

# APHA Code of Conduct Policy and Procedures

The American Public Health Association (“APHA”) is committed to high business and ethical standards for its members.<sup>1</sup> In line with this commitment, the Executive Board of APHA has established the following Code of Conduct Policy and Procedures (“Policy”) for:

- Receipt, retention and treatment of any concerns, issues, or complaints (together “Concerns”) regarding violations of the APHA Code of Conduct (“Reportable Matters”), and
- Submission of Concerns by any member of APHA (“Reporting Member”) regarding Reportable Matters of another member of APHA (“Respondent”).

The procedures set forth herein for reporting of Concerns relating to any Reportable Matters apply to the APHA Code of Conduct.

## 1 CODE OF CONDUCT

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All members should adhere to this Code of Conduct (“Code”) when conducting APHA business, representing APHA or attending APHA-sponsored and non-sponsored events whether in person, virtually, or in written and/or verbal communications.

### Decorum

- Be transparent and honest in conducting business.
- Make commitments and promises in good faith.
- Conduct oneself in a professional manner in all circumstances.
- Inform oneself of norms and customs of others and avoid engaging in behavior that may be considered disrespectful or intimidating.
- Respect others’ time by adhering to deadlines, being on time to meetings and events, staying present and providing information in a timely manner.

### Collegiality

- Aim for consensus and compassion in all interactions.
- Respect diversity and foster inclusion.
- Promote shared decision making, information and resources.
- Encourage equitable access to leadership, development and engagement opportunities, as well as meetings and events.

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<sup>1</sup> As used herein, “member” refers to any individual member.

### **Communications (Written, Oral)**

- Listen actively to other points of view and seek to understand them.
- Enable and encourage all to bring forth ideas regardless of differences in education level or professional experience.
- Engage people respectfully in discussion.
- Stay focused on the topic and not personal feelings, even if there is disagreement with someone or something being said/stated.
- Avoid interrupting and allow people to be heard.

### **Harassment/Discrimination**

- Harassment is unacceptable and will not be tolerated.
- Any discriminatory statements or actions based on race, gender, race, ethnicity, national origin, religion, sexual orientation, homophobia, transphobia, disability, health condition, marital, domestic or parental status are unacceptable and will not be tolerated.

## **2 CONCERN RESOLUTION PROCEDURE**

### **A. CONDUCT SUBCOMMITTEE**

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The implementation of this Policy shall reside in the Conduct Subcommittee of the Governance Committee of the Executive Board.

The Conduct Subcommittee shall be comprised of three members of the Governance Committee appointed by the Governance Committee Chair. All actions of the Conduct Subcommittee shall be by majority vote.

The Executive Director shall appoint one or more APHA staff members to serve as Conduct Compliance Liaisons (“CCL”) to support the work of the Conduct Subcommittee. The CCL shall serve at the direction of the Conduct Subcommittee in accordance with this Policy.

If the membership of the Conduct Subcommittee needs to be expanded due to workload, then additional members may be drawn from the Executive Board appointed by the chairs of the Governance Committee and Executive Board. All Conduct Subcommittees must have at least one Governance Committee member. Staffing for multiple committees will be appointed by the APHA Executive Director.

## B. SUBMISSION OF CONCERNS

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Any Reporting Member having a Concern about a Respondent may report the Concern to APHA.<sup>2</sup>

**Reasonable grounds.** Any Reporting Member filing a Concern must be acting in good faith and have reasonable grounds for believing the information disclosed indicates a violation of the Code. Reporting Members should also consider internal resolution prior to the submission of a Concern, especially if the Concern is related to a relatively minor matter.

**Bad faith allegations.** Unsubstantiated allegations, which the Reporting Member knows or should know to be false or which the Reporting Member had made maliciously may constitute a violation of the Code of Conduct and may subject the Reporting Member to disciplinary or corrective action.

**Concerns only in writing.** The Reporting Member must submit the Concerns in writing electronically, by regular mail or by electronic mail. Anonymous reports will not be acted on.

**Confidentiality cannot be assured.** The Reporting Member may request that they want their names to be kept confidential in relation to the Respondent, although confidentiality cannot be assured. These Confidential Concerns will be treated in accordance with Section 7 of this Policy.

