

SEASHORE GARDENS LIVING CENTER OUR COMPLIANCE PLAN

I. Introduction to Our Compliance Program

Seashore Gardens Living Center (“SGLC”) has always strived to maintain a good faith effort to comply with all applicable laws, rules, and regulations. In accordance with existing guidance from the U.S. Department of Health and Human Services, Office of Inspector General, as well as the statutory requirements of the Patient Protection and Affordable Care Act, SGLC has adopted a Compliance Program.

The goal of our Compliance Program (our Program) is to ensure that SGLC adheres to all applicable Medicare and Medicaid laws, rules, and regulations related to the submission of claims. This includes, among other things, to ensure proper documentation of services, billing, coding, and claims submission, and the prevention, prompt detection, and appropriate corrective action to detect, address, and prevent fraud, waste, and abuse.

The purpose of our Program is to:

1. Outline and emphasize our commitment to accurate and lawful documentation and submission of all claims for services to Medicare, Medicaid and other third-party payers;
2. Help our employees understand and meet legal and ethical standards that govern our business;
3. Promote the prevention, detection, and resolution of any acts that do not conform to applicable federal and/or state laws, rules, and regulations; and
4. Minimize, through early detection and reporting, any potential loss to the government from erroneous claims as well as reduce SGLC’s potential exposure to damages and civil and criminal penalties that may result from noncompliance.

Compliance is a key component to our day-to-day operations. Thus, all persons associated with the provider (including employees, vendors, executives, governing body members, members of the Board of Directors, appointees, associates, and residents) are expected to comply with all applicable laws, rules, and regulations as well as SGLC’s policies and procedures. Those who fail to comply with the elements of this Plan may face disciplinary action, up to and including termination.

II. Compliance Program Components

Compliance Officer

SGLC has appointed a Compliance Officer, who is responsible for day-to-day operations of our Program.

Our Compliance Officer is responsible for overseeing the implementation of our Program, making recommendations to SGLC regarding changes that must be made to enhance compliance and updating our Program, as necessary, to reflect updates in expectations enumerated in applicable laws, rules, and regulations.

Our Compliance Officer has the following specific responsibilities:

1. Coordinate resources to ensure the ongoing effectiveness of our Program;
2. Develop compliance policies and standards;
3. Report to the Compliance Committee and senior management on implementation progress on a regular basis;
4. Monitor developments and changes in relevant state and federal law, regulations, government agency guidance, and court rulings, which may affect our Program. Revise our Program when appropriate to reflect any changes in expectations and/or requirements;
5. Ensure that all staff members and contractors have read the Code of Conduct and signed a statement acknowledging their understanding of its requirements;
6. Participate in the development, presentation and the documentation of educational programs for all employees, agents and affiliated providers that focus on the elements of our Program and risk areas specific to SGLC;
7. Develop policies that encourage reporting of suspected fraud and other improprieties without fear of retaliation;
8. Work with individuals responsible for personnel decisions to ensure that SGLC does not delegate substantial discretionary authority to individuals whom SGLC knows or has reason to know has the propensity to engage in criminal, civil, and/or administrative violations;
9. Conduct or assist in conducting appropriate internal compliance reviews and audits;
10. Conduct and oversee investigations of matters that merit investigation under our Program;
11. Bring to the Compliance Committee and senior management's attention all compliance issues for appropriate response and disciplinary action, if necessary;

12. Maintain documentation and track all issues referred to the Compliance Officer and/or Compliance Committee; and
13. Report regularly to the governing body on the operation of our Program and any significant developments.

Annual Reporting: On at least an annual basis, the Compliance Officer will issue a report to the Senior Administration, the Governing Body, and the Board of Directors that describes the compliance efforts that have taken place during the prior year and that identifies any changes to the Compliance Program that need to be made to improve compliance. The report shall include the following:

1. Copy of Audit Plan
2. All Audit Results
3. All Reports of Noncompliance (whether made by hotline call, telephone call, e-mail, face-to-face communication, etc.)
4. All Investigations into Alleged Noncompliance and Results of the Investigations
5. Response and Corrective Action, Addressing Identified and Substantiated Noncompliance

As necessary, and as specific compliance issues arise that require immediate attention, the Compliance Officer will make a report on a more frequent basis.

Compliance Committee

SGLC has appointed a Compliance Committee (the Committee), which will have overall responsibility for oversight of compliance activities.

The Committee will meet no less than quarterly to review reports on SGLC's compliance activities.

Our Compliance Committee has the following specific responsibilities:

1. To stay up to date on current issues and standards specific to our business;
2. Ensures that we maintain and improve our Program to reflect the latest state, national, and industry standards;
3. Make recommendations to management regarding recommended revisions to existing policies and new policies that may be necessary;
4. Review reports on SGLC's compliance activities;

5. Assist Compliance Officer and senior management in putting into place appropriate response to compliance issues as well as appropriate disciplinary action;
6. Oversee the development and implementation of systems for communicating compliance questions and concerns and reports of wrongdoing;
7. Advise and assist the Compliance Officer in his/her responsibilities;
8. Report regularly to the governing body on the operation of our Program and any significant developments; and
9. Ensure the company is meeting the highest standards of compliance.

All Compliance Committee members shall sign a Confidentiality Statement.

Policies and Procedures

SGLC has written policies and procedures that describe compliance expectations, identify how to communicate compliance issues with appropriate personnel, and describe how potential compliance problems should be investigated and resolved.

Our policies and procedures establish SGLC's expectations for the conduct of our staff members and others with whom we are associated in order to reduce the possibility of fraud, waste, and abuse. Our policies include the adoption of a Code of Conduct (Attachment A), which assists staff members in avoiding both the appearance and commission of improper activities. The Code of Conduct is distributed to all staff members. The Compliance Officer is responsible for ensuring that all staff members have certified that they have received, read, and fully understand the Code of Conduct.

The Compliance Officer is responsible for developing and maintaining all compliance-related policies and procedures. All of our written policies and procedures will be reviewed and revised periodically to reflect changes to our business practices as well as changes to applicable laws, rules, and regulations. Revised policies and procedures shall become effective upon approval by the Compliance Officer and Compliance Committee.

Training and Education

All of our employees are responsible for compliance.

