



**EMPLOYEE HANDBOOK**

**Effective  
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## TABLE OF CONTENTS

	<u>Page</u>
<b>A. INTRODUCTION MATERIALS</b>	
WELCOME .....	1
HANDBOOK INTERPRETATION .....	2
CODE OF ETHICS .....	2
MISSION AND VALUES .....	3
<b>B. PERSONNEL POLICIES</b>	
ATTENDANCE AND PUNCTUALITY .....	4
CLASSIFICATION OF EMPLOYEES .....	5
DISCIPLINARY PROCEDURE.....	6
DRESS CODE.....	8
DRUG AND ALCOHOL POLICY.....	10
EMPLOYEE CONFLICT OF INTEREST .....	14
EMPLOYEE RIGHTS REGARDING CULTURAL VALUES,ETHICS, AND RELIGIOUS BELIEFS .....	15
EMPLOYMENT RECORDS .....	16
EQUAL EMPLOYMENT OPPORTUNITY .....	17
GRIEVANCE PROCEDURE .....	17
HARASSMENT POLICY.....	18
HOURS OF WORK .....	19
IDENTIFICATION BADGES .....	20
INSPECTION .....	21
JOB VACANCY ANNOUNCEMENT/EMPLOYEE TRANSFER REQUEST .....	21
MEAL PERIODS .....	22
ON-CALL PAY.....	22
OVERTIME.....	23
PAYCHECKS AND PAYDAYS .....	24
PAYROLL DEDUCTIONS .....	24
PERFORMANCE EVALUATION.....	24
PUBLIC INFORMATION .....	26
RELATIVES, HIRING OF .....	26
RIGHT OF OFFSET.....	27
SHIFT DIFFERENTIAL.....	27
SOLICITATION AND DISTRIBUTION .....	27
TELEPHONE COURTESY AND USAGE .....	28
TERMINATION OF EMPLOYMENT.....	28
THEFT .....	30
TIME RECORDS .....	31
UNEMPLOYMENT COMPENSATION .....	31
VOTING TIME .....	32

**C. EDUCATION**

COMPETENCY VALIDATION .....32  
CONTINUING EDUCATION/TRAINING .....33  
LICENSURE COMPLIANCE .....34  
ORIENTATION AND EDUCATION PROGRAM .....35

**D. BENEFITS**

BEREAVEMENT LEAVE .....38  
JURY DUTY .....38  
LEAVE OF ABSENCE (LOA) .....39  
    GENERAL MEDICAL LEAVE OF ABSENCE ..42  
    BENEFIT PARTICIPATION WHILE ON FMLA  
        OR GENERAL MEDICAL LOA..... 43  
    REINSTATEMENT FOLLOWING LEAVE ..... 44  
    PAY AND BENEFITS AT REINSTATEMENT..44  
    MILITARY LEAVE OF ABSENCE (LOA) .....45  
    PERSONAL LEAVE OF ABSENCE (LOA) .....45  
PAID LEAVE TIME PROGRAM .....46  
PERSONAL STATUS CHANGES.....49  
RECOGNITION OF SERVICE .....49  
EMPLOYEE ACKNOWLEDGEMENT FORM.....50  
CONFIDENTIALITY STATEMENT/INFORMATION/  
    SECURITY AGREEMENT.....51

## **WELCOME**

There is probably no other institution in America that impacts a community as strongly as a hospital. Schools and churches teach us our values and bring us together in both mind and spirit. But it is inside the walls of this hospital and through community outreach programs that we take on the responsibility of caring for the health and well-being of the families of our community.

As an employee of Delta Health System, you play a vital role in our efforts to achieve these goals. You are our greatest strength and most important resource. We look to you for your ideas, talents, suggestions, and most importantly, your enthusiasm. Our commitment to excellence is shown each and every day by your service to patients, families, visitors, and co-workers. Without your hard work and emphasis on service excellence, our facility would not be the regional leader in healthcare that it is today.

This handbook defines many of the guidelines and policies that Delta Health System adheres to in regards to its relationships with all of its employees. Standards of performance are high at Delta Health System and it is important that each employee strives to meet these standards. Our Human Resources Department staff is at your disposal if you have questions or concerns regarding policies contained within this handbook. They are here to assist you.

At Delta Health System, we make an effort to never be complacent with where we are as a hospital. With your assistance, there is always something greater to achieve.

Sincerely,

Scott Christensen  
Chief Executive Officer

## **HANDBOOK INTERPRETATION**

The purpose of this handbook is to provide our employees of Delta Health System with general information regarding the policies and procedures at Delta Health System. **NEITHER THIS HANDBOOK NOR ANY PROVISION OF THIS HANDBOOK IS AN EMPLOYMENT CONTRACT OR ANY OTHER TYPE OF CONTRACT.** Due to the nature of hospital operations and variations necessary to accommodate individual situations, the policies and procedures set out in this Handbook and the Human Resources Policy and Procedure Manual may not apply to every individual or every situation. The hospital reserves the right to rescind, modify, or deviate from these or other policies and procedures relating to employment matters from time to time as it considers necessary in its sole discretion, either in individual or hospital-wide situations with or without notice.

All employees of Delta Health System are employed for an indefinite period of time, and employment may be terminated, with or without cause, at any time, as the will of either the employee or the hospital. This status can only be altered by a written contract of employment, which is specific as to all material terms and is signed by both the employee and the Chief Executive Officer of Delta Health System.

## **CODE OF ETHICS**

Delta Health System believes that conscientious dedication to the highest ethical standards is essential to its mission. This dedication is important because this facility is charged with serving the community and a significant portion of the facility's services are reimbursed through governmental programs which properly require that the people's business be conducted with complete integrity. This facility is committed to meeting high ethical standards in all our activities.

Constant vigilance is necessary to avoid impropriety and the appearance of impropriety. Consequently, the facility has developed a Compliance Program to set standards for conduct, and to monitor conduct in various areas of activity at the facility. Although the Compliance Officer will centrally direct the implementation and enforcement, the responsibility for compliance rests with each department. Ultimately, compliance is the responsibility of every employee and every independent professional that enjoys staff privileges at Delta Health System.

## MISSION AND VALUES

Delta Health System is committed to providing quality health care and health related services to the people throughout its service area. Delta Health System is committed to a comprehensive approach that effectively and efficiently meets the needs of individuals, families, and the community.

- **To Patients**, Delta Health System's goal is to provide facilities and programs designed to meet a broad range of health care needs in a cost-effective manner.
- **To Physicians**, Delta Health System's goal, within the financial resources of the system, is to provide the medical staff with state-of-the-art technologies and innovative programs required to meet the needs of their patients in both preventing illness and restoring health.
- **To Employees**, Delta Health System's goal, within the financial resources of the system, is to provide an environment in which employees can work with dignity and progress according to their ability and initiative. To assist them in improving both service and their individual excellence, to provide them with a competitive and fair salary and benefit program.
- **To the Community** in which it functions, Delta Health System's goal is to provide responsive quality and cost effective services as well as participation in community activities as a responsible corporate citizen.
- **To the Board of Trustees and Citizens of Washington County**, Delta Health System's goal is to provide prudent asset management and creative growth strategies in keeping with its commitment to all the constituencies in this Mission Statement.

Because we are committed to the continuous improvement of quality within the hospital community, we uphold the following values:

- **Respect** - High regard for self, colleagues and others without reference to race, color, religion, sex, national origin, age, disability, or socioeconomic status.
- **Service** - An understanding of service that calls for personal and hospital-wide commitment to unselfish care for others.
- **Creativity** - Innovative thinking, planning, and implementation complementary to being flexible and responsive to needed change.
- **Participation** - Recognition that all persons and each section of the hospital are essential to fulfilling the overall mission of the hospital.

## ATTENDANCE AND PUNCTUALITY

### Statement of Purpose:

To promote proper patient care and equitable treatment to all employees. The hospital expects that all employees report to work at the designated beginning of their shift.

### Policy:

Absenteeism is defined as any work time missed that is scheduled.

Absenteeism may involve an absence of one or more consecutive days. The employee who is ill for an extended period of time will be charged with only one incident of absenteeism.

Periods of hospitalization, bereavement leave, jury leave, previous suspensions, PLT requests, and military leave, approved schedule adjustments, leave of absences requested and approved in advance by the Department Manager or Human Resources will not be counted as absences. They will be recorded, however, for purposes of documentation.

Infractions incurred for illness will not be negated by a subsequent hospitalization for the same illness occurrence.

Unscheduled days off for low census may only be approved by on-duty nursing supervisor.

Notification by any person other than the employee is not acceptable notification unless the employee is hospitalized.

Failure to report to work or call in two (2) consecutive days is considered job abandonment and will result in termination of employment.

Employees who report to work as scheduled but may have an unexpected illness or emergency arise, will not be documented as having an absence if they work at least one-half of the scheduled shift. However, working less than one-half of the scheduled shift will result in a recorded absence and will be documented as an absence.

Any pattern of unreliability in attendance is unacceptable and may result in disciplinary actions up to and including termination of employment.

Tardiness is defined as arriving/clocking in seven (7) minutes or more after the time scheduled to be at work. Example: An employee is scheduled to work 8:00 a.m. to 5:00 p.m. and that employee punches the clock at 8:07 a.m., he/she is considered tardy and a tardy infraction is recorded.

When absenteeism or tardiness occurs, the employee is required to call his/her immediate Supervisor and/or Department Manager. Advance call-ins will not prevent an employee from being subject to discipline for an occurrence of absenteeism or tardiness. Call-ins must not be left on voice mail.

Disciplinary Action: Department managers will be responsible for keeping time records and issuing counseling memos for all employees in their respective areas of responsibility.

Absenteeism/Tardiness: A *Verbal* counseling memo will be issued after three (3) occurrences within a twelve (12) month period. The twelve (12) month time period will begin with the first occurrence of absenteeism/tardiness. A *Written* warning will be issued after six (6) occurrences.

*Suspension* will occur after the ninth (9<sup>th</sup>) occurrence in a twelve (12) month period. *Termination* will occur if there is one (1) more occurrence resulting in a total of ten (10) within the twelve (12) month period

Two (2) suspensions within a twelve (12) month period is automatic termination. See HR.011, Disciplinary Procedure for further information.

The Vice President of Human Resources must review suspension and termination counseling memos before being discussed with an employee.

## **CLASSIFICATION OF EMPLOYEES**

### Statement of Purpose:

All employees of Delta Health System will be employed in designated employee classifications to establish the number of regularly scheduled work hours per week and eligibility for benefit programs.

### Policy:

Delta Health System has five (5) types of employee classifications as identified below.

Introductory Employee - Employee whose performance is being evaluated to determine whether further employment in a specific position or with Delta Health System is appropriate. The first three (3) months (90 days) after employment begins is designated as the introductory period. If Delta Health System determines that the designated introductory period does not allow sufficient time to thoroughly evaluate the employee's performance, the introductory period may be extended for a specified period. Employees who satisfactorily complete the introductory period will be notified of their new employment classification.

Full Time - Employee is regularly scheduled to work forty (40) hours per week and whose employment is for an indefinite term. Eligible for all benefit programs when maintaining an average of thirty-two (32) hours per week. All hours worked will be reviewed and monitored on a quarterly basis.

Part Time - Employee is regularly scheduled to work a minimum of twenty-four (24) hours, but less than thirty-two (32) hours per week and whose employment is for an indefinite term. Eligible for selected benefit programs.

Per Diem (PRN) - Employee is not regularly scheduled and works on an as needed basis and whose employment is for an indefinite term. Not eligible for benefit programs.

Temporary - Employee's work assignment is expected to be of limited duration with specified ending date. A temporary employee is not, however, guaranteed employment for the duration of the assignment. Not eligible for benefit programs.



Employment benefit information related to full and part time classifications can be obtained from the Human Resources Department.

## **DISCIPLINARY PROCEDURE**

### **Statement of Purpose:**

It is the intent of Delta Health System to provide a consistent and equitable disciplinary system to our managers and employees. This system will provide guidelines to ensure corrective action is taken throughout every aspect of the employee counseling and disciplinary procedure and assistance to the offending employee in correcting identified deficiencies in his/her capacity as an employee of Delta Health System.

### **Policy:**

Employees who commit offenses in violation of policies, rules and regulations of Delta Health System are subject to disciplinary action ranging from verbal warning to immediate termination, depending on the severity of the offense.

Although employment with Delta Health System is based on mutual consent and both the employee and Delta Health System have the right to terminate employment at will, with or without cause. Delta Health System may terminate an employee with or without advance notice. Delta Health System may use progressive discipline at its discretion.

Disciplinary action may call for any of four (4) steps: (1) verbal warning, and oral communication between the employee and his/her immediate supervisor and/or department chair which provided a description of the circumstances and the manner in which future offenses can be avoided by the employee, (2) written warning, a written description of the circumstances and the manner in which future offenses can be avoided by the employee, (3) suspension with or without pay, or (4) termination of employment, depending on the severity of the problem and number of occurrences. There may be circumstances when one or more steps are bypassed.

Progressive discipline means that, with respect to most disciplinary problems, these steps will normally be followed: a first offense may call for a verbal warning; a next may be followed by a written warning; another offense may lead to a suspension; and still another offense may then lead to termination of employment.