Any APHA member may submit Concerns under this Code of Conduct Policy through any of the following channels:

- (a) Electronically filing a report, using the following link:  
<https://ampublichealth.wufoo.com/forms/q1f3b2c91sw4yf0/>
- (b) By regular mail addressed to:  
American Public Health Association  
Attn: Conduct Compliance Liaison  
800 I St NW  
Washington, DC 20001
- (c) By e-mail addressed to the Conduct Compliance Liaison at:  
[ConductCompliance@apha.org](mailto:ConductCompliance@apha.org)
- (d) If the Concern involves the Conduct Compliance Liaison, then the Reporting Member may submit the Concern directly to the APHA Director of Human Resources at:  
[Ilka.cameron@apha.org](mailto:Ilka.cameron@apha.org)

**Communications.** The report, letter, or e-mail (each a “Communication”) should contain as much detail as possible to allow for proper assessment. A Communication that lacks sufficient detail may be returned to the Reporting Member as insufficient for further action. The Communication should be candid and include all relevant information regarding the Concern.

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<sup>2</sup> Individuals suspected of committing a crime, including harassment, bullying, and/or verbal or physical altercations of any kind shall be referred to local law enforcement as necessary and in accordance with any applicable law, in addition to disciplinary action under this Policy.

## C. ADMINISTRATIVE REVIEW

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**Initial review by CCL and Conduct Member.** The CCL and at least one member (“Conduct Member”) of the Conduct Subcommittee will review each Communication.

The CCL and Conduct Member shall determine if the Concern falls within the scope of this Policy, whether it contains sufficient detail for any further action, and what further action if any should be taken. The determination of whether the Communication falls within the scope of this Policy, whether it contains sufficient detail, and what further action if any should be taken is at their discretion. If there is disagreement between the CCL and Conduct Member, an additional subcommittee member will be consulted for a majority opinion.

**Further action after initial review.** CCL and Conduct Member may follow-up with the Reporting Member if they determine that further information is necessary before deciding on the disposition of the Concern. After reviewing the Communication, the CCL and Conduct Member may dispose of the Concern by 1) closing the Concern; 2) resolving the Concern through remediation; or 3) sending the Concern to the Conduct Subcommittee for further investigation.

### **1. Close Concern.**

A Concern matter may be closed if the CCL and Conduct Member determine that: (i) it lacks sufficient factual allegations to constitute a violation of the Conduct Code; (ii) there is good reason to believe the Concern was made in bad faith, (iii) the actions of the Respondent identified in the Concern have already been considered in an earlier concern, or (iv) the Concern otherwise falls outside the scope of this Policy.

### **2. Remediation.**

A Concern that is subject to this Policy may be subject to remediation if the Concern is relatively minor and the Respondent has not previously been admonished (or reviewed) for the same or similar conduct.

The Conduct Member and the CCL may at any time offer remediation to the Respondent to resolve the Concern. Offers of remediation shall generally not be offered in egregious cases.

An offer of remediation may involve any combination of the following at the discretion of the CCL and Conduct Member: (i) the Respondent accepting responsibility for their behavior; (ii) the Respondent making amends commensurate with their actions; (iii) a private written admonishment; (iv) mediation between the Reporting Member and Respondent to resolve any outstanding concerns; (v) other minor penalty that contributes to the continuing professional growth of the Respondent. The Concern may be closed only if the Respondent accepts the remediation.

### **3. Concern Referred to Conduct Subcommittee for Preliminary Review.**

If the Concern is not closed during the Administrative Review, the CCL and Conduct Member shall send the Concern to the Conduct Subcommittee for further review as described below.

## **D. PRELIMINARY REVIEW**

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Concerns that are referred to the Conduct Subcommittee shall be subject to a Preliminary Review.

The Preliminary Review shall include (a) a meeting with the Reporting Member (telephone or other remote communications) to gather any further information or details regarding the Concern; (b) a meeting with the Respondent (telephone or other remote communications) to ascertain the Respondent's version of the facts in the Concern.

If any documentation was submitted as part of the initial submission of the Concern or as a result of either the Reporting Member or Respondent conversations, this material may also be reviewed as part of the Preliminary Review.

As part of the Preliminary Review, the Respondent shall have the opportunity to submit their version of the facts in writing within a time frame deemed reasonable by the Conduct Subcommittee.

Upon completion of the Preliminary Review, the Conduct Subcommittee shall promptly determine whether an Investigation is warranted.

In its determination, the Conduct Subcommittee shall consider whether there is any dispute in the factual allegations of the Concern; the seriousness of the issues raised; and the likelihood that an Investigation will reasonably affect the Conduct Subcommittee's disposition of the Concern. The Conduct Subcommittee may conduct an Investigation regardless of whether the Reporting Member withdraws their Concern.

