

SYSTEMWIDE POLICY

Professional Expectations

This Policy is Applicable to the following Corewell Health sites:

SYSTEMWIDE

Beaumont Pharmacy Solutions, Beaumont Post Acute Care, Continuing Care (CHW), Corewell Health Beaumont Grosse Pointe Hospital, Corewell Health Beaumont Troy Hospital, Corewell Health Big Rapids Hospital, Corewell Health Dearborn Hospital, Corewell Health Farmington Hills Hospital, Corewell Health Gerber Hospital, Corewell Health Grand Rapids Hospitals (Blodgett Hospital, Butterworth Hospital, Helen DeVos Children's Hospital), Corewell Health Greenville Hospital, Corewell Health Ludington Hospital, Corewell Health Medical Group East, Corewell Health Medical Group West, Corewell Health Pennock Hospital, Corewell Health Reed City Hospital, Corewell Health South (Niles, St. Joseph, and Watervliet Hospitals.; Corewell Health Medical Group South; Applicable Corewell Health South Regional Sites), Corewell Health Taylor Hospital, Corewell Health Trenton Hospital, Corewell Health Wayne Hospital, Corewell Health William Beaumont University Hospital (Royal Oak), Corewell Health Zeeland Hospital, Corporate (Corewell Health East), Corporate (Corewell Health West, South and Priority Health), Outpatient/Physician Practices (CHW), Priority Health

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Department Area:	Human Resources

1. Purpose

Corewell Health team members contribute to our mission of improving health, instilling humanity, and inspiring hope by continuously exhibiting standards of behavior and performance that demonstrate the Corewell Health values of clarity, collaboration, compassion, courage, and curiosity and by following our [Code of Excellence](#).

We strive to employ individuals of character and commitment who do not require a detailed list of work rules to consistently meet a high standard of performance and behavior. Outlined here are general expectations to guide our team members, and this is not an all-inclusive list of work rules.

Corewell Health reserves the right to address, at a level within its sole discretion, any performance or conduct issues not addressed, specifically in this policy.

Please note: Because Corewell Health is a healthcare organization, we are subject to laws and have legal obligations that are not applicable to many other employers. This policy, and many others, reflect that fact. However, Corewell Health respects every team member's legal rights. This policy is not intended to, and will not be applied in any manner to, restrict or interfere in any way with team members' rights to engage in any activity that is protected by law, including any activity that is protected by federal labor law. If you have any questions or concerns regarding your legal rights, you should feel free to speak with your leader or a member of Human Resources. Information on your rights under federal labor law is available [here](#) (see § 157).

Entities will reference associated Documentation contained within this document as applicable
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2. Definitions

- 2.1. **Employed Team Member:** an individual on Corewell Health's payroll (including physicians and other providers) who may also receive benefits, if eligible, directly from Corewell Health; May also be referred to as employee.
- 2.2. **Non-Employed Team Member:** an individual who does not receive payroll or benefits from Corewell Health, performs 'work' on behalf of the organization, and has physical (badge) access and/or logical (information system access).

3. Responsibilities

All team members must conduct themselves in a manner that ensures the orderly and efficient operation of Corewell Health's business and creates a safe work environment for our team members, patients, and health plan members.

4. Compliance

- 4.1. Team Members should take time to read and become familiar with the details of any policies that apply to them and to follow any expectations outlined. Seek clarification from your leader or from HR (Human Resources) if you need it. When policies are not followed, there may be coaching or performance correction that results.
- 4.2. When a team member is covered by a collective bargaining agreement (CBA) and the terms of the CBA are different, the team member should follow the CBA instead of the policy.

5. Policy

5.1. Model Corewell Health Values

- 5.1.1. As a leading health system recognized for high integrity, quality, innovation, expertise and compassion, our strong values guide our behaviors and actions with every interaction.
- 5.1.2. We serve people throughout our communities and support one another as team members through our commitment to living our values of clarity, compassion, collaboration, curiosity, and courage.

5.2. Key Professional Expectations

5.2.1. Ethical Expectations

- 5.2.1.1. Respect and abide by federal, state, and local laws.
- 5.2.1.2. Respect the property and belongings of Corewell Health, its team members, patients, residents, and health plan members.
- 5.2.1.3. Be truthful in all that you say, do, document, and share.
- 5.2.1.4. Treat everyone with respect regardless of race, color, national origin, sex, disability, age, religion, genetic information, marital status, height, weight, gender, pregnancy, sexual orientation, gender identity or expression, veteran status, or any other legally protected category.
- 5.2.1.5. Maintain appropriate professional boundaries within your scope of service delivery, including with patients, residents, clients, family members, guests, health plan members, and other team members.

