



**PUTNAM COUNTY
MEMORIAL HOSPITAL**

People You Know, Care You Trust

Employee Handbook

Revised November 2019

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WELCOME TO PUTNAM COUNTY MEMORIAL HOSPITAL (PCMH)

We are honored to have you as a member of our staff. We trust you will find your work here interesting and rewarding.

Working in our hospital carries a special responsibility because the lives of many people depend on how well each person does his or her particular job. Therefore, capability, reliability, and thoroughness are essential. PCMH believes that the most valuable assets the hospital can possess are qualified employees working in harmony to provide the highest standards of patient care.

When you become a member of PCMH, you are representing the hospital to patients, visitors, your neighbors, your friends, and your fellow employees. To our patients and visitors, you are Putnam County Memorial Hospital. As an employee of PCMH, you have high professional standards to maintain a great personal responsibility in helping to continue the reputation of PCMH. Therefore, it is vital that you know your hospital, its services, its facilities, and its policies and procedures.

PCMH believes that you will be a happier and more effective employee if you clearly understand the hospital's employee policies. Please read the following pages carefully. This handout has been developed to acquaint you with the policies, as well as the many benefits you will enjoy as an employee. In the event that you desire clarification or have questions on the contents, feel free to contact Human Resources. These policies take precedence over all former policies.

PCMH recognizes the value of providing benefits for its employees which are described in these employee policies. These policies are not intended to constitute a contract between PCMH and any of the employees for either employment or the providing of any benefit.

We sincerely hope that you will look upon your job not only as a means of employment but also as an opportunity to provide a valuable service in Putnam County and surrounding areas.

We welcome you as a member of our excellent health care team.

Putnam County Memorial Hospital Board and Administration

PHILOSOPHY

MISSION STATEMENT

The mission of Putnam County Memorial Hospital is to provide a responsive healing environment for patients and their families, and to improve the quality of life for all members of our community.

VISION

To be a provider of high quality patient focused health care that is readily accessible, cost effective and meets the needs of the communities we serve. We believe that Putnam County Memorial Hospital has a responsibility to: Ensure access to superior quality integrated health care for our community and expand access for underserved populations within the community.

PHILOSOPHY

Putnam County Memorial Hospital is committed to service excellence and continuous performance improvement. As a community health care services provider, we remain attentive to the health and well-being of those we serve.

EXTREME HOSPITALITY

It is the intent of PCMH to provide a pleasant and helpful environment to those who enter our facility. Whether patient, visitor, or staff, each person is entitled to be treated with respect and dignity. This is Extreme Hospitality.

Employees are expected to display a pleasant and helpful attitude at all times. Patients, visitors, and co-workers should be assisted in a polite and expeditious manner. If you are unable to help them personally, then you will find an individual who can provide the assistance. During your hospital orientation you have received specific training in our customer service philosophy entitled, "We Care."

CODE OF ETHICS

PCMH believes strongly in the Code of Ethics. Any violation of the Code of Ethics will be subject to review by the Supervisor and/or Manager as well as the Chief Executive Officer (CEO) for the purpose of corrective and/ or disciplinary action.

1. The health, welfare, and privacy of our patients must come before all personal and financial interest of each employee.
2. Each employee must keep confidential all information regarding patients that is observed or learned on the job.
3. Employees must refrain from giving medical advice beyond their scope of practice. They must also refrain from the unauthorized release of information regarding diagnosis or therapy.
4. Each employee must report any unethical practice, procedure, or conversation to his/her immediate Supervisor and should refrain from discussing the grievance with other coworkers.

RESPONSIBILITY:

Department Managers are responsible for making the requirements of these policies known to their employees and to apply the requirements of these policies in an equitable manner. Employees are to familiarize themselves with the requirements of these policies and abide by their guidelines. The nature and severity of any violation can be of such a degree as determined by Putnam County Memorial Hospital Administration to eliminate any and all steps, and result in the discharge of an employee without progression through the customary procedures.

CHAIN OF COMMAND

COMMUNICATION AND CHAIN OF COMMAND

The purpose of a chain of command is to establish a direction of authority by which an effective operation can proceed in an efficient manner.

Each employee is accountable to his/her Supervisor or Manager. If an employee has a problem or complaint, he/she should first discuss the matter with the Supervisor or Manager.

If the employee has consulted with the Manager and a satisfactory solution has not been reached, or if the employee is having a problem with the Manager, the employee should consult with the Director of Human Resources. HR will report all findings to the CEO with a copy of the findings given to the Manager and to the employee.

If a satisfactory conclusion is not reached, the employee can then request a hearing with the CEO. If a satisfactory conclusion is not reached, the employee can request to be put on the agenda for the Board of Trustees next scheduled board meeting.

MANAGERS

Managers will be responsible for the day-to-day operation of their department. They will be responsible for the conduct and efficiency of employees in their Department.

In order to be prepared for the possibility that a Manager requires an extended period of leave, each Manager must have a designated successor properly trained to cover so that business can proceed as usual in the Manager's absence.

There will be a quarterly meeting of Managers. The purpose of the meetings is to ensure effective communications to eliminate misunderstanding and to keep employees current on institutional matters.