Delta Health System recognizes that there are certain types of employee problems that are serious enough to justify either a suspension, or, in extreme situations, termination of employment, without going through the usual progressive discipline steps.

All suspensions, whether with or without pay, and involuntary terminations must be approved by the Vice President of Human Resources and the appropriate Administrative Representative prior to discussions with the employee.

While it is impossible to list every type of behavior that may be deemed a serious offense, the

following are examples of problems that may result in immediate suspension or termination of employment. The problems listed are not necessarily serious offenses, but may be examples of unsatisfactory conduct that will trigger progressive discipline.

- An employee receives four (4) written counseling memos in a twelve (12) month period, whether or not involving the same offense.
- An employee receives two (2) suspensions in the last twelve (12) month period, whether or not the suspensions involve the same offense
- An employee commits the same offense in which he/she has been suspended within the past twelve (12) month period.
- The twelve-month period begins on the date of issuance of any disciplinary action.
- Unsatisfactory work performance.
- Falsification of employment application of other facility records.
- Tampering with, forgery of, any employee (including their own) time card or identification badge.
- Leaving work during working hours for other than excused absence.
- Sleeping on the job.
- Violation of computer confidentiality and security policies.
- Insubordinate behavior toward management, including failure or refusal to follow instructions of supervisor, including refusal to accept job assignments or any other serious breach of discipline.
- Physical or verbal abuse of any employee, patient, physician, vendor or visitor.
- Unauthorized possession, use, copying, or reading of facility records or disclosure of information contained in such records to unauthorized persons.
- Theft, fraud or misappropriation of property belonging to the facility, another employee, patient or visitor of the facility.
- Obtaining any facility-provided benefits through dishonesty, deception or fraud.
- Unauthorized possession, usage, or disposal of legal drugs on the facility property at any time.
- Conviction of sale, possession, use or manufacturing of a controlled substance.
- Carrying concealed weapons or violation of other penal laws.
- Reporting to work under the influence of intoxicants or suspected of reporting to work under influence of intoxicants (see Drug/Alcohol Policy on suspension and testing).
- Violation of Pilferage control policy.
- Failure to obtain licensure required by Delta Health System or state or federal law.
- Discourteous or offensive behavior toward a patient, visitor, employee, physician, or vendor.
- Excessive absences/tardiness.
- Violations of facility, departmental, and coordinating departments policies and procedures.
- Conviction of a crime that would reflect on the employee's continued employment.
- Refusal to accept overtime assignments without justifiable reason when necessary and requested by an employee's continued employment.
- Refusal to accept overtime assignments without justifiable reason when necessary and requested by an employee's supervisor.
- Accepting tips and gratuities.
- Soliciting any product for sale, doctrine to follow, or organization to join without prior approval of the facility CEO
- Spending time in an unproductive manner.
- Failure to properly use and display employee identification badge.
- Fraudulently obtaining Workmen's Compensation benefits.

- Violation of fire and safety rules.
- Engaging in personal work on facility premises without permission.
- Exceeding meal period or break period when not permitted.
- Fighting
- Disruptive behavior/actions to the workforce and operations of Delta Health System.
- Failure to report a known accident to immediate Supervisor.
- Violations of Compliance Program and the Delta Health System code of Conduct and Ethical Behavior.
- Failure to report to work.
- Unauthorized posting or removal of any notices on facility bulletin boards or property.
- Failure to follow proper clocking in and out on automated time keeping system and/or time cards.
- Working overtime without prior approval of immediate supervisor and/or unit Director.
- Smoking is prohibited at any Delta Health System facility.

The regulations issued by the Department of Health and Human Services pursuant to the Health Insurance Portability and Accountability Act (HIPAA) have enacted and imposed specific sanctions regarding non-compliance with the requirements of the privacy standards. Refer to policy AD.CO.057, “Sanctioning of Employees, Agents, and Contractors,” for the disciplinary breaches and process regarding violations of the HIPAA regulation.

### **DRESS CODE**

#### **Statement of Purpose:**

The dress code of Delta Health System will vary by department, but should be functional and reflect the seriousness of purpose we have in providing expedient and skilled nursing care to patients.

#### **Policy:**

Hospital employees shall maintain high standards in their appearance, projecting a professional image to patients, patients’ families, physicians, visitors, and the public. Neatness, cleanliness, appropriately fitted clothing, hairstyles, and jewelry should conform to the best business, professional, and safety standards. It is imperative that each Department Director orientates his/her employees to the standards specified in this Policy and Procedure. Employees not adhering to the dress code standards will be subject to disciplinary action and be sent home immediately to change their clothing each time violation of the policy occurs.

1. The Human Resources Department must review department specific dress codes prior to implementation.
2. Departments requiring uniforms or “scrubs” are generally designated a specific color. Once a department makes a uniform color decision, the Department Director contacts the Human Resources Department and if the color is available, it will be approved. If already taken, a substitute would have to be submitted. Departments any change colors every two (2) years. Human Resources will maintain color-coding records for each department represented and requests to change the color of the designated uniform must be submitted to the Human Resources Department for approval. If a department wants a monogram on their uniform, they should contact the Human Resources Department for approval of the monogram/logo.

3. Dresses and skirts must be no more than three (3) inches from the top of the kneecap. Dress pants with appropriate blouse/jacket, are considered acceptable. Denim dresses, skirts, or jumpers may be worn if they are not faded, frayed, torn, or tattered. Attention to proper fit is essential. See through clothing, spandex and shorts (culottes, walking, etc.) are not permitted.

Exceptions:

- Employees who change into uniform when reporting to work may dress casual, including neat looking jeans, walking shorts, and tee shirts (no slogan/advertisement) prior to reporting to duty.
- Off –campus employees (employees who perform their job off premises, specifically Home Health) can wear knee length walking shorts and tennis shoes and socks.
- “On-call” personnel are to respond immediately and each department should have appropriate cover-up attire, i.e., lab coat or scrubs upon the employee’s arrival.
- Shoes should be appropriate for the work performed and the style of dress. White non-canvas tennis shoes are permitted. Canvas tennis shoes are not allowed.
- Backless shoes, clogs and/or “mules” are acceptable, unless deemed otherwise, departmental dress code. Open toe shoes are not permitted in patient care areas.
- Hair should be clean and neatly styled and should not interfere with patient care at any time. Facial hair should not interfere with an employee’s ability to wear personal protective equipment when required. Men should keep their mustaches and beards trimmed at all times, otherwise to be clean-. Sideburns must be trimmed and cannot exceed in length below the earlobe. Employees should have their fingernails trimmed appropriately (No longer than one quarter inch long) for their designated work areas so as not to interfere with patient care and safety. Artificial Nails and Nail Tips are prohibited if duties include direct contact with patients.
- Jewelry shall be kept at a minimum if duties include direct contact with patients. Employees may wear earrings, bracelets (including ankle), necklaces, watches and rings in a conservative fashion. There may be some clinical areas where jewelry is not appropriate. Employees are not allowed to wear facial jewelry with the exception of earrings. No more than two (2) earrings per ear.
- Excessive make-up and strong perfume/cologne will not be permitted.
- Caps (baseball type) will not be permitted except in the following departments: security, physical plant, environmental services and central supply. Caps must remain clean and in good repair to maintain a professional appearance while inside the hospital. Caps must be uniform to the department specific, i.e.; all caps in each department must be identical. Caps bearing the facility logo must have the approval of the Human Resources Department.

Good personal hygiene is extremely important to patient care, as well as the comfort of co-workers and the expected professional image of the Delta Health System. Employees must practice good personal hygiene, remain clean and well groomed at all times. Excessively worn clothing must be replaced.

The following list outlines items that are not considered professional attire and will not be permitted:

- |                                       |                                    |
|---------------------------------------|------------------------------------|
| Wind suits                            | Sweatshirts and or pants           |
| Hiking boots                          | Facial jewelry, excluding earrings |
| Halter tops or crop tops              | Buttons with political slogans     |
| Sun dresses                           | Overalls                           |
| Spandex attire                        | Untrimmed mustaches/beards         |
| Torn or dirty clothing                | Sideburns below the earlobe        |
| Unruly hair                           | Do-rags & Scarves covering hair    |
| Shorts (culottes, walking, city, etc) |                                    |

T-shirts (are permitted under outer clothing only)

Tattoos of an offensive nature (i.e., profanity, nudity, etc.) should be covered at all times. Body piercing must not be obvious at any time.

Infection control standards may also require adherence to these guidelines, and due to safety consideration, dress codes may vary in each department requirements.

When attending an educational function or inservice while not on duty, you must maintain a professional appearance at all a times.

Employees of contracted agencies, which are located within the hospital, are required to adhere to the Delta Health System dress code.

Surgical scrubs are to be worn by surgical service employees in accordance with the surgical attire policy (SS.SUR.010). Wearing of surgical scrubs by non-surgical service employees is prohibited except in the event of a blood or body fluid exposure causing soiled clothing. In the event a non-surgical service employee experiences a blood or body fluid exposure the Nursing Supervisor may issue surgical attire per protocol.

### **Casual Day**

Friday will be designated as “Casual Day”. Jeans of any color are not permitted. Again, proper fit is essential to a professional image. Non-canvas tennis shoes may be worn. The Delta Health System polo shirt is acceptable. When choosing your attire for “Casual Day”, employees are expected to reflect the professional image maintained at this facility.

\*\* Exemptions to the dress code policy due to an employee’s disability or religion must be discussed with the Human Resources Department.

### **DRUG AND ALCOHOL POLICY**

#### **Statement of Purpose:**

It is the policy of the facility to provide a working environment as free from the use of non-prescribed drugs and alcohol as reasonably possible in order to maintain an environment that promotes optimum levels of patient care and safety in the work place.

#### **Policy:**

The facility requires that every employee be free of non-prescribed drugs or medications, and alcohol use. Each offer of employment is conditional upon negative drug test results. The facility will not extend employment to any applicant who receives a positive result on the pre-employment drug test or refuses to be tested.

All testing will be conducted by a licensed independent medical laboratory, which will follow established testing standards. Testing will be conducted on a blood, urine and/or saliva specimen provided by the candidate to the testing laboratory under procedures established by the laboratory to insure privacy of the employee, while protecting against tampering/alteration of the test results.

Delta Health System will pay for the cost of the testing, including the confirmation of any positive

test result by gas chromatography. The testing lab will retain samples in accordance with state law, so that a candidate may request a retest of the sample at his/her own expense if he or she disagrees with the test result.

The facility also reserves the right to test employees upon reasonable and individualized suspicion. Violations of the Alcohol and Drug Policy may result in disciplinary action, up to and including termination. The facility may also terminate any employees who tests positive for alcohol or drugs while undergoing counseling and/or treatment for alcohol and drug abuse or during the twenty-four (24) month period following completion of rehabilitation or counseling program.

Employees are advised of this program in accordance with Mississippi's Drug and Alcohol Testing statutes, Mississippi Code Ann. § 71-7-1, *et seq.* which provides for drug and alcohol testing of employees and job applicants.

All information, interviews, reports, statements, memoranda, and drug tests, written or otherwise received by Delta Health System through its drug and alcohol testing program is confidential, except as required or permitted by law.

**Prohibited Conduct:**

- The sale, manufacture, distribution, purchase, use or possession of alcohol or nonprescribed and/or illegal drugs or medications (including non-prescribed narcotics, hallucinogenic drugs, marijuana, or other non-prescribed controlled substances), or equipment, products and materials which are used, intended for use, or designed for use with such drugs or alcohol, is prohibited during working hours and while on the facility's property.
- Reporting to work or being at work while under the influence or impaired by alcohol or non-prescribed and/or illegal drugs or medications is prohibited.
- Reporting to work or being at work with non-prescribed and/or illegal drugs medications in the blood or urine is prohibited.
- Reporting to work or being at work while using prescribed medications may also be prohibited where, in the opinion of the management, such use prevents the employee from performing the duties of his/her job or poses risk to the safety of the employee, other persons, or property.

**Drug and Alcohol Testing:**

An employee may be requested to undergo a drug test conducted in accordance with Mississippi Code Ann. §71-7-1, *et seq.* or other applicable laws and regulations in the following circumstances:

**Pre-employment:** All offers of employment, re-employment or reinstatement is conditional based upon the applicant successfully passing a drug test prior to starting work. The applicant must sign a consent form agreeing to submit to a drug test. Any applicant who does not consent will not be considered for employment.

**Post-Accident:** When an employee is involved in a work related accident, incident, or injury and reasonable and individualized suspicion exists to believe that such accident, incident, or injury may have been caused by or resulted from such impairment, the employee will be required to submit to a drug and alcohol test.

Random: Delta Health System may conduct random alcohol/drug testing on a neutral selection basis as it deems appropriate. A neutral selection basis means a mechanism for selecting employees for testing that (1) results in an equal probability that any employee from a group of employees subject to the selection mechanism will be selected and, (2) does not give the employer discretion to waive the selection of any employee selected under the mechanism routine or random tests.

Annual Health Screen: Employees may be required to submit to a drug and alcohol test as a part of their annual health screen.

