VA

U.S. Department of Veterans Affairs

Veterans Health Administration

CODE OF INTEGRITY

Dear Colleagues:

Integrity is essential to our mission. Veterans depend upon it, and the public trust demands it. It is our job and greatest responsibility to provide the highest quality of care to Veterans.

This landmark Code of Integrity emphasizes VHA's common culture of integrity and its responsibility to operate with the highest principles and ethical business standards both in the provision of health care, as well as our everyday interactions with one another.

As government employees, all of us adhere to a Federal employee code of conduct. The VHA Code of Integrity takes this commitment further by underscoring the unique role VHA staff play in Veterans' care. Centered around VA's ICARE values of Integrity, Commitment, Advocacy, Respect and Excellence, the Code provides high-level guidance regarding VHA's expectations for how we work together, provide care to Veterans, conduct research, maintain financial records, protect assets, and serve as government employees.

The Code also speaks to a fundamental driver of quality in all health care systems: encouraging ongoing and comprehensive feedback from all stakeholders. We need and we want all employees and Veterans to feel empowered to provide firsthand accounts of their experiences. These accounts allow us to identify problems early on and rectify them immediately. Whether it's a matter of quality, patient safety, patient privacy, or an issue related to fraud, waste and abuse, all employees should feel protected in stepping forward. In support, the Code includes a list of employee responsibilities, how and where employees can raise concerns and report violations, and VHA's commitment to non-retaliation.

Finally, the Veterans we serve expect VHA to cultivate an environment where ethical conduct and personal accountability are encouraged. By promoting a just culture, VHA fosters an environment where employees are encouraged to inform their leaders of any challenge to success. Having a Code of Integrity, therefore, demonstrates to those we are privileged to serve that each of us is accountable.

I encourage you to please take the time to read the Code of Integrity and reflect upon the ways it applies to your everyday work. Creating a culture that's conducive to the highest ethical standards is critical not only to assuring high quality health care, but also to assuring public trust in VA.

Richard A. Stone, M.D.

VA CORE VALUES

VA's five core values underscore the obligations inherent in VA's mission: Integrity, Commitment, Advocacy, Respect, and Excellence. The core values define "who we are," our culture, and how we care for Veterans and eligible beneficiaries. Our values are more than just words – they affect outcomes in our daily interactions with Veterans and eligible beneficiaries and with each other. Taking the first letter of each word—Integrity, Commitment, Advocacy, Respect, Excellence—creates a powerful acronym, "I CARE," that reminds each VA employee of the importance of their role in this Department. These core values come together as five promises we make as individuals and as an organization to those we serve.

INTEGRITY

Act with high moral principle. Adhere to the highest professional standards. Maintain the trust and confidence of all with whom I engage.

COMMITMENT

Work diligently to serve Veterans and other beneficiaries. Be driven by an earnest belief in VA's mission. Fulfill my individual responsibilities and organizational responsibilities.

ADVOCACY

Be truly Veteran-centric by identifying, fully considering, and appropriately advancing the interests of Veterans and other beneficiaries.

RESPECT

Treat all those I serve and with whom I work with dignity and respect. Show respect to earn it.

EXCELLENCE

Strive for the highest quality and continuous improvement. Be thoughtful and decisive in leadership, accountable for my actions, willing to admit mistakes, and rigorous in correcting them.

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1.0 Introduction ★

1.1 What is the Code of Integrity?

The Code of Integrity provides guidance to ensure that work at VHA is accomplished not only in accordance with all applicable laws, regulations, and policies, but also with the spirit of these laws, regulations, and policies. This document outlines how VHA employees conduct themselves, how to treat others, and how to perform work with integrity at VHA. The Code of Integrity is a consolidated document that will simplify and connect the key laws, regulations, and policies that apply to VHA.

1.2 Why do we need the Code of Integrity?

As a minimum standard, VHA employees are expected to comply with all applicable laws, regulations, and policies. The Code of Integrity demonstrates the commitment to I CARE values in the workplace and to the ethical values that guide what should be done, beyond what must be done. The Code of Integrity emphasizes VHA employees' responsibilities to operate with integrity and the highest ethical standards. It is a consolidated document with various references and points of contact for specific matters of integrity.

