

Healthcare Compliance Forms and Tools Sample Internal Investigation Checklist

By Hazelden Betty Ford Foundation

Internal Investigation Checklist

Please utilize this document as a reference tool and consult with your organization for preferred items to place on this checklist and proper processes to follow within your organization.

IMPORTANT: To the extent possible, all investigations must be completed within [X] days of receiving notification or otherwise becoming aware of an incident. Additionally, recommendations and action plans resulting from the investigation should be communicated as soon as possible, but no later than [X] business days upon completion of the investigation.

Section 1: Common Workplace Complaints

A: Critical Policies	
□ Code of conduct	□ Technology P&Ps
☐ Conflict of interest policies and procedures (P&Ps)	□ Social media P&Ps
□ Drug/alcohol use P&Ps	□ Workplace relationships/boundaries P&Ps
□ Financial P&Ps	
□ Gifts/gratuities P&Ps	
□ Interactions with patients/clients P&Ps	
☐ Harassment/discrimination P&Ps	

B: Situations Meriting an Investigation	
☐ Billing and coding issues	☐ Improper employment or disciplinary actions
□ Conflicts of interest	☐ Misconduct/inappropriate behavior
$\hfill\Box$ Disclosure of confidential information	□ Patient care/safety
□ Discrimination	□ Theft/vandalism
□ Drug/medication control	□ Unlawful/improper payments
□ Harassment	☐ Workplace retaliation/retribution
Section 2: Preparing for an Investigation	
A: Considering Risk Factors (if you answer yes to any questions, co	onsult the Legal Department)
□ □ Alleged violation of state or federal law or the code of	ethics that would result in serious harm to individuals or the organization, or

□ Privacy P&Ps

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Allegation involving more than a single team or multiple reports from various teams directed toward a single leader?

significant civil or criminal penalties?

Allegation against executive leadership member?

Y

Y

Y

N

N

N

□ Y	□ N	Allegation involving multiple sites, a region, or the organization?
□ Y	□ N	Allegation that could undermine the effectiveness of the compliance program?
Y	□ N	Allegation that could result in media attention, damage (monetary or reputational)?
Y	□ N	Allegation that could result in government actions against the company?
Y	□ N	Allegations that could result in the need to make a regulatory report?

IMPORTANT: If you answered yes to any of the questions above, consult with the Legal Department.

B: Determining Investigation Participants
□ Lead investigation department
□ Lead investigator
□ Co-investigator/Notetaker
□ Stakeholders
□ Reporter(s)
□ Implicated person(s)

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□ Witnesses/interviewees	
□ In-house counsel	
C: Collecting Evidence	
□ Personnel file (implicated person)	☐ Department schedules/shift logs
□ Personnel file (reporter)	□ Timecards
□ Prior investigation files (implicated person)	□ Financial records
□ Prior investigation files (reporter)	□ Email communications
□ Supervisory files	□ Surveillance footage
□ Photographs	□ Network drives/hard drives
□ Voicemails	□ Professional code of conduct
□ Incident reports	□ Policies and procedures
□ Patient records	□ Social media activity
□ Electronic health record activity (keystrokes)	□ Text messages
D. Interview Planning	

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□ Plan the order of interviews(often with the reporter first, then witnesses, and the implicated person last).
☐ Be aware of interviewee's employment status and regular work hours.
□ Mark calendar invites "private."
□ Schedule interviews in a confidential location.
□ Whenever possible, do not include managers/supervisors in direct report interviews.
☐ Limit information shared with managers/supervisors(minimum necessary; need to know).
□ Prepare interview script and questions.
☐ Anticipate interviewee answers/reactions/behaviors/questions and plan your response.
Section 3: Conducting Workplace Investigations
A: Investigation Reminders
☐ Begin investigation as soon as practical after receipt of complaint or once there is reason to believe that inappropriate conduct, violation of policy, etc. has occurred.
□ Open and maintain a case (whether electronically or on paper): document in real time

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 \Box Determine whether an investigation should be attorney-client privileged(consult with in-house counsel).

 $\hfill\Box$ Create a timeline and update as investigation evolves.

☐ Assume that all emails, notes, and other investigation materials are discoverable in litigation.
☐ Determine who needs to be in the know and how much information should be provided.
☐ Determine who needs to be part of your investigation interviews and involve them right away in the process.
B: Conducting Interviews
☐ Introduce and provide explanation of interview (i.e., goal to gather information that person may have).
\square Explain the investigation process and your role.
□ Discuss confidentiality; do not promise absolute confidentiality.
□ Review nonretaliation policy, explain what constitutes retaliation, and provide interviewee with notice document.
☐ If the interview is conducted by an attorney, provide Upjohn Warning.
\Box Let the interviewee give their story; record all details(day, time, place, witnesses, documents).
☐ Begin with general nonleading questions.(What is your role at the organization? How long have you worked with the implicated person? How would you describe your relationship?)
☐ Move into more specific questions. (When did the incident occur?)
□ Drill down highly specific questions. (Describe the incident and persons involved. Has this happened before?)
□ Determine identity of all persons involved in conduct.

□ Determine identity of all witnesses involved in conduct.		
☐ Explore whether the interviewee knows if any other individuals have been subjected	l to conduct.	
☐ Go through events chronologically again; document details and relevant statements	5.	
☐ Do not record or transcribe interviews; document exact statements in quotes, as app	propriate.	
□ Obtain or request relevant documents or evidence.		
\Box Invite the interviewee to contact you with questions or additional information.		
C: Determining Interim Remedies		
□ Separate parties	□ Temporary reassignment	
☐ Separate parties ☐ Administrative leave (with or without pay)	□ Temporary reassignment	
□ Administrative leave(with or without pay) □ Suspend network/email access		
□ Administrative leave (with or without pay)		
□ Administrative leave (with or without pay) □ Suspend network/email access Section 4: Closing an Investigation		

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□ Update timeline.
□ Analyze each interviewee's story; assess credibility and plausibility.
□ Determine whether a violation of policy, code of ethics, the law, or inappropriate conduct has occurred.
□ Prepare final report, detail steps taken and reasons for conclusions, and do not make legal conclusions.
B: Remedying Workplace Complaints
☐ Inform the key stakeholder(s) of the findings; share the final report with person(s) responsible for determining remedial/corrective action.
□ Offer recommendations (e.g., coaching, verbal or written warning, performance improvement plan, termination, return-to-work plan)
□ Follow up with reporter to ascertain whether retaliation has occurred.
□ Follow up with key stakeholder(s) to learn final actions/disciplinary action.
C: Completing Final Steps
□ Document the case outcome.
□ Document final actions taken.
□ Close the investigation (i.e., close electronic file or finalize and secure all documentation if on paper).

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