Independent Living, Inc.
Whistleblower Policy

Introduction

Independent Living, Inc. (the “Agency”) requires its directors, officers, employees and volunteers, as well as all persons who provide the Agency with contracted services (each, a “Protected Person”), to observe high standards of business and personal ethics in the performance of their duties on the Agency’s behalf. As employees and representatives of the Agency, Protected Persons are expected to practice honesty and integrity in fulfilling their responsibilities and are required to comply with all applicable laws and regulations. The objectives of this Whistleblower Policy are to encourage and enable Protected Persons, without fear of intimidation and/or retaliation, to raise concerns regarding suspected unethical and/or illegal conduct or practices on a confidential and, if desired, anonymous basis so that the Agency can address and correct inappropriate conduct and actions. This policy is not intended as a method for reporting violations of the Agency’s applicable human resources policies, problems with co-workers or managers, or for reporting issues related to alleged employment discrimination or sexual or any other form of unlawful harassment, all of which should be dealt with in accordance with the Agency’s Personnel Policies and Procedures, as it is those Policies and Procedures that are applicable to such matters.

Reporting Responsibility

It is the responsibility of all Protected Persons to report in good faith any concerns they may have regarding actual or suspected activities which may be illegal or in violation of the Agency policies with respect to, without limitation, fraud, theft, embezzlement, accounting or auditing irregularities, bribery, kickbacks, and misuse of the Agency’s assets, as well as any violations or suspected violations of high business and personal ethical standards, as such standards relate to the Agency (each, a “concern”), in accordance with this Whistleblower Policy.

No Intimidation and/or Retaliation

No Protected Person who, in good faith, reports a concern shall suffer intimidation, harassment, retaliation, discrimination or adverse employment consequence because of such report. Any employee of the Agency who intimidates and/or retaliates against someone who has reported a concern in good faith is subject to discipline up to and including termination of employment. Notwithstanding anything contained herein to the contrary, this Whistleblower Policy is not an employment contract and does not modify the employment relationship between the Agency and its employees, nor does it change the fact that employees of the Agency are employees at will. Nothing contained herein is intended to provide any Protected Person with any additional rights or causes of action, other than those provided by law.
**Reporting Concerns**

Any concerns should be reported as soon as practicable to the Agency’s Compliance Officer. Any questions with regard to the scope, interpretation or operation of this Whistleblower Policy should also be directed to the Compliance Officer. If a Protected Person believes the Compliance Officer is somehow involved in the concern, a report should be made to the Executive Director or Board President.

**Compliance Officer**

The Compliance Officer is responsible for investigating and resolving all reported concerns and shall advise the Compliance Committee of all reported concerns. The Compliance Officer shall report to the full Board of Directors at each regularly scheduled board meeting on compliance activity.

**Investigations**

The Compliance Officer is tasked with the responsibility to investigate a reported concern. If necessary and as appropriate, the Compliance Officer may delegate this task to another member of the agency. The Compliance Officer may not delegate such responsibility to an employee or other individual who is the subject of the reported concern or in a manner that would compromise either the identity of an employee who reported the concern anonymously or the confidentiality of the complaint or resulting investigation. For concerns involving the Compliance Officer, the Executive Director or Board President are responsible for investigating or assigning the investigation to another employee.

Investigations may include interviews, documentation reviews, and root cause analyses as appropriate. Analyses will also be conducted to determine who, if anyone, may be encouraging, directing, facilitating, or permitting non-compliant behavior. This includes but is not limited to other individuals within the organization who were aware of activities which may be illegal or in violation of the Agency policies but failed to report them.

Notwithstanding anything herein to the contrary, the scope, manner and parameters of any investigation of a reported concern shall be determined by the Compliance Committee in its sole discretion and the Agency and its employees shall cooperate as necessary in connection with any such investigation.

**Acting in Good Faith**

Anyone reporting a Concern must act in good faith and have reasonable grounds for believing that the information disclosed may indicate a violation of law and/or ethical standards. Any allegations that prove to have been made maliciously or knowingly to be false will be viewed as a disciplinary offense.
**Failure to Report**

Failure to report a compliance concern and/or failure to follow ILI Policy and Procedure regarding reporting can lead to disciplinary actions up to and including dismissal. This includes being a participant of non-compliant behavior, and/or encouraging, directing, facilitating or permitting non-compliant behavior to take place.

**Confidentiality**

The Agency takes seriously its responsibility to enforce this Whistleblower Policy and therefore encourages any person reporting a concern to identify him or herself so as to facilitate any resulting investigation. Notwithstanding the foregoing, in reporting a concern, a Protected Person may request that such report be treated in a confidential manner (including that the Agency take reasonable steps to ensure that the identity of the reporting person remains anonymous). Concerns may also be reported on an anonymous basis. Reports of Concerns will be kept confidential to the extent possible, consistent with the need to conduct an adequate investigation.

**Handling of Reported Concerns**

The Compliance Officer will acknowledge receipt of each reported concern within five business days, but only to the extent the reporting person’s identity is disclosed or a return address is provided. All reports will be promptly investigated; the scope of any such investigation being within the sole discretion of the Compliance Committee, and appropriate corrective action will be taken if warranted by the investigation.

At the conclusion of an investigation, a written report will be created and presented to the Compliance Committee. If it is determined that any illegal or unethical practices occurred, referrals will be made to the appropriate external regulatory agencies including but not limited to the Office of the Medicaid Inspector General, Office of the Inspector General, NYS Attorney General, Internal Revenue Service, etc.

As a result of an investigation a plan of correction may be developed by the Compliance Officer as appropriate. Applicable policies, procedures and/or practices may be updated, corrected, or modified as needed.

**Records**

The Compliance Committee will retain, on a strictly confidential basis for a period of seven years, all such records related to reported concerns. Such records will be considered privileged and confidential. In the event of ongoing litigation, records may be retained longer.
**Distribution**
The Agency shall distribute a copy of this Whistleblower Policy to all Protected Persons. This policy is contained within the Agency’s compliance plan which is distributed and reviewed with all staff during new hire orientation and annually thereafter.

**Contact the Corporate Compliance Manager or the President of the Board of Directors via:**

**Carrie Ruby-Geiger**, Corporate Compliance Manager
- E-mail: crgeiger@myindependentliving.org or ilccorpcompliance@gmail.com
- Telephone: (845) 565-1162, extension 222
- Mail to: Independent Living, Inc., 5 Washington Terrace, Newburgh, NY 12550
  Attention: Compliance Officer

**Criss Ittermann**, President of the Board of Directors
- E-mail: eclectictllc@gmail.com
- Phone: 845-820-0262
- Mail to: Independent Living, Inc., 5 Washington Terrace, Newburgh, NY 12550
  Attention: ILI Board President

Approved by the Agency’s Board of Directors: 10/2017