Information received by the Manager is to be shared with employees within the individual departments. Employees may channel questions and concerns through their immediate supervisor. (See Addendum A-Chain of Command)

CONFIDENTIALITY

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) PRIVACY RULE

All employees of PCMH and all others associated with PCMH are responsible for protecting the confidentiality of protected health information that is obtained, maintained, used, disclosed, heard or viewed while carrying out their responsibilities on behalf of PCMH. Failure to comply will result in disciplinary action, up to and including termination.

All new employees will be given HIPAA training during orientation held on the first day of employment at PCMH. Yearly, HIPAA training will be given to current employees during their yearly re-orientation. Re-orientation will be done through Care Learning annually. All documentation that the employee has received the HIPAA training will be maintained in each employee's personnel file.

When leaving employment at PCMH for any reason, the employee will be reminded that any patient information they learned during their employment here is still confidential.

If an employee witnesses a potential HIPAA violation, he/she must report it to the HIPAA Compliance Officer immediately.

GENERAL, NON-HIPAA, CONFIDENTIALITY

In the course of their work, employees may have access to confidential information regarding personnel records and PCMH business records. It is the employee's responsibility to protect the privacy and confidence of patients, employees, and PCMH. Any confidential information is to be used in the performance of duties. Failure to comply will result in disciplinary action, up to and including termination.

EMPLOYMENT POLICY

PCMH is committed to the policy that all persons shall have equal access to its employment, programs, medical services, and facilities without regard to race, color, religion, sex, sexual orientation, national origin, creed, age, and/or disability.

Reasonable accommodations will be provided to enable qualified applicants to perform the essential functions of the job which they are seeking without exerting undue hardship on other employees as defined in the American Disabilities Act or create a financial burden for PCMH.

GENERAL POLICY

In order to assure the recruiting and retention of qualified employees, PCMH will strive to carry out the following general policies:

- To employ those persons regardless of sex, sexual orientation, race, creed, color, national origin, religion, disability or age who are fitted by preparation, skill, and experience to perform the prescribed work.

- To establish hours of work in compliance with legal and professional regulation; however, keeping in mind that during emergencies some departments of the hospital may require additional or varied hours of work.
- To respect the individual rights of employees and to treat all employees with courtesy, consideration and dignity.
- To not tolerate racial, sexual or religious harassment in any form.
- To provide wages, working conditions, and employee benefits that are consistent with competitive health care practices and the hospital's economic situation.
- To provide adequate compensation according to the type of work and the employee's qualifications, merits, and experience.
- To provide a safe, healthful, and pleasant work environment.
- To give employees the right to express themselves in matters of grievances or suggestions.
- To encourage efficiency and interest in PCMH and its work.
- To promote personal satisfaction and self-improvement and to give employees opportunities for advancement.

EQUAL EMPLOYMENT OPPORTUNITY

It is the policy of PCMH to provide equal employment opportunity for all employees or applicants without regard to race, religion, color, creed, sex and sexual orientation, age, disability and/or national origin. Equal employment opportunity includes, but is not limited to, hiring, training, promotion, transfer, demotion, and termination.

VETERAN'S STATUS

PCMH will comply with current Federal regulations under the Uninformed Services Employment and Reemployment Rights Act of 1994 (USERRA).

EMPLOYMENT AT WILL

All terms, conditions, and benefits of employment, whether set forth in this handbook or elsewhere, are unilateral expressions of current policies and procedures and may be changed at any time for any reason, with or without notice, at the discretion of the CEO.

Nothing in this handbook is intended to provide contractual rights, or to convey a guarantee of continued employment. Each employee is an employee at-will which means that employment can be terminated at any time and for any reason by either the employee or PCMH.

As a PCMH employee, you are responsible for reviewing hospital policies and procedures and for abiding by them. If you do not understand the policies, you should contact Human Resources for clarification.

PCMH will keep employees informed regarding revised policies as they occur, through email and Managers.

CURRENT CREDENTIAL VERIFICATION

PCMH maintains a mechanism for the ongoing verification of current license, registration, certification, and legal work status in the United States of all applicable personnel. Applicants for jobs that require licenses, registration or certification shall be employed only after verification of their credentials.

If an employee's license expires, the employee will not be allowed to work. The employee will then have 30 days to verify renewal of the expired license. If no verification is received, the employee will be placed on immediate suspension. The employee will be terminated if verification is not received within 30 days following the suspension.

All applicants offered employment at PCMH are required to provide documentation to establish employment eligibility in the United States.

BACKGROUND CHECKS/ PRE-EMPLOYMENT DRUG SCREENING

Upon offering employment, prospective employees will be required to provide information regarding any criminal background information, child abuse, and dependent adult abuse charges by signing authorizations for PCMH to obtain this information and by providing a pre-employment drug screening.

1. Criminal History Records Disclosure Consent to authorize the background checks.
2. A request for and consent to Employee Disqualification List (EDL) check through the Missouri Department of Social Services.
3. A state background check is done through the Missouri Hospital Association (MHA) for the state in which the applicant resides, or if new to that state, the previous state of residence. It is the responsibility of the applicant to pay this fee.
4. An office of the Inspector General List.
5. PCMH requires that all applicants for employment who have received conditional offers of employment be tested for use of controlled substances or abuse of legal drugs. Only those receiving a negative result will be considered qualified for employment.

Employees will not be allowed to begin work until these background checks and the pre-employment screening have been completed.