If an Investigation is not warranted, the CCL communicates this information with the Reporting Member and Respondent.

## **E. INVESTIGATION**

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If the Conduct Subcommittee decides that an Investigation is warranted, it shall have the discretion to determine the scope of the Investigation. The Conduct Subcommittee shall have the authority to retain outside legal, accounting, or other relevant expertise in any Investigation, as it deems necessary to conduct the Investigation in accordance with this Policy.

## **F. REPORT**

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At the conclusion of any Investigation, the Conduct Subcommittee shall prepare a report ("Report") summarizing its findings and any recommended Corrective or Disciplinary Action. When considering Corrective or Disciplinary Action, if the Respondent has previously been found to have violated the APHA Code of Conduct, this information will be shared with the Conduct Subcommittee for consideration.

The Respondent shall receive a copy of the Report (redacted as necessary to preserve the confidentiality of interested parties) and shall have the option to submit a written response (“Respondent’s Response”) to the Report within 10 calendar days, which may be extended a maximum of 15 additional days at the request of the Respondent.

The Respondent’s Response may include any relevant information, including documentation or witness statements. The Respondent’s Response also may include any information that may bear on a decision regarding any Corrective or Disciplinary Action, as set forth in Section [\*] of this Policy.

After receiving the Respondent’s Response, the Conduct Subcommittee may conduct any further investigation it determines is warranted and may revise its Report.

## **G. RECOMMENDATION AND DECISION**

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**Governance Committee Decision.** The Conduct Subcommittee will forward its final Report, including recommended Corrective or Disciplinary Action, to the Governance Committee for final action (“Decision”).

**Review Limited to Written Record.** The Governance Committee consideration of the recommendation of the Conduct Subcommittee shall be limited to a review of the written record. The Governance Committee shall meet to discuss the Report in Executive Session and render a Decision.

**Executive Board Participation.** The Executive Board Chair shall be invited to the Governance Committee meeting at which the Report will be discussed. If the Executive Board Chair is unable to attend, the Chair of the Governance Committee may defer consideration of the Report or may ensure that the Executive Board Chair is notified of the Concern and contents of the Report prior to the Governance Committee meeting.

**Non-Expulsion Decisions.** The Decision of the Governance Committee shall be deemed final, including any corrective or disciplinary action; except, however, that any Decision that may result in the expulsion of a Member (“Expulsion Decisions”) shall not be final and shall automatically be referred to the Executive Board.

For non-Expulsion Decisions, the Governance Committee will share its Decision with the Executive Board by way of Executive Session. A copy of the Decision will also be shared with relevant APHA management, the Respondent, and the Reporting Member.

The Decision is intended to be for internal APHA purposes only and shall not be distributed to third parties except relevant legal or law enforcement authorities where applicable. APHA may provide a copy of the Decision to its counsel, accountant, and other third-party professionals or experts.

**Expulsion Decisions.** Any Expulsion Decision shall be subject to automatic review by the Executive Board, which has final authority whether to expel a Respondent from APHA.

The Decision to Expel shall be promptly communicated to the Respondent. The Respondent shall have thirty days from receipt<sup>3</sup> of the Expulsion Decision to make a written submission to the Executive Board.

On review of an Expulsion Decision, the Executive Board may consider the entire written record, including any timely submitted written submissions of the Respondent. After its consideration, the Executive Board may determine whether to impose Corrective or Disciplinary Action as provided for in Section 3; or refer the matter back to the Governance Committee for further consideration. The Executive Board may expel the Respondent only if it determines that that the Respondent has acted in a manner as “to reflect discredit upon APHA.”<sup>4</sup>

### **3 CORRECTIVE OR DISCIPLINARY ACTION**

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Based on the nature, intentionality, severity, and frequency of the violation, corrective or disciplinary action may include the following measures:

1. Communication with Reporting Member and/or Respondent for corrective action or letter of warning;
2. Letter of reprimand;
3. Exclusion from certain activities, events, meetings, sessions or conferences of APHA;
4. Removal from APHA leadership positions;
5. Suspension of membership in APHA;
6. Expulsion from APHA with possibility of reinstatement;
7. Expulsion from APHA without possibility of reinstatement.

### **4 COMMUNICATION OF DECISIONS AND ACTIONS OF THE EXECUTIVE BOARD**

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The Decision will be distributed under the guidelines in this Section 4.

