CORPORATE COMPLIANCE PLAN



Supporting Adults and Children with Autism Since 1976

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SCFU Mission Statement

Special Citizens Futures Unlimited, Inc. (hereto referred to as "SCFU" or "the Agency") is committed to the development and delivery of a comprehensive, integrated system of services and has as its primary purpose the promotion and attainment of independence, inclusion, individuality and productivity for children and adults with Autism.

SCFU Commitment Statement

In order to assist in SCFU's ongoing effort to improve service quality, and in order to effectively prevent, detect, and respond to inappropriate business practices, improper conduct, and violations of the law, SCFU has established this Corporate Compliance Plan. The Corporate Compliance Plan shall serve as the mandatory Medicaid compliance program as required by the regulations of the NYS Office of the Medicaid Inspector General (OMIG). Through the identification of errors and omissions in data, this Corporate Compliance Plan will produce information that will be used to measure compliance with SCFU's legal and ethical requirements. This Corporate Compliance Plan is intended to be supplemental to the existing Strategic Plan and overall Quality Management program at SCFU.



Policy and Procedure: Corporate Compliance Policy

Departments Affected: All

Policy Section: Compliance

Replaces Policy: all versions prior to 03/28/19

I. Policy

It has been and continues to be the policy of SCFU to comply with all applicable federal, state, local laws and regulations, and payer requirements. It is also SCFU's policy that all employees, contractors, board members, volunteers, interns, vendors, and other agents of SCFU adhere to the SCFU Code of Business Conduct & Ethics that has been adopted by the Board of Directors, the Executive Director, and the Compliance Committee.

II. Commitment

We have always been and remain committed to our responsibility to conduct our business affairs with integrity based on sound ethical and moral standards. We will hold our employees, contracted personnel, volunteers, interns, and vendors to these same standards.

SCFU is committed to maintaining and measuring the effectiveness of our Corporate Compliance policies and standards through monitoring and auditing systems reasonably designed to detect noncompliance by its employees and agents. We shall require the performance of regular, periodic compliance audits by internal and/or external auditors who have expertise in federal and state health care statutes, regulations, and health care program requirements.

III. Responsibility

All employees, contractors, board members, volunteers, interns, vendors, and other agents shall acknowledge that it is their responsibility to report any instances of suspected or known non-compliance to the SCFU Executive Director or the Compliance Officer. All agents shall acknowledge that it is their responsibility to cooperate with the resolution of any and all investigations regarding any non-compliance of which they have knowledge. Reports may be made anonymously and without fear of retaliation or retribution. Failure to report known or suspected non-

compliance or making reports which are not in good faith will be grounds for disciplinary action, up to and including termination. Reports related to harassment or other workplace-oriented issues will be referred to Human Resources.

IV. Policies and Procedure

The Agency will communicate its compliance standards and policies through required training initiatives to all employees, contractors, board members, volunteers, interns, vendors, and other agents. We are committed to these efforts through distribution of this plan and our Code of Business Conduct and Ethics therein.

V. Enforcement

The Corporate Compliance Policy will be consistently enforced through appropriate disciplinary mechanisms including, if appropriate, discipline of employees responsible for failure to detect and/or report non-compliance.

VI. Agency Response

Detected noncompliance, through any mechanism, i.e. compliance auditing and/or confidential reporting, will be responded to in an expedient manner. We are dedicated to the resolution of such matters and will take all reasonable steps to prevent further similar violations, including any necessary modification to the Corporate Compliance Plan.

VII. Due Diligence

SCFU will, at all times, exercise due diligence with regard to background and professional license investigations for all prospective employees, interns, volunteers, contractors, vendors, and members of the Board of Directors.

VIII. Non-Retaliation, Non-Intimidation, and Whistleblower Provisions and Protections

SCFU will not intimidate nor take retaliatory action against any current or former employee if the employee discloses certain information about SCFU's policies, practices, or activities to a regulatory agency, law enforcement, or other similar agency. Protected disclosures are those that assert that SCFU is in violation of a law that creates a substantial and specific danger to the public health and safety or which constitutes health care fraud under the law or that asserts that, in good faith, the employee believes constitutes improper quality of consumer care.