ORIENTATION

PCMH provides an orientation for each new employee to help them understand his/her job, the department, and PCMH as a whole. It is the hospital's policy that all employees should have an informative and complete orientation to prepare them to meet their immediate work responsibilities.

All new employees will complete a general hospital-wide orientation, which includes review of employee benefits and employee policies in this handbook, such as the disciplinary and grievance policies. Employees will then complete their departmental orientation before starting their assigned job functions. The department orientation will include assuring that the department's policies and procedures are read and understood by the new employee. All employees will review their

department's policies and procedures annually. Managers will facilitate the annual review and provide Human Resources with dates of employee completion.

HIRING OF RELATIVES

An employee should not be in a position of direct or indirect supervision of a family member or be in a position to evaluate or promote a relative. The final decision on employment of relatives will be the CEO's.

ATTENDANCE/ABSENTEEISM

Prompt attendance for scheduled work time is expected and essential to providing timely services and the best care possible to our patients. Excessive absenteeism and /or tardiness may result in disciplinary action and may have an adverse effect on an employee's future transfer request, promotion, or continuous employment. It is of the utmost importance that each and every employee report for work to perform the duties for which he/ she is compensated.

Unless advance notice has been given by the employee, he/ she must notify his/ her manager at least two (2) hours prior to the start of his/ her scheduled shift. Late reporting of absence/ tardy may result in disciplinary action.

To have an absence/ tardy be considered as a **scheduled** absence/ tardy, an employee must receive department manager approval for the absence/ tardy at least twenty-four (24) hours in advance of the scheduled shift for which the absence/ tardy has been requested. Without proper notice points may be assigned for unexcused absences per hospital policy.

Failure to report to work without notification (NO CALL / NO SHOW) to the department manager when scheduled to work may result in an unpaid 24 hour suspension during investigation into the circumstance and termination can be considered. A second (NO CALL / NO SHOW) is automatic termination.

If an employee reports to work and has to leave due to illness or other unexpected circumstances, the employee must have worked two thirds (2/3) of their shift to avoid receiving an occurrence.

Any absence from work due to work related injury will not be considered as an occurrence.

A Family Medical Leave Act (FMLA) leave will accrue an occurrence on the first day, unless that day has been considered an approved scheduled absence by the Department Manager or Director of Human Resources.

Hourly rate staff that habitually fails to "clock-in" on the hospital time clock will be subject to the occurrences and disciplinary actions as outlined in this policy. The shifts worked, but not "clocked in"

may be considered unreported absences, therefore resulting in accrued occurrences, as there is no way to verify actual "clock in" or work time.

Managers will require a physician's note if a pattern of excessive absence is established and/ or to protect patient, visitors and co-workers. (A physician's note does not remove an absence from consideration as an occurrence within the guidelines of this policy.)

WORK SCHEDULING

Every employee is a part of a team that works well only when each employee does his/her best. PCMH must provide quality patient care around the clock making a detailed planning of work schedules necessary. Administration's responsibility is to plan work schedules that provide a staff adequate to deliver quality patient care at all times. Administration also recognizes that employees need to know their tentative work schedules a reasonable period of time in advance. Of necessity, this must be a tentative work schedule subject to change at the discretion of the supervisor or Manager in response to unanticipated circumstances.

PCMH arranges schedules to meet the requirements of both the employee and the department. Regular working hours are scheduled in advance but they are subject to change. Managers have authorization to require mandatory overtime, if needed, to provide quality patient care.

An employee who cannot work as scheduled may trade with someone of the same job classification. This must be done within the same pay period. The employee is responsible for locating the person to make the change, which must be approved by the Supervisor or Manager. Changes in schedules should not cause either employee to go into overtime. Requests for days off need to be submitted in writing prior to posting of the new work schedule.

CHANGES IN EMPLOYEE'S PERSONAL INFORMATION

Employees have a responsibility to make sure their personnel records are up to date and should notify the Human Resources Department in writing of any of the following personal changes:

- Name
- Address
- Telephone number
- Marital status (for benefits and tax withholding purpose only)
- Number of dependents (for benefits and tax withholding purpose only)
- Beneficiary designations for any insurance or benefits
- Persons to be notified in case of emergency
- Bank information for direct deposit, if applicable

JOB POSTINGS

Whenever possible, the hospital will try to fill openings through promotions from within. This encourages employees to utilize their abilities to the fullest. These openings will be posted on the employee bulletin board for a period of three (3) consecutive days. All vacancies will be filled on the basis of applicant qualifications.

EMPLOYEE STATUS

Employees of PCMH are classified into the following employment status categories:

PROBATIONARY EMPLOYEE

The first ninety (90) days of employment for a newly hired employee is a probationary period to determine that the employee is able to perform the jobs assigned. This also provides the employee with an opportunity to become familiar with his/her assignments and allows administration the opportunity to evaluate an employee's performance and work habits.

Before the end of the probationary period the employee will have a face-to-face evaluation by the Supervisor/Manager along with the Director of Human Resources. These evaluations should acknowledge the employee's area of excellence and document the employee's short-comings. Any short-comings noted must be well documented and must include a plan of action for improvement. These evaluations are to be used as a positive teaching tool. The Director of Human Resources will inform the CEO of all negative evaluations.

During the initial probationary period new probationary employees cannot use PTO. Health insurance becomes active the 1st of the month following 30 days of employment. Vision will become effective the first day of the month following the 90 day probation period.