Reasonable Suspicion: Where individualized and reasonable suspicion exists to believe that an employee is under the influence of, or impaired by drugs or alcohol, and such impairment may affect the employee's performance, or may present a health or safety risk, the employee may be required to submit to a drug and alcohol test. Reasonable suspicion drug and alcohol testing" means drug and alcohol testing based on a belief that an employee is using or has used drugs in violation of the employer's policy drawn from specific objective and articulable facts and reasonable inferences drawn from those facts in light of experience, and may be based upon, among other things: (i) Observable phenomena, such as direct observation of drug use and/or the physical symptoms or manifestations of being under the influence of a drug; (ii) Abnormal conduct or erratic behavior while at work, absenteeism, tardiness or deterioration in work performance; (iii) A report of drug use provided by reliable and credible sources and which has been independently corroborated; (iv) Evidence that an individual has tampered with a drug and alcohol test during his employment with the current employer; (v) Information that an employee has caused or contributed to an accident while at work; (vi) Evidence that an employee is involved in the use, possession, sale, solicitation or transfer of drugs while working or while on the employer's premises or operating the employer's vehicle, machinery or equipment.

Post Rehabilitation: An employee may be periodically tested for drugs and alcohol for a period of twenty four (24) months after completion of a rehabilitation, treatment, or counseling program.

Delta Health System's drug and alcohol testing program consists of the following substances:

Amphetamines	Barbiturates	Cocaine
Benzodiazepine	Cannabinoids	Methadone
Methaqualone	Ethanol	
Phencyclidine (PCP)	Opiates	

Before being tested, an employee must sign a consent form and list all prescribed or non-prescribed medications they are taking, or have taken within the last 10 days. All prescriptions should be in their original container labeled with name/phone number of pharmacy, name of employee, strength of drug, and should not be more than one year old. Prescriptions must be presented to the Employee Health Nurse for verification. Employees who refuse screening and/or testing will be terminated.

**Notification of Results:**

Should the results of an initial alcohol/drug test be negative, there shall be no confirmation test.

Should the results of the initial alcohol/drug test be positive, a confirmation test on such sample specimen shall be conducted. Any positive confirmation tests will be reported to the Medical Review Officer, who is responsible for receiving and interpreting the laboratory results and reporting to the Employee Health Nurse for action. Delta Health System's Employee Health Nurse will notify the

employee, in writing, of a positive confirmed test result within five (5) working days after receipt of same and inform the employee of the consequences of such results, which include disciplinary action up to and including termination, and the options available to the employee.

Within ten (10) working days after receiving notice of a positive confirmed test result, the employee may submit information to the Employee Health Nurse explaining the test results and why the results do not constitute a violation of this policy. In addition, an employee may have a sample retested at a laboratory of his/her own choosing, at his/her own expense. If the employee's explanation of the positive test results is not satisfactory to the Employee Health Nurse, a written explanation as to why the explanation is unsatisfactory, along with the report of positive results, shall be made a part of the employee's medical and personnel records.

**Alcohol Testing:**

Breath and/or saliva specimens may be collected for initial tests; blood specimens shall be collected and tested for confirmation tests after a positive initial test. Any detectable level of alcohol greater or equal to 40mg/dl found in blood will be deemed a positive, confirmed result.

**Release of Test Results:**

Delta Health System will not release the results of any drug or alcohol test without the employee's prior written consent, unless otherwise required or permitted by law.

**Disciplinary Action:**

An employee will be temporarily suspended without pay after obtaining the results of a positive initial test pending the results of a confirmation test. The Vice President of Human Resources must evaluate and approve all proposed testing or disciplinary action resulting from violation of this policy. In such cases where the Vice President of Human Resources is unavailable, the Chief Nursing Officer and/or Administrator On-Call should be notified and will take appropriate action. Nothing in this policy alters the fact that all employees of this facility are employed for an indefinite period and that such employment may be terminated without cause or notice at the will of either the employee or the facility.

Note: In the case that the confirmation test is negative the employee will be paid for any hours previously scheduled while suspended.

**Assistance for drug/alcohol problems:**

It is the responsibility of each employee to seek assistance from the Human Resources Department Employee Assistance Program ("EAP") before drug and or alcohol problems lead to performance problems, safety concerns or violation of policy. Requests for assistance will be treated as confidential. Any employee who voluntarily seeks such assistance prior to receiving a positive drug or alcohol test will not be terminated solely on account of such drug and or alcohol use, provided the employee enrolls in and successfully completes at the employee's expense, a Human Resources approved rehabilitation program.

In the event an employee receives a positive confirmed test results for drugs and or alcohol and is allowed to continue employment through provisions of the EAP, the employee will not be allowed to continue employment until he or she has enrolled and successfully completed, at the employee's expense, a Human Resources approved rehabilitation program.

In both of the above situations, the employee may be allowed to return to work if enrolled and continually attending an approved outpatient rehab program. If an employee is participating in drug



and/or alcohol rehabilitation through EAP, drug and/or alcohol testing may be conducted by the rehabilitation provider as deemed appropriate by the provider.

Any such enrollment in an inpatient or outpatient rehab program does not guarantee the employee continued employment. Routine reporting of the employee's progress from the rehab program to Employee Health Nurse is mandatory. Any employee participating in an approved rehab program pursuant to this policy must abide by the terms of the Delta Health System EAP agreement. Any employee receiving a confirmed positive alcohol and or drug test during his or her first 90 days of employment is not eligible for participating in the HR approved rehab program and will be immediately terminated.

## **EMPLOYEE CONFLICT OF INTEREST**

### **Statement of Purpose:**

Establish guidelines to identify, address, and resolve any areas of potential conflict between a person's responsibilities and obligations as an employee of Delta Health System and a person's outside personal interests. Employees may not realize any profit or gain as a result of their position with the hospital apart from the normal compensation/benefit program.

### **Policy:**

Delta Health System employees, particularly department heads, will not seek or accept employment or be engaged in their field of work outside of their hospital employment without prior approval of their immediate supervisor and the Chief Executive Officer of Delta Health System.

In addition, Hospital employees shall not serve as owners, employees, officers, directors, or agents of businesses, which offer services in competition with services offered Delta Health System without prior approval from their immediate supervisor and the Chief Executive Officer.

Employees sign an Acknowledgement of Receipt of the Employee Conflict of Interest Policy when they read and accept the Code of Conduct booklet at new employee orientation.

Requests for permission to seek or accept additional employment or engagement, or to be affiliated in any way with a business which competes with Delta Health System, must be submitted in writing to the employee's immediate supervisor in sufficient time for a decision to be made prior to the beginning of the job, engagement or relationship.

The employee may accept employment or engagement or participate in unrelated fields provided that such employment, engagement or participation in no way affects the employee's job performance or attendance.

Conflicts of interest are considered to exist in situations where employees' actions or activities involve:

- The obtaining of an improper personal gain or advantage by reason of an employee's position with the hospital;
- An adverse effect upon the interest of the hospital.
- The obtaining by a third party of an improper gain, or of an advantage to the detriment of the hospital; or
- The appearance of any of the above

Any issues related to a conflict of interest shall be disclosed to the employee's appropriate supervisor, compliance liaison, the Compliance Officer or the compliance program ValuesLine.

## **EMPLOYEE RIGHTS REGARDING CULTURAL VALUES, ETHICS, AND RELIGIOUS BELIEFS**

### **Statement of Purpose:**

To identify and outline the mechanisms for staff to refuse to participate in-patient care based on cultural values or religious beliefs.

Delta Health System respects its staff members' cultural values, ethics, and religious beliefs and the impact these may have on patient care. The hospital will consider whether conflicting cultural values, ethics, or beliefs are sufficient grounds for granting requests not to participate in care. To ensure that patient care and treatment will not suffer if a staff member is excused from participating in any aspect of care, the hospital has established alternative methods of care delivery for these situations.

### **Policy:**

Examples of patient care that may cause conflict:

1. Withholding or removal of life support.
2. Administration of blood or blood products.
3. Participation in planned abortion.
4. Organ procurement.

(This list is not all-inclusive. There are others that may arise. Disease states will not be considered justification for employee to request transfers.)

Under these circumstances, the following steps should be followed:

1. The employee must notify his/her supervisor or department manager of his/her request to be removed from a certain aspect of patient care as soon as possible.
2. The request will be evaluated and reasonable accommodation will be made to reassign patient care responsibilities in order to ensure a continuum of care.
3. The reassignment will not occur until a mechanism is in place to ensure patient care will not be adversely affected or compromised by the reassignment. Refusal to provide care will result in disciplinary action up to and including termination. Under no circumstance will a request be granted if it is felt that doing so would negatively affect the care of the patient.

Employees must understand that for staffing reasons, it may not be possible to grant a request. Under these circumstances, employee should be encouraged to request transfers where these issues would be less likely to occur.

In cases where conflicts cannot be confirmed or established practice is unclear, the ethical dilemma section of this policy will be used.

Ethical dilemma resolution:

1. All ethical dilemmas will be resolved at the lowest level.
2. If not resolved, the immediate Supervisor will be notified, followed by the Department Manager, then the appropriate Administrator.
3. Dilemmas not resolved at the administrative level will be taken to the Chief of the Medical Staff.

**EMPLOYMENT RECORDS**

Statement of Purpose:

To provide a document (employment record) which is accurate and complete for record keeping purposes during an employee's period of employment at Delta Health System. The employment record will contain documentation related to, but not limited to, information for the following areas: pre-employment information; licensure; federal, state laws and regulatory requirements; compensation; employee benefit participation; payroll deductions; orientation/education; performance evaluations and competency; disciplinary actions; and other various employment information.

Policy:

All employment records are business records of the facility and are maintained in a secured area of the Human Resources Department. These records cannot be removed from Human Resources without the approval of the Vice President of Human Resources.

It is the responsibility of every employee to notify the Human Resources Department of any personal information changes, *i.e.*, marital status, change of address, emergency contact, etc. Current employees may review their employment records to the extent the Human Resources Department deems acceptable and can make an appointment to do so with the Human Resources Department. Terminated employees may not review employment records.

Employment records cannot be photocopied, but an employee can make notes on information contained in his/her employment record. Nothing should be entered into the employment record without the employee's knowledge.

Employment records are confidential and can only be reviewed by the employee and the following individuals:

- Human Resources personnel.
- Immediate Supervisor and/or Department Director.
- Administrative Council Representative responsible for the employee's department.
- Chief Executive Officer.
- Representative of a federal or state regulatory or licensure agency as required by law.
- CMS representative during accreditation survey.
- Continuing educational personnel.

## **EQUAL EMPLOYMENT OPPORTUNITY**

### **Statement of Purpose**

It is the intent of Delta Health System to provide equal employment opportunities for all qualified individuals who seek employment with Delta Health System.

### **Policy:**

It is and shall continue to be the policy of Delta Health System that all persons are entitled to equal employment opportunity regardless of race, color, religion, sex, national origin, age, or disability. The facility does not and will not permit employees to engage in unlawful discriminatory practices.

Delta Health System will comply with all applicable state and federal civil rights laws; every effort will be made to employ the most qualified individuals without regard to the above factors. Additionally, it is and will continue to be Delta Health System's policy to provide promotion and advancement opportunities in a non-discriminatory manner.

## **GRIEVANCE PROCEDURE**

### **Statement of Purpose:**

Whenever a group is required to work together for an extended period of time, problems and misunderstandings can occur. In order to aid in prompt and constructive problem solving, employees are encouraged to use this avenue for review and resolution. This procedure is not for use in cases of employee terminations.

- Step One: Discussion of the problem with the employee's immediate Supervisor and/or Department Director. If the employee desires to continue to Step Two or Three, he/she must notify the Vice President of Human Resources.
- Step Two: If a settlement does not occur in Step One, the employee then has three (3) days from receipt of the decision to submit in writing to the Senior Administrative Leader for that employee's department, why he/she believes the action taken was inappropriate and what action should be taken.
- Step Three: If a settlement does not occur in Step Two, the problem should be presented in writing to the Vice President of Human Resources within three (3) days from receipt of the decision in Step Two.
- Step Four: If a settlement does not occur in Step Three, the HR Director may present the situation to the Grievance Council within 3 days from receipt of the decision to determine if the correct process has been followed. The Grievance Council will report back to the Vice President of Human Resources. The final decision will rest with the HR Director in consultation with the CEO.

## **HARASSMENT POLICY**

### **Statement of Purpose:**

It is Delta Health System's intent that employees and their work environment should be free from all forms of harassment and intimidation.

### **Policy:**

Delta Health System does not and will not permit employees to engage in sexual harassment, or harassment based on race, color, religion, gender, national origin, age, disability, or other trait protected by federal, state or local law. Harassment by any employee, supervisor, manager, or person doing business with the facility is strictly prohibited. Violation of this policy is grounds for discipline, up to and including termination.

This policy forbids verbal or physical conduct which is degrading or shows hostility toward an individual because of his/her race, color, religion, gender, national origin, age, disability, citizenship, military or veteran status, family medical leave status, or other status protected by federal, state or local law, where such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or that creates an intimidating, hostile, or offensive working environment. Harassment may include, but is not limited to, characterizations, slurs, jokes, or other verbal or physical conduct relating to an individual's race, color, religion, gender, national origin, age, disability, or other protected status. Sexual harassment can consist of unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual or gender related nature that creates an offensive or hostile work environment.