1.3 Don't we have a Code of Conduct?

While there are Standards of Ethical Conduct for Employees of the Executive Branch and criminal conflicts of interest laws applicable to all Federal employees, the Code of Integrity is specific to VHA employees. The Code of Integrity consolidates applicable policies, laws, and regulations in a single document for easy reference. It further demonstrates the commitment to integrity in interactions with fellow employees, treatment of Veterans and other beneficiaries, research conducted, financial matters, and asset protection.

1.4 Who must follow the Code of Integrity?

The Code of Integrity applies to all VHA employees.

INTEGRITY

More than technical compliance with the laws and regulations, integrity means having the sort of character where behavior and actions are trusted to be ethical, reflective of agency values, without the intent or effect of being false or misleading, and beyond minimal compliance with laws, regulations, and policies.

2.0 Responsibilities

2.1 Adherence

All VHA employees are responsible for being familiar with this Code of Integrity and complying with the laws, regulations, and policies that apply to their work. Please review the reference links in each of the sections, as they will lead you to the relevant source information for each concept.

2.2 Raising Concerns and Reporting Violations

2.2.1 Obligation to Report

Employees have a legal obligation to report violations of criminal law to their supervisor, VA Police, and/or the Office of Inspector General. Federal regulations provide the following guidance regarding an employee's duty to report:

> *All VA employees with knowledge or information about actual or possible violations of criminal law related to VA programs, operations, facilities, contracts, or information technology systems shall immediately report such knowledge or information to their supervisor, any management official, or directly to the Office of Inspector General (38 C.F.R. 1.201).*

Moreover, Federal regulations provide the following guidance regarding reporting fraud, waste, and abuse.

> *Employees shall disclose waste, fraud, abuse, and corruption to appropriate authorities (5 C.F.R. 2635.101(b)(11)).*

Employees are also encouraged to seek guidance regarding concerns and ask questions to prevent, identify, and remediate suspected misconduct at VHA. Additional information on whom to contact can be found in 2.3. Whom to Contact with Questions or Concerns.

2.2.2 Non-retaliation

Federal employees who act as whistleblowers and expose and report certain kinds of agency misconduct are protected (5 U.S.C. §2302(b)(8)). This whistleblower protection extends to disclosures that an employee reasonably believes constitutes a violation of any law, rule, regulation, or gross mismanagement, gross waste of funds, abuse of authority, or a substantial and specific danger to public health or safety. A Federal employee authorized to take, direct others to take, recommend or approve any personnel action must not take, fail to take, threaten to take, or threaten to fail to take any personnel action against an employee because of protected whistleblowing.

No disciplinary or punitive action will be taken against staff or visitors who report patient safety and/or quality of care concerns to The Joint Commission (APR 09.02.01, The Joint Commission).

2.3 Whom to Contact with Questions or Concerns

VHA has several resources available to assist with raising and reporting concerns. Managers and senior leadership in the facility or program office are available to address concerns and answer questions, as they are familiar with laws, regulations, and policies that apply to employees' work. Apart from an employee's duty to report actual or possible criminal violations as well as complying with Standards of Ethical Conduct for Employees of the Executive Branch, employees are encouraged, but not required, to first discuss their questions or concerns on compliance and integrity issues with their immediate supervisor. If an employee feels they are unable to resolve their questions or concerns, employees are encouraged to escalate to the facility management or local points of contact. For questions or concerns related to specific matters of integrity outlined in the sections below, please contact the appropriate points of contact listed.

Decision Making Guidance Regarding Integrity in the Workplace

When considering where to speak up about your concerns, ask yourself:

1. Do I have a concern about a possible violation of applicable law, regulations, or policies?
2. Do I have a concern that certain practices or actions are inconsistent with the I CARE values?
3. Do I have a concern that certain practices or action may harm Veterans, other beneficiaries, or VHA staff?

If the answer to any of the questions above is "yes", you are encouraged to discuss your concerns with your immediate supervisor. You may approach facility management, local points of contact, or national points of contact (when an issue is not local in nature or cannot be resolved locally) regarding your concerns.

Please note that the Office of General Counsel, the Office of Special Counsel, the Office of Accountability and Whistleblower Protection, the Office of Inspector General, and offices identified in Section 7 may be contacted at any time.