We acknowledge that our Program will be ineffective unless SGLC ensures that the following are effectively trained about our Program, specific regulatory compliance issues, and their responsibilities:

1. Employees
2. Executives

3. Governing Body Members
4. Board Members
5. All other affected persons associated with the facility, including: vendors, consultants, residents, and family members

Therefore, SGLC maintains an ongoing compliance training program, which includes the following:

1. Our Compliance Plan, including Code of Conduct
2. New Hire Orientation, including Compliance Expectations
3. Regular Compliance Training

SGLC's compliance training and education program is designed to communicate our Program's standards and procedures to staff members in a meaningful and effective manner and to ensure consistent application of our Program's policies. In order to best accomplish this, our training program is geared to the level of responsibility and job function.

Training sessions will utilize classroom, lecture, recorded instruction, and/or other means of communication, as appropriate to accommodate the skills, experience, and knowledge of the trainees. Other forms of education will be employed, such as the use of posters, bulletin boards, paycheck stuffers, etc., to inform employees of new compliance issues or to reinforce various aspects of past training. No matter how the information is presented, that training occurred must be thoroughly documented, including the date, attendees, and agenda.

During new hire orientation, all new hires, regardless of position and seniority, will be trained on the Compliance Program and specific requirements and expectations under the program.

It is the Compliance Officer's responsibility to coordinate training activities and maintain a library of compliance-related information and training materials.

All compliance training is mandatory.

Reporting System

Our Program rests upon the ability of our personnel to openly and freely communicate issues of concern to their supervisors, the Compliance Officer, and the Compliance Committee. We are committed to developing and supporting any and all lines of communication to support our efforts to detect, address, and prevent compliance issues, including a method of anonymous reporting.

SGLC has established reporting procedures which are readily accessible to all persons associated with the provider (including employees, vendors, executives, governing body members,

members of the Board of Directors, appointees, associates, and residents) as well as members of the general public.

SGLC's Compliance Officer should be contacted with questions about compliance or to report potential violations or any concerns regarding compliance. The Compliance Officer will maintain open lines of communication and may be reached by telephone, by inter-office mail, or by face-to-face communication. Even if an individual merely has a general question about the propriety of conduct, he/she should still reach out to the Compliance Officer. All reports of compliance issues and violations are taken seriously and investigated accordingly. To the fullest extent possible, all communication to the Compliance Officer will remain confidential.

Should any individual feel uncomfortable making a report to the Compliance Officer, he/she has the option of making a report to our Compliance Hotline (800-557-1066), which allows for anonymous reporting of compliance issues without fear of retribution. Signs with information for contacting the Compliance Hotline are visible throughout our facility.

All reports must be made in good faith. There will be no adverse action or retaliation against any staff member who makes a good faith report of a compliance concern. Likewise, there will be no retaliation for other actions of good faith participation in the compliance program, including but not limited to: reporting potential issues; cooperating or participating in the investigation of issues; participating in self-evaluations, audits, and remedial action; and/or making reports of inappropriate conduct to appropriate officials.

Auditing and Monitoring

SGLC has established a system for routine identification of compliance risk areas and self-evaluation of risk areas, including auditing and monitoring, designed to detect criminal, civil, and administrative violations.

Internal auditing standards are integral to the Compliance Program. Data will be collected and analyzed on a regular basis to assess SGCL's compliance with established standards of practice, in particular: quality, documentation, billing, and reimbursement guidelines.

SGLC will employ a variety of techniques, including but not limited to the following:

1. Periodic interviews with management personnel regarding their perceived levels of compliance within their departments or areas of responsibility;
2. Questionnaires developed to poll personnel regarding compliance matters as well as the effectiveness of individual training techniques;
3. Periodic written reports of department managers, utilizing assessment tools developed to track specific areas of compliance;
4. Audits designed and performed by internal and/or external auditors using auditing guidelines; and

5. Exit interviews of departing employees.

The Compliance Officer will ultimately be responsible for coordinating formal audits; however, the audits may be performed by internal or external auditors or another designee. The auditors should: possess the qualifications and experience necessary to adequately identify potential compliance issues; be objective and independent of management; and have access to relevant personnel, records, and areas of operation; present a written evaluation concerning compliance activities to the Compliance Officer; and specifically identify areas where corrective actions are needed.

Auditing and monitoring should be conducted regularly and written reports must be presented to the Compliance Officer and Compliance Committee at least quarterly. Any areas of potential noncompliance shall be kept confidential.

The Compliance Officer shall analyze the results of the auditing and monitoring to determine the root cause. On the basis of these reports, the Compliance Officer and Compliance Committee shall determine an appropriate response.

Response

When potential compliance issues arise, SGLC will take reasonable steps to respond appropriately to the offense and prevent future similar offenses. As such, SGLC has established a system for responding to compliance issues as they arise, including investigating, retaining legal consultation, updating policies and procedures, implementing corrective action plans, and, when appropriate, remitting payment and/or reporting misconduct to appropriate authorities. It is the responsibility of all associated with SGLC to assist in resolving compliance issues by participating in good faith in SGLC's response to potential compliance violations, including cooperating when SGLC is conducting investigations and abiding by corrective action put into place.

Reports received through either a reporting mechanism or through some other mechanism (e.g., auditing) shall be documented and assessed initially by the Compliance Officer. If the initial assessment indicates that there is a basis for believing that the conduct reported constitutes noncompliance, the matter shall be reported to the Compliance Committee for review.

All instances of potential noncompliance shall be investigated to determine whether the allegation appears to be well-founded. The Compliance Officer shall promptly begin an investigation in accordance with the following procedure:

1. Compliance Officer shall commence an investigation as soon as reasonably possible, but in no event more than thirty (30) days following reasonable suspicion of a compliance violation.
2. The investigation may include:
 - A. Interviews of the person(s) involved in or having knowledge of the potential noncompliance;

- i. Interviewees with relevant information may be required to submit a signed, dated written statement;
 - ii. If the Compliance Officer does not request a written statement from Interviewee, the Compliance Officer shall document the interview and he/she should sign and date the record.
- B. The creation of a timeline of events;
- C. Review of related documents, if appropriate;
- D. Review of applicable federal and state laws, rules, and regulations as well as SGLC's policies and procedures;
- E. Collaboration with the Compliance Committee; and
- F. Consultation with legal counsel, auditors, healthcare consultants, etc.

Every effort to investigate potential noncompliance shall be documented and kept with the original report.

If the allegation is substantiated, Compliance Officer shall determine:

1. Whether the alleged activity violates state, federal or SGLC's policies and procedures;
2. What corrective action, if any, should be taken; and
3. Whether the allegation warrants reporting.