If the supervisor believes the new employee has potential but has not achieved a level of acceptable performance, the probationary period can be extended for a period not to exceed 90 days. During the extended probationary period, the employee is eligible for benefits and will accrue vacation and sick time, but the employee cannot use vacation and sick time until the probationary period is over.

FULL-TIME EMPLOYEE

A full-time employee has completed the ninety (90) day probationary period and is consistently scheduled to work at least thirty (30) hours per week. Where appropriate, the employee rotates shifts, weekends, days off, and holidays. The employee is eligible to enroll and participate in employee benefit programs. The hospital reserves the right to overstaff full-time employees.

PART-TIME EMPLOYEE

A part-time employee has completed the ninety (90) day probationary period and is consistently scheduled to work less than thirty (30) hours per week. The employee works an assigned schedule and where appropriate, rotates shifts, weekends, days off, and holidays. The employee is not eligible to enroll or participate in most employee benefits programs. The hospital reserves the right to overstaff part-time employees.

POSITION REQUIRED AS NEEDED (PRN) EMPLOYEE

A PRN employee has completed the ninety (90) day probationary period but may or may not be scheduled on the regular schedule. However, he/she may be called as needed to work. The employee is not eligible to enroll or participate in most employee benefit programs.

Criteria for PRN Nurses:

1. They must have a valid driver's license.
2. They must provide PCMH with their availability in a timely manner in regard to scheduling.
3. Their shifts will be scheduled per availability.

Benefits of PRN Nurses:

1. They will receive holiday pay when working on a holiday.
2. They will receive the current shift differential for the shift they are working.

FORMER EMPLOYEES WHO ARE REHIRED

If a former employee who resigns is rehired after the final resignation date, he/she will return to PCMH with the same status of a new probationary employee. He/she will have the 90 day waiting period for benefits. He/she will begin accruing PTO from the date of rehire but cannot use any PTO until the ninety first (91) day of consecutive employment. During the 90 day waiting period, employees are not eligible for PTO.

Rehired employees are not guaranteed their former positions and/or shifts. Seniority will be based on the date of rehire, not the original date of hire.

CHANGE OF EMPLOYMENT STATUS

Employment status will be the determining factor as to eligibility for employee benefits.

If the employee's status changes from PRN or part-time status to full-time status, the employee will become eligible for those benefits offered full-time employees, effective the first of the month after the employee has been full-time for thirty (30) days for medical insurance and 90 days for life and vision.

If the employee's status changes from full-time status to part time or PRN status, the employee will no longer be eligible for the full-time employee benefits. Change of status will be effective at the beginning of the pay period following the status change.

Managers must submit information for Status Change Forms to the Human Resources Department whenever there are changes to an employee's status. These changes include: increases in pay, transfers, promotions, change in name, termination, full-time to part-time status, (or vice versa), address change, and new hires.

COMPENSATION

The rates of pay at PCMH are determined on the basis of job requirements and levels of performance. It is policy of PCMH to pay wages which are internally equitable, externally competitive and which will aid in the recruitment, retention and motivation of a highly qualified staff.

SHIFT DIFFERENTIAL

A shift differential is paid to employees working the night shifts and weekend package shifts.

If an employee works across two shifts, the shift differential for that employee will be at the differential rate for the majority of the hours worked.

OVERTIME HOURS

In order to provide continued and uninterrupted service, it may be necessary for an employee to work in excess of normal work hours.

Non-exempt employees will receive one and one-half (1 ½) times their shift rate of pay for hours worked in excess of forty (40) hours per week.

PTO hours are not considered hours worked for the computation of overtime. If hours worked plus PTO hours requested exceeds 40 hours per week, payroll will reduce the PTO hours to get the employee back to 40 hours for the week.

Any overtime must be authorized prior to the performance of such worked by the employee's Supervisor or Manager. If the employee's hours for a shift exceed the normal shift length, the employee must have the Supervisor or Manager sign their time card beside the shift that went over the normal shift length.

If switching of hours at an employee's option will result in overtime for the employee, then switching of hours must be approved by the Supervisor or Manager before the switch occurs.

Attendance and travel time at approved meetings and training classes will be considered time worked for overtime calculation purposes. Overtime resulting from travel must be approved by the Supervisor or Manager.

ON CALL PAY

As a health care provider, PCMH must be able to answer patient demands day or night. To insure this service, it is necessary to have a number of employees in engineering, lab, radiology, and respiratory therapy departments on an "On-Call" basis. On call pay is paid at the rates of : \$3.00 per hour on week days and \$5.00 per hour on weekends.

CALL BACK PAY

Employees on-call will be paid a set hourly rate while on-call. If the on-call employee is called in, he/she will receive pay at the rate of one and one-half (1 ½) times his/her base pay for a minimum of one hour. If an employee is called in several times for brief periods, the one hour minimum applies to each call back. The total shall not exceed the hours in the call period.

Non-exempt employees who do not receive "on-call" pay shall receive one and one-half (1 ½) times their regular hourly wage if called back to work after leaving for the day or on a weekend if there is an emergency situation at the hospital. Nursing staff receives a \$20.00 call back fee as well as their regular pay rate for hours worked. Employees will only be called back in by the supervisory personnel or designee.

OVERSTAFFING

Effective November 25, 2007, PCMH began a policy for overstaffing of employees. Any employee who is overstaffed will be compensated at one dollar (\$1) per hour while being overstaffed.