The SCFU Code of Business Conduct & Ethics

SCFU ensures that all aspects of an individual's care and professional conduct are performed in compliance with our mission statement, policies and procedures, professional standards and applicable governmental laws, rules and regulations. SCFU expects that every person who provides services to persons served must adhere to the highest ethical standards and promote ethical behavior. Any person whose behavior is found to violate ethical standards will be disciplined appropriately. Similarly, any contractor who violates the standards of conduct places at risk their business relationship with SCFU.

The SCFU Code of Business Conduct & Ethics is applicable to all employees, agents, independent contractors, members of the Board of Directors, and volunteers. All are required to annually review and comply with the SCFU Code of Business Conduct & Ethics, as well as the Corporate Compliance Plan and Policy. SCFU will take disciplinary action for those who participate in non-compliant behavior, fail to report a suspected violation of the Corporate Compliance Plan, encourage, direct, facilitate or permit non-compliant behavior and/or engages in intimidation or retaliatory behavior directed at those who report non-compliant behavior. All employees, agents, volunteers, interns, and contractors are expected to work cooperatively and respectfully to provide the highest quality of services possible.

I. Expectations

Affected Individuals may not engage in any conduct that conflicts – or is perceived to conflict – with the best interest of SCFU. Affected Individuals must disclose any circumstances where the employee or his or her immediate family member is an employee, consultant, owner, contractor, or investor in any entity that (i) engages in any business or maintains any relationship with Agency; (ii) provides to, or receives from, Agency any consumer referrals; or (iii) competes with Agency. Affected Individuals may not without permission of the Compliance Officer accept, solicit, or offer anything of value from anyone doing business with SCFU.

When any person knows or reasonably suspects that the expectations above have not been met, this must be reported to the Compliance Officer or the Executive Director, so that each situation may be appropriately dealt with. The Compliance Officer may be reached at (917) 270-5333.

Compliance Program Oversight

I. The Role of the Compliance Officer

The Compliance Officer shall have direct lines of communication to the Executive Direct and to the Board of Directors and shall have sufficient authority and resources to carry out his/her responsibilities.

A. Job Responsibilities

The Compliance Officer is directly obligated to served the best interests of our Agency, individuals, and employees. Responsibilities of the Compliance Officer include but are not limited to:

- **1.** Overseeing, monitoring and enforcing the implementation of the Corporate Compliance Plan/Program
- 2. Updating, periodically, the Corporate Compliance Plan as changes occur within the Agency, within the law and regulations, or governmental and third party payers
- **3.** Directing and/or monitoring SCFU's internal audits for the purpose of evaluating and monitoring the effectiveness of the compliance standards, policies and procedures, and providing feedback, including recommending changes/improvements as necessary, to the Leadership Team and the Executive Director, and to the Board of Directors when appropriate.
- **4.** Identify potential areas of risk or weaknesses and recommend changes/improvements as necessary, to Leadership
- **5.** Developing and implementing compliance policies and procedures
- **6.** Providing guidance to leadership, medical/clinical personnel, and individual departments regarding P & P and governmental laws, rules, and third party payers
- Overseeing efforts to communicate awareness of the existence and contents of the Corporate Compliance Plan

- **8.** Develop, approve, and or monitor the educational and training materials and programs related to the Corporate Compliance Program and ensure that all employees attend required training sessions
- 9. Actively seeking up-to-date material and releases regarding regulatory compliance
- **10.** Maintaining a reporting system (hotline) and responding to concerns, complaints, and questions related to the Corporate Compliance Plan
- **11.**Ensuring that independent contractors are aware of the requirements of the Corporate Compliance Plan
- **12.** Acting as a resourceful leader regarding regulatory compliance issues
- **13.** Direct or assist in the investigation and resolution, with the advice of legal counsel if deemed necessary, of reported or suspected concerns related to compliance
- **14.** Coordinating internal investigations and implementing corrective action
- **15.** Investigate or oversee delegation of, investigations into matters related to compliance issues, including employee, individual, and/or payer complaints and allegations of non-compliance

II. The Role of the Compliance Committee

- **A.** Compliance Committee members are appointed by the Executive. Compliance issues are reported by the Compliance Committee to the Executive Director and Board where appropriate. The Compliance Committee's purpose is to advise and assist the Compliance Officer with implementation of the Corporate Compliance Plan.
- **B.** The Compliance Committee shall:
 - **1.** Meet at least once quarterly, more frequently if necessary, to ensure effective communication and enactment of responsibilities
 - a. Assist the Compliance Officer in the aforementioned duties