3.0 Integrity in the Workplace

3.1 General Considerations

It is every employee's responsibility to be aware of and abide by the relevant laws, regulations, and policies that govern their specific work. In addition, it is every employee's responsibility to model behavior that is in alignment with VA's I CARE values. Demonstrating the values publicly is the best way to gain and maintain a reputation as honest servants of the public, including Veterans and other beneficiaries. It is important to consider the potential reputational harm that your actions could have on VA.

Acting with integrity in the workplace means you, not only demonstrating commitment to VA's I CARE values, but also understanding, modeling, and honoring laws and institutional policies regarding the following:

- Diversity and Equal Employment Opportunity
- Harassment (Sexual and Non-Sexual)
- Hostile Work Environment
- Workplace Violence
- Occupational Health & Safety
- Standards of Ethical Conduct for Employees of the Executive Branch
- Criminal Conflict of Interest Prohibitions
- Hatch Act (Political Activity)

3.2 Relevant Laws, Regulations, and Policies

Note that this list is not all-inclusive, as there may be additional laws, regulations, or policies that apply.

- VA Directive and Handbook 5025: Legal
- VA Directive 5975: Diversity and Inclusion
- VA Directive 5977: Equal Employment Opportunity Discrimination Complaints Process
- VA Directive 6515: Use of Web-Based Collaboration Technologies
- VA Directive 7700: Occupational Health & Safety
- VHA Directive 1124: Equal Employment Opportunity Policy
- EEO, Diversity and Inclusion, No FEAR, and Whistleblower Rights and Protection Policy Statement
- Harassment Prevention Program
- Criminal Conflict of Interest Laws, 18 U.S.C. §§ 201-209
- Standards of Ethical Conduct for Employees of the Executive Branch, 5 C.F.R. Part 2635
- Hatch Act, 5 U.S.C § 7323 (Office of Special Counsel Hatch Act Website)
- Guide to Government Ethics - Summary of the Laws and Rules for VA Employees (for VA Employees only)

3.3 Workplace Points of Contact

Additional information regarding when and how to reach out to these points of contact can be found in Points of Contact (Section 7).

TOPIC	POINT(S) OF CONTACT	SECTION LOCATION
Standards of Ethical Conduct for Employees of the Executive Branch	OGC Ethics Specialty Team	7.1
Privacy	Privacy Officer, VHA Office of Privacy	7.6
Discrimination, Harassment, and Dispute Resolution	Harassment Prevention Program Coordinator (HPPC), EEO Managers, Office of Resolution Management	7.3
Occupational Safety and Health	Occupational Health Services	7.10

3.4 Workplace Questions and Answers

Example scenario regarding harassment:

Bill sometimes makes comments to his administrative assistant Ann Smith about how attractive she is. She never says anything when he makes these comments. One day, Ann requests a raise. Bill says that he will consider her request and suggests that the two of them go for drinks and to dinner after work. Ann makes it clear that she wants to keep their relationship purely professional and would therefore prefer not to go out with him. Bill says that he understands. Two weeks later, Bill informs Ann that he has denied her request for a raise. She asks Bill for an explanation, and he says that if she would be more "cooperative" with him, then her chance for a raise would improve. Ann asks what does cooperative mean? Bill smiles and says, "You figure it out."

3.4 Workplace Questions and Answers

Q: The other day, a co-worker told me a joke that had mild sexual content. I was not offended by it, and we both found the joke funny. Today, we both got a memo from our supervisor telling us that our conduct was inappropriate and a potential violation of VHA's sexual harassment policy. Was the joke harassment?

A: While one joke alone may not be harassment, it could be perceived as part of a hostile work environment. In this situation, you need to remember that the question is not whether you or the employee who told the joke was offended, but whether a "reasonable person" would find it offensive. Another employee must have overheard you and found the joke offensive enough to report it, causing your supervisor to send the memo. Not everyone you work with will share your same opinion as to what is or is not offensive. Be more careful about what you say at work.

Q. Why might I contact a resource in health care ethics?

A. Ask for a review of a document or proposal from an ethics perspective. Ask for clarification or interpretation of ethical aspects of a policy. Ask questions about topics in health care ethics. Ask questions if they are not sure what is the ethically right thing to do.

Q: One of the organization's best workers has approached you with a problem. She is being hit on by her department supervisor, but she doesn't want you to do anything. She just wants it to be on record that she told someone. She is handling the situation, and she asks you to promise not to discuss the matter with anyone.

