

**BLUE WATER DEVELOPMENTAL HOUSING, INC.
POLICIES AND PROCEDURES: EMPLOYEE INFORMATION**

SUBMITTED BY: Jennifer Stringer	DATE SUBMITTED: 01/13/2016	SECTION: Administrative	
BOARD APPROVED ON: 02/10/2016	DATE REVISED: 07/27/17, 09/16/2020, 3/27/2023	SUBJECT: Corporate Compliance	
ANNUAL REVIEW BY EXECUTIVE DIRECTOR: 07/27/17, 11/21/18, 09/16/2020, 9/16/2022, 3/27/2023		POLICY #: EA-002	PAGE #: 1 of 6

I. APPLICATION

The provisions stated herein shall apply to all employees of Blue Water Developmental Housing, Inc. (BWDH).

II. POLICY

It is the policy of Blue Water Developmental Housing to have a Corporate Compliance Program that includes a plan, process for receiving complaints, conducting investigations, compliant process trainings, and reporting.

BWDH will have a written process and timeframes for verifying that personnel are not on the List of Excluded Individuals and Entities (LEIE):

- Office of Inspector General (OIG)
- Michigan Sanctioned Provider List (SPL)
- Michigan Public Sex Offender Registry (PSOR)

and actions to be taken in response to the information received.

III. DEFINITIONS

- A. **Abuse:** For purposes of this policy, a pattern of behavior resulting in the submission of inappropriate, unfounded, or illegal claims, with a frequency greater than that which could be reasonably considered a mistake
- B. **Alleged Illegal Conduct:** Conduct which, on its face, appears to be in conflict with that required by law.
- C. **Alleged Improper Conduct:** That conduct which includes such behaviors as intimidation, harassment and other unethical behavior.
- D. **Fraud:** Knowingly and willfully executing or attempting to execute a scheme or deception.
- a. To defraud any program
 - b. To obtain, by means of false or fraudulent pretenses, representations, or promises, any of the money or property owned by, or under the custody or controlled by Agency.

Individuals in management will be committing fraudulent behavior when in a position where they should have known fraud is taking place and did

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nothing to stop it. When allegations result after warnings of impropriety have been issued, abuse becomes fraud.

- F. **High Probability:** Considered to exist whenever one of the following circumstances is present:
- a. When the allegation arises as a result of regular review of claims, case review, or other routine monitoring and detection activities and the number of improprieties exceeds the level a reasonable person would categorize as a mistake.
 - b. When the allegation arises as a result of routine detection and monitoring activities and the same impropriety continues after a warning has been issued.
 - c. Whenever a specific allegation of improper or illegal activity has been brought to the attention of management by a credible person.

IV. STANDARDS

- A. All employees are expected to conduct themselves in a manner that promotes the BWDH's Mission, Vision and Code of Ethics.
- B. The process for reporting compliance or non-compliance will be posted at all times.
- C. Detection of non-compliance will occur through already established reviews, including audit, claims data, record reviews and complaints made by employees, individuals served, parents, guardians, or others.
- D. BWDH shall investigate its own complaints and report compliance issues on a quarterly basis (or as needed). The report may include requests from BWDH for an outside party to assist in the investigation.
- E. Plans of correction shall address remediation of the specific allegation and may include a plan for change in policy designed to prevent recurrence of similar findings in the future.
- F. Possible findings:
 - a. Staff are found to have falsified records.
 - b. Staff are found to have stolen agency or consumer funds and/or property.
 - c. Intentional fraudulent action for the purpose of financial gain.

With respect to all areas of risk, the magnitude of the risk, changes in the risk from previous periods, and recommendations form remediating the risk will be made.

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V. NOTIFICATION/PROCEDURE

WHO	Complaint Process DOES WHAT
Employee	<ol style="list-style-type: none"> 1. Identifies an alleged act of illegal or improper conduct either by an individual or program 2. Notifies his or her local compliance officers, residential and community service division directors immediately of such conduct by telephone, email, or formal complaint. 3. BWDH identified compliance officer assists the employee in completing the form "Complaint of Non-Compliance," while maintaining anonymity when requested, if possible. (Note: Recipient Rights complaints should be referred to the Recipient Rights Office. Concurrent investigations can be conducted as appropriate.)

WHO	Investigation Process DOES WHAT
Compliance Officer	<ol style="list-style-type: none"> 1. Determines if an allegation of non-compliance can be identified as a reportable event. 2. Assigns the complaint a number using a year numbering system: month and year. 3. Categorizes the complaint from the type given and description offered. 4. Acknowledges written receipt of the complaint to the complainant within three (3) working days.
Compliance Officer	<ol style="list-style-type: none"> 5. Conducts interviews, research, and reviews as necessary to investigate the complaint, bringing in outside resources when necessary.

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6. Prepares a “Non-Compliance Investigative Report” within 30 days that either substantiates the complaint or does not substantiate the complaint unless extenuating circumstances exist. (See Exhibit B.)

7. Recommends remedial action plan as appropriate for all substantiated complaints.

8. Forwards the completed report and remedial action plan to the executive director.

Executive Director

9. Reviews the complaint and report within ten (10) business days.

10. Makes a determination and agrees or disagrees with the findings and makes recommendations.

11. Informs the board of directors and contract agency of any substantiated findings.

12. Reports to law enforcement or other accrediting bodies as necessary.

13. Distributes a final report to the following parties
a. Complainant (as appropriate)
b. Executive Assistant

Executive Assistant

14. Incorporates findings into a database to track BWDH Corporate Compliance complaints.

WHO

**Reporting Process
DOES WHAT**

Compliance Officer

1. Corporate compliance officer, community services director completes quarterly Corporate Compliance Reports and forwards them to BWDH Management who acts as the Quality Improvement Committee and provides a copy to the executive secretary for e-filing.

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2. Reviews the Compliance Plan at least annually and updates it as necessary.
3. Reviews and analyzes annually the complaint data for trends or problems areas.
4. Recommends to the Management Team any changes and/or follow-up action as necessary.
5. Forwards the Corporate Compliance Plan to the Board for approval on an annual basis.

Executive Director

**Office of Inspector General, Sanctioned Provider List and
Public Sex Offender Registry Process**

WHO

Human Resource
Manager/Designee

DOES WHAT

1. All employees prior to hire will have completed all background checks required by the Office of Inspector General, Sanctioned Provider List and Public Sex Offender Registry.
2. Will conduct ongoing checks as specified by our contracting agencies.

MORC- once every quarter, recommends monthly

Macomb County Community Mental Health (MCCMH)- monthly

St. Clair County Community Mental Health (SCCCMH)- they conduct the checks.

Checks will be completed by going to the following website and completing the identified steps:

<https://miltcpartnership.org/>

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1. Quick Check
2. Clicking on the above listed checks
3. Enter first and last name
4. Click Search
5. Print results for each check

If no records found, will forward for scanning and saving to personnel file.

If records are found excluding from employment will immediately proceed with following the discharge policy.

VI. EXHIBITS

- A. <..\..\Forms\Complaint forms\Corporate Compliance Complaint of Non-Compliance form revised 3.6.2023.doc>
- B. ..\..\Forms\Complaint forms\Non-Compliance Investigative Report_js.08.28.13.docx
- C. <..\..\Forms\Complaint forms\Corporate Compliance Quarterly Reporting.xlsx>