

Code of Conduct Acknowledgment

Employee Acknowledgment and Signature Page

Acknowledgment of Receipt and Understanding of the Code of Conduct

I acknowledge that I have received, read, and understood the **Code of Conduct** for [Facility Name]. I understand that the Code outlines the ethical values, compliance standards, and expectations required of all employees, contractors, volunteers, vendors, and representatives of the organization.

I recognize the importance of adhering to the policies and principles detailed in the Code of Conduct, including but not limited to:

- Maintaining ethical business practices and integrity in all operations.
- Protecting residents' rights, safety, and dignity at all times.
- Ensuring compliance with laws, regulations, and facility policies, including HIPAA and the False Claims Act.
- Reporting any violations, concerns, or ethical dilemmas promptly to the appropriate authority or through the Employee Hotline without fear of retaliation.
- Supporting a workplace that values equity, inclusion, and respect for all employees and residents.

I understand that compliance with this Code of Conduct is a condition of my employment or association with [Facility Name]. I also understand that failure to adhere to the guidelines outlined in this document may result in disciplinary action, up to and including termination of employment or termination of my relationship with the organization.

By signing below, I affirm my commitment to uphold the values and standards outlined in the **Code of Conduct**.

Employee Name (Print): _____

Employee Signature: _____

Date: _____

Supervisor Name (Optional): _____

Supervisor Signature (Optional): _____

Date: _____

(Disclaimer: This document serves as a suggested outline for developing a facility's Code of Conduct. It is strongly advised to consult the facility's legal department prior to implementation.)

RESTORING QUALITY. REBUILDING TRUST.