If the Governance Committee determines that there is insufficient evidence to support a finding that a violation occurred, the Decision will be provided in writing by electronic email to the Respondent and the Reporting Member only.

If the Governance Committee determines that a violation has occurred, the Decision will be provided in writing to the Respondent and the Reporting Member and to relevant APHA staff.

All actions of the Executive Board shall be distributed to the Respondent, the Reporting Member, and relevant APHA staff.

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<sup>3</sup> Thirty days shall be calculated from the date on which the Decision is sent to the Respondent. To the extent the 30<sup>th</sup> day falls on a weekend or federal holiday, then the Respondent shall have until the next business day to make their submission.

<sup>4</sup> APHA, Bylaws-Article VI, Section 7(T).

## **5 EXECUTIVE SESSION AND VOTING**

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All sessions or meetings of the Governance Committee and the Executive Board regarding a Code of Conduct Concern, including discussions about the Decision and any Expulsion Decision shall be held in Executive Session.

All actions of the Conduct Subcommittee and Executive Board shall be by majority vote of the members present.

## **6 NO RETALIATION**

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This Policy is intended to enable members to raise Concerns for review, investigation, and/or appropriate action. With this goal in mind, APHA shall not retaliate or tolerate any retaliation by APHA staff, or members, directly or indirectly, including encouraging retaliation by others, against anyone who, in good faith, makes a report of a Concern or provides assistance to the Conduct Subcommittee, management or any other duly authorized person or group, including any governmental, regulatory or law enforcement body, investigating a report of a Concern.

If the Conduct Subcommittee becomes aware of a retaliatory action against a Reporting Member, the Conduct Subcommittee shall inform the Governance Committee and full Executive Board of such action.

Nothing in this Policy shall limit the authority of APHA to discipline, penalize, suspend or terminate any member for good and sufficient reasons. Good reason shall not include having in good faith made a report of a Concern or provided assistance to the Conduct Subcommittee, management or any other duly authorized person or group, including any governmental, regulatory or law enforcement body, investigating such report. A person's right to protection from retaliation does not extend immunity for any complicity in the matters that are the subject of the Concerns or any ensuing Preliminary Review or Investigation.

## **7 CONFIDENTIALITY**

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Confidentiality may not be assured. Nevertheless, reports of Concerns, Preliminary Review, and Investigations pertaining to Concerns, shall be kept confidential to the extent possible, consistent with the need to conduct an adequate Preliminary Review and Investigation.

The Conduct Subcommittee shall take reasonable steps necessary to protect the Reporting Member from retaliation. The Conduct Subcommittee shall adopt measures to minimize the release of any information beyond those who have a specific need to know about the Concern or as otherwise set forth in this Policy.



## **8 CONFLICTS OF INTEREST**

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If the Concern involves the CCL, or member of the Conduct Subcommittee or a member of the Executive Board, the involved individual(s) will not be permitted to participate in the consideration or investigation of the Concern or the Corrective or Disciplinary Action.

If such involvement excludes the majority of the Conduct Subcommittee participating in the process, consideration or investigation of the Concern and any Corrective or Disciplinary Action shall be assigned by the Executive Board Chair or their designee or to an ad hoc committee made up of three members of the Executive Board.

## **9 RETENTION OF COMPLAINTS AND DOCUMENTS**

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The CCL shall maintain a log of all Communications, tracking their receipt, investigation, and resolution. All documents relating to the Communications, Preliminary Review, and Investigations shall be maintained by APHA for a minimum of seven years from the initial receipt of the Concern by APHA.

## **10 QUARTERLY REPORTS**

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The Conduct Subcommittee shall present a quarterly report containing the following information with respect to each Concern received during the quarter at a meeting of the Governance Committee: a description of the Concern; whether the Communication resulted in the commencement of a Preliminary Review or an Investigation; the status of each matter; the outcome of any Concerns. The identities of the Reporting Member and Respondent will not be included in the quarterly reports to the Governance Committee.

The quarterly report shall also contain if there are recommendations for APHA to take any further actions consistent with this Policy, and whether to make changes to the Code or to this Policy.

## **11 REVIEW OF POLICY AND DATE OF MOST RECENT BOARD CONSIDERATION**

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The Code of Conduct Policy shall be reviewed at a minimum every three years.

This revised Code of Conduct Policy was approved by the Executive Board on July XX, 2024.