Examples of harassment: An employee may be racially harassed by a person of the same or a different race. An employee may be harassed on the basis of color by a person of the same color or different color. An employee may be sexually harassed by a person of the same or opposite gender. Male employees may be sexually harassed by female employees and vice versa. An employee may be harassed concerning his religion by a person of the same or a different religion. An employee may be harassed on the basis of national origin by a person of the same or a different origin. An employee may be harassed on the basis of age by a younger person, older person, or a person of the same age. An employee may be harassed on the basis of citizenship by a person of the same or a different citizenship.

### **Reporting Procedure:**

An employee who believes that he/she is being harassed by a co-worker, supervisor, manager or other individual (whether employed at the facility or not), or believes his/her employment is being adversely affected by such conduct (whether directed at the employee or at a co-worker), must immediately report such concerns to the Supervisor, Department Manager, Vice President of Human Resources, or the Chief Executive Officer, as soon as possible. If a Manager or a Supervisor is involved in the conduct about which the employee is complaining, the employee should contact the next higher level management person or the Vice President of Human Resources. If the complaint is against the Vice President of Human Resources, the employee should contact the Chief Executive Officer of Delta Health System. Any Supervisor, Manager or representative in the Human Resources Department who, either by report from an employee or by other means, becomes aware of conduct that may constitute harassment must immediately report such conduct to the Vice President of Human Resources, or the Chief Executive Officer.

This policy also prohibits retaliation against employees who bring sexual harassment charges or assist in investigating charges. Any employee bringing a sexual harassment complaint or assisting in the investigation of such a complaint will not be adversely affected in terms and conditions of employment,

nor discriminated against or discharged because of the complaint. Employees who make good faith complaints of harassment or provide information related to such complaints will be protected against retaliation. After a complaint of harassment has been received, management will endeavor to scrutinize employment decisions affecting the complainant and witnesses during and after the investigation to ensure that such decisions are not based on retaliatory motives.

Upon learning of claims of harassment, Delta Health System management will conduct a prompt and thorough investigation. The investigation is made by looking at the record as a whole and the totality of the circumstances. The determination will be based on a preponderance of all the facts, on a case by case basis. If it is determined that inappropriate behavior has occurred, Delta Health System will take appropriate disciplinary action, up to and including discharge of the offending employee. If an employee is not satisfied with the conclusion or results of the investigation, his/her concerns should be presented to the Vice President of Human Resources, or if appropriate, the Chief Executive Officer. Whether or not an employee files an internal complaint, management must correct harassment if management knows it is occurring and, even if the conduct is “perceived” or clearly in violation of this policy.

Delta Health System is not obligated by law or by this policy to employ the least drastic corrective action, and may take whatever measures are necessary to ensure compliance with this policy. If termination is not elected, the harasser may be required to accept training or counseling as a condition of continued employment in order to ensure that he/she understands why his/her conduct violated this policy.

As the burden of proof is on the complainant, if there is not a preponderance of evidence of harassment, the complaint will be deemed “unfounded.” Both parties will be counseled about the applicable law and policy, and encouraged to seek assistance from the Human Resources Department if additional situations arise.

If the investigator finds harassment did not occur, the investigator must also make a determination whether the accusation filed was deliberately false. If so, it will be treated the same as any other falsification of company records, subject to discipline up to and including termination.

If an employee feels harassed, and after filing a complaint under this policy is not satisfied with the result, the employee has the right to file a claim with the U. S. Equal Employment Opportunity Commission (EEOC), 207 West Amite Street, Jackson, MS 39201; Phone: 601-965-4537; TDD: 601-965-4915. The time limit to file with the EEOC is 180 days after the last incident.

## **HOURS OF WORK**

### **Statement of Purpose:**

Delta Health System provides continuous patient care 24 hours a day, 7 days a week; it must be staffed accordingly.

### **Policy:**

For this reason, employees may be scheduled to work various weekdays, weekends and holidays to meet the needs of the facility. Each department Director/Supervisor is responsible for scheduling sufficient staff to meet the needs of their department. Employees will be required to work the hours assigned and schedules will differ between departments. In addition, it may be necessary for the facility to change the starting and completion time of a work shift to accommodate the needs of the facility or its patients. Non-

exempt employees should not report to work earlier than is reasonably necessary for reaching their assigned work area after clocking in (normally 3 to 5 minutes) and they will be expected to clock out in the same manner.

For patient care areas, each workday is generally organized into two twelve-hour shifts:

Day Shift	6:45 a.m.	to	7:15 p.m.
Night Shift	6:45 p.m.	to	7:15 a.m.

Supervisors may also elect to use alternative scheduling to provide sufficient coverage. Some employees will be required to rotate shifts and alternate working days, evenings or nights. They may also be asked to work in units other than their assigned unit; before this is done, their supervisor will work with the employee to assure that they are able to perform the duties required on the new unit. Work schedules will generally be posted in advance to allow for personal business to be conducted around work schedules.

Break Periods:

The privilege of enjoying a 15-minute break for each four (4) hour period of work is observed by the organization as long as the break will not interfere with the work required. The scheduling of breaks will be the responsibility of the Department Director, and it must be realized that breaks are not guaranteed, and workloads on a given day may eliminate the break period. It should be understood that employees on break do not go into other work areas for non-business purposes and interfere with or distract other employees who are working at that time. No break should be taken within one (1) hour of the beginning of an employee's scheduled shift.

**IDENTIFICATION BADGES**

Statement of Purpose:

To establish a facility policy concerning the issuing, wearing, and maintenance of the employee identification badge.

Policy:

To properly provide identification to other employees, physicians, patients, patients' family members, visitor's and other individuals doing business with the facility, it is necessary for all employees to wear their facility issued employee identification badge while on duty. The front side of the badge with the name and photo ID of the employee are to be visible at all times on upper torso.

Badges will be required when receiving employee reimbursement checks and in the cafeteria for employee meal discounts. The facility pays for the initial badge that is issued and other badges that require changes due to an employee's change of classification, department, name, etc. Badges that become unusable due to normal wear and usage will be replaced at no cost to the employee. However, badges that are damaged due to misuse and are lost will be replaced at a charge of \$5.00 to the employee. All employee identification badges are to be issued by the Human Resources Department.

When an employee reports to work without a badge, he/she must notify his/her immediate supervisor. Continued occurrences will be handled through the employee disciplinary process. Employee identification badges are property of the facility. If an employee resigns or is terminated from

employment, the badge must be returned to either the employee's immediate supervisor or the Human Resources Department on the last workday. If the badge is not returned on the last day worked, \$50.00 will be deducted from the employee's final paycheck to cover the administration expenses caused by the failure to turn in the badge.

## **INSPECTION**

### **Statement of Purpose:**

Delta Health System desires a safe working environment that is free of illegal drugs, alcohol, firearms, explosives or other improper materials.

### **Policy:**

All facility property, including but not limited to lockers (whether secured by employee's locks or otherwise), desks, file cabinets, computer disks, and electronically stored data, and vehicles used by the facility's employees, is provided for the use and/or convenience of employees but remains the sole property of Delta Health System. It is therefore subject to being searched and the contents held by the facility's Security personnel at any time.

Employees are discouraged from bringing personal items to work. The facility may, from time-to-time, search and/or require employees to allow inspection of parcels, bags (including handbags and briefcases) and/or other personal items, and/or personal vehicles brought onto facility property.

## **JOB VACANCY ANNOUNCEMENT/EMPLOYEE TRANSFER REQUEST**

### **Statement of Purpose:**

To establish a procedure in which new and replacement positions will be announced to potential internal and external candidates. This procedure enables eligible qualified employees to inquire about facility job opportunities and request a transfer or, in the case of external candidates, to submit an employment application to fill the vacant position.

### **Policy:**

All positions receiving administrative approval will be posted on the facility's web-site for a minimum of three (3) days (72 hours).

### **Internal Candidates:**

Eligible employees are defined as those employees who have successfully completed their introductory employment period in their current position. Employees who are interested in being considered for a posted position should obtain, complete and return a Transfer Request Form to the Human Resources Department. The form must have the signature of the employee's immediate Supervisor/Department Director, which acknowledges the employee's interest in a posted position within the facility.

The Human Resources Department will ensure the employee meets the minimum requirements of the position and then notify the Department Director with the vacant position of the eligible and qualified internal candidates. The employee's personnel file will be made available for the respective director for review in the Human Resources office. The Department Director will arrange and conduct interviews with the prospective candidates.



Once a selection has been made and accepted, the Human Resources Department will notify the candidates not selected of the decision. A mutually agreed upon transfer date will be determined by each Department Director to ensure a smooth transition. The transfer period is between two (2) to four (4) weeks. If extenuating circumstances exist, a maximum of six (6) weeks would be allowed, if approved by Administration.

External Candidates:

Outside candidates will complete an online application at [www.deltahealthsystem.org](http://www.deltahealthsystem.org). Employment applications will be reviewed by the Human Resources Department to ensure applicants meet the minimum qualifications of the posted position. If an internal candidate is not selected, qualified outside applicants will be forwarded to the respective Department Director and the Department Director will arrange and conduct interviews with potential candidates. Once a selection has been made and accepted, the Human Resources office will notify those candidates interviewed and not selected.

### **MEAL PERIODS**

Statement of Purpose:

Delta Health System realizes the need for employee meal breaks. However, employee meal breaks should not result in an interruption of necessary services.

Policy:

Employees, depending on their classification, are to be scheduled by their supervisor for a thirty-minute or hour meal period within the first six hours of starting his/her shift. The meal period is to be on the employee's time. If a non-exempt employee is unable to take a meal period, the employee must notify and obtain his/her supervisor's approval for the work to be done at the time of occurrence. The employee then documents the missed meal period on his/her time record, so he/she can be paid for the missed meal period. Non-exempt employees who leave the premises for lunch must clock out and back in upon return to the facility. In the interest of cleanliness and in compliance with various regulations, consumption of food is restricted to the cafeteria or designated departmental break rooms or employee lounges.

### **ON-CALL PAY**

Statement of Purpose:

Employees who are required, as a condition of employment, to be "on call," will be compensated a designated amount per hour.

Policy:

Call pay for a position(s) and the number of staff required for departmental call coverage must receive Administrative approval. Positions approved for emergency "on-call" pay will receive call pay for carrying the beeper with the following specific minimum guarantee of hours if called in for a procedure.

<u>Department</u>	<u>Guaranteed # of Hours Pay</u>
Cath Lab	3 hours
Non-invasive	1 hour
GI Lab	3 hours
OR/PACU	3 hours
Home Health	Per visit
Hospice	Per visit
Radiology	1 hour
Respiratory Home Health	Per visit
Physical Therapy	1 hour
Occupational Therapy	1 hour

Employees who are called in, are paid their regular hourly rate for hours worked. Call pay begins at the end of the normal shift or completion of that day’s work, whichever is first. Call pay will not be paid during any worked hours. To be eligible for call back pay, the employee must be off the clock for a minimum of 15 minutes from their regularly scheduled shift. These hours count toward the computation of overtime for all hours worked in excess of forty hours in the designated work week. Abuse of this policy may result in disciplinary action up to and including termination.

### **OVERTIME**

**Statement of Purpose:**

Delta Health System discourages work in excess of an employee’s regular schedule in order for its employees to have sufficient relief and rest. However, in order to provide the best possible services to our patients, it may be necessary for employees to work overtime.

**Policy:**

This facility will provide guidance and instruction to both Department Directors and employees on the approval and payment of overtime.

Department Directors/Supervisor must authorize all overtime before it may be worked. If an hourly employee knows his/her work will not be completed at the end of the shift, or needs to work through lunch, the employee must notify his/her immediate Supervisor or Department Director for approval at time of occurrence. The additional work time could create an overtime situation at the end of the week and the Department Director must approve for overtime or make adjustments to staff to avoid overtime from occurring.

Overtime will be paid to all non-exempt (hourly) employees in compliance with the Fair Labor Standards Act (FLSA) and state wage and hour laws where applicable. Overtime will be paid at one and a half times the employee’s average hourly rate for all productive hours (excluding PLT) worked in excess of forty (40) hours in the designated work week. Exempt employees are not eligible for overtime pay.

**NOTE:** Employees on “On-Call” status will be paid according to the guidelines established for on-call pay.

## **PAYCHECKS AND PAYDAYS**

### **Statement of Purpose:**

Delta Health System considers each paycheck a confidential matter between this facility and its employees and strongly encourages employees to refrain from discussing pay.

### **Policy:**

Questions regarding a paycheck or pay should be discussed with an employee's Department Director and if necessary the Human Resources and/or Payroll Departments. Employees are responsible for reviewing their payroll check advices (check stubs) to insure the accuracy of appropriate pay and authorized deductions. No manual checks will be issued for performance evaluation increases.