5.2.2. Conduct Expectations

- 5.2.2.1. Bring your heart to work every day.
- 5.2.2.2. Be mindful that you represent Corewell Health within the community and on social media.

- 5.2.2.3. Demonstrate patience, compassion, and professionalism in your words, actions, reactions, gestures, emotions, and tone.
- 5.2.3. Maintain strict confidence of confidential or proprietary information.
 - 5.2.3.1. Do not share or disclose confidential or proprietary information maintained or received by Corewell Health, including HIPAA (Health Insurance Portability and Accountability) protected information, medical information, patient identities, clinical or business practices, strategic plans, financial data, organizational performance, information technology or any other such information not readily available to the public whether during or after employment with Corewell Health.
 - 5.2.3.2. Do not access, disclose, discuss, or otherwise reveal information about patients, members, visitors, team members or employment candidates except that which is required in performing your job or which you have a legal right to share.
 - 5.2.3.3. Do not share passwords, access codes or any other information assigned to you to access systems or confidential information.
- 5.2.4. Adhere to all policies and procedures.
 - 5.2.4.1. Policies and procedures guide our behaviors, our work processes and reinforce requirements to provide safe, quality care to our patients and our members.
 - 5.2.4.2. Team members should become familiar with those policies and procedures specific to their work region, facility, department, and position as well as corporate and other policies like HR, Infection Prevention, Safety, Finance, and Business Assurance.
 - 5.2.4.3. Demonstrate professionalism in what you wear to work. Adhere to the [Dress Code and Identification \(ID\) Badge](#) policy for your role including your personal hygiene.
- 5.2.5. Workplace Recordings
 - 5.2.5.1. Corewell Health is committed to promoting open communication among team members, health plan members, patients, and residents. At the same time, Corewell Health is dedicated (and in some cases legally obligated) to safeguard confidential information such as protected health information, proprietary information and trade secrets, and confidential business strategies and information. Therefore, team members may not record conversations, phone calls, or Corewell Health meetings with any recording device, such as a mobile phone or recorder, unless they receive prior written permission from legal, the recording is required by the organization’s needs, and it fully complies with the law and any applicable policy.
 - 5.2.5.2. Recordings of virtual meetings are acceptable when announced in advance or visible and/or the meeting itself indicates it is being recorded and is for the purpose of further review by participants or by team members who were unable to attend and would benefit from the information for business purposes.
- 5.2.6. Performance Expectations
 - 5.2.6.1. Accomplish the duties and expectations of your job on time, consistently, and with a high standard of excellence.
 - 5.2.6.2. Comply on time (and before expiration) with the expectations of your position related to required licenses, certifications, education, immunizations, health requirements, competencies, learning, and evaluations.

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- 5.2.6.3.** Be accountable for what you are responsible for doing or delivering.
- 5.2.6.4.** Be open to feedback and be committed to continuous improvement.
- 5.2.6.5.** Actively participate in your development discussions, performance feedback and evaluations, goal setting, and maintaining your talent profile.
- 5.2.6.6.** Comply with the expectations of [Attendance and Reliability](#) and be ready to begin your job duties at your scheduled start time.
- 5.2.6.7.** During times of higher-than-normal work volume or critical staffing vacancies, team members may be required to work additional hours above their FTE (Full Time Equivalent) to meet the needs of the business.

5.3. Use Work Time and Corewell Health Equipment/Property Appropriately

- 5.3.1.** Team members may not perform activities for pleasure (such as reading, crafts, etc.), or conduct personal business (such as work for another organization for which the team member may provide services or otherwise support, a team member's own business pursuits or schoolwork) during working hours without authorization. Personal activities may be performed during rest and meal periods in accordance with Corewell Health policies.
- 5.3.2.** Team members may not misuse, damage, neglect, use or possess without authorization, the equipment or property of Corewell Health or of other individuals. This includes but is not limited to the use of any facilities, equipment, and or supplies for diagnosing or treating self or others unless the individual is registered as a patient at the time of treatment and any services provided are ordered and/or delivered through appropriate standards of patient care.
- 5.3.3.** Team members may not add, run, download, or install any computer software to Corewell Health computer systems without prior approval to do so.
- 5.3.4.** Corewell Health property should not be removed from the work site without management's prior written approval. All surplus items must be channeled through Purchasing. If items cannot be used elsewhere in the organization, Supply Chain will donate the items to area charitable organizations. Team members may not leave the premises or work location with Corewell Health owned scrubs in their possession.