- **C.** Analyze the environment where SCFU does business, including legal requirements with which it must comply
 - 1. Ensure that independent contractors, vendors, and relevant third parties are aware of SCFU's Compliance Plan
 - 2. Review and assess existing P&P that address identified risk areas for possible incorporation into the Corporate Compliance Plan.
 - **3.** Working with departments to develop standards and P&P that address specific risk areas and encourage compliance according to legal and ethical requirements.
 - **4.** Advise and monitor appropriate departments relative to compliance matters.
 - **5.** Monitor internal and external audits to identify potential non-compliant issues.
 - **6.** Implement corrective and preventive action plans, if applicable
 - 7. Develop a process to solicit, evaluate, and respond to complaints and problems.
 - **8.** On an annual basis, the Compliance Officer will assess areas that present risks for non-compliance. The assessment will be guided by the prior year's results of audits performed by the Compliance Officer and various internal and external department audits.
 - 9. The Compliance Officer will direct the Compliance Committee in assessing areas that present risks for non-compliance. The Compliance Officer will review the Agency's Corporate Compliance performance of the prior year and set forth future compliance efforts in a work plan. The assessment will be guided by the prior year's results of audits performed by the Compliance Department and various internal and external department audits.
 - 10. Neither the Compliance Officer nor the Compliance Committee is responsible for the organization's actual compliance with applicable laws, rules, and regulation. Rather the Compliance Officer and the Committee strive to ensure that the

organization has in place at all times an effective Compliance Plan/Program and related policies and procedures that are appropriate for the organization and that are monitored and enforced on an ongoing basis.

III. The Role of the Executive Director

- A. The Executive Director directs the Leadership team in implementing the agency's mission, policies and procedures and ensures that the agency is conducting its business within the law. The Executive Director oversees all components of the Corporate Compliance Plan. The Executive Director has supervisory responsibility for implementation of the Compliance Plan. The Compliance Officer reports directly to the Executive Director.
- **B.** Developing and implementing employee feedback loop which encourages employees to report potential problems without fear of retaliation.

IV. The Role of the Compliance Specialist

- **A.** The Compliance Specialist is responsible for collecting, auditing, cataloguing, and maintaining the Agency's Medicaid service documentation. The Compliance Specialist conducts monthly audits of service documentation and program data collection for all programs and departments within the Agency utilizing case management software, paper hardcopies, and visual observation. The Compliance Specialist compiles gathered data and presents report to Compliance Officer. Also reports missing, defective, and incomplete documentation to the Compliance Officer, and advises programs how corrections are to be made in accordance with regulations.
- **B.** The Compliance Specialist reports directly to the Compliance Officer and is a member of the Compliance Committee.

V. The Role of the Quality Improvement/Quality Assurance (QA/QI) Specialist

A. The QI/QA Specialist works closely with Agency employees to ensure compliance with guidelines and regulations. The QA/QI Specialist will perform related work as requested to include coordinating, conducting and following up on incident investigations, preparing documents and files for committee meetings, create and maintain detailed spread sheets pertaining to incident management, producing monthly report summaries, and the development and dissemination of the annual Trend Report, including both reportable and non-reportable incidents. Also directs internal auditing and assists with the review of all programming aspects of SCFU.

B. The Quality Assurance/Improvement Specialist reports directly to the Compliance Officer and is a member of the Compliance Committee.

VI. The Role of the Leadership Team:

A. The Leadership team is responsible for ensuring that their respective departments are in compliance with all Federal and State laws and regulations, and Agency policies and procedures pertinent to their department. They also have an affirmative duty to report incidents of non-compliance to the Executive Director and/or the Compliance Officer. Managers are responsible for staying informed of the state and federal regulations that govern their respective departments, as they have free access to the OPWDD, OMIG, Justice Center websites where the regulations are readily available. Managers will attend mandatory compliance trainings, as well as both mandatory and voluntary programmatic, safety, and incident reporting trainings pertinent to their respective departments. Additionally, the Compliance Department will periodically distribute new regulations and ADM's as they are issued by the governing agencies.

VII. Role of the Board of Directors:

A. The Board of Directors is accountable for governing the organization as a knowledgeable body regarding compliance expectations, practices, identified risks, and plans for corrective action. The Board of Directors has authorized the compliance program which consists of a written plan that assures full compliance with all laws and regulations affecting SCFU programs and services.