SGLC shall respond to compliance problems promptly and thoroughly by putting into place corrective action. Corrective action shall be imposed as a means of facilitating the overall goal of full compliance. Corrective action plans should assist SGLC employees, vendors or business associates to understand specific issues and reduce the likelihood of future noncompliance. Corrective action shall be sufficient to effectively address the particular instance of noncompliance and should reflect the severity of the noncompliance and the past adherence to compliance standards. All associated with SGLC are responsible for actively participating in the corrective action.

The corrective action plan should identify the nature of the noncompliance and immediate correction of any harm resulting from the violation as well as the resolution of specific problems identified. The plan may include:

1. A recommendation to revise applicable policies and procedures to clarify proper protocols and/or development of new systems to safeguard against future noncompliance of a similar nature;
2. Additional mandatory training for employees, contractors, vendors, and/or business associates;

3. Increased auditing and/or monitoring;
4. Focused review of records made by employees, contractors, vendors, or business associates for a defined period of time following discovery of noncompliance;
5. A recommendation to not bill inappropriate claims;
6. A recommendation to repay any overpayments uncovered during the investigation, with interest, if appropriate;
7. A recommendation to report to appropriate authorities within sixty (60) days of discovery and repay any overpayments uncovered during the investigation, with interest, if appropriate, after the Compliance Officer has conducted an investigation and considered the following:
 - A. Identification of the exact issue;
 - B. The amount involved;
 - C. Any patterns or trends that the problem may demonstrate within the provider's billing system;
 - D. The extent of the period affected;
 - E. The circumstances that led to the overpayment; and
 - F. Whether or not the organization has a corporate integrity agreement in place which requires self-disclosure.
8. Enforcement of disciplinary standards; and
9. Other reasonable corrective measures calculated to ensure adherence to applicable federal and state laws, rules, regulations, and our Program.

For a defined period of time following the implementation of a corrective action plan, the Compliance Officer shall follow up and audit the corrective action to determine whether it is being followed as well as its effectiveness in preventing the recurrence of similar violations.

If an allegation is not substantiated, the Compliance Officer shall keep a clear record of the investigation's conclusion as well as what factors were considered in making that determination.

Enforcing Disciplinary Standards

Active participation in the Compliance Program is mandatory. Adherence to applicable laws, rules, and regulations as well as SGLC's Compliance Program will be an element in evaluating performance. Failing to report suspected noncompliance; participating in non-compliant

behavior; or encouraging, directing, facilitating or permitting, either actively or passively, non-compliant behavior may result in disciplinary action, up to and including termination. Also, if SGLC learns that an individual knowingly fabricated, distorted, exaggerated, or minimized a report of misconduct, either to injure someone else or to protect himself or herself, the individual will be subject to disciplinary action, up to and including termination.

Sometimes an individual who makes a report may also admit to noncompliance on his or her part. Making a report, in itself, does not guarantee protection from disciplinary action related to the underlying noncompliance. However, volunteering information about one's own errors, misconduct, or noncompliance will be taken into account, as long as the admission is complete and truthful, and was not already known to, or about to be discovered by, SGLC. The weight to be given to the report will depend on all the facts known to SGLC at the time disciplinary decisions are made.

All disciplinary actions are applied consistently and in accordance with well-publicized guidelines. All compliance-related disciplinary policies are fairly and firmly enforced; as a general rule, similarly situated employees committing similar offenses under similar circumstances shall be subject to the same discipline. However, the form of correction or discipline provided will be case specific and may be based on a variety of factors, including whether the employee promptly reported his/her own violation, severity of the offense, previous incidents involving the individual, whether the employee cooperates fully in investigating/correcting the violation, and the individual's commitment to a positive change in behavior.

The range of disciplinary action to which persons may be subject include the following:

1. Verbal Warnings;
2. Written Warnings;
3. (Paid or Unpaid) Suspension from Employment or Revocation of Contract; and
4. Termination.

Some acts or omissions of employees and others associated with SGLC shall result in immediate termination. Also, individuals who commit negligent or reckless violations of laws, rules, regulations, or Company policy shall be terminated immediately.

Non-Intimidation and Non-Retaliation

SGLC has a policy of non-intimidation and non-retaliation for good faith participation in the Compliance Program, including but not limited to: reporting potential issues; cooperating or participating in the investigating of issues; participating in self-evaluations, audits, and remedial action; and/or making reports to appropriate officials of inappropriate conduct.

Reassessment

SGLC believes that a thorough and ongoing evaluation of the various aspects of the Compliance Program is crucial to its success. Therefore, SGLC performs a periodic reassessment of the Compliance Program to evaluate its effectiveness and to make any necessary adjustments.

In order to evaluate the effectiveness of the Compliance Program, SGLC will employ a variety of techniques, including but not limited to the following:

1. Periodic interviews with management personnel regarding their perceived levels of compliance within their departments or areas of responsibility;
2. Questionnaires developed to poll personnel regarding compliance matters including the effectiveness of individual training/educational techniques;
3. Periodic written reports of department managers utilizing assessment tools developed to track specific areas of compliance; and
4. Exit interviews for departing employees.

SGLC shall make any necessary adjustments to the Compliance Program, found to be warranted through the reassessment process.

III. External Communications

Contact with Government Agents/Investigators

All contacts with anyone claiming to represent any local, state, or federal agency requesting information or an interview concerning SGLC should be immediately directed to the Compliance Officer or his/her designee. It is SGLC's policy to cooperate with the authorities. Keep the following in mind:

1. No one is **required** to submit to questioning by government investigators or employees.
2. If someone claiming to represent the government contacts you at work or at your home regarding SGLC or your employment, follow these steps:
 - A. Ask for identification and a business card.
 - B. Determine precisely why he or she wishes to speak with you.
 - C. Tell the investigator that you wish to make an appointment for a date and time in the future.
 - D. Immediately notify the Compliance Officer.

Contact with the Media

All contacts concerning SGLC with anyone from the media shall be referred to the Compliance Officer or his/her designee.

Contact with Attorneys

All contacts concerning SGLC with anyone claiming to be an attorney shall be referred immediately to the Compliance Officer or his/her designee.

Contact with Competitors

All contacts with anyone representing a competitor of SGLC or employed by a competitor shall be reported to your immediate supervisor.

IV. Investigations and Litigation

Subpoenas, Summonses, and Legal Complaints

Other than routine subpoenas for medical or personnel records, subpoenas, summonses, or other legal complaints involving SGLC shall be given to the Compliance Officer or his/her designee immediately. It is important that the Compliance Officer and other appropriate individuals respond to subpoenas, summonses, and other legal documents; therefore, it is our policy that staff not turn over documents or discuss the case with any individuals unless directed to do so.