5.4. Use Computer and Technology Equipment Appropriately

- 5.4.1.** Team members are expected to use Corewell Health computer, voice mail and electronic communications resources only in full compliance with Corewell Health's policies whenever they are used. Under no circumstances may these resources be used in any manner which disrupts business operations or violates the law or Corewell Health policy. All electronic communications and other information created, stored, or transmitted on these resources is the property of Corewell Health. Users of these resources should have no expectation of privacy with respect to such usage. Corewell Health reserves the right to access, monitor, review, copy or disclose any communications, files or other information team members create, receive or view on these resources, and team members should consequently have no expectation of privacy with respect to their usage of these resources.
- 5.4.2.** Access codes must be kept confidential and authentication devices must be protected.

- 5.4.3.** Corewell Health respects the right of its team members to use electronic resources such as websites and weblogs as a medium of self-expression. For additional guidance, please reference the [Social Media Policy](#).
 - 5.4.4.** Use of personal websites, weblogs, social networking sites, e-mail, instant messaging, and other electronic communications systems to disclose confidential or proprietary information is prohibited.
 - 5.4.5.** Use of mobile devices or cellular phones for personal reasons should be limited to meal and rest periods where appropriate and should not be used or answered for personal matters when working with patients, members, visitors, or other customers. Leaders should initiate performance coaching to address any initial concerns. Team members should also follow the Patient Photography Videotaping Imaging policy.
- 5.5. Maintain a Violence Free Environment**
 - 5.5.1.** Team members must not use threatening, coercive or violent behavior, whether overt or implied, and whether written, verbal, or physical.
 - 5.5.2.** Team members must not use or possess weapons during work time, in Corewell Health vehicles or on Corewell Health premises (regardless of whether the property is owned or leased). This includes weapons which may be stored in any vehicle that come onto the work site whether the team member is licensed to carry the weapon, concealed or otherwise. Exception: Security team members as authorized by their job description.
- 5.6. Maintain Accurate Time Records**
 - 5.6.1.** Exempt team members are responsible for accurately reporting time off.
 - 5.6.2.** Non-exempt team members are responsible to clock in and out as applicable in order to record all time worked to receive appropriate payment.
 - 5.6.3.** If overtime is necessary to complete assigned work, team members should be authorized prior to incurring the overtime.
 - 5.6.4.** Work performed “off the clock” is never acceptable. Team members who work off the clock will be paid for all time worked but will be subject to disciplinary action up to and including termination of employment.
 - 5.6.5.** Team members must not clock in or out for others.
 - 5.6.6.** Team members must not falsify their time records. Falsification of time records resulting in additional compensation or time not worked is considered theft and misconduct.
- 5.7. Maintain Social Security Number Privacy**
 - 5.7.1.** Social security numbers obtained from employed and non-employed team members, patients or any others are confidential information.
 - 5.7.2.** Social security numbers will be obtained, retained, used, disclosed, and disposed of only for legitimate business reasons in accordance with this policy and applicable federal, state, and local laws.
 - 5.7.3.** Obtaining social security numbers: Documents or other records containing social security numbers are to be requested, obtained, or created only for legitimate business reasons. Such legitimate business reasons include but are not limited to:
 - 5.7.3.1.** Verifying eligibility for employment in accordance with the Immigration Reform and Control Act,
 - 5.7.3.2.** Tax reporting purposes (e.g., IRS (Internal Revenue Service) Form W-4), for new hire reporting, or, for contractors or vendors, for tax reporting purposes such as completion of an IRS Form 1099.
 - 5.7.3.3.** Investigating an applicant’s or team member’s credit, criminal, educational, or driving record.