VIII. Legal Counsel

A. Outside legal counsel may be notified, at the discretion of the Executive Director, of any incidents that have a reasonable cause to support the assertion of non-compliance, at which time the Compliance Officer will be responsible for facilitating

Education and Training

I. Expectations

A. Education and training are critical elements of the Corporate Compliance Plan. Every employee, contractors, board member, volunteer, intern, vendor, and other agents of SCFU, is provided with a copy of this Corporate Compliance Plan. SCFU provides training to its employees as part of their initial orientation to the Agency, and annually thereafter. All are expected to be familiar and knowledgeable about the Agency's Corporate Compliance Plan and have a solid working knowledge of his or her responsibilities under the Plan. The Board of Directors will also be trained on the key elements of the Corporate Compliance Plan.

II. Attendance

- A. Compliance policies and standards will be communicated to all employees through required participation in mandatory training programs. All employees and Board Members are required to participate in annual compliance trainings regarding the compliance plan and program, reporting mechanisms, Federal and NYS False Claims Act, OMIG Compliance, waste, fraud and abuse, whistle-blower protections, ethical standards, and conflicts of interest.
- **B.** All compliance trainings given, and staff/employee attendance thereto are Department documented. The Human Resources maintains all such documentations. includina sheets signed attendance by each staff member/employee who attends such training and the materials used to conduct the trainings.
- C. All staff members/employees must sign the acknowledgement form upon receiving the Corporate Compliance Plan, the SCFU Code of Business Conduct & Ethics, and the False Claims Act. These are provided to each staff member/employee at the initial Compliance and Ethics training during the Orientation period. Updates of these documents will be provided accordingly and must be signed for by each staff member/employee upon receipt.

Lines of Communication for Reporting Non-Compliance

I. Expectations

A. SCFU is committed to fostering open communications at all levels within the organization. Our goal is that all employees, members of the board, volunteers, interns, vendors, or contractors who have questions about a potential instance of waste, abuse or fraud, will report the situation to the Compliance Officer or Executive Director. All employees must report actual or suspected noncompliance in which the employee has a good faith beliefs occurring including actual or potential violations of laws, regulations, policies, procedures, or of SCFU's Code of Business Conduct and Ethics. Failure to report is also deemed noncompliant and a violation of this requirement.

B. Reporting Procedure

- 1. If an employee, or other witnesses, learns of, or is asked to participate in any activities that are potentially in violation of the Compliance Plan, he or she should contact the Corporate Compliance Officer or the Executive Director. Reports may be made in person, by phone, or may be made anonymously by calling a telephone number referred to as the Compliance and Ethics Hot-line, which is dedicated for the purpose of receiving such notifications.
- 2. Upon receipt of a question or concern, any supervisor, officer, or director shall document the issue at hand and report to the Compliance Officer. Any questions or concerns relating to potential non-compliance by the Compliance Officer should be reported immediately to the Executive Director.
- 3. The Compliance Officer or Designee shall record the information necessary to conduct an appropriate investigation of all complaints. If the Affected Individual was seeking information concerning the Code of Business Conduct and Ethics or its application, the Compliance Officer or designee shall record the facts of the call and the nature of the information sought and respond as appropriate. SCFU shall, as much as is possible, protect the anonymity of the Affected Individual who reports any complaint or raises a question about Agency's Corporate Compliance Policies and standards. Affected Individuals must be aware, however, that there may be a point in time that an individual's identity

must become known or revealed in certain instances, such as when government authorities become involved.

- 4. The Compliance & Ethics Hot-line offers an additional or alternative anonymous option for the reporting employee, contractor, or community member when concerns about potential unethical, illegal and unsafe actions arise, and when direct communication is not appropriate or has not resulted in corrective action and the matter remains a concern to the employee, contractor, agent or community member.
- 5. The Compliance Officer or Designee shall record the information necessary to conduct an appropriate investigation of all complaints. If the employee was seeking information concerning the Code of Business Conduct & Ethics or its application, the Compliance Officer or Designee shall record the facts of the call and the nature of the information sought and respond as appropriate. The Agency shall, as much as is possible, protect the anonymity and confidentiality of the employee, consumer, community member or contractor who reports any complaint. However, there may be a point in time that an individual's identity must become known, or revealed in certain instances, such as when government authorities become involved.

