of activities. MCC encourages a system that compels accountability at all levels. Disclosure of our financial practices is an essential element of the accountability process. Full and complete disclosure reinforces responsibility and strongly deters wrongdoing.

It is vital that all monetary and in-kind donations, as well as all other monies passing through the organization be accurately recorded and accounted for consistently. No funds are to be used in a manner that would suggest a desire to improperly influence another's decision making and/or cause a personal benefit or gain.

25) Government Investigations

It is MCC's policy to cooperate with all government investigations, audits, surveys and evaluations. These investigations are part of the healthcare environment today, and the procedures for cooperating with these investigations can be complicated. In complying with MCC policy, you must not:

- a. Lie or make false or misleading statements to any government investigator, auditor, surveyor or evaluator;
- b. Destroy or alter any record or document in anticipation of a request from the government or court;
- c. Attempt to persuade another workforce member or any person to give false or misleading information to a government investigator, auditor, surveyor, or evaluator; or
- d. Be uncooperative with any government investigator, auditor, surveyor or evaluator.

26) Law and Regulations

MCC is a non-profit, public benefit organization organized under and subject to, state charitable trust laws and the federal tax code. MCC's goal is to comply with both the letter and the spirit of the law. To this end MCC's Workforce and the Board of Directors will:

- a. Comply with all laws and regulations affecting the organization;
- b. Not use MCC funds, assets, facilities, materials, or other services, directly or indirectly, for the purpose of providing contributions to or support for either

political parties or candidates for public office; and

- c. Report violations and protect those who report violations.

Actions or behaviors that cannot withstand public scrutiny must be avoided. We want to comply with applicable laws and be seen as an ethical leader in all situations. Meeting our legal and ethical obligations cannot be fully defined or ensured by any set of rules, however extensive. In the end, our individual and collective confidence rests on the integrity of each of us.

27) Commitment to Compliance

I have received a copy of the MCC's Code of Conduct. I understand that I have an obligation to read it and understand it, and I agree to abide by its principles. I further agree to conduct myself in an ethical, legal and responsible manner at all times.

I also agree to keep this document for future reference. I understand that if I have questions or concerns about its content or other MCC policies, I will ask for clarification from my supervisor, Compliance Officer or the Director of Human Resources.

Signature: _____

Printed Name: _____ Date: _____

Please sign and return this form to your Compliance Officer. It will be filed in your MCC file.