

# COMPLIANCE SURVEY FACT SHEET

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## Background:

Development of the Ethics-Compliance Survey began in 1986, with the instrument first administered in 1988. Our goal from the outset was to allow organizations to assess their own compliance environments and generally, to identify best compliance practices. It took two years (1986 – 1988) to validate the Survey and establish the database. Since that time, the Survey has undergone continuous refinement. The most recent refinement is the introduction of a scale focusing on employee commitment to maintaining the privacy of protected information. Survey results have been published by the U.S. Sentencing Commission, the Bureau of National Affairs (various publications), and the Federal Ethics Report, among others.

## Survey Capabilities:

Survey administration allows you (at your option) to compare your organization to all healthcare organizations in the database, to all providers in the database or to all health plans in the database. You can also compare locations and functions within your organization and assess differences among employees by level of responsibility and experience. The Survey also allows you to track a number of other factors of potential interest (responsiveness to HR, awareness of the Code of Conduct, attitude toward the “hotline”, etc.). We work with you to identify topics of interest.

Specifically, in all administrations the Survey allows assessment of the:

- responsiveness of employees to written policies and procedures, including those with which they disagree
- responsiveness of employees to values and ethical principles in circumstances in which written policies and procedures may not resolve an issue
- whether employees understand and accept the Code of Conduct
- level of risk (by location, employee tenure, function) that employees will use external reporting mechanisms such as *qui tams*
- confidence of employees in the commitment to ethics and compliance by
  - their immediate supervisors
  - higher level managers and leadership
  - the organization as a whole
- level of fear of retaliation for reporting legitimate concerns
- perception that ethical and legal conduct is appropriately recognized and rewarded
- employee commitment to protecting private health information
- employee belief that there is a common standard of conduct for all members of the organization
- adequacy of policies, including policies in specialized, compliance sensitive areas