The employee with overtime will be the first one to be overstaffed. An employee can only be overstaffed for that day. Overstaffing in advance will not be allowed.

Employees may use PTO hours to make up the difference in their paychecks but it is not required.

If an employee takes voluntary overstaffing, the employee **MUST** be available to return to work within 30 minutes. If the employee is not available when called to return to work, the use of PTO hours will not be allowed.

Overstaffing applies to all departments but may not be practical for some of the smaller departments. Any employee taking overstaffing needs to fill out an absence form (green sheet) with the number of hours overstaffed and if they want to use PTO hours to make up the difference.

PAY PERIOD CYCLE

The pay period consists of two (2) weeks totaling 14 days. The pay period begins on Sunday at 12:01 a.m. and ends fourteen (14) days later on Saturday at 12:00 midnight.

The beginning of the shift determines which pay period the hours will be paid.

ELECTRONIC TIME CARDS

Time cards are the hospital's official record of the employee's hours at work. All employees have the responsibility for clocking in and clocking out at the beginning and end of each work day. Thirty minutes for lunch is automatically deducted each day when the employee qualifies for a lunch break. (See rest periods)

Employees requesting payment for PTO hours should write these hours on a Leave of Absence request form and submit to the Department Manager for approval prior to the date time is requested.

PAYROLL CHECKS

Bi-weekly payroll checks and direct deposit stubs are issued on the Friday following the end of the pay period. Managers, or their designee, may pick up their employee's checks or direct deposit stubs from the Human Resources office after 8:00 a.m. on Friday of the pay week. If the Friday of the pay week falls on a national holiday, checks will be released on Thursday after 3:00 p.m.

Employees must submit written authorization in advance for their payroll checks to be picked up by another person.

DIRECT DEPOSIT

PCMH encourages their employees to have their pay direct deposited to their bank accounts rather than receiving an actual check. An employee needs to fill out an authorization form from Human Resources and attach a voided check to the form. After Human Resources receives the direct deposit authorization form, the employee will receive an actual check for the first pay and Human Resources will do a "pre-note" on the direct deposit batch. On the second pay the employee will be paid by direct deposit.

Employees leaving employment at PCMH for any reason will receive their final pay as an actual check even if they have been participating in direct deposit.

PAYROLL DEDUCTIONS

PCMH is required to make certain deductions from employees' wages each pay period. These deductions are for federal and state income tax withholding, and Social Security and Medicare withholding. The required amounts for each of these deductions are determined from information given to the hospital on Form W-4 and MO W-4 that are filled out by the employee. It is the employee's

responsibility to notify payroll of any change in marital status, dependents, or residential status that would affect these deductions.

Optional deductions may be made for insurance, PCMH and Rural Health Clinic outstanding accounts, and/or other miscellaneous deductions. Any optional deductions must be authorized in writing.

WAGE GARNISHMENTS

PCMH is required by law to deduct garnishments received in the form of a court order. In the case of wage garnishments, payroll will notify the employee of PCMH's obligation to garnish the employee's income.

PERFORMANCE APPRAISALS

During each employee's time at PCMH, his/her job performance will be periodically appraised and formally evaluated. These evaluations provide an overview of the employee's strengths and weaknesses as well as a skills inventory. Because these evaluations are to be used as a positive teaching tool, any short-comings noted must be well documented for improvement.

All employees will have face-to-face evaluations upon completion of their 90 day probationary period and at least annually thereafter.

Employees will be notified in advance as to the date and time of their performance appraisals.

TIME OFF

REST PERIODS

The employee shall be allowed two (2)- fifteen (15) minute breaks (one in first half of the employee's shift and another in a second half of the employee's shift) for every eight (8) hours worked with pay. Employees working a four (4) hour shift shall be entitled to one (1) fifteen (15) minute break without pay.

All employees shall take rest periods at the times designated by their Manager. Employees may not leave the hospital property during rest periods without permission of their supervisor. Those employees leaving the hospital premises shall clock in and out. Breaks may not be accumulated or "saved" to provide additional time off work.

Breaks should be taken in non-work areas unless prior permission is received from the Manager for an employee to take his/her break in the work area.

MEAL BREAKS

Employees shall be entitled to one uncompensated 30 minute meal break. All employees must have permission of their Supervisor to leave the hospital campus during meal breaks. Those employees

leaving the hospital premises shall clock out when they leave and clock back in at the end of their lunch break.

BENEFITS

PCMH offers a variety of benefits to its employees. Eligible employees may enroll for benefits within 30 days of their employment or eligibility date for medical and 90 days for vision and life. Most benefits will be effective on the first of the month following the 90 day probationary period. (For employees whose status changed from part time to full time, most benefits are effective on the first of the month after the employee has completed thirty (30) days of full time status).

PTO

Full time employees accrue PTO. They will not be eligible to use PTO time while they are on their 90 day probationary period.

Full-time employees receive vacation accrual on the following schedule.

Years	Accrual	Weeks	Maximum Accrual
0-1 years	6.16	4	250
1-5 years	7.7	5	250
5-10 years	9.24	6	250
10-15 years	10	6.5	250
15-20 years	10.77	7	250
21+	11.54	7.5	250

PAID HOLIDAYS (8 HOURS):

Employees must have successfully completed their 90 day probationary period to use PTO.