Direct deposit of payroll checks is mandatory and a condition of employment. All employees are paid by Direct Deposit on alternate Fridays in keeping with the facility's biweekly pay system. Direct Deposit forms must be completed and returned to Human Resources before employment begins. Changes to an employee's account should be made at the Human Resources Department as soon as possible in order for Payroll to change account information in the Direct Deposit System. If an account has been closed or changed and direct deposit money is returned to the facility, a manual check will be issued to the employee. The employee cannot continue to receive manual checks. New account information for Direct Deposit must be provided to the Human Resources Department immediately upon issuance of the manual check for continued employment.

## **PAYROLL DEDUCTIONS**

### **Statement of Purpose:**

Delta Health System is required by law to make certain payroll deductions.

### **Policy:**

The Payroll Department will deduct from employee earnings only those deductions required by law (social security, withholding taxes, garnishments, etc.), plus employee authorized contributions such as premiums for insurance benefits, hospital bills, savings plans, United Way, etc. All deductions require the employee's signature, especially voluntary deductions.

## **PERFORMANCE EVALUATION**

### **Statement of Purpose:**

To establish a standard format and instructions for use within the three (3) month introductory period and annual employee performance evaluation. The proper preparation of an employee performance evaluation can be used as a consistent and integral part of the performance improvement function. The hospital, the employee, and the supervisor can gain from this evaluation experience.

No role of the Department Manager or Supervisor exceeds in importance as his/her role as a manager of people. Most of what we accomplish is through people and, therefore, our ultimate success in achieving quality patient care can be traced directly to our skills in personnel management. The appraisal of individual work performance and skills validation, which includes recognition of the employee's strengths and accomplishments, is an essential psychological and motivational process. Equally important is the communication of work performance factors which fail to meet expected standards or otherwise need improvement.

Policy:

The employee performance evaluation is to be used in establishing a formal process of job performance, skills validation, and personal review with the employee in each assigned job. The hospital will appraise the job performance of each employee after three (3) months of initial employment or promotion and annually thereafter within thirty (30) days of the three (3) month or annual evaluation due date.

1. Responsibility of Supervisor:

- a. Review and update the employee's job description and performance frequently.
- b. Review the job description and skills validation criteria prior to the formal evaluation with the employee to have a clear understanding of the duties and responsibilities being reviewed.
- c. To insure the employee has had adequate opportunity to participate in training as called for in the inservice training program.

2. Objectives:

It is essential that both the Supervisor and employee understand the goals and objectives which the employee is expected to attain. This will include a forthright understanding on the part of both parties as to the amount of work and the quality of work, *i.e.*, our standards applied in evaluating each employee. The formal employee performance review program is designed to:

- a. Determine and document for each employee whether that employee is working up to, beyond, or short of hospital standards with reference to productivity and quality of work performed.
- b. Improve each employee's job satisfaction and morale by letting him/her know that a Supervisor is concerned with his/her job progress and personal development.
- c. Serve as a systematic guide for supervisors in planning each employee's further training (planning and goal setting).
- d. Assure considered opinion of an employee's performance rather than snap judgment.
- e. Assist in planning personal moves and placements to best utilize each employee's capabilities.
- f. Assist in determining and recording special talents, skills, and capabilities that might otherwise be unrecognized.
- g. Provide an opportunity for each employee to discuss job problems and interests with his/her supervisor.

The person who directly supervises an employee is expected to evaluate the performance of that employee. The Department Director may also review the evaluation with the Supervisor and/or the individual employee, if applicable. Evaluations are considered delinquent if not completed within thirty (30) days from the due date. Consideration for merit increases, or changes in position (if applicable), will not be granted until the evaluation form has been completed and submitted with the employee's completed annual requirement sheet. It is necessary for a supervisor to keep written records which can be informal, but which record instances to superior or inferior performance and the strong and weak points of the employee so the evaluation will reflect a full period under consideration. Annual presentation of status report on competency of staff (evaluations) will be made to the Board of Trustees by the Vice President of Human Resources at each October Board meeting.

Considerations which should be made in completing these forms are:

1. Rate the employee objectively only on his/her performance during the current rating period.
2. Rate the employee's performance with respect to the job requirements and as comparable to the performance of other employees performing the same work. (Self-evaluation is encouraged).
3. Consider each factor separately.
4. Rate only those areas which apply to this position.
5. In your comments, try to be as specific as possible. Use examples to illustrate.
6. Define any goals you may want the employee to attain. Be as specific as possible.
7. Encourage the employee to add his/her comments.
8. All evaluations are to be either typed or written in ink.

Questions or requests for assistance should be directed to Human Resources.

### **PUBLIC INFORMATION**

#### **Statement of Purpose:**

It is Delta Health System's intent to provide a system to protect the rights of its patients from any unauthorized disclosure of health care information.

#### **Policy:**

No employee may give out information about any patient's condition to anyone without specific authorization. No agent or employee of this facility may disclose health care information about a patient to any person other than the patient without the written authorization of the patient or the patient's legally authorized representative. To do so may involve both employees and the facility in legal action.

All requests for information should be directed to the Chief Executive Officer of Delta Health System. The Chief Executive Officer shall authorize one or more individuals to release patient information to the extent permitted by law. The person authorized to release the information may vary by organizational status, type of information requested, and the origin of request for information. The individuals may include Administrator On-Call, Nursing Supervisor on duty or other individual so designated by the Chief Executive Officer.

### **RELATIVES, HIRING OF**

#### **Statement of Purpose:**

It is the intent of Delta Health System to prevent actual or potential improprieties or conflicts of interest regarding the employment of qualified relatives of employees.

Policy:

For purposes of this policy “relative” is defined as any relationship by blood or marriage. Employment of relatives will be reviewed on a case-by-case basis to ensure that such employment does not involve conflicts of interest or other adverse consequences to business operations. No employee is permitted to work within the “supervision” of a relative if one relative’s work responsibilities, salary, or career progress could be influenced by the other relative.

**RIGHT OF OFFSET**

Statement of Purpose:

To provide a method of recovering monies owed to the facility from departing employees.

Policy:

The facility maintains the right of offset to recover monies owed to the facility by terminating employees. When an employee voluntarily or involuntarily terminates his/her employment, the Human Resources Department will review the personnel file of the departing employee, verify with the Finance Department, and determine if the employee owes the facility any monies. If there is an outstanding debt, the Human Resources Department notifies the employee and the amount will be deducted from the employee’s final check(s) and if need be, arrangements made for future payments within a specific time period. The facility will reserve the right to use outside sources to recover monies owed should problems develop in obtaining repayment.

**SHIFT DIFFERENTIAL**

Statement of Purpose:

As an additional benefit for employees working other than the day shift, a shift differential will be paid for evening and/or night shifts.

Policy:

Many departments operate 24-hours each day, some employees will be scheduled to work evening and/or night shifts. Shift differential will be paid to employees who work 3:00 p.m. to 11:00 p.m. and 11:00 p.m. to 7:00 a.m. Employees working eligible shifts must work four (4) hours into the designated shifts to receive shift differential pay.

**SOLICITATION AND DISTRIBUTION**

Statement of Purpose:

It is Delta Health System’s intent to prevent disruption of health care operations of the hospital, interference with patient care and inconvenience to our patients and their visitors.

Policy:

The following rules will apply to solicitation and distribution of literature on hospital property:

1. No one may solicit or distribute literature on hospital property except in parking lots or the cafeteria, so long as such persons are not disrupting patients, employees, or hospital visitors.
2. Employees may not solicit for any purpose during working time.
3. “Working time” does not include rest breaks and meal periods. “Working time” includes the working time of both the employee doing the solicitation or distribution, and the employee to whom it is directed. If you have any questions as to the meaning of “working time,” please ask your Human Resources representative for clarification.
4. The sale or delivery of merchandise of any kind for commercial or philanthropic purposes other than items acquired by the hospital for its use is prohibited. This includes, but is not limited to Tupperware, Avon, and/or lottery or raffle tickets, including those for charitable causes, unless specifically authorized by Administration.

### **TELEPHONE COURTESY AND USAGE**

#### **Statement of Purpose:**

Employee courtesy in using the telephone is a positive customer relation tool for the community we serve and enhances the work environment.

#### **Policy:**

Employees should remember these basic techniques when using the telephone:

- Answer properly and promptly
- Provide identification by giving name and department
- Give accurate and careful answers
- Transfer calls tactfully
- Always say “please” and “thank you”
- Use a helpful and pleasant tone of voice at all time
- Hang up gently

The facility’s telephone equipment is limited. Personal telephone calls must be kept to an absolute minimum and be limited to calls of an urgent or emergency nature only. Long distance calls must be charged to the employee’s home or personal charge card.

### **TERMINATION OF EMPLOYMENT**

#### **Statement of Purpose:**

To establish a format and procedure for employment termination and the replacement of terminated employees.

Employment with Delta Health System is based upon mutual consent and either the employer or the employee may terminate the employment relationship at any time, for any reason. In order to maintain adequate staffing levels, it is essential that the facility have advance notice of an employee’s desire to terminate his/her employment status.

Procedure:

There are four (4) general categories of terminations.

A. Resignation

An employee who wishes to voluntarily terminate his/her employment should submit a written letter of resignation with an effective date of his/her last day of employment, to his/her immediate Supervisor or Department Director.

1. Staff employees, who are not Supervisors, must give a two (2) week notice of resignation.
2. Supervisors, Managers and Department Directors must give a four (4) week notice of resignation.

Department Director forwards written letter of resignation and a Personnel Action Form (PAF) to the Human Resources Department and a Personnel Action Form (PAF) is initiated for signature. If an employee fails to provide a written resignation, the Director forwards written documentation of the employee's verbal resignation to Human Resources to initiate the PAF and exit interview.

B. Quitting

This situation applies when an employee leaves without notice or less than the required notice period. An employee who is absent for two (2) or more consecutive scheduled work days without notice will be considered to have abandoned his/her job and voluntarily quit.

Quitting may cause the employee's record to include a poor termination report and will negatively affect opportunity for re-employment with Delta Health System. Exceptions to this will be evaluated on a case by case basis.

C. Reduction in Force/Position Elimination

This situation occurs when due to business reasons, the work force is reduced and/or position(s) eliminated.

Employees will be given the following notice periods, indicating their last workday, if their position is affected by a reduction in force and/or the position(s) is eliminated.

- Staff employees with less than one (1) year of service – one (1) week.
- Staff employees with greater than one (1) year of service – two (2) weeks.
- Staff employees with greater than ten (10) years of service – four (4) weeks.
- Supervisors, Managers and Directors – four (4) weeks.
- Supervisors, Managers and Directors with greater than ten (10) years of service – six (6) weeks.

At the discretion of Delta Health System, pay in lieu of working partial or the entire notice period may be offered to the employee(s).

D. Involuntary Termination

This situation exists when a termination for cause is initiated by Delta Health System. The Department Director discusses proposed termination action with the Vice President of Human Resources and appropriate Administrative Council Representative, this action is considered after



proper counseling of employee's actions and/or offense is so serious, immediate termination is warranted.

If approved, Department Director and Vice President of Human Resources meet with employee to discuss termination action. The discussion consists of the reason for the termination decision, employee comments, discussion concerning references and benefits, if applicable, and return of hospital property the employee was assigned.

At the discretion of the Vice President of Human Resources and/or Department Director notification of security and presence of an officer might be required in the respective area in which a termination interview is being conducted. The Human Resources Department will notify the Director of Security if their services are needed. Once the interview is concluded, the Security Officer will accompany the employee and the Department Director to his/her work area and provide the employee time to obtain all of his/her personal belongings. In the best interest of the facility and employees, termination interviews and departures should be held at times which least interfere with co-workers, patients and visitors.

Employees who resign, or are discharged, will be paid on the next regular payday. Employee attendance sheets and all other information concerning the termination of the employee will be forwarded to the Human Resources Department for permanent filing and retention.

The Director of Information Services or the Coordinator will be notified in the following manners upon the suspension, resignation, or termination of an employee so that he/she may be removed from the system or made inactive:

Suspension:

The employee will be inactive for as long as he/she is suspended.

Resignation:

The employee will become inactive upon the last day of the pay period in which he/she resigned.

Discharge for Cause:

The employee will be removed from the system immediately.

Replacement:

To replace an employee, the Department Director completes and submits a Personnel Action Form with the "Employment Requisition" section completed and submits for administrative approval. Upon receipt of administrative approval, the position is posted as outlined in the Job Vacancy Announcement/Transfer Policy.

## **THEFT**

Statement of Purpose:

Delta Health System strives to maintain the security of its material resources for the benefit of all patients, employees, staff and visitors.

Policy:

The cooperation of all employees is essential if the problem of theft is to be minimized. Supplies and equipment should be stored in approved areas and maximum-security measures observed. Employees should not bring excessive amounts of money or valuables to work. The facility cannot be responsible for loss or theft of personal items. Facility property may not be removed from the premises except by written authorization in advance from the Chief Executive Officer or his/her designee.

Of necessity, the facility is open 24 hours a day. Employees are urged to be alert to the entry of unauthorized persons in any areas. Employees who see someone who does not appear to be an employee, or even an employee who might be outside his/her regular work area, should offer assistance in directing the employee or non-employee to his/her destination.

### **TIME RECORDS**

#### **Statement of Purpose:**

To provide a systemic method of recording time worked for accurate and equitable compensation to our employees. The facility provides work under the forty (40) hour work week in which overtime is paid at time and a half for all productive hours over 40 hours. The designated workweek begins on a Sunday and concludes on the following Sunday.

#### **Policy:**

Employees must record all time worked through the time and attendance system each day, week, and bi-weekly pay period depending on whether hourly or salaried. Hourly employees must use their identification badge to properly clock in at the beginning and end of each shift. Employees must use their own badge and time sheet to record work time and are not permitted to record time in or out for another employee. Exempt employees do not have to complete a timesheet.

Managers should print all time sheets for employees in their department(s) so the employee can review and verify that the payroll information is accurate for submission to the Payroll Department. Once the paycheck advice is received and an error is noted, the following procedure is to be used to correct the error:

If the Department Director, Human Resources, or Payroll Departments is at fault, a manual check will be issued, but if the employee is at fault, the correction will be included on the next paycheck.

### **UNEMPLOYMENT COMPENSATION**

Employees, who qualify under state law, are covered by unemployment insurance that is paid for by the facility. Benefits are subject to change in accordance with Mississippi State law.

## VOTING TIME

Statement of Purpose:

It is Delta Health System's intent to provide a policy that allows employees to have the opportunity to discharge his/her civic duty.

Policy:

If an employee is unable to vote before or after regular working hours, the employee will normally be allowed reasonable time off to discharge his/her civic duty. The employee must, however, schedule this time off with his/her Department Director, realizing that in all circumstances the needs of the patients come first during work hours. The employee must clock out while away from the hospital for the purpose of voting, or the employee may take PLT.

## COMPETENCY VALIDATION

Statement of Purpose:

To provide a framework for assuring that hospital clinical staff is knowledgeable about key equipment and procedures in their scope of work.

Policy:

All employees must be competent to fulfill their assigned responsibilities. The evaluation of staff competency and the assignment of job responsibilities are performed by personnel who have the clinical and/or managerial knowledge and experience necessary to competently make these decisions. At no time during employment at Delta Health System, shall any staff member perform any skill or function without adequate preparation.

**Initial competency is established through the following:**

- Completion of an application documenting appropriate background and experience.
- Completion of an interview with the appropriate department director.
- Satisfactory background and reference checks.
- Verification of license and/or certification (as applicable).
- Completion of an orientation program, including appropriate post tests.
- Demonstration of core competency by the end of the introductory period.

**The department director shall review the department's competency program annually and adjust the required ongoing competencies based on the following:**

- Patient population, including age considerations.

- High volume, high risk, low volume/high risk or problem prone procedures.
- Findings from performance improvement activities, needs analysis and/or infection control and safety activities.
- Changing / new technology.
- Revision of existing policies / implementation of new policy and procedures.

**Each employee's competency shall be assessed annually and include the following:**

- Completion of all mandatory in-services and continuing education activities.
- Defined competencies for each unit based on high volume, high risk, low volume/high risk or problem-prone responsibilities.
- Competency testing, demonstration of competency and/or direct observation of specific tasks.

**Documentation of Competency:**

- Initial and ongoing/annual competencies will be validated and documented using a combination of paper documents and an electronic e-learning system.

**CONTINUING EDUCATION/TRAINING**

**Statement of Purpose:**

The Continuing Education/Training Program is designed to outline the procedures for providing approved education and training to our employees.

**Policy:**

Delta Health System with administration approval will pay for the following educational opportunities for employees:

- Professional workshops, seminars, and Cerner training that will benefit the facility and enhance the employee's job performance.
- Conventions, specialized education, school and/or training. These types of education/training require a Continuing EDUCATIONAL Agreement between the employee and Delta Health System.

Example: Nuclear Medicine, Ultrasound, Hyperbaric Training, and approved national professional conventions.

Employee's attendance at Delta Health System sponsored education/training event will be paid as "education" time and related fees registration, travel, lodging and meals. Non-exempt employees are paid for all hours in attendance at the workshop or seminar, including travel time required for

driving to and from the event. Exempt employees are paid at their normal salary. Employees who attend events on their own can request the usage of their PLT account or days without pay.

Certifications – The employee should either request PLT or time off without pay to attend certification classes with his/her immediate supervisor. The employee will pay for fees, books, or other expenses related to obtaining recognized certifications. Employees will be responsible for maintaining the approved certification and all related expenses associated with recertification.

If management mandates a certain position should have a specific certification that was not previously required for the position, the facility will bear the expense of the current employee(s) education/training, which includes the use of “education” time during their attendance at the certification class. This expense is related to the employee’s first certification attempt and if not successful the employee would be responsible for the expenses related to future classes. A specific time frame will be set for the employees to obtain certification by management, and if not obtained the employee would be eligible to transfer to other units for which he/she is qualified or if a position were not available, the employee would be terminated.

#### Procedure:

1. The Department Director completes and submits an Education/Training Request form and if necessary a Continuing Education/Training Agreement, to the appropriate Administrative Council Member for approval. All trip requests that exceed \$1,000.00 must have approval of the Chief Executive Officer.
2. If approved, the Department Director is responsible for making the necessary travel arrangements. Air travel must be made at the lowest rates possible and information concerning the facilities’ travel agency can be obtained from Administration.
3. Expenses for mileage, meals and tip allowances are reimbursed based on federal (per diem) guidelines for the geographic area of travel. This information can be obtained on Icare.
4. All requests for a travel advance must be approved and submitted to Accounts Payable a minimum of seven days prior to departure. All expense reports are to be completed within seven days of return.

#### Summary:

It is the Department Director’s responsibility to facilitate the request for education and training and if approved, coordinate travel arrangements for attendance.

## **LICENSURE COMPLIANCE**

#### Statement of Purpose:

To assure licensed, certified, and registered personnel maintain current status as required by their position description and legislative or regulatory authorities.

Policy:

Individuals employed for jobs requiring licensure/registration are required as a condition of employment, to comply with appropriate guidelines for their respective positions, as imposed by the legislative or regulatory authorities. Each employee is personally responsible for the timely maintenance of his/her license, registration, certification, etc. and its regular renewal, as necessary.

Recent graduates employed prior to successful completion of licensing requirements will remain on introductory status until all requirements have been fulfilled and may be terminated or placed in less responsible positions should they fail to obtain licensure. Likewise, employees who allow their licenses, registration or certification to lapse may be removed from the work schedule and/or terminated from employment.

The established procedure to assure policy is as follows:

1. During the Human Resources Department pre-employment processing, the employee is to provide official documentation which reflects current status of registry, certification, or licensure. A copy of this documentation will be maintained in the employee's personnel file in the Human Resources Department.
2. Employees are required to maintain and provide updated and current documentation of licensure, certifications, or registry as required by their position described by their Department Director.
3. The Department Director copies the employee's current licensure, certification, or registry document and forwards to the Human Resources Department for updating of the employee's personnel file.
4. Employees who fail to maintain current licensure, certification, or registry requirements for their respective position will be suspended for up to thirty (30) days to meet requirements or terminated from their position.

## **ORIENTATION AND EDUCATION PROGRAM**

Statement of Purpose:

Delta Health System conducts a general orientation program for all new employees, volunteers, students, and contract personnel. This program is required by for all as an introduction to the work place environment.

Policy:

Delta Health System will provide the New Employee Orientation program for each new employee, volunteer, student, and contract personnel. Information included in the program provides an introduction of the organization, philosophy, mission and vision of the hospital. Individuals will be informed about the rules, regulations and policies that will enable them to understand and comply with the policies and procedures of the hospital.

- Information presented during new employee orientation will relate to, but not be limited to, standards of behavior, customer service, patient satisfaction, HCAHPS, performance improvement, quality indicators, employee health, employee benefits/handbook, environment of care, corporate

compliance, sexual harassment, patient rights, confidentiality, HIPAA, grievances, general safety, fire safety, electrical safety, ergonomics, back safety, hazard communication, security and workplace violence, reporting incidents, emergency preparedness, and infection control/hand hygiene.

- Information presented during clinical hospital orientation will relate to, but not be limited to, the same as general hospital orientation plus, informed consent, advanced directives, EMTALA, developmentally appropriate care, cultural competency and providing competent care, health care associated infections, blood-borne pathogens, standard/airborne/contact/droplet precautions, PPE, restraints/seclusion, and patient abuse/assault/neglect.
- Computer training and Nursing Orientation (when applicable) are provided after new employee orientation.
- Following New Employee Orientation, it is the responsibility of each department director to schedule each employee to an orientation period on the unit and/or department with a preceptor.
- Mentoring of all new employees is encouraged as the employee continues his/her entry into each working environment.
- Paperwork for each new employee must be completed and on file in the Human Resource Department before their orientation can begin.
- New Employee Orientation is scheduled as soon as the new employee is cleared for hire.
- Coordinating the New Employee Orientation program will be the responsibility of the Human Resources Department.
- Documentation related to an employee's participation at New Employee Orientation is the responsibility of the Human Resource Department and will be maintained in the employee's personnel file.

### Departmental Orientation

- Following New Employee Orientation, each new employee will participate in a departmental orientation. Departmental orientation is the direct responsibility of the department directors and will begin with the first day of employment.

- The content of the departmental orientation will be determined by the respective department directors. Assistance in planning and organizing departmental orientation is available from the Human Resource Department. It shall be the responsibility of the Human Resource Department to maintain a liaison with each department in maintaining compliance with this policy.
- Copies of documentation related to departmental orientation are to be furnished to the Human Resources Department by the department director within 30 days after employment and maintained in the employee's personnel file.

#### Orientation of Volunteers

- Orientation of Volunteers is handled through the Human Resources Department.

#### Student Orientation

- Students assigned to Delta Health System for clinical rotation will be provided with an orientation to the facility. New students will be scheduled for an orientation class which includes, but is not limited to, the following: confidentiality, service, appropriate dress, guest relations, safety and security, infection control, compliance, age specifics, and back safety/ergonomics. Request for student orientation will be approved by the Human Resource Department.
- The instructor of the respective school or university will accompany all students during the orientation process. The department director of the unit in which the student is assigned will be responsible for orientating the student to safety policies and other applicable policies and procedures on the unit.

#### Resources

- Educational programs are presented in compliance with regulatory initiatives. Mandatory in-services are presented in a variety of learning patterns.



## **BEREAVEMENT LEAVE**

### **Statement of Purpose:**

Delta Health System will provide regular full time employees with compensation during the death of an immediate family member.

### **Policy:**

Regular full time employees are eligible for bereavement leave after 90 days of continuous employment. Eligible employees can receive approval for up to 24 hours (inclusive of the day of the funeral) depending on the employee's current work schedule. Employees not eligible for bereavement leave may be given time off without pay.

Immediate family members are defined as employee's parents, stepparents, grandparents, brother, stepbrother, sister, stepsister, spouse, children, stepchildren and parents in law. In the event of the death of an immediate family member, the employee must notify his/her Department Director and discuss dates the employee will be out and the expected return date. It is the employee's responsibility to complete the leave request form and give to their immediate supervisor. The Department Director will approve payment of bereavement leave on the employee's time records provided to payroll. The Department Director can ask for a copy of the deceased family member's obituary, if necessary.

## **JURY DUTY**

### **Statement of Purpose:**

To establish an overall policy and procedure guideline to accommodate our employees when summoned to fulfill their civic responsibility for jury duty. This policy outlines the employee's responsibilities and the facility's commitment to the employee during this period.

### **Policy:**

Regular full time non-exempt employees will be paid their base hourly rate and exempt employees will receive their regular salaries for jury duty service in exchange for the earnings paid by the court up to a maximum of 30 work days (240 hours).

Part-time and PRN employees are not eligible for jury duty pay.

In order for an employee not to experience a loss in earnings during jury duty service, the employee must do the following:

1. Employee notifies his/her immediate supervisor the next workday following receipt of Jury Summons. If the employee isn't scheduled to work on the next workday, then the employee should contact the supervisor by telephone to ensure prompt notification. In addition, the employee must present the Jury Summons to the Human Resources Department to ensure payment.
2. While serving on jury duty, if an employee is released for the day before half of the regular day shift is over for the specific department/unit, the employee will contact his/her supervisor to notify the supervisor he/she is available for work (if needed) for the remainder of the day shift.

3. Upon notification and completion of jury duty, the employee is required to notify his/her supervisor of his/her immediate availability for work and the employee is to present copies of documents of jury duty release for processing payment of jury duty pay to the Human Resources Department.
4. The employee is required to submit all payment checks from the court to the Human Resources Department immediately upon receipt. If any employee has not submitted the court checks within three weeks from release of jury duty, payroll deductions will be started immediately (payroll deduction authorization will be part of the payment of jury duty pay to ensure receipt of all court checks).

### **LEAVE OF ABSENCE (LOA)**

#### **Statement of Purpose:**

Delta Health System provides four types of leaves of absence: Family and Medical Leave, General Medical Leave, Military Leave and Personal Leave.

#### **Policy:**

Employees are required to keep management informed regarding the employee's need for and return from any LOA. If, for any reason (including illness, injury, pregnancy, or any other reason) an employee is absent from work, the employee must obtain written administrative approval for the absence, or the facility will consider the employee to have abandoned his/her job. Requests for LOA should be made as soon as the employee becomes aware of the need for the LOA, preferably 30 days in advance of the requested start date of the LOA.