Employees may use any of the following to report a concern:

Compliance and Ethics Hot-line: 917-270-5333

To make a report anonymously, dial *67 first to block caller id, then dial (917) 270-5333

Contact information for the SCFU Compliance Officer is as follows:

Dina Hardy, Compliance Officer: 212-643-2663, extension 220

Office location: Special Citizens Futures Unlimited, Inc., 1775 Grand Concourse, Suite 802, Bronx, NY 10453

Confidential Fax: (646) 328-1267

Email: dina.hardy@specialcitizens.org

Non-Retaliation, Non-Intimidation, and Whistleblower Provisions

I. The identity of reporters will be safeguarded to the fullest extent possible and the reporter will be protected against any form of retribution, intimidation or retaliation. A threat or act of retaliation against an employee or other individual who has reported improper or illegal conduct can threaten the integrity of SCFU's dedication to these standards by deterring the reporting of noncompliance and can limit SCFU's ability to monitor and resolve issues of compliance. Any threat or reprisal against a person who acts in good faith pursuant to his or her responsibilities under this Plan is acting against the Agency's compliance policy. SCFU will take appropriate disciplinary action, up to and including termination of employment or contract, for any employee or agent who discharged, suspends, threatens, or otherwise discriminates against an employee who in good faith initiates or assists in reporting a suspected incidence of waste, fraud, or abuse or a violation of the agency's Code of Business Conduct and Ethics will result if such reprisals are proven.

II. Guidance

A. Any employee, contractor or agent may seek guidance with respect to the Corporate Compliance Plan or Code of Business Conduct & Ethics at any time by following the reporting mechanisms outlined above.

Auditing and Monitoring of Compliance Activities

I. Internal Audits

- **A.** Ongoing evaluation is critical in detecting non-compliance and will help ensure the success of the Compliance Program. An ongoing auditing and monitoring system, implemented by the Compliance Officer and in consultation with the Executive Director, is an integral component of the auditing and monitoring systems. This on-going evaluation shall include the following:
 - **1.** Review of relationships with third-party contractors, specifically those with substantive exposure to government enforcement actions;
 - 2. Compliance audits of Compliance policies and standards;

- **3.** Review of documentation and billing relating to claims made to federal, state, and private payers for reimbursements, performed internally or by an external consultant as determined by the Compliance Officer.
- **4.** Oversee the safety and well-being of all individuals supported by SCFU through a series of internal audits and reviews of all aspects of quality care
- 5. Assist in the reduction of adverse trends identified during the audit process
- **6.** Internal audits will incorporate an objective process designed to improve SCFU's programs in pursuit of accomplishing it's goals by bringing a systematic approach to evaluate and improve compliance with internal policies and procedures, as all state and federal regulations and laws.
- **B.** The Compliance Committee will monitor State and Federal work plans and audits results, review the results of internal audits, and as necessary, formulate corrective action plans. Corrective action plans may include disciplinary action, education, or the development or revision of related Policies & Procedures. The audits and reviews will function to examine the Agency's compliance with specific rules and policies through on-site visits, personnel interviews, general questionnaires (submitted to employees and contractors), and consumer record documentation reviews.

II. Plan of Integrity

- **A.** Additional steps to ensure the integrity of the Corporate Compliance Plan will include:
 - **1.** Annual review with legal counsel of all records of communications and reports by all employees or contractors kept in accordance with the Plan.
 - 2. The Compliance Officer will be notified immediately in the event of any visits, audits, investigations, or surveys by any government agency or authority, and shall immediately receive a photocopy or scanned copy of any correspondence from any regulatory agency charged with licensing the Agency and/or administering a federal, state, or local funded program with which the Agency participates.
 - **3.** Establishment of a process detailing ongoing notification by the Compliance Officer to all appropriate personnel of any changes to laws, regulations, or policies, as well as appropriate training to assure continuous compliance

- **4.** Regular internal auditing and monitoring procedures will be conducted within our programs in order to identify and promptly rectify any potential non-compliance issues.
- **B.** Fiscal audits will be conducted by an external audit firm, as deemed appropriate by the Executive Director and/or the Board of Directors.
- C. If external or internal auditors discover a departure from compliance or ethical standards, the audit report will recommend appropriate corrective action, including revision of internal control mechanisms and disciplinary actions. The Compliance Committee will recommend a corrective action plan and will monitor the outcome annually.