A: Talk with an HR representative. You can promise that you will try to keep the investigation as confidential as possible, but you cannot promise complete confidentiality.

4.0 Integrity in Care for Veterans and in Conduct of Research

4.1 General Considerations

It is of the utmost importance that VHA follow ethical, scientific and clinical standards and comply with the applicable laws, regulations, and policies in delivering care to Veterans and in conducting research. Patient safety and patient care rights are of paramount importance in decision making. Additionally, VHA must protect the privacy and security of personal information that is collected, used or that is entrusted, respect the safety and quality of the care provided to Veterans, and monitor the research being conducted. VHA must comply with all requirements for reporting adverse events.

Acting with integrity when delivering care for Veterans or in conducting research, especially research involving Veterans as subjects, means understanding, modeling, and honoring the applicable laws, regulations, and policies regarding the following:

- Quality of Care
- Patients' Rights
- Privacy of Information
- Research & Scientific Integrity
- Criminal Conflict of Interest Laws
- Standards of Ethical Conduct for Employees of the Executive Branch
- Stop the Line for Patient Safety Initiative
- Patient Safety

4.2 Relevant Laws, Regulations, and Policies

Note that this list is not all-inclusive, as there may be additional laws, regulations, or policies that apply.

- VHA Directive 1004: National Center for Ethics in Health Care
  - VHA Handbook 1004.01, Informed Consent for Clinical Treatments and Procedures
  - VHA Handbook 1004.02, Advance Care Planning and Management of Advance Directives
  - VHA Handbook 1004.03, Life-Sustaining Treatment Decisions: Eliciting, Documenting and Honoring Patients' Values, Goals and Preferences
  - VHA Handbook 1004.04, State-Authorized Portable Orders
  - VHA Handbook 1004.05, iMedConsent™
  - VHA Handbook 1004.06, IntegratedEthics®
  - VHA Handbook 1004.07, Financial Relationships Between VHA Health Care Professionals and Industry
  - VHA Handbook 1004.08, Disclosure of Adverse Events to Patients
- VHA Office of Research & Development 1200 Series Policies
- VHA Handbook 1058.01: Research Compliance Reporting Requirements
- VHA Handbook 1058.02: Research Misconduct
- VHA Directive 6066: Protected Health Information (PHI) and Business Associate Agreements Management
- VHA Directive 1605.01: Privacy and Release of Information
  - VHA Handbook 1605.03: Privacy Compliance Assurance Program
- VA Directive 0009: Ensuring Quality of Information Disseminated by VA
- Criminal Conflict of Interest Laws, 18 U.S.C. §§ 201-209
- Standards of Ethical Conduct for Employees of the Executive Branch, 5 C.F.R. Part 2635
- Limitation on Certain Physician Referrals, 42 U.S.C. 1395nn
- Hatch Act, 5 U.S.C § 7323 (Office of Special Counsel Hatch Act Website)
- Guide to Government Ethics - Summary of the Laws and Rules for VA Employees (for VA Employees only)

4.3 Care for Veterans and Conduct of Research Points of Contact

Additional information regarding when and how to reach out to these points of contact can be found in Points of Contact (Section 7).

TOPIC	POINT(S) OF CONTACT	SECTION LOCATION
Standards of Ethical Conduct for Employees of the Executive Branch and Criminal Conflict of Interest Laws	OGC Ethics Specialty Team	7.1
Criminal Matters	VA Police, VA Office of Inspector General	7.2
Research Non-Compliance	Research Compliance Officer, Office of Research Oversight	7.8
Health Care Ethics	Local Ethics Point of Contact, National Center for Health Care Ethics	7.9
Patient Safety and Quality Concerns	Patient Safety Manager, Research Compliance Officer, The Joint Commission	7.5
Privacy	Privacy Officer, VHA Office of Privacy	7.6
Information Security	Information Security Officer	7.7

4.4 Care for Veterans and Conduct of Research Questions and Answers

Q. What kinds of questions can ethics consultation help answer?

A. An ethics consultation can help address situations like these:

- The Veteran's family is confused and upset. They do not agree about what is the right thing to do for the Veteran's care. Can VA help?
- The Veteran is too sick to make her own decisions. How should the surrogate decide what is best for the Veteran?