All requests for a LOA must be submitted in writing to the employee's Department Director. The Department Director will immediately notify the Human Resources Department to verify eligibility for LOA and schedule an appointment to discuss the request between the employee, Department Director and Human Resources Benefits Coordinator. In case of an emergency, where it is not possible to apply for an LOA before the absence begins, employees must request the LOA as soon as possible within 24 hours of their absence. The Department Director will then notify the Human Resources Benefits Coordinator. It is essential that every employee comply with these procedures to facilitate the request and if approved, allow for proper manpower staffing to be obtained or adjusted during the LOA period.

If an employee does not know how long an illness or other absence may last, the employee must request the LOA for a specific period of time. If the request is approved, it will be approved only for a specific period of time. If further leave becomes necessary, the employee must request and receive approval for an extension.

If circumstances make a written request for LOA impossible, employees may orally request a LOA. However, to avoid any confusion or misunderstanding, no leave will be considered to have been granted for more than three (3) days based on an oral request. In addition, employees are expected to make arrangements for LOA personally, unless the employee is physically unable to do so.

#### **Reporting Requirements:**

An employee on an approved LOA is required to keep his/her Department Director and the Human Resources Department advised of the employee's status and intent to return to work on a weekly, biweekly or monthly basis depending on the length of the LOA. Failure to do so may be considered a resignation from employment.

### Scheduling:

Based upon the nature and length of the absence, the facility may require an employee submit a fitness-for-duty medical release of the employee's ability to perform the duties of his/her position before returning to work.

Written verification may be required from the employee for an absence. In addition, any request for a LOA one (1) week or more must be accompanied by appropriate written documentation. For absences based upon the employee's own illness or injury, or the illness or injury of a family member, the written verification is a physician's diagnosis certifying the condition for the LOA. Failure to submit such documentation will result in denial of the LOA request or in the absence of being counted as unexcused and being treated accordingly. Employees may be required to submit re-verification for an absence depending on the circumstances involved.

### Benefits and Reinstatement:

Depending on the nature of the request for leave of absence, benefits may be affected by a LOA, and prior to taking a leave of absence the employee needs to determine from the Human Resources Department whether benefits will be affected. An example would be health benefits during a LOA granted for personal leave. Once again, depending upon the nature of the LOA which has been approved, the facility cannot guarantee re-employment upon return from a LOA, except those which qualify for and are approved under the Family Medical Leave Act. Whenever circumstances permit, an employee needs to check with the Human Resources Department for clarification of any questions which may arise concerning the continuation of benefits and reinstatement to the same or similar position upon returning from a LOA.

### Family and Medical Leave Act (FMLA)

Employee eligibility: (1) Employees who have a cumulative (not necessarily continuous) 12 months of prior service; or (2) employees who have worked at least 1,250 hours during the 12 months immediately preceding the date on which the FMLA would commence.

Types of FMLA: All eligible employees are permitted a total of 12 work weeks of unpaid leave during any 12-month period for one or more of the following events:

- (1) The birth of a child and in order to care for the child;
- (2) The placement of a child with the employee for adoption or foster care;
- (3) In order to care for the spouse, son, daughter, or parent of the employee, if such person has a serious medical condition;
- (4) To care for a child over the age of 18 years of age who has a serious health condition and is incapable of self care because of mental or physical disability; and
- (5) Because of a serious health condition that makes the employee unable to perform the functions of his/her position.

A "serious health condition" is an illness, injury, impairment, or physical or mental condition, which involves:

- (1) inpatient care in a hospital; or
- (2) continuing treatment by a healthcare provider for any period of time requiring an absence from work; or

- (3) a chronic serious health condition which requires periodic visits to a healthcare provider over an extended period of time which may cause episodes of incapacity such as asthma, diabetes, epilepsy; or
- (4) a period of incapacity for a long-term or permanent condition for which treatment may not be effective such as severe stroke or terminal stages of a disease; or
- (5) any absence for multiple treatments by a healthcare provider for restorative surgery or any condition which would likely result in a period of incapacity if untreated such as cancer (chemotherapy), severe arthritis (physical therapy), kidney disease (dialysis) or for prenatal care.

FMLA does not include routine physical, eye, or dental examinations. In addition, the taking of over-the-counter medication such as aspirin, antihistamines or salves; or bed rest, drinking fluids, exercise, and other similar activity which may be initiated without a visit to a healthcare provider is not by itself sufficient to constitute a regimen of continuing treatment to allow the employee to take LOA under this policy. Therefore, unless complications arise, the following are not considered “serious health conditions: for purposes of this policy: the common cold, earache, upset stomach, minor ulcer, headache other than migraine, and routine dental or orthodontic problems.

#### FMLA Duration:

Under FMLA, eligible employees are entitled to a total of 12 weeks of leave during any “rolling” 12-month period (measured backward from the date the FMLA leave sought by the employee would begin). Example: An employee taking six (6) weeks FMLA leave on January 5, 1999, and an additional six (6) week leave on March 1, 1999, is not entitled to additional FMLA leave until January 5, 2000, at which time the employee is eligible to request an additional six (6) week’s leave.

Married employee couples who both work for Delta Health System and are both eligible for FMLA are eligible for a combined total of twelve (12) weeks of FMLA Parental Leave. An employee’s entitlement for Parental Leave for the birth or placement for adoption or foster care expires at the end of the 12-month period beginning on the date of the birth, placement, or adoption. Any Parental Leave must be conducted within this 12-month period.

When medically necessary, Serious Family Illness Leave or Serious Personal Illness Leave may be taken intermittently, in separate blocks of time (no less than one hour), or on the basis of a “reduce leave schedule” under which an employee’s usual working hours each day or each week are reduced.

#### Request and Approval:

Employees who decide to apply for FMLA should obtain a FMLA packet from the Human Resources Department which includes the Request for Leave of Absence form, Certification of Healthcare Provider form and pertinent information related to FMLA. Employee requests for FMLA should be submitted on the Request for Leave of Absence form to the employee’s Department Director. Employees must provide the facility with at least thirty (30) calendar days notice of the need for FMLA leave whenever the need for the leave is foreseeable (such as the expected birth or placement for adoption or for planned medical treatment). Requests for FMLA should be accompanied with documentation such as a Certification of Healthcare Provider form which must be submitted within fifteen (15) calendar days of the request or as soon as possible. Failure to provide this required medical certification may result in denial of leave or denial of continuation of leave until the certification is provided and/or automatic re-designation of the leave as other than FMLA.

Management sometimes may know the reason for the request, but may not be able to confirm that the leave qualifies for FMLA Parental, Serious Family Illness, or Serious Personal Illness Leave, or management may have requested a Certification of Healthcare Provider form that has not been received, or the parties are in the process of obtaining a second or third medical opinion. In these cases, management may preliminary designate the leave as FMLA. Upon receipt of the required information from the employee, or of a Certification of Healthcare Provider form confirming the leave qualifies under one of the FMLA provisions, the preliminary designation will become final. If the employee fails to provide information necessary to confirm that absences are eligible for FMLA leave, fails to provide the completed Certification of Healthcare Provider form in a timely manner, or if the documentation does not confirm the absences are eligible for FMLA leave, the designation of the absence(s) as preliminary eligible for FMLA is automatically withdrawn. The Human Resources Department will notify the employee of the withdrawal, but the employee should understand that it is his/her responsibility to provide the appropriate information and/or medical certification within fifteen (15) calendar days, or provide an explanation and verification as to why this time frame is impractical.

When planning medical treatment, employees should consult with their Department Directors and attempt to schedule the treatment so as to minimize the impact of the employee's absence on the department's operations. In cases where the need for FMLA cannot be anticipated thirty (30) days in advance, the employee must give notice of the need for FMLA as soon as possible (at least one or two business days) after the employee learns of the need for FMLA. Failure to give proper advance notice of the need for FMLA when the need for such leave is foreseeable may result in denial of the leave until thirty (30) days after such notice is provided.

In the case of Serious Personal Illness or Serious Family Illness, the facility may request medical re-certification every thirty (30) days, or whenever the employee requests an extension of FMLA. Circumstances described in the original medical certification may change significantly (such as the duration or nature of the illness or complications), or the facility might receive information which casts doubt on the continuing validity of the medical certification.

If the facility has reason to question the validity of a medical certification provided by the employee's healthcare provider, the facility may require the employee to obtain a second opinion, at the facility expense, from a healthcare provider designated by the facility. In the event, the second opinion differs from the first; the facility may require the employee to obtain a third and final opinion, again at the facility's expense, from a healthcare provider jointly approved by the facility and the employee.

Timely requests for FMLA from eligible employees will be granted as required by the state and federal law.

## **I. GENERAL MEDICAL LEAVE OF ABSENCE (INCLUDING PREGNANCY AND ON-THE-JOB INJURIES OR ILLNESSES)**

### **A. Eligibility:**

Full-time employees (regularly scheduled for 40 hours a week) are eligible for unpaid General Medical Leave. Exceptions to this full-time employment requirement may be made where required by law to accommodate pregnancy related disabilities, on-the-job injuries or illnesses, or to accommodate an employee with a disability under the Americans with Disabilities Act (ADA).

An employee may request a General Medical LOA when he/she is unable to work due to a medical condition and has exhausted (or is expected to exhaust) all available Paid Leave Time (PLT) benefits and FMLA time, yet is still unable to return to work. General Medical LOA is leave that does not qualify as FMLA Serious Personal Illness Leave, as described above, or either because the medical condition is not a “serious health condition,” or because the employee is not eligible for or has exhausted all FMLA leave.

B. Duration:

General Medical LOA, if approved, is granted only for the period of inability to work due to a medical condition, not to exceed three (3) months.

C. Request and Approval:

Requests for General Medical LOA should be submitted to an employee’s Department Director in the same procedure as for requests for FMLA discussed above.

Requests for General Medical LOA must be accompanied by a Certification of Healthcare Provider form obtained from the Human Resources Department.

## **II. BENEFIT PARTICIPATION WHILE ON FMLA OR GENERAL MEDICAL LOA**

A. FMLA:

An employee on approved FMLA may continue group health insurance coverages during the LOA by paying the employee’s normal biweekly contribution rate of the cost of such coverages during the LOA on or before the date when payroll deductions for such costs would normally be made. Failure to pay the employee’s portion of the premium when due will result in elimination of the coverage after thirty (30) days.

An employee who fails to return from FMLA leave may be required to reimburse the facility for the facility’s cost of maintaining group health insurance coverages for the employee and/or the employee’s dependents while on FMLA leave. The employee will be relieved of this obligation, if the employee’s failure to return to work is due to reasons beyond the employee’s control, such as the continuation, reoccurrence or onset of a serious health condition of the employee or the employee’s spouse, parent or child.

B. General Medical Leave:

An employee on General Medical LOA may continue group insurance coverage during the LOA by making prior arrangements to pay the full premiums for coverage. Failure to pay the premiums when due will result in elimination of coverage.

C. Use of Available Paid Leave Time during FMLA or General LOA:

Employees will be required to use their Paid Leave Time (PLT) in amounts equal to their regular work schedule during FMLA or General Medical LOA. When all PLT hours have been exhausted, employees will then be placed in an unpaid LOA status, in which PLT benefits are not earned. When the eligible employee returns to work, the earning of PLT hours is resumed.

### **III. REINSTATEMENT FOLLOWING LEAVE**

#### **A. FMLA Leave:**

Request for Reinstatement - An employee returning from FMLA Leave for his/her own serious health condition should notify his/her supervisor upon being released to return to work by the employee's healthcare provider. The employee is required to provide documentation from the healthcare provider confirming the employee's fitness to return to his/her normal duties. Failure to provide a requested return to work release may result in denial of reinstatement until the employee satisfies this request. An employee desiring to return from FMLA leave other than Serious Personal Illness prior to the date was due to expire, should contact his/her Department Director to schedule the effective date of his/her return to work.

An employee returning from FMLA leave will normally be reinstated to the position held by the employee at the time the leave commenced or to an equivalent position. However, an employee returning from FMLA leave will have no greater right to employment or employment in a specific position than he/she would have had in the absence of the leave.

#### **B. General Medical Leave:**

An employee seeking a return from General Medical LOA should notify the employee's supervisor of availability to return to work immediately upon being released to return to work by the employee's healthcare provider. The employee will also provide the organization with a medical release from the healthcare provider confirming the employee's fitness to return to his/her normal duties (or any limitations if the employee's activities are limited.)

The facility cannot guarantee to hold a position open for an employee who is on a General Medical LOA. An employee seeking reinstatement from such leave may be offered his/her former position if it is available. If the employee's prior position is unavailable, the employee may be offered any available position for which the facility concludes he/she is qualified, at the rate of pay for the new position. In the event the employee declines an offer of reinstatement to any full, part time or prn position or if there are no such positions available upon the employee's return to work, the employee's employment will be terminated.

### **IV. PAY AND BENEFITS AT REINSTATEMENT**

#### **A. FMLA:**

Employees returning from FMLA leave will have their benefits reinstated to the same levels that existed at the time the leave commenced. Exceptions would be for any PLT benefits used during the leave period and changes in benefits which took place during the leave at the employee selection due to annual election or family status change. Changes in benefits, which would have occurred had the employee not taken leave, will also apply. An employee's pay rate will also be adjusted to reflect any unconditional or across-the-board pay increases granted during the period of LOA.