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- 5.7.3.4. Administering health insurance plans, team member benefit plans or programs, retirement programs, or other team member employment plans or programs.
 - 5.7.3.5. Patients' social security numbers for tax reporting purposes or for purposes of establishing a customer-specific account or other record.
 - 5.7.4. Retention & Access to Social Security Numbers
 - 5.7.4.1. All documents containing social security numbers (whether partial or complete) will be maintained in confidential secured files.
 - 5.7.4.2. Only team members who have a legitimate business reason will have access to documents containing social security numbers. Such team members must access or use social security numbers in a manner that prevents unauthorized individuals from seeing, using, or accessing the number(s).
 - 5.7.4.3. No team member may access, use, copy, or disclose a social security number (or documents containing them) in a way that would disclose anyone's social security number in a public way, or to any person who is not expressly authorized by Corewell Health to access social security numbers for legitimate business purposes. Where a document containing a social security number is to be distributed to persons outside of Corewell Health, and the social security number is not relevant to the legitimate business purpose for which the document is being shared, the social security number must be redacted or otherwise rendered unreadable.
 - 5.7.4.4. Team members using documents containing social security numbers will take appropriate steps to secure such documents when not in immediate use to ensure the confidentiality of social security numbers to the maximum extent possible.
 - 5.7.5. Disposal of Documents Containing Social Security Numbers
 - 5.7.5.1. When documents containing social security numbers are to be disposed of, they must be disposed of in a way that ensures that the numbers remain confidential to the extent practicable, as required by law. Hardcopy documents containing social security numbers must be destroyed by shredding or another secure fashion. Electronic records containing social security numbers must be deleted using IS programs and techniques that ensure the numbers are no longer accessible.
 - 5.7.5.2. Unauthorized Use/Disclosure of Social Security Numbers: Any team member who obtains, uses, or discloses social security numbers for unauthorized purposes or contrary to the requirements of this policy shall be subject to performance correction, up to and including termination of employment, or termination of their contractual or other relationship with Corewell Health.

5.8. Conflicts of Interest

- 5.8.1. Team members shall not engage in any outside employment, activity, financial relationship, investment, or other interest that may compete with or conflict with Corewell Health's interests unless an exception or approval is provided in writing by Human Resources or Compliance, consistent with applicable conflicts of interest policy or other policy.

- 5.8.2.** Other than compensation from Corewell Health for a job performed, and as consistent with conflict-of-interest policies, team members shall not have a financial or other personal interest in a transaction between Corewell Health or any of its business units, a vendor, supplier, provider, customer or competitor.
- 5.8.3.** Team members should not engage in any financial, business, or other activity that competes with Corewell Health's business, may interfere, or appear to interfere with the performance of their duties, or that involves the use of Corewell Health property, facilities, or resources.
- 5.8.4.** Team members should not be employed in an area where they have a direct or indirect reporting relationship with a family member or where there is a situation that creates a conflict of interest or a perceived conflict of interest. Team members have a duty to disclose where such situations may exist to their leader or Human Resources.
- 5.8.5.** Team members (or leaders) who are aware of any potential conflict of interest, or who have any questions about the application of this section, should discuss the matter with their leader, a member of Human Resources or the Compliance Department.

5.9. Addressing Professional Concerns

- 5.9.1. Resolving and reporting concerns**
 - 5.9.1.1.** Team members are encouraged to directly address concerns of professional expectations or other violations with other team members as appropriate.
 - 5.9.1.2.** If a team member is not comfortable addressing the concerns directly, they can report them to their leader, to Human Resources (1-877-ASKHR11 (275-4711)) or if they wish to remain anonymous, they can report to the confidentially to 1-877-319-0266.
- 5.9.2. Responding to concerns**
 - 5.9.2.1.** When serious matters arise that could threaten the safety and well-being of patients, residents, members, team members or visitors, a leader or HR may immediately remove the team member from the workplace. This may occur at any time but is more likely during an evening or weekend shift or while fact finding is underway.
 - 5.9.2.2.** All concerns reported will be appropriately reviewed and evaluated.
 - 5.9.2.3.** The reporter will be kept confidential to the extent possible, however, there may be occasions when the details of the situation reveal the reporter.
 - 5.9.2.4.** Retaliation by any individual will not be tolerated.
 - 5.9.2.5.** The individual reporting the concern will be apprised of the matter's progress, where appropriate, but will not be privy to the resolution or outcome for confidentiality reasons.

5.10. Conducting Fact-Finding (Investigation)

- 5.10.1.** Serious matters, allegations, or complex issues may require fact finding.
- 5.10.2.** Fact finding investigations of team members should be conducted in partnership with Human Resources (unless the fact finding is related explicitly to clinical practice); Human Resources may engage counsel to assist with or to conduct fact finding under privilege.
- 5.10.3.** All fact finding will be documented.
- 5.10.4.** The team member accused of wrongdoing will have an opportunity to provide input and share their perspective regarding the situation. Failure to disclose

criminal arrests or convictions as required or to cooperate in a related investigation may result in performance correction or separation from employment.