Q. I am researcher at a VA facility and have a question about VA research policy and VA research funding. I also have a concern about potential noncompliance involving the review and approval of research at my facility. Whom should I contact?

A. If you feel comfortable raising your question and concern locally, you can reach out to research administrative personnel at your facility or follow local requirements for reporting research concerns. If you are concerned about reaching out locally, questions about VA research policies and funding may be directed to the Office of Research & Development. Concerns about potential noncompliance involving VA research may be reported to the Office of Research Oversight.

Q. I am a principal investigator, co-principal or other investigator on VA research. How do I disclose intellectual property rights or other financial interests which might be affected by the research?

A. Such interests are reported on a Research Financial Conflict of Interest Statement (VA Form Alt 450), which is submitted to the Research & Development Committee.

Q. Can I have an ownership interest in the company that will commercialize my invention(s) and engage in VA research, or outside research that would affect the marketability of those inventions?

A. No, but you may assist in the commercialization of your invention under a Cooperative Research and Development Agreement.

Q. I have an academic appointment at the affiliated teaching hospital. Can I sign-off on the affiliate's grant application to NIH?

A. No, you may perform research on behalf of the affiliate and provide updates to the affiliate regarding the progress of that research, but you may not sign-off on the grant application. Doing so would violate criminal conflict of interest law because you would be representing a non-Federal party before a Federal agency in connection with a matter in which the United States is a party and/or has a direct and substantial interest. 18 U.S.C. §§ 203, 205.

Q. Do I need to report all my inventions to VA?

A. Yes, you must report it to the Technology Transfer Program, and any other programs referenced throughout this document, even if the invention did not result from your VA research, regardless of when and where you made the invention.

5.0 Integrity in Financial Matters and Asset Protection

5.1 General Considerations

VHA's property, assets, and confidential and proprietary information must be protected. All employees are responsible for safeguarding this information. It is essential to complete accurate financial records that fairly represent the work you perform. While there are multiple controls in place to protect and preserve financial integrity and assets, VHA employees must be diligent to maintain the trust and confidence of Veterans and other beneficiaries.

Acting with integrity in financial matters and asset protection means understanding applicable laws, regulations, and policies regarding the following:

- Coding and Billing for Services
- Accuracy of Records
- False Claims Act
- Financial Reporting and Records
- Use of Time, Equipment, and Proprietary Information
- Protection of Confidential Information
- Fraud, Waste, and Abuse (FWA)
- Use and Security of VHA Assets
- Standards of Ethical Conduct for Employees of the Executive Branch
- Criminal Conflict of Interest Prohibitions

5.2 Relevant Laws, Regulations, and Policies

Note that this list is not all-inclusive, as there may be additional laws, regulations, or policies that apply.

- VA Directive 6300: Records and Information Management
- VHA Directive 1030: Compliance and Business Integrity Oversight Program
- VHA Directive 1733: VHA Finance Quality Assurance Reviews
- VA Directive 6001: Limited Personal use of Government Office Equipment Including Information Technology
- VA Directive 6500: Managing Information Security Risk: VA Information Security Program
- VHA Handbook 1004.07: Financial Relationships Between VHA Health Care Professionals and Industry
- Criminal Conflict of Interest Laws, 18 U.S.C. §§ 201-209
- Standards of Ethical Conduct for Employees of the Executive Branch, 5 C.F.R. Part 2635
- Hatch Act, 5 U.S.C § 7323 (Office of Special Counsel Hatch Act Website)
- Guide to Government Ethics - Summary of the Laws and Rules for VA Employees (for VA Employees only)
- Procurement Integrity Act, 41 U.S.C. §§ 2101-2106, 48 C.F.R. § 3.104, Subpart 3.104

5.3 Financial Matters and Asset Protection Points of Contact

Additional information regarding when and how to reach out to these points of contact can be found in Points of Contact (Section 7).

TOPIC	POINT(S) OF CONTACT	SECTION LOCATION
Standards of Ethical Conduct for Employees of the Executive Branch and Criminal Conflict of Interest Laws	OGC Ethics Specialty Team	7.1
Criminal Matters	VA Police, VA Office of Inspector General	7.2
VHA Revenue Cycle Financial and Business Operations	CBI Officer, Office of Compliance and Business Integrity	7.4
Privacy	Privacy Officer, VHA Office of Privacy	7.6
Information Security	Information Security Officer	7.7
Finance	Local Fiscal Officer, Finance Officer, or Financial Manager or VHA Chief Financial Officer	7.11

5.4 Financial Matters and Asset Protection Questions and Answers

Q. An employee performing a financial review identifies that the results of the review were not accurately reported based on the findings. What should the employee do?