Enforcement of Compliance Standards

I. Background Investigations

A. For all employees and contractors who have authority to make decisions that may involve compliance issues or who will have contact with service recipients, the Agency will conduct a reasonable and prudent background investigation, including reference checks, criminal back ground checks, and will check all required exclusion lists as part of every employment application or contractor vetting process.

II. Disciplinary Action - General

A. Affected Individuals who fail to comply with SCFU's Corporate Compliance Policy and standards, or who have engaged in conduct that has the potential of impairing the Agency's status as a reliable, honest, and trustworthy service provider, will be subject to disciplinary action, up to and including termination of employment, contract, assignment, or appointment. Any discipline will be appropriately documented in the Affected Individual's file, along with a written statement of reason(s) for imposing such discipline. The Compliance Officer shall maintain a record of all disciplinary actions involving the Corporate Compliance Plan and report at least quarterly to the Board of Directors regarding such actions.

III. Disciplinary Action - Supervisory

A. Supervisors will be sanctioned for failure to adequately instruct their subordinates or failure to detect noncompliance with applicable policies and legal requirements where reasonable diligence on the part of the Supervisor would have led to the earlier discovery of any problems or violations and would have provided Agency with the opportunity to correct them.

IV. Performance Evaluation – Supervisory

- A. The Agency's Corporate Compliance Program requires that the promotion of, and adherence to, the elements of the Corporate Compliance Program, be a factor in evaluating the performance of the Agency's employees and contractors. They will be periodically trained in new compliance policies and procedures. In addition, all managers and supervisors will:
- **B.** Discuss with all supervised employees, the Compliance policies and legal requirements applicable to their function.
- **C.** Inform all supervised personnel that strict compliance with these policies and requirements is a condition of employment.
- **D.** Disclose to all supervised personnel that the Agency will take disciplinary action up to and including termination or revocation for violation of these policies and requirements.

Detecting and Response to Noncompliance

I. Violation Detection

- **A.** The Compliance Officer, Executive Director, and the Compliance Committee shall determine whether there is any basis to suspect that a violation of the Corporate Compliance Plan has occurred
- **B.** If it is determined that a violation may have occurred, the matter shall be referred to legal counsel who, with the assistance of the Compliance Officer, shall conduct a

more detailed investigation. This investigation may include, but is not limited to, the following:

- 1. Interviews with individuals having knowledge of the fact alleged
- 2. A review of documents, and
- **3.** Legal research and contact with governmental agencies for the purpose of clarification

**if advice is sought from a government agency, the request and any written or oral response shall be fully documented

II. Reporting

- **A.** At the conclusion of an investigation involving legal counsel, he/she shall issue a report to the Compliance Officer, Executive Director, and Compliance Committee summarizing his or her findings, conclusions, and recommendations and will render an opinion as to whether a violation of the law has occurred. The report will be reviewed with legal counsel in attendance. Any additional action will be on the advice of counsel.
- **B.** The Compliance Officer shall report to the Compliance Committee regarding each investigation conducted.

III. Rectification

A. If Agency identifies that an overpayment was received from any third party payer, the appropriate regulatory (funder) and/or prosecutorial (attorney general/police) authority will be appropriately notified with the advice and assistance of counsel. It is our policy to not retain any funds that are received as a result of overpayments. In instances where it appears an affirmative fraud may have occurred, appropriate amounts shall be returned after consultation and approval by involved regulatory and/or prosecutorial authorities. Systems shall also be put in place to prevent such overpayments in the future.

IV. Record Keeping

A. Regardless of whether a report is made to a governmental agency, the Compliance Officer shall maintain a record of the investigation, including copies of all pertinent

documentation. This record will be considered confidential and privileged and will not be released without the approval of the Executive Director or legal counsel.

Final Approval Date	Signature	Title
3/20/2019	and Divi	Executive Director



Corporate Compliance Plan Understanding and Acknowledgement:

I have read and been informed about the content, requirements, and expectations of The Corporate Compliance Plan at Special Citizens Futures Unlimited, Inc. I have received a copy of the Corporate Compliance Plan and agree to abide by the guidelines as a condition of my employment and my continuing employment at Special Citizens Futures Unlimited, Inc.

I understand that if I have questions, at any time, regarding the SCFU Corporate Compliance Plan I will consult with, the Compliance Officer or a Human Resources staff member.

Please read this Plan carefully to ensure that you understand it before signing this document.

Employee Signature	Date