#### **B. General Medical LOA:**

Employees returning from General Medical LOA will have their benefits reinstated to the same levels as existed at the time the leave commenced (except any paid PLT benefits used during the leave), so long as such reinstatement is consistent with the employment status to which the employee returns. If an employee's pay rate upon return from General Medical LOA is different from his/her pay rate prior to LOA, PLT benefits will be paid at the rate of pay in effect at the time the benefits are requested and used.

## V. MILITARY LEAVE OF ABSENCE (LOA)

Employees who must be absent for active or inactive military training duty (e.g., Reserves or National Guard summer camps, annual cruises, weekend drills, attendance at military schools) will be granted, upon receipt of military orders, a Military LOA without pay. An employee may use available PLT benefits for annual military training obligations upon written request.

- A. Eligibility:  
All employees who engage in active or inactive military training duty in the armed forces of the United States (including National Guard).
- B. Duration:  
Military LOA will be granted for the period of training.
- C. Request and Approval:  
Request for Military LOA should be made immediately upon receipt of official orders from the armed forces of the United States or the National Guard, enabling the facility to adjust the work schedule accordingly.
- D. Reinstatement:  
Reinstatement from Military LOA shall be granted in accordance with state and federal law
- E. Benefits Reinstatement:  
Employee's returning from Military LOA will have their benefits reinstated as required by state and federal law.

## VI. PERSONAL LEAVE OF ABSENCE (LOA)

A Personal LOA without pay may be granted for a variety of reasons, although such LOAs are not routinely granted. A Department Director, with Administrative Approval, may allow an employee Personal LOA in situations, which justify the granting of such leave,

- A. Eligibility:  
An approved Personal LOA may be granted to regular full and part time employees with six (6) months of continuous service.
- B. Duration:  
Not to exceed three (3) months.
- C. Request and Approval:  
Employees should submit requests for Personal LOA at least thirty (30) days in advance of the need for the LOA, whenever the need for Personal LOA is foreseeable, or as much in advance as possible, under the circumstances.



## PAID LEAVE TIME PROGRAM

### Statement of Purpose:

Delta Health System has established a “Paid Leave Time Program” which provides each regular full-time and part-time employee a prescribed number of days off with pay each year. Its purpose is to:

- Establish a standard equitable program that recognizes all days off equally.
- Encourage the planning and predictability of time off.
- Permit employees the greatest flexibility in using paid leave time.
- Provide long-term illness benefit.

### Policy:

Delta Health System’s PLT program is a flexible plan that eliminates distinction between sick, holiday, vacation, and other elective and non-elective approved absences by combining these days into one plan, which grants leave time to employees at their regular base rate of pay.

Delta Health System’s PLT program benefits are designed for:

- Vacation
- Holidays
- Minor Illness
- Family Emergencies
- Religious Observance
- Preventive Health/Dental Care
- Personal Business
- Major Illness

Note: Bereavement benefits are covered under a separate policy.

### A. Eligibility

1. Full-time Regular Employees  
Full-time employees working eighty (80) hours or more in a two-week period (bi-weekly) shall be eligible to earn PLT in accordance with the accompanying schedule.
2. Part-time Regular and PRN Employees  
Part-time and PRN employees are not eligible to participate in the PLT program.

### B. PLT Benefit

1. The amount of PLT an employee can accumulate in any one calendar year is based on the following:
  - a. Job status (regular full or part-time).
  - b. Length of service as determined by the anniversary date.
2. Employees will be granted increasing amounts of PLT based on the number of benefit eligibility years of continuous service completed. The maximum amount of PLT that can be earned in one year is indicated by the accompanying schedule.

#### Regular Full Time

0-15 years	6.46/hrs ppd
15-25 years	8.00/hrs ppd
25+ years	9.54/hrs ppd

Department Directors

0-15 years	8.00/hrs ppd
15+ years	9.54/hrs ppd

Maximum PLT accumulation is 480 hours. Any unused PLT hours over the 480 hours maximum will be forfeited. PLT is designated to be used by Delta Health System's employees for the purposes for which it is provided. Employee may cash out PLT hours one time a year. (refer to policy HR.091 for details)

C. General Guidelines for PLT

1. Paid Leave Time (PLT)

- a. PLT benefits may be used after three (3) months of eligible employment.<sup>1</sup> The schedule of annual PLT earned each year based on length of service is outlined above in Section III, Part B.2.
- b. PLT begins the pay period after the date of employment/eligibility for regular full-time employees; however it may not be used until completion of three (3) consecutive months of employment in a benefits eligible status. PLT benefits do not accrue when an employee is in a non-pay status.
- c. PLT hours can be taken in units of a half or a full shift. Under certain circumstances such as emergencies or illness, employees may be allowed to use PLT in increments of one hour, with the approval of the Department Director/designee.
  - i. In the event an employee is authorized to be sent home due to illness or injury, PLT can be used for the balance of that day if PLT is available.
  - ii. The actual PLT hours taken must be recorded on the employee's time card.
  - iii. PLT hours shall not exceed the equivalent of the employee's regular work scheduled in any one payroll period.
  - iv. Upon termination for any reason set forth in the Human Resources Policy and Procedure Manual, an employee loses all PLT hours.
- d. PLT must, except in unusual circumstances such as emergency or illness, be requested in writing in advance of the time off desired and approved by the immediate Supervisor or Department Director.
  - i. Advance written notice of PLT shall be determined by departmental policy, but shall not be less than two (2) weeks.
  - ii. The Department Director maintains the right to approve/disapprove all requests for PLT in accordance with the needs of the department and staffing requirements. Whenever possible, PLT will be scheduled in conjunction with seniority and desires of the employee. When requests conflict, the Department Director shall make the final determination.
  - iii. The Department Director may disapprove a request for PLT if staffing or work requirements cannot be arranged if sufficient advance notice is not given. In rare circumstances, a previously approved request may also be denied.

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<sup>1</sup>Department Directors can access their PLT immediately, provided there is PLT available.

- iv. In cases involving illness/emergency absence, employees requiring PLT without prior approval must notify their immediate Supervisor and/or Department Director in conjunction with department policy, which shall be no less than **two hours** before the start of their designated work shift. This advance notice enables the Supervisor/Department Director to arrange for replacement personnel if necessary.
  - v. When PLT is requested without prior approval due to emergency or illness, a specific reason and expected length of absence must be stated and available PLT used.
  - vi. Failure to call or failure to receive approval may result in an unpaid absence. Such absences may be cause for disciplinary action.
  - vii. If under a physician's care, the physicians' written authorization to resume full and regular duties must be given to the immediate Supervisor or Department Director.
  - viii. PLT may not be used for lost time due to tardiness.
  - ix. At the discretion of hospital administration, PLT may be used to supplement hours due to reduced staffing levels during periods of decreased workload.
  - x. Employees are encouraged to use their PLT each year for rest and relaxation. Upon appropriate Department Director approval, the employee may use any amount of earned benefit time in any given calendar year.
- e. Termination/Retirement
- i. Employees who terminate with less than three (3) months of continuous service have no PLT benefits.
  - ii. Hourly Employees who resign with three (3) or more months of continuous service are eligible for PLT payout, provided that at least eighty (80) hours written notice of resignation was given and the employee serves eighty (80) continuous hours of service. Exempt employees who resign with three (3) or more months of continuous service are required to work out a 4 week notice to be eligible for PLT payout. PLT cannot be used in lieu of notice.
  - iii. Employees who have used more PLT than they have earned shall have their terminal pay reduced by the amount of unearned PLT taken.
  - iv. Employees who are terminated are not entitled to PLT hours.

Leave Request Form:

It is the employees' responsibility to complete the leave request form and give it to their immediate Supervisor. The immediate Supervisor will approve or disapprove the request and advise the employee of the decision. All PLT requests are subject to staffing requirements and approval of the immediate Supervisor.

Summary:

This policy is part of the Human Resources Policy and Procedure Manual and questions concerning the administration of this benefit program should be directed to the Human Resources Department.

## **PERSONAL STATUS CHANGES**

### **Statement of Purpose:**

The federal Consolidated Omnibus Budget Reconciliation Act (COBRA) gives employees and their qualified beneficiaries the opportunity to continue health insurance coverage when a “qualifying event” would normally result in the loss of eligibility.

### **Policy:**

Each employee must notify the Human Resources Department within 30 days of a qualifying event which alters his/her family situation.

Some common qualifying events are the birth or adoption of a child; resignation; termination of employment; death of an employee; a reduction in an employee's hours or a leave of absence; an employee's divorce or legal separation; and a dependent child who no longer meets eligibility requirements.

Under COBRA, the employee or beneficiary pays the full cost of coverage. Delta Health System provides each eligible employee with a written notice which contains important information about the employee's rights and obligations.

## **RECOGNITION OF SERVICE**

### **Statement of Purpose:**

It is Delta Health System’s intent to recognize employee who have maintained a continuous period of employment with Delta Health System by presenting him/her with a service pin.

### **Policy:**

Service pins signifying completion of five, ten, fifteen, twenty, twenty-five, thirty, thirty-five and forty years of continuous service are presented to employees each year.

**EMPLOYEE ACKNOWLEDGMENT FORM**

The employee handbook describes important information about Delta Health System. I understand that I should consult the Vice President of Human Resources regarding any questions not answered in the handbook.

I have entered into my employment relationship with Delta Health System voluntarily and acknowledge that there is no specified length of employment. Accordingly, either I or Delta Health System can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I also understand that the policies and procedures contained herein are subject to change, except to Delta Health System's policy of employment at will. I understand that revised information may supersede, modify, or eliminate existing policies. I understand that it is my responsibility to read and comply with the policies contained in this handbook and any revisions made to it.

I further acknowledge and agree that within ten (10) days of the date of my receipt to read and gain an understanding of the harassment policy and its reporting requirements contained within the employment handbook. I acknowledge that should I have questions, or if I believe that I have been harassed, that I must contact my Supervisor, Department Director, Vice President of Human Resources, or Chief Executive Officer. I agree to abide by this policy with complete understanding that if I fail to do so; it may lead to disciplinary actions, up to and including termination.

I understand that I have received the following documents:

1.     \_\_\_\_\_ Employee Handbook  
      Initial
2.     \_\_\_\_\_ Harassment Policy  
      Initial
3.     \_\_\_\_\_ Discipline Policy  
      Initial
4.     \_\_\_\_\_ Substance Abuse and Drug Testing Policy  
      Initial

I acknowledge that this handbook and related policy is neither a contract of employment nor a legal document.

EMPLOYEE'S NAME (printed): \_\_\_\_\_ DATE: \_\_\_\_\_

EMPLOYEE'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**DELTA HEALTH SYSTEM**

**Confidentiality Statement/Information Security Agreement**

I recognize and acknowledge that as an employee of Delta Health System I may receive information concerning the hospital, its employees, and patients and their families which is confidential in nature; and that the goodwill of this hospital depends, among other things, upon its keeping such information confidential.

There are times when employees, physicians, consultants and vendors may be required to access confidential information, operate computer equipment, or have access to software systems as part of their performance of duties for Delta Health System. Those charged with this responsibility must understand information security policies in effect throughout the hospital.

Therefore, I agree to the following provisions:

- Not to disclose any portion of a patient's record except to a recipient designated by the patient or to a recipient authorized by the hospital who has a need-to-know in order to provide for the continuing care of the patient or to discharge one's employment or other service obligation to the hospital.
- Not to operate or attempt to operate computer equipment without specific authorization from supervisors.
- Not to demonstrate the operation of computer equipment to anyone without specific authorization.
- To maintain assigned passwords that allow access to computer systems and equipment in strictest confidence and not disclose a password with anyone at any time, for any reason.
- To access only computer systems, equipment and functions as required for the performance of my responsibilities.
- To contact my supervisor or the Director of Information Systems immediately and request a new password(s) if mine is (are) accidentally revealed.
- Not to record passwords in any manner, as this increases the possibility of accidental disclosure.
- Not to disclose any portion of the Hospital's computerized system with any unauthorized individuals. This includes, but is not limited to, the design, programming techniques, flow charts, source code, screens and documentation created by Hospital employees or outside sources.
- Not to use the computer to access and/or distribute materials that are pornographic in nature.
- Not to use the computer to access and/or distribute materials that are offensive or harassing in nature to any person based on race, color, national origin, gender, religion, age, disability or other status protected by federal, state, or local law.
- To report activity that is contrary to the provisions of this agreement to my supervisor or the Director of Information Services.

I understand that the disclosure of confidential information may give rise to irreparable injury to Delta Health System or to the owner of such information, and that failure to comply with the above policies will result in formal disciplinary action up to and possibly including termination from the Hospital in the case of employees and the termination or cancellation of agreements in the case of physicians, consultants, or vendors.

Signature of Employee/Physician/Consultant/Vendor: \_\_\_\_\_

Printed Name of Employee/Physician/Consultant/Vendor: \_\_\_\_\_

Date: \_\_\_\_\_