- New Year's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving
- Christmas Day

If a paid holiday falls on Saturday, it will be observed the preceding Friday. If a holiday falls on a Sunday, it will be observed the following Monday.

SICK LEAVE BANK

Purpose:

The purpose of the Sick Leave Bank is to provide a full-time employee additional sick leave when a catastrophic illness or disability occurs that requires extended hospitalization/treatment or home confinement of the employee or a member of the employee's immediate family.

- Immediate family is defined as; husband, wife, mother, father, brother, sister, children, step-children or any relative or person living within the employee's household for whom the employee has custodial responsibility or where such person is financially and emotionally dependent on the employee and where the presence of the employee is needed.
- Catastrophic injury or illness is defined as a life-threatening condition or combination of conditions affecting the mental or physical health of the employee or the immediate family member. The catastrophic illness or injury must require services of a physician.

Procedures:

- Participation in the Sick Leave Bank is voluntary.
- He/she must be a regular full-time employee.
- New employees will be eligible for the pool and can donate a minimum of 8 hours at the completion of their 90 probationary period. Personal days can be donated in that instance.
- To become a member of the Sick Leave Bank you must complete an initial enrollment form and annually thereafter or when the pool falls below 200 hours.
- Any employee who chooses not to participate must sign a Declination Form.
- Each participant in the bank will donate a minimum of 8 PTO hours.
- Once the hours have been donated to the bank, it stays donated and may not be withdrawn.
- Hours will not be required to be donated to the pool once the bank reaches 800 hours. If the pool falls below 200 hours, employees will again be requested to contribute to the Sick Leave Bank to continue to participate at the beginning of each year.
- Annual participation in the Sick Leave Bank is voluntary, but requires contributions to the bank. Contributions will be made at the annual open enrollment.
- Only during the annual open enrollment period each year, may an employee elect to no longer participate in the Sick Leave Bank program.
- Employees must be an active member of the program to be able to participate.
- To request leave from the Sick Leave Bank, participating employees must submit A Request for Use of Sick Leave Form.
- All requests must be accompanied by a physician's statement which includes the beginning date of the condition, and a description for the illness or injury. All requests must indicate the number of sick leave days requested and information related to this request.
- No hours from the pool may be withdrawn until the participant has exhausted his/her accumulated PTO hours.
- The maximum number of hours that can be granted to and withdrawn by any one member shall be 200 hours.

- Enrollment in the Sick Leave Bank does not guarantee that an employee shall receive benefits from the Sick Leave Bank. Administration will determine the approval or denial of sick leave for illness, injury or sudden unexpected medical condition from the Sick Leave Bank.

BEREAVEMENT LEAVE

PCMH recognizes the need of employees to have time off in the event of a death in their immediate family. Therefore, full-time and part-time employees may receive bereavement leave for up to 40 hours. Bereavement pay will be paid at the employee's regular base rate. Bereavement pay in combination with worked hours will not result in overtime pay.

An employee will be allowed up to 40 hours of bereavement leave if necessary for the death of the following member of the immediate family:

- Parents (including parents-in-law)
- Spouse
- Children (including children-in-law)

An employee will be allowed up to 24 hours of bereavement leave if necessary for the death of the following member of the family:

- Brothers / Sisters
- Grandchildren (including great-grandchildren)

When bereavement leave is necessary, the employee should notify the Manager as soon as possible so that a replacement can be found for that shift. If an employee needs to be gone for more than the time specified above, the employee may request additional time for his/her Manager. If approved, the employee may use vacation time or time without pay.

FAMILY AND MEDICAL LEAVE ACT (FMLA)

The FMLA Act of 1993 gives eligible employees the right to take unpaid time off from work for a period of up to twelve (12) work weeks in a twelve (12) month year. FMLA may be for the birth of a child, placement of a child for adoption or foster care, the need for the employee to care for a family member (child, spouse, or parent) with a serious health condition, the employee's own health condition makes the employee unable to do the essential functions of his/her job, because of a qualifying exigency arising out of the fact your spouse, son or daughter, or parent is on active duty or call to active duty status in

support of a contingency operation as a member of the National Guard or Reserves or because you are the spouse, son or daughter, parent or next of kin of a covered service member with a serious injury or illness. This leave may be taken continually or intermittently. If intermittently or on a reduced schedule, the employee may be requested to take an alternate position, which accommodates this reduced schedule but is equal in pay and benefits. The 12 month period begins on the first day of the leave.

To be eligible for FMLA, the employee must have been employed at PCMH for twelve (12) months and worked at least 1,250 hours in the previous twelve (12) months.

It is the employee's responsibility to:

1. Complete the required paperwork and turn it in appropriately.
2. Communicate with the Supervisor and Human Resources about time expected to return to work.

It is the employer's responsibility to:

1. Notify the employee of eligibility for FMLA.
2. Keep an accurate record of hours worked for the employee FMLA eligibility.
3. Maintain all medical documents in Human Resources in the employee's confidential record.

An employee granted FMLA may use PTO concurrently with this leave.

PTO does not accrue during FMLA leave.

FMLA will not affect the employee's insurance coverage but the employee needs to make arrangements for the payments of all insurance premiums.