- 5.10.5.** Fact finding will be conducted thoroughly and as promptly as possible considering all factors involved.
- 5.10.6.** Unless permitted by CBA, non-team members, such as attorneys, family members, or others, are not permitted to participate in or attend fact findings.
- 5.10.7.** A team member may be placed on leave during fact finding.
 - 5.10.7.1.** When placed on leave, the employed team member should be paid for any scheduled shifts while on leave.
 - 5.10.7.2.** If it is determined there is no wrongdoing on the part of the team member, or the team member is returned to work without being separated, there will be no negative impact to their compensation. If the conclusion of the fact-finding results in an employed team member not returning to work, any remaining PTO (Paid Time Off) will be applied to the time paid while on leave.
 - 5.10.7.3.** The leader can retain the team member's ID badge and suspend physical (ID badge) or computer and account (Digital Services) access while on leave.

5.11. Off-duty Conduct

- 5.11.1.** Corewell Health respects team member privacy and has no desire or intention to regulate off-duty conduct that is unconnected to Corewell Health's business.
- 5.11.2.** All team members, however, should be aware that Corewell Health has the right—and in some cases the legal obligation—to respond to off-duty behavior that intersects with the workplace in material fashion including reputational harm to Corewell Health.
- 5.11.3.** Corewell Health's Harassment Free Workplace, Social Media, Code of Excellence, and Equal Employment Opportunity Policies, for example, are not limited solely to conduct that takes place on Corewell Health's premises.
- 5.11.4.** Corewell Health may evaluate appropriate action in situations where a team member's off-duty actions or communications harm or may harm Corewell Health's reputation or services, render a team member unable to fully perform his or her duties, or lead to the reasonable refusal, reluctance, or inability of others to work with the team member.
- 5.11.5.** Team members are strongly discouraged from wearing or displaying their ID badge, clothing or insignia with Corewell Health brand names (including Corewell Health, Spectrum Health, Beaumont Health, Priority Health, etc.) when attending public events related to political or social issues that are not sanctioned by Corewell Health. Examples of such events include: political or social issue based marches, protests, walk-outs or demonstrations, and political activism or fundraising events.
- 5.11.6. Licensed Healthcare Professionals, Vice Presidents and Above**
 - 5.11.6.1.** The off-duty conduct of team members who are licensed healthcare professionals, vice presidents, senior vice presidents, and executive vice presidents can have a particularly significant impact on the public trust in, and reputation of, Corewell Health.
 - 5.11.6.2.** In addition to the above policy requirements for all team members, when engaging in off-duty conduct that is not sanctioned by Corewell Health, licensed healthcare professionals and executives are expected to:

- 5.11.6.2.1. Ensure the health of patients is not jeopardized and patient care is not compromised.
- 5.11.6.2.2. Avoid conduct or activity that is intimidating or threatening or that is rude or derogatory toward a patient, group of patients or any member of the public.
- 5.11.6.2.3. Refrain from using their title or role and affiliation with Corewell Health to influence a benefit or result.

5.12. Disclosure of Criminal Arrests or Convictions

5.12.1. Disclosure of Felony Arrests

- 5.12.1.1.** Team members must disclose to their leader as soon as practicably possible any arrest resulting in felony charges. Misdemeanor arrests do not need to be reported.

5.12.2. Disclosure of Misdemeanor or Felony Conviction

- 5.12.2.1.** Team members must disclose to their leader as soon as practicably possible any felony conviction or any non-traffic related misdemeanor conviction. If driving is a required part of the team member's job duties, traffic related misdemeanor convictions must be disclosed to their leader as soon as practically possible.

- 5.12.3.** Leaders will partner with Human Resources to determine eligibility to continue working during the adjudication process and will evaluate any obligations related to participation in any federal healthcare programs. The outcome will also consider the Off-Duty Conduct section of this policy.

5. Revisions

Corewell Health reserves the right to alter, amend, modify or eliminate this policy at any time without prior written notice.

- 6. Policies Superseded and Replaced:** This policy supersedes and replaces the following policies as of the effective date of this policy: Acceptable Behavior and Harassment Prevention, #9412562, Beaumont Health; Self-Disclosure of Criminal Arrests and Convictions, #7788207, Beaumont Health; Personal Relationship Policy, #7775656, Beaumont Health

7. References

- [Attendance and Reliability](#)
- [Code of Excellence](#)
- [Dress Code and Identification \(ID\) Badge](#)
- [Social Media Policy](#)
- [Corewell Health Acceptable Use Policy](#)

6. Policy Development and Approval

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7. Keywords:

core values, professional, conduct, misconduct, license, education, competency, drugs, alcohol, weapons, violence, professional conduct, respect, integrity, teamwork, excellence, engagement, time records, falsification, badge, time keeping, certification, due date, timeliness, on time, time, dress code, relative, family member, off duty conduct, recording