A. The employee should first discuss the finding with his or her supervisor and the VISN financial quality assurance managers for corrective action. The employee may also report the incident to the Office of the Inspector General. Matters of fraud, waste and abuse can also be reported to the Office of Special Counsel and Office of Accountability and Whistleblower Protection.

Q. An employee has questions related to appropriations law or financial policies regarding purchases such as Award ceremonies, travel, and purchase cards. Where should the employee look for assistance?

A. Refer to VA Financial Policies Website, Government Accountability (GAO) ("Red Book"), or the local fiscal officer.

6.0 Integrity as a Federal Employee

6.1 General Considerations

Public service is a public trust. Government officials must put the public's interests before their own interests. The public may lose confidence in the integrity of the Government if it perceives that an employee's Government work is influenced by personal interests or by payments from an outside source. An executive branch employee's Government work may have the potential to benefit the employee personally, affect the financial interests of the employee's family, or involve individuals or organizations with which the employee has some past, present, or future connection outside of the employee's Government job. Hence VHA employees must avoid situations where personal interests might, or might appear to, impact their objectivity in performing their official duties. Conflicts of interest occur when an employee's personal financial interest or outside activity or the interest of another, such as a spouse or outside employer, interferes —or appears to interfere— with the employee's ability to do our work in an impartial manner. Employees are encouraged to proactively disclose actual or perceived conflicts of interest.

Acting with Integrity as a Federal employee means understanding applicable laws, regulations, and policies regarding the following:

- Procurement Integrity
- Standards of Ethical Conduct for Employees of the Executive Branch
- Criminal Conflict of Interest Prohibitions
- Hatch Act (Political Activity)

6.2 Relevant Laws, Regulations, and Policies

Note that this list is not all-inclusive, as there may be additional laws, regulations, or policies that apply.

- VHA Handbook 1660.03: Conflict of Interest for the Aspects of Contracting for Sharing of Health-Care Resources (HCR)
- VA Directive 1663: Health Care Resources Contracting – Buying Title 38 U.S.C § 7323
- VHA Handbook 1004.07: Financial Relationships Between VHA Health Care Professionals and Industry
- VA Directive and Handbook 5025: Legal
- VA Directive 8100: Guidance Relating to Congressional Relations Activities
- VA Directive 0008: Developing Public-Private Partnerships with, and Accepting Gifts to VA from, Non-Governmental Organizations
- Criminal Conflict of Interest Laws, 18 U.S.C. §§ 201-209
- Standards of Ethical Conduct for Employees of the Executive Branch, 5 C.F.R. Part 2635
- Hatch Act, 5 U.S .C § 7323 (Office of Special Counsel Hatch Act Website)
- Guide to Government Ethics - Summary of the Laws and Rules for VA Employees (for VA Employees only)
- Department of Justice Procurement Integrity Website (Procurement Integrity Act)
- VHA Directive 1098: VHA Public-Private Partnerships

6.3 Federal Employee Points of Contact

Additional information regarding when and how to reach out to these points of contact can be found in Points of Contact (Section 7).

TOPIC	POINT(S) OF CONTACT	SECTION LOCATION
Standards of Ethical Conduct for Employees of the Executive Branch and Criminal Conflict of Interest Laws	OGC Ethics Specialty Team	7.1
Criminal Matters	VA Police, VA Office of Inspector General	7.2
Prohibited Personnel Practices, Whistleblower Disclosures, Hatch Act Violations, Violations of the Uniformed Services Employment and Reemployment Rights Act (USERRA)	Office of Special Counsel, Department of Labor	7.12

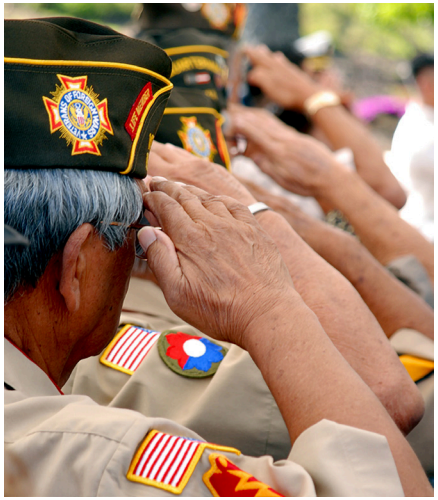
6.4 Federal Employee Questions and Answers

Q. I have an outside business. Can I seek Government contracts on behalf of that business?

A. No. In this instance, as a Federal employee, you would be prohibited from representing outside business before a Federal agency. Generally, VA employees are prohibited from "being the face of" a non-Government party before the Federal Government. (This prohibition does not apply to representation before Congress).

Q. I am the Associate Director of a VAMC and a local chapter of a VSO has invited me to attend their annual Gala. Can I accept free attendance?

A. Maybe. Employees are generally prohibited from accepting gifts, including free attendance at events, which are given because of their official position or offered by a prohibited source such as a VSO. However, there is an exception for "widely attended gatherings." Acceptance of free attendance at a widely attended gathering must be approved by the appropriate agency designee. The agency designee determines if attendance is in VA's interest because it will further agency programs and operations and VA's interest in the employee's participation in the event outweighs concerns that acceptance may or may appear to improperly influence the employee in performing their official duties. Contact the OGC Ethics Specialty Team for further guidance on acceptance of gifts of free attendance.



Q. I am a VA physician also appointed at the affiliated medical school. The matter at issue is a public-private partnership (PPP) with the affiliate, which will not involve any transfer of funds, but rather a coordination of resources and outreach. Can I participate in a VA sharing agreement with the affiliate?

A. No. If the PPP has no effect on the affiliate's "bottom line", the employee still has a "covered relationship" with the affiliate for the purposes of the Standards of Ethical Conduct for Employees of the Executive Branch governing appearances of a conflict. Hence, to avoid an appearance of a conflict the physician should not participate in the PPP with the affiliate.

7.0 Points of Contact

7.1 Standards of Conduct for Employees of the Executive Branch and Criminal Conflict of Interest Laws

For questions concerning the Standards of Ethical Conduct for Employees of the Executive Branch or criminal conflict of interest laws, please contact the OGC Ethics Specialty Team.

VA Central Office (VACO)

- E-mail: GovernmentEthics@va.gov
- Phone Number: 202-461-6000 or 202-461-7637

Outside VACO:

- E-mail: OGCNorthAtlanticEthics@va.gov (CT, DC, DE, MA, MD, ME, NC, NH, NJ, NY, PA, RI, VA, VT, WV)
- E-mail: OGCSouthEastEthics@va.gov (AL, FL, GA, KY, Puerto Rico, SC, TN)
- E-mail: OGCMidwestEthics@va.gov (IA, IL, IN, KS, MI, MN, MO, NE, ND, OH, SD, WI)
- E-mail: OGCContinentalEthics@va.gov (AR, CO, LA, MS, MT, OK, TX, UT, WY)
- E-mail: OGCPacificEthics@va.gov (AK, AZ, CA, Guam, HI, ID, NM, NV, OR, Philippines, WA)

7.2 Criminal Matters

Information about actual or possible violations of criminal laws related to VA programs, operations, facilities, or involving VA employees, where the violation of criminal law occurs on VA premises, will be reported by VA management officials to the VA police component with responsibility for the VA station or facility in question. Criminal matters involving felonies must be referred immediately to the VA Office of the Inspector General (OIG). VA management officials with information about possible criminal matters involving felonies are responsible for prompt referrals to the OIG.

- Hotline Phone Number: 1-800-488-8244 (8:30 a.m. - 4 p.m. Eastern Time)
- Fax: 202-565-7936
- E-mail: VAOIG.HOTLINE@forum.va.gov
- Mailing address: Office of the Inspector General Hotline (53E) P.O. Box 50410 Washington, DC 20091-0410

7.3 Discrimination, Harassment, and Dispute Resolution

If you have concerns or allegations about equal employment opportunity (EEO) discrimination, harassment (sexual and non-sexual), and alternative dispute resolution (ADR), contact the Harassment Prevention Program Coordinators (HPPC) and EEO Managers. You may also direct these to the Office of Resolution Management (ORM).

- Phone Number: 1-888-566-3982

7.4 VHA Revenue Cycle Financial and Business Operations

The Facility CBI Officer can serve as a local resource for compliance with the laws, regulations and standards of business integrity. The CBI HelpLine is a reporting opportunity which is separate from the VA OIG Hotline.

- Phone Number: 1-866-842-4357
- Fax: 201-643-1184
- E-mail: vhacbihelpline@va.gov
- Mailing Address: VHA/Office of Compliance and Business Integrity(10E1A) Attn: VHA CBI Helpline
- 810 Vermont Avenue NW, Washington, D.C. 20420

7.5 Privacy

For matters related to privacy compliance regarding the handling of employee information, please contact the VHA Facility Privacy Officer, VHA Privacy Office, or view the VHA Privacy Office SharePoint (for VA Employees only).

VHA Privacy Office

- Phone Number: 1-877-461-5038
- Email: VHAPrivIssues@va.gov
- Mailing Address: VHA Privacy Office, Office of Health Informatics (10A7) at 810 Vermont Avenue NW, Washington, DC 20420

7.6 Patient Safety and Quality Concerns

Facility staff must report to the Patient Safety Manager (PSM), as per local policy, any unsafe conditions of which they are aware, even if the conditions have not yet resulted in an adverse event or close call. Report research-specific concerns to the Research Compliance Officer. All adverse events require reporting and documentation in the VHA Patient Safety Information System (PSIS).

For additional support, employees and visitors should identify and report unsafe practices, processes, and environments to The Joint Commission.

- Online: Submit a new patient safety event or concern. Submit an update to the incident. (You must have the incident number.)
- E-mail: patientsafetyreport@jointcommission.org
- Mail: Office of Quality and Patient Safety, The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181

7.7 Information Security

For matters related to compliance with the appropriate information system program standards, please contact the Information Security Officer or view the Information Security Portal (for VA Employees only).

7.8 Research Non-Compliance

For matters related to VA research noncompliance and other VA research-related concerns, please contact your facility's Research Compliance Officer. If you have additional questions regarding human research protections, laboratory animal welfare, research information security, and laboratory safety, contact the Office of Research Oversight.

- Phone Number: 202-632-7620 or 877-343-6562

7.9 Health Care Ethics

For matters related to ethical issues (uncertainties or conflicts about values) that arise in patient care, health care management, and research, VA employees, Veterans, patients and their families may contact their local Ethics Consultation Service or the National Center for Ethics in Health Care.

- Phone Number: 202-632-8457
- Email: vhaethics@va.gov

7.10 Occupational Health and Safety

For matters related to occupational health, prevention and safety programs for employees in support of regulatory and professional standards, please contact Occupational Health Services.

- Phone Number: 202-461-1068
- E-mail: VHAAskOccHealth@va.gov

7.11 Finance

For matters related to national appropriation and fiscal management, please contact your Local Fiscal Officer, Finance Officer, or Financial Manager or VHA Chief Financial Officer.

- Phone Number: 202-461-6666

7.12 Prohibited Personnel Practices, Whistleblower Disclosures, Hatch Act Violations, Violations of the Uniformed Services Employment, and Reemployment Rights Act (USERRA)

- For matters related to concerns or allegations about a prohibited personnel practice, including reprisal for whistleblowing, employment discrimination, an improper hiring practice, or failure to adhere to laws, rules, or regulations that directly concern the merit system principles, you may contact the Office of Special Counsel.
- For matters related to making a whistleblower disclosure concerning a violation of a law, rule, or regulation; gross mismanagement; a gross waste of funds; an abuse of authority; and/or a substantial and specific danger to public health or safety, you may also contact the Office of Special Counsel.
- For allegations concerning certain political activity by Federal employees (Hatch Act), these may be filed with the Office of Special Counsel.
- For complaints concerning potential violations of USERRA, these may be filed with the Office of Special Counsel or the Department of Labor.

Office of Special Counsel
- Mail: 1730 M Street, N.W., Suite 218, Washington, D.C. 20036-4505
- E-mail: info@osc.gov
- Phone Number: 800-872-9855

Department of Labor
- Mail: 200 Constitution Ave NW Washington, DC 20210
- Phone Number: 866-4-USA-DOL

VA

U.S. Department of Veterans Affairs

Veterans Health Administration