UNPAID LEAVE OF ABSENCE NOT COVERED UNDER FMLA

Full-time and part-time employees who have completed their probationary period are eligible for unpaid personal leaves of absence in emergency situations or under highly unusual circumstances. These leaves of absences are for situations not eligible for FMLA. Leaves of absence are not allowed for an employee to look for other gainful employment. Leaves of absence maybe granted for up to ninety (90) days.

A written request for a Leave of Absence must be submitted at least thirty (30) days in advance. This can be waived when emergency circumstances prohibit advance request. Each request will be reviewed individually by the Manager and Human Resources.

PTO does not accrue during the leave period. Arrangements must be made with Human Resources for continuation of insurance coverage.

After a leave of absence, the employee will be returned to the same or similar job, if available, unless there is a change in the employment status. If the same or similar job is not available, every effort is

made to place them within the hospital. Should the employee be unable to return to work as scheduled, an extension may be requested. The request must be in writing and state specific reasons an extension is needed. It must be given to the Manager at least one (1) week before the employee is due back to work. Failure to request leave extension will be assumed to be evidence of voluntary termination.

JURY DUTY

PCMH believes serving as a juror is a civic duty. Employees are urged to serve when called, provided essential services are maintained. When not serving, employees are expected to be at work. If an employee works during the evening or night shift and has served on a jury during the scheduled day, he/she is not expected to work that night.

An employee who is called for jury duty shall notify his/her Manager immediately upon receiving notice of such call. Full-time or part-time employees summoned for jury duty will be allowed time off while on jury duty and will be paid the difference between the employee's basic earnings at the time of such jury duty and the daily fee received from the court for jury duty. The employee may keep any additional fees paid by the court, including mileage, motel room reimbursement and food allowances. (For part time employees, their basic earnings refer to their regularly scheduled work days).

The employee needs to give a copy of the check from the court to Payroll. This will be used in calculating how much PCMH needs to pay the employee for the days he/she served on jury duty.

WORKER'S COMPENSATION

PCMH recognizes the importance of a consistent and equitable Worker's Compensation Program in protecting valued employees in the event of a work-related illness, injury, or death. Reasonable effort will be made to assure quality care and an expedient return of the employee to his/her pre-injury status whenever possible. The Worker's Compensation Program covers all individuals meeting the guidelines set forth by the State of Missouri regardless of position or status. The plan is designed according to Missouri statute and provides medical and indemnity (lost wage) protection for the individual in the event of a work-related illness or injury. The insurance carrier will monitor claims benefits which typically end when maximum medical improvement has been reached or when the employee returns to work. These benefits may be expected when a permanent/partial or permanent/total disability is identified by a physician recognized by PCMH.

I. Employee Responsibility

- A. The employee must report the work-related illness or injury, no matter how minor, to the Manager as soon as possible. Medical treatment may, under certain circumstances, be waived or postponed, but a worker's compensation Report of Injury Form must be completed and submitted to Human Resources prior to the employee going home for the day and no later than 24 hours after the injury occurred. Failure to report injuries may jeopardize Worker's Compensation benefits. A Report of Injury Form must be completed by each employee involved in, or observing the accident.

- B. If medical treatment is needed, the employee will report to the Infection Control Nurse, unless emergency treatment is necessary. If emergency treatment is needed, the employee should be seen in the emergency room. If the clinic is open and the employee does not need emergency treatment, then the employee should be seen at the clinic instead of the emergency room.
 - C. It will be mandatory to use PCMH facilities (i.e.: pharmacy, physical therapy, x-ray, and lab) whenever possible. Failure to utilize PCMH facilities may result in non-payment of medical expenses.
- II. Manager Responsibility
- A. When notified of an injury, the Manager or designee needs to be sure that the employee has completed a worker's compensation Report of Injury Form. This completed form must be given to HR as soon as possible.
 - B. After an accident, the employee must be examined by the Nurse Practitioner or a physician either at a Hospital Clinic or the Emergency Room, unless the Manager and the employee are in agreement to waive treatment.
 - C. Any employee who is injured on the hospital premises and requires medical treatment may be required to take a drug and/or alcohol test following their immediate treatment.
- III. Human Resources Responsibility
- A. Following submission of a work-related claim, the employee will be contacted by Human Resources.
 - B. A "First Report of Injury" will be filed with the compensation carrier as soon as possible after receiving the Report of Injury.
 - C. Human Resources will then follow up with the employee on an on-going basis until the employee is able to return to work.

The weekly amount of disability is based on current workers compensation standards.

Worker's Compensation is a benefit provided and paid by the hospital at no direct cost to the employee.

RESTRICTED WORK PROGRAM

PCMH has a restricted duty program for employees who have incurred work related injuries which temporarily prevent them from performing the duties of their normal job assignment. Duty assignments shall be made in relation with the disability, as determined by the Provider assigned by the workers compensation carrier. Job assignments will be made within the Provider's restrictions. Restricted job assignments will be made within the Provider's restrictions. Restricted job assignments will be made in the following manner:

1. By classification
2. Supplemental in and out of classifications without displacement of other employees.
3. Make work

When an employee is placed in the restricted work program a discussion will be held between the employee, the employee's supervisor and Human Resources or his/her designee in regard to the restricted work assignment.

Employees will be permitted to work their regularly scheduled hours during the time of their restriction. Restricted duty employees have the right to voluntarily overstaff if this will not cause a manpower shortage and is approved by PCMH administration.