Legal counsel will be contacted, if appropriate.

Search Warrants

If someone representing a government agency attempts to execute a search warrant at any SGLC location:

1. SGLC employees and contractors shall not interfere with the agents.
2. SGLC employees and/or contractors shall demand a copy of the search warrant and the business card (or name) of the agent in charge.
3. The Administrator or highest-ranking SGLC employee on the premises shall be informed of the situation, immediately.
4. The Compliance Officer or his/her designee shall also be contacted. Any instructions given by the Compliance Officer shall be carefully followed.
5. Legal counsel shall be contacted, if appropriate.
6. SGLC employees and/or contractors shall assure that:

- A. only those items referred to in the search warrant are taken;
 - i. SGLC acknowledges that the items taken will be our original documents.
 - ii. If the government agents attempt to take actual computers, SGLC employees and/or contractors shall attempt to detach the computers for the government agents in order to minimize damage to the wiring, etc.
- B. SGLC documents shall not be photocopied by the government agents on the premises; and
- C. A correct and complete inventory of all items taken shall be requested from the government agents before they leave the premises.

While the agents may have the right to be on the premises to execute a warrant, that does not mean SGLC employees and/or contractors must submit to interviews. Employees and contractors need not explain SGLC operations, bookkeeping, records or what any document means; however, employees and contractors will cooperate in locating items called for in the search warrant.

If a government agent makes requests or demands of you inconsistent with these instructions, seek the advice of the Compliance Officer or his/her designee.

**ATTACHMENT A
SEASHORE GARDENS LIVING CENTER
CODE OF CONDUCT**

INTRODUCTION

Seashore Gardens Living Center (“SGLC”), its employees and contractors, and those with whom SGLC associates and/or contracts, where appropriate, constantly strive to ensure that all activity by, on behalf of or with the organization is in compliance with all applicable federal, state, and local laws, regulations, ordinances, administrative directives, and any other binding governmental directives (“Laws and Regulations”).

The general principles articulated in this Code of Conduct are intended to provide guidance to individuals in their obligation to comply with applicable laws and regulations. However, the general principles contained herein are neither exclusive nor complete. Employees and contractors are expected to refer to SGLC’s Compliance Program, manuals, policies, and procedures as well as other relevant Laws and regulations for further guidance. It is important for all employees and contractors to recognize that they are required to comply with all applicable laws and regulations, as well as SGLC’s Compliance Program, manuals, policies, and procedures, whether or not specifically addressed in this Code of Conduct. If questions regarding the existence of, interpretation or application of any law, regulation, rule, standard, policy, and/or procedure arise, they should be directed to SGLC’s Compliance Officer.

SGLC expects each individual to whom this Code of Conduct applies to abide by the principles in this Code of Conduct and to conduct the business and affairs of the organization in a manner consistent with the general policies set forth herein.

Nothing in this Code of Conduct is intended to, nor shall be construed as, providing any additional employment or contractual rights to employees and contractors or other persons.

ETHICAL BUSINESS PRACTICES

1. Achieving business results by illegal acts or unethical conduct is not acceptable. It is expected that all personnel and external agents shall act in compliance with the requirements of applicable law and this Code and in a sound ethical manner when rendering services to our residents and when conducting business and operational functions.
2. Employees and contractors shall perform their duties in good faith and to the best of their ability, and shall not obtain any improper personal benefit by virtue of their relationship with SGLC.
3. Other than compensation from SGLC, and as consistent with the conflict of interest policies, personnel shall not have a financial or other personal interest in a transaction between SGLC and a vendor, supplier, provider, or customer.

4. Each supervisor and manager is responsible for ensuring that the personnel within their supervision are acting ethically and in compliance with applicable law and the Code. All personnel are responsible for acquiring sufficient knowledge to recognize potential compliance issues applicable to their duties, and for appropriately seeking advice regarding such issues.
5. Communication. SGLC requires honesty from individuals in the performance of their responsibilities and in communication with SGLC's attorneys and auditors. No employee or contractor shall make false or misleading statements to any state or federal officials, investigator, or person/entity doing business with SGLC. Employees and contractors shall not destroy or alter SGLC information or documents in anticipation of, or in response to, a request for documents by any applicable government agency or from any court.
6. Financial Reporting. All of SGLC's business transactions shall be carried out in accordance with management's general or specific directives. All of the books and records shall be kept in accordance with generally accepted accounting standards or other applicable standards. All transactions, payments, receipts, accounts, and assets shall be completely and accurately recorded on SGLC's books and records on a consistent basis. All information, including financial reports, cost reports, accounting records, expense accounts, time sheets, and other documents recorded and submitted to other persons must accurately and clearly represent the relevant facts or the true nature of the transaction, and must not be used to mislead those who receive the information or to conceal anything that is improper.
7. Proprietary Information. SGLC's employees and contractors shall not steal information belonging to another person or entity, including from SGLC, or use any publication, document, computer program, information, or product in violation of a third party's interest in such product. All employees and contractors are responsible for ensuring that they do not improperly copy documents or computer programs in violation of applicable copyright laws or licensing agreements for their own use. Employees and contractors shall not use confidential business information obtained from competitors or pre-employment agreements in violation of a covenant not to compete, or in any other manner likely to provide an unfair competitive advantage to SGLC.
8. Business Relationships. Employees and contractors shall not engage in any business practice intended to unlawfully obtain favorable treatment or business from any government entity or any other party in a position to provide such treatment or business. Employees and contractors shall not use confidential or proprietary information about SGLC for their own personal benefit or for the benefit of any other person or entity, except SGLC.
 - A. *Disclosure of Financial Interest*. Employees and contractors shall disclose to the Compliance Officer, or his/her designee, any financial interest, ownership interest, or any other relationship they (or a member of their immediate family) have with SGLC's vendors or competitors.

- B. *No Use of Insider Information.* Employees and contractors may not use “insider” information for any business activity conducted by or on behalf of SGLC. All business relations with contractors providing any services to SGLC must be conducted at arm’s length both in fact and in appearance, and in compliance with SGLC’s policies and procedures. Employees and contractors must disclose personal relationships and business activities with such contractor personnel that may be construed by an impartial observer as influencing the employees’ and contractors’ performance or duties. Employees and contractors have a responsibility to obtain clarification from management on questionable issues that may arise.
9. Personnel shall not engage in any financial, business, or other activity which competes with SGLC’s business which may interfere or appear to interfere with the performance of their duties, or that involve the use of SGLC property, facilities, or resources, except to the extent consistent with the conflict of interest policies.
10. Personnel shall comply with applicable antitrust laws. There shall be no discussions or agreements with competitors regarding price or other terms for product sales, prices paid to suppliers or providers, dividing up customers or geographic markets, or joint action to boycott or coerce certain customers, suppliers, or providers.
11. SGLC and its employees and contractors shall not engage in unfair competition or deceptive trade practices, including misrepresentation of SGLC’s products or operations. Personnel shall not make false or disparaging statements about competitors or their products or attempt to coerce suppliers or providers into purchasing products or services.
12. Confidentiality. All personnel shall maintain the confidentiality of SGLC’s business information and of information relating to SGLC’s personnel, vendors, suppliers, providers, and residents. Personnel shall not use any such confidential or proprietary information except as is appropriate for business. Personnel shall not seek to improperly obtain or misuse confidential information of SGLC’s competitors.
13. Personal Use of Corporate Assets. All employees and contractors are expected to refrain from converting assets of SGLC to personal use unless authorization is given from the Executive Director, Administrator, or President/CEO. All business of SGLC shall be conducted, and SGLC’s property utilized, in a manner designed to further SGLC’s interest rather than the personal interest of an individual employee or contractor. Employees and contractors are prohibited from the unauthorized use or taking of SGLC’s equipment, supplies, materials, or services.

LEGAL COMPLIANCE

1. Gifts from Customers or Others. Employees and contractors are prohibited from soliciting or accepting tips, personal gratuities, gifts, or other things of value from SGLC’s customers or others that seek to do business with SGLC. If a customer or

another individual wishes to present a monetary gift, he/she should be referred to the Compliance Officer or his/her designee.

2. Gifts Influencing Decision-Making. Employees and contractors shall not accept gifts, favors, services, entertainment, or other things of value to the extent that decision-making or actions affecting SGLC might be influenced. Similarly, the offer or giving of money, services or other things of value with the expectation of influencing the judgment or decision-making process of any purchaser, supplier, government official, or other person by SGLC is absolutely prohibited.
3. Gifts from Existing Vendors or Customers. Employees and contractors may retain gifts from vendors or customers, which have a nominal value generally less than \$50 in aggregate over each year. To the extent possible, these gifts should be shared with the employees and contractors' co-workers. Gifts of cash and cash equivalents (e.g., gift certificates) are never acceptable.
4. Vendor or Customer Sponsored Entertainment. Occasionally, at a vendor's or customer's invitation, an employee or contractor may accept meals or refreshments, attend a local theater or sporting event, or similar entertainment, at the vendor's or customer's expense, so long as the cost is of nominal value under the circumstances, generally less than \$50 in aggregate over each year. In most circumstances, a regular business representative of the vendor or customer should be in attendance with the employee or contractor. Employees and contractors should advise the Compliance Officer, or his/her designee, of vendors or customers that offer such invitations on a frequent basis, even if the employee or contractor does not accept such invitations.
5. Conflicts of Interest. Neither Employees nor contractors may use their positions at SGLC to profit personally or to assist others in profiting in any way at the expense of SGLC.
6. Anti-Discrimination/Anti-Harassment. All personnel are responsible for ensuring that the work environment is free of discrimination or harassment due to sex, age, race, color, religion, national origin, disability, or any other status protected under state or federal law.
7. Fraud and Abuse. SGLC expects its employees and contractors to refrain from conduct which may violate any federal and state laws relating to health care fraud and abuse. Each employee and contractor is expected to: a) maintain honest and accurate records of services provided; b) follow current and applicable laws, regulations and guidelines to facilitate proper documentation of services; and c) take necessary steps to prevent the submission of claims for payment and reimbursement of any kind that are fraudulent, abusive, inaccurate, or medically unnecessary.
8. Kickbacks, Inducement, and Self-Referrals. SGLC and its employees and contractors shall comply with all laws relating to kickbacks, inducements, and self-referrals.

SGLC and its employees and contractors shall not knowingly offer, pay, solicit, or receive bribes, kickbacks, or other improper remuneration in order to induce business reimbursable by any federal or state governmental program including, but not limited to, Medicare and/or Medicaid.

All employees and contractors are required to report any gifts or other gratuities, other than those of nominal value, received from any outside source that is in the position to benefit from the referral of business to SGLC.

9. Lobbying/Political Activity. Personnel shall not directly or indirectly authorize, pay, promise, deliver, or solicit any payment, gratuity, or favor for the purpose of influencing any political official or government employee in the discharge of that person's responsibilities. Personnel shall not entertain government personnel in connection with SGLC business.

EDUCATION

1. SGLC will develop and implement a regular education and training program for all employees.
2. All employees are expected to participate in educational programs and abide by policy requirements.
3. Adherence or non-adherence to SGLC's Compliance Program will be a factor in evaluating the performance of an employee.
4. SGLC will maintain records of all educational programs presented to employees and relevant external agents.

REPORTING OF VIOLATIONS

1. Illegal acts or improper conduct may subject SGLC to severe civil and criminal penalties, including large fines and being excluded from certain types of federally funded insurance programs. It is, therefore, very important that any illegal activity or violations of the Code be promptly brought to SGLC's attention.
2. Any director, officer, or employee who is uncertain of, believes, or becomes aware of any violation of this Code or any illegal activity by a director, officer, or employee or another person acting on SGLC's behalf shall promptly report the violation or illegal activity in person, by phone, or in writing, to:
 - A. The Administrator or Executive Director;;
 - B. the Department Head or Assistant Department Head;
 - C. your Supervisor;
 - D. the Compliance Officer; or
 - E. the SGLC Compliance Hotline at (800) 557-1066.
3. It is a violation for personnel not to report a violation of the Code or any illegal activity. If you have a question about whether particular acts or conduct may be illegal or violate the Code, you should contact one of the persons listed above. It is a violation of this Code for personnel to whom a potential illegal act or violation of the Code is reported to not ensure that the illegal act or violation of the Code comes to the attention of those responsible for investigating such reports. If the illegal acts or conduct in violation of the Code involve a person to whom such illegal acts or violations might otherwise be reported, the illegal acts or violation should be reported to another person to whom reporting is appropriate.
4. It is SGLC's policy to promptly and thoroughly investigate reports of illegal activity or violations of this Code. Personnel must cooperate with these investigations. You must not take any actions to prevent, hinder, or delay discovery and full investigation of illegal acts or violations of this Code. It is a violation of this Code for personnel to prevent, hinder, or delay discovery and full investigation of illegal acts or violations of this Code.
5. Personnel may report illegal acts or a violation of this Code anonymously. To the extent permitted by law, SGLC will take reasonable precautions to maintain the confidentiality of those individuals who report illegal activity or violations of this Code and of those individuals involved in the alleged improper activity, whether or not it turns out that improper acts occurred. Failure to abide by this confidentiality obligation is a violation of this Code.
6. No reprisals or disciplinary action will be taken or permitted against personnel for good faith reporting of, or cooperating in the investigation of, illegal acts or violations of this Code. It is a violation of this Code for personnel to punish or conduct reprisals in regard

to personnel who have made a good faith report of, or cooperated in the investigation of, illegal acts or violations of this Code.

DISCIPLINARY ACTION

1. Personnel who violate the Code or commit illegal acts are subject to discipline up to and including dismissal. Personnel who report their own illegal acts or improper conduct, however, will have such self-reporting taken into account when determining the appropriate disciplinary action.

**ATTACHMENT B
SEASHORE GARDENS LIVING CENTER
DEFICIT REDUCTION ACT OF 2005**

PURPOSE

To ensure Seashore Gardens Living Center (“SGLC”) is consistent with applicable legal requirements and standards of practice.

POLICY

SGLC is committed to adhering to all fraud and abuse compliance regulations. The Deficit Reduction Act of 2005 (“Act”) requires SGLC to educate and train staff on federal and state false claims laws, whistleblower protections and SGLC’s policies and procedures for detecting and preventing fraud, waste and abuse.

PROCEDURE

SGLC’s Compliance Officer shall implement this policy and procedure.

SGLC shall require Vendors and Contractors to adopt this policy. SGLC further expects that Vendors and Contractors shall disseminate this policy to their employees and managers.

BACKGROUND CHECKS

SGLC shall verify that any current or prospective employees (regular and/or temporary), contractors, or subcontractors who directly or indirectly will be furnishing, ordering, directing, managing, or prescribing items or services in whole or in part are not excluded, unlicensed, or uncertified by searching the following databases on a regular basis:

1. Federal Exclusions Database
<http://oig.hhs.gov/fraud/exclusions.asp>
2. Excluded Parties List System
<http://www.epls.gov/>
3. N.J. Treasurer’s Exclusions Database
www.state.nj.us/treasury/debarred/
4. N.J. Division of Consumer Affairs Licensure Databases
<https://newjersey.mylicense.com/verification/>
<http://12.150.185.184/dca/>
5. N.J. Certified Nurse Aide and Personal Care Assistant Registry
<http://www.cnatips.com/registry/nurse-aide-nj.php>

6. N.J. Department of Health and Senior Services Licensure Databases
<http://www.state.nj.us/health/healthfacilities/search.shtml>

Because the Affordable Care Act has proclaimed an individual excluded in one state as excluded in all states, SGLC shall also verify that no current or prospective employees (regular and/or temporary), contractors, or subcontractors who directly or indirectly will be furnishing, ordering, directing, managing, or prescribing items or services in whole or in part are excluded, unlicensed, or uncertified by searching currently maintained state databases.

AUDIT OF BILLING RECORDS

SGLC shall review billing records routinely under the overall direction of the Compliance Officer or his/her designee. Review may be both prospective and retrospective.

The billing records shall be provided at random. SGLC shall examine the records for compliance with the applicable standards of practice, specifically compliance with billing-related statutes, regulations, and guidelines

CORRECTIVE ACTION PLANS

The Compliance Officer and the Compliance Committee shall develop a work plan based on the audit findings to address any negative practices. Corrections may include, but are not limited to, the following actions:

1. Review of documentation process and/or forms; changes shall be made, if necessary.
2. In-service to professional staff.
3. Disciplinary actions to individual(s) who may be repeat offenders of improper documentation.

STAFF EDUCATION

Written policies, employee handbooks and employee training shall cover:

1. The Federal False Claims Act [31 U.S.C. §§ 3729–33]
2. The Federal Program Fraud Civil Remedies Act [31 U.S.C. §§ 3801–12]
3. Any applicable state false claims laws, which in New Jersey include:
 - A. New Jersey Medical Assistance and Health Services Act – Criminal Penalties [N.J.S.A. 30:4D-17(a)–(d)]
 - B. New Jersey Medical Assistance and Health Services Act – Civil Remedies [N.J.S.A. 30:4D-7.h; N.J.S.A. 30:4D-17(e)–(i); N.J.S.A. 30:4D-17.1.a]

- C. New Jersey Health Care Claims Fraud Act [N.J.S.A. 2C:21-4.2; 4.3; N.J.S.A. 2C:51-5]
 - D. New Jersey False Claims Act [P.L. 2007, Chapter 265]
4. The right of employees for whistleblower protections under the New Jersey Conscientious Employee Protection Act [N.J.S. 34:19-1 et seq.], and some of the Federal and State statutes mentioned above.
 5. The employer's policies and procedures for detecting and preventing fraud, waste and abuse in Medicaid, NJ FamilyCare, Medicare and other federally funded health care programs, as outlined above.

All employees shall be trained upon initial hire and on an annual basis thereafter.

DISCUSSION OF APPLICABLE LAW

1. Deficit Reduction Act of 2005 [42 U.S.C. § 1396a(a)(68)]
 - A. Federal law that requires SGLC, because it receives Medicaid funding, to take the following actions to address fraud, waste and abuse in health care programs that receive federal funds:
 - i. Establish written policies for all employees and contractors or agents.
 - a. Provide detailed information about the Federal and State False Claims Act; administrative remedies for false claims or statements; and whistleblower protection;
 - b. Include provisions regarding the entity's policies and procedures for detecting and preventing fraud, waste, and abuse, and;
 - c. Provide employees with a specific discussion of employees' rights to be protected as whistleblowers.
 - ii. Under Section 6032, SGLC must establish and make available to their employees, contractors, and agents policies that explain:
 - a. Federal and state laws dealing with false claims for payment from federally funded programs; and
 - b. SGLC's policies and procedures to detect and prevent fraud, waste and abuse in these programs.
 - iii. Contractors and agents must also adopt SGLC's policies and make them available to their employees.
2. Federal False Claims Act [31 U.S.C. §§ 3729–33]

- A. Federal law that creates liability for any person who knowingly presents or causes to be presented a false or fraudulent claim to the U.S. government for payment from any federally funded contract or program.
 - i. “Knowingly” means that a person, with respect to information:
 - a. Has actual knowledge of falsity of information in the claim;
 - b. Acts in deliberate ignorance of the truth or falsity of the information in a claim; or
 - c. Acts in reckless disregard of the truth or falsity of the information in a claim.
 - B. Health care providers and suppliers who violate the False Claims Act can be subject to criminal and civil monetary penalties ranging from a maximum of five years imprisonment and \$5,500 to \$11,000 for each false claim submitted.
 - i. PLUS up to three times the amount of damages sustained by the U.S. Government.
 - ii. PLUS, if convicted, possible exclusion from participation in federal health care programs.
 - C. Qui Tam “Whistleblower” Provisions
 - i. Allow any person, also known as the “relator”, with actual knowledge of allegedly false claims to file a lawsuit on behalf of the U.S. government.
 - ii. Relators may receive a percentage of the moneys recovered by the U.S. government.
 - iii. SGLC is prohibited from retaliating against Relators for complaining or filing lawsuits. If there is retaliation, Relators are entitled to employment reinstatement, back pay and any other compensation arising from retaliatory conduct against a whistleblower for filing an action, investigating a false claim or providing testimony for or assistance in a False Claims Act action.
 - D. Examples of Health Care Fraud [31 U.S.C. §§ 3801-12]
 - i. Billing for services not rendered or goods not provided
 - ii. Falsifying certificates of medical necessity
 - iii. Billing for services not medically necessary
 - iv. Billing separately for services that should be a single service
 - v. Falsifying treatment plans or medical records to maximize payments
 - vi. Failing to report overpayments or credit balances
 - vii. Duplicate billing
3. Federal Program Fraud Civil Remedies Act [31 U.S.C. §§ 3801-12]

- A. Federal law that provides federal administrative remedies for false claims and statements to federally funded health care programs.
 - B. Current civil penalties are \$5,500, (to be adjusted for inflation every four years), for each false claim or statement, and an assessment in lieu of damages sustained by the federal government of up to double damages for each false claim for which the Government makes a payment.
4. New Jersey False Claims Act [adding N.J.S.A. 2A:32C-1–2A:32C-17 and amending N.J.S.A. 30:4D-17(e)]
- A. State law creates liability for any person who knowingly presents or causes to be presented a false or fraudulent claim to the State of New Jersey for payment from any state funded contract or program.
 - B. Prohibits retaliation by SGLC against any employee for the disclosure of information regarding this law; thus, SGLC shall not discharge, demote, suspend, threaten, harass, deny promotion to, or in any other manner discriminate against an employee in the terms and conditions of employment because of the employee’s good faith report to the State or law enforcement agency.
 - i. If there is retaliation, the employer must make the employee “whole” by reinstating him/her, paying him/her two times the amount of back pay, interest on the back pay, compensation for any special damage sustained as a result of the discrimination and, where appropriate, punitive damages.
 - ii. No employer shall make, adopt, or enforce any rule, regulation, or policy preventing an employee from disclosing information to a State or law enforcement agency or from acting to further a false claims action, including investigating, initiating, testifying, or assisting in an action filed or to be filed under this act.
 - iii. In addition, the defendant shall be required to pay litigation costs and reasonable attorney’s fees associated with an action brought under this section.
 - C. Health care providers and suppliers who violate the New Jersey False Claims Act can be subject to civil monetary penalties ranging from \$5,500 to \$11,000 for each false claim submitted.
5. New Jersey Medical Assistance and Health Services Act [N.J.S.A. 30:4D-7h; N.J.S.A. 30:4D-17(e)–(i); N.J.S.A. 30:4D-17.1.a]
- A. State law that provides criminal and civil penalties for individuals and entities engaging in fraud or other criminal violations relating to Title XIX-funded programs.
 - B. Criminal penalties include:

- i. fraudulent receipt of payments or benefits: fine of up to \$10,000, imprisonment for up to 3 years, or both;
- ii. false claims, statements or omissions, or conversion of benefits or payments: fine of up to \$10,000, imprisonment for up to 3 years, or both;
- iii. kickbacks, rebates and bribes: fine of up to \$10,000, imprisonment for up to 3 years, or both; and
- iv. false statements or representations about conditions or operations of an institution or facility to qualify for payments: fine of up to \$3,000, or imprisonment for up to 1 year, or both.

C. Civil sanctions include:

- i. unintentional violations: recovery of overpayments and interest;
- ii. intentional violation, and violation of New Jersey False Claims Act: recovery of overpayments, interest, up to triple damages, and between \$5,500 and \$11,000 for each false claim.

D. Violations can result in the exclusion of an individual or entity from participation in all health care programs funded in whole or in part by the N.J. Division of Medical Assistance and Health Services.

6. New Jersey Health Care Claims Fraud Act [N.J.S.A. 2C:21-4.2 and 4.3; N.J.S.A. 2C:51-5]

A. State law that provides for criminal penalties for health care claims fraud, including the submission of false claims to programs funded in whole or in part by state funds.

- i. “Health care claims fraud” means making, or causing to be made, a false, fictitious, fraudulent, or misleading statement of material fact in, or omitting a material fact from, or causing a material fact to be omitted from, any record, bill, claim or other document, in writing, electronically or in any other form, that a person attempts to submit, submits, causes to be submitted, or attempts to cause to be submitted for payment or reimbursement for health care services.

7. New Jersey Conscientious Employee Protection Act [N.J.S.A. 34:19-1 et seq.]

A. State law that prohibits SGLC from taking any retaliatory action against an employee because the employee:

- i. Discloses, or threatens to disclose to a supervisor or to a public body an activity, policy or practice of the employer, or another employer, with whom there is a business relationship, that the employee reasonably believes:

- a. is in violation of a law, or a rule or regulation promulgated pursuant to law and/or
 - b. is fraudulent or criminal
 - ii. Provides information to, or testifies before, any public body conducting an investigation, hearing or inquiry into any violation of law, or a rule or regulation promulgated pursuant to law by the employer, or another employer; or
 - iii. Objects to, or refuses to participate in any activity, policy or practice which the employee reasonably believes:
 - a. is in violation of a law, or a rule or regulation promulgated pursuant to law and/or ;
 - b. is fraudulent or criminal; and/or
 - c. is incompatible with a clear mandate of public policy concerning the public health, safety or welfare or protection of the environment.
 - B. An employee who feels that he/she has been retaliated against may make a report by contacting any of the following:
 - i. Administrator
 - ii. Compliance Officer
 - a. Reports may be made either openly or anonymously.
 - iii. NJ Medicaid Fraud and Abuse Hotline: 609-826-4701 or 1-888-937-2385
 - iv. Centers for Medicaid and Medicare Services: 1-800-447-8477
8. New Jersey Uniform Enforcement Act [N.J.S.A. 45:1-21]
- A. State law that provides that a licensure board within the N.J. Division of Consumer Affairs “may refuse to admit a person to an examination or may refuse to issue or may suspend or revoke any certificate, registration or license issued by the board” who has engaged in “dishonesty, fraud, deception, misrepresentation, false promise or false pretense:, or has “advertised fraudulently in any manner.”
9. New Jersey Consumer Fraud Act [N.J.S.A. 56:8-2, 56:8-3.1, 56:8-13, 56:8-14 and 56:8-15]
- A. State law that makes it unlawful to use “any unconscionable commercial practice, deception, fraud, false pretense, false promise, misrepresentation, or the knowing concealment, suppression, or omission of any material fact”, with the intent that others rely upon it, in connection with the sale, rental or distribution of any items or services by a person, or with the subsequent performance of that person.

- B. Penalties include a fine of not more than \$10,000 for the first offense and not more than \$20,000 for the second and each subsequent offense. Restitution to the victim can also be ordered.

ATTACHMENT C
SEASHORE GARDENS LIVING CENTER
POLICY AGAINST HARASSMENT

POLICY

Seashore Gardens Living Center (“SGLC” intends to provide a work environment that is pleasant, healthful, comfortable, and free from intimidation, hostility or other offenses that might interfere with work performance. Harassment of any sort - verbal, physical, and/or visual - will not be tolerated.

WHAT IS HARASSMENT?

SGLC is committed to equal opportunity and non-discrimination in all aspects of employment, including hiring, promotions, and the work environment. SGLC endeavors to foster a congenial work environment in which all individuals are treated with respect and dignity. Each individual has the right to work in an environment that promotes equal opportunity and prohibits discriminatory practices, including sexual and other forms of harassment.

SGLC expressly prohibits any form of employee harassment or discrimination based on sex, race, color, religion, national origin, age, disability, sexual orientation, marital status or veteran status or any other factor or protected class that is illegal under federal, state or city law (any of which is referred to as an “Unlawful Category”). Improper interference with the ability of employees to perform their expected job duties is not tolerated.

Harassment or discrimination is unacceptable on SGLC’s property, or in other work-related settings.

DEFINITIONS AND EXAMPLES OF HARASSMENT

For purposes of this policy, harassment is defined as unwelcome or unwanted conduct, whether verbal or physical, based upon race, sex, religion, or any other Unlawful Category. Harassment occurs when the unwelcome or unwanted conduct is made a condition of employment, utilized for decisions affecting employment (including, but not limited to, promotions, hiring and firing), used to create an intimidating or hostile work environment or found to unreasonably interfere with an individual's ability to work.

Examples of the type of conduct that constitutes harassment include, but are not limited to: physical conduct, verbal conduct, display of harassing pictures or materials, name calling and jokes which are based on Unlawful Categories such as race, sex, national origin, sexual orientation, disability, etc.

COVERAGE

This policy covers all SGLC employees and independent contractors without exception. SGLC will not tolerate, condone or allow harassment, whether engaged in by fellow employees, supervisors, managers, independent contractors or other non-employees who conduct business with the company. SGLC encourages the reporting of all incidents of harassment, regardless of who the offender may be.

COMPLAINT PROCEDURES

While SGLC encourages individuals who are being harassed, or subject to discrimination, to promptly notify the offender that his or her behavior is unwelcome, SGLC also recognizes that power and status disparities between an alleged harasser and a target may make such confrontation extremely difficult. Whether or not such informal, direct communication between individuals is effective, SGLC requires that the complaint be reported in the following manner:

If an individual has been subjected to harassment based on an Unlawful Category, or believes he or she has been treated in an unlawful, discriminatory manner, whether by a co-worker, superior or other non-employee who conducts business with SGLC, the individual should promptly report the incident, either verbally or in writing, to his or her immediate supervisor. In the event the employee believes it would be inappropriate to discuss the matter with his or her immediate supervisor, the employee should report it to SGLC's Compliance Officer or his/her designee.

All reports of harassment or discrimination will be reduced to writing by the person receiving the complaint and signed by the complainant. If a person other than the Compliance Officer receives the complaint from a SGLC employee or agent, he or she will promptly confer with the Compliance Officer who will coordinate and direct an investigation into the allegations.

Where necessary, SGLC may employ Special Counsel, a lawyer or consultant to investigate the complaint and provide guidance in handling the matter.

The complaint will be investigated expeditiously. While SGLC endeavors to keep the complaint confidential throughout the investigatory process, please be aware that SGLC will only do so to the extent practical and appropriate under the circumstances.

RESOLVING THE COMPLAINT

Upon completing the investigation of a complaint and conferring with counsel and SGLC's management, if necessary, the Compliance Officer will communicate his or her findings and intended action to the complainant and alleged offender.

If SGLC determines that an individual is guilty of harassing or discriminating against another individual, appropriate disciplinary action, up to and including termination, will be taken against the offending person. Appropriate sanctions will be determined by the management of the company in consultation with the person conducting the investigation, Special Counsel, and/or

any outside counsel or consultant so engaged. In addressing confirmed incidents of harassment, SGLC's response, at a minimum, will include reprimanding the offender and preparing a written record of the offense. Additional action may include, but is not limited to: referral to counseling, withholding of a promotion, reassignment, temporary suspension without pay, financial penalties or termination.

RETALIATION PROHIBITED

SGLC will not in any way retaliate against an individual who makes a report of harassment or unlawful discrimination or provides information concerning such actions, nor will it permit any employee to do so. Retaliation is a serious violation of this policy and should be reported immediately. Any person found to have retaliated against another individual for reporting harassment or discrimination will be subject to the same disciplinary action provided for offenders.

FALSE ACCUSATIONS

If, after investigating any complaint of harassment or unlawful discrimination, SGLC determines that the complainant or purported witness falsely accused another knowingly or in a malicious manner, the complainant or witness, as the case may be, will be subject to appropriate disciplinary action.