To provide a fair and consistent method for handling employees who incur work related injuries and are unable to return to their regular job, this program must address the employee's occupational injury considerations and recognize the need for maintaining operational efficiency and flexibility.

- The employee will be working on a restricted duty assignment or will be on leave of absence receiving Temporary Total Disability (TTD) after suffering a work related injury.
- When the Provider indicates the injured employee has reached "full healing status"; i.e./ "you're as good as you are going to get" as far as recovery is concerned, the employee must return to his/her regular job or to an open job that is within the employee's medical restrictions.
- If the employee cannot do either of the preceding, he/she will be discharged from employment.

INCLEMENT WEATHER

There will be instances when the weather conditions will make it difficult or impossible for some employees to get to work. In the event that weather conditions will cause an employee to be late or absent from work, the employee shall call the Hospital immediately and inform his/her Supervisor or Manager of the circumstances. To be paid for inclement weather time off, the employee must use PTO.

It is also recognized that there may be instances when an employee cannot get home after a shift. The hospital will attempt to provide overnight accommodations to the extent that such vacant beds allow this to be done.

BENEFITS

GROUP HEALTH INSURANCE

PCMH offers group health insurance to all full-time employees. The group health insurance coverage begins on the first of the month after the employee's 30th day of employment. For part-time employees changing to full-time, their group health insurance coverage begins on the first of the month after they have completed thirty (30) days of full-time service. Premiums will be deducted from your check during the month prior to the effective date.

	Anthem Buy-Up Plan	Anthem Basic Plan
Employee Only	135.09/PP – 270.18/mo	82.85/PP - 165.70/mo
Employee + Spouse	452.44/PP – 904.88/mo	330.72/PP – 661.44/mo
Employee + Child(ren)	392.79/PP – 785.58/mo	284.13/PP – 568.26/mo
Employee + Family	710.14/PP – 1420.28/mo	532.00/PP – 1064.00/mo

LIFE/ ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE

- PCMH pays for a \$50,000 life insurance policy and a \$50,000 accidental death and dismemberment policy for all full-time employees.
- Employees may purchase additional life insurance for themselves and dependents.
- Life insurance is effective the first of the month after being employed 90 days.
- Premiums for any additional life insurance purchased will be deducted from the employee’s check during the month prior to the effective date.

RETIREMENT

Employees may elect to purchase retirement plans should he/she desire retirement benefits. Employees may choose which retirement plan they wish to make contributions to: Security Benefits. PCMH does not contribute on the employees behalf.

AFLAC

Employees may elect coverage from supplemental policies; i.e. cancer, accident, short term disability, etc. PCMH does not make a contribution to these policies on employee’s behalf.

Vision is effective the 1st of the month after 90 days.

New York Life

Employees Whole Life is available through New York Life. Employees may enroll at the annual enrollment.

EMPLOYEE RELATIONS

DRESS CODE

Putnam County Memorial Hospital (PCMH) takes great pride in the services we provide to patients just as we take pride in the professional image of our employees. Our business is to provide professional health care service to our community, and it is important that our appearance convey the professional manner and dignity of our healthcare profession to the public. These guidelines have been established for the basic standards of professional dress and to comply with Infection Control, OSHA and other safety requirements. These guidelines are not all-inclusive; however, good judgment should be used at all times.

PCMH recognizes that each employee has his or her own individual style, but Departmental Managers have the responsibility and the right to require employees to dress in accordance with the job they conduct. Employees' work apparel and uniforms should be professional and appropriate to the individual job performed and must be clean and neat at all times. Revealing, offensive, torn, or dirty clothing or shoes are strictly prohibited.

Departmental Managers are responsible to advise employees of any requirements specific to the department. Some departments specify a particular uniform / scrubs be worn by all employees. Employees who are members of these departments are asked to insure the uniform is clean, neat, wrinkle-free, and free from stains / debris.

Employees in all Departments are to follow all personal hygiene guidelines appropriate for a service-related position and keep shoes, hair, make-up, jewelry and other accessories conservative and neat in appearance at all times. Proper undergarments are required and must be inconspicuous.

All apparel must be clean and neat and should not be so tight as to restrict necessary activity. Hem length of dresses, skirts and skorts must be no shorter than one inch above the knee, and must be no longer than the top of the shoe. Pants of all fabrics are to be appropriately hemmed and not able to touch or drag on floor surfaces when standing erect. Attire should be in good taste, avoiding any extreme in fashion. Casual-business is appropriate attire, in accordance with the following:

Jeans: Various departments may be allowed to wear jeans as their uniform due to the various duties performed in the department. Due to some job functions in other departments jeans may be worn when approved by the Department Manager. Otherwise jeans are not acceptable attire or allowed except for designated Casual Fridays. Exceptions are on days when extreme weather conditions exist, i.e. when area schools are dismissed due to weather conditions. Jeans that are torn, frayed, faded, or patched are unacceptable at any time.

T-shirts: Short-sleeve or sleeveless undergarment type shirts or T-shirts with advertising, transfers, licensed apparel (only exception is PCMH apparel) or inappropriate expressions or graphic design are unsuitable at any time.

Shorts: Shorts are not appropriate at any time during work hours. Including: Knee length or shorter pants, tailored walking shorts, and Bermuda shorts. Exceptions that are acceptable are: Tailored skorts and dress capris at least knee length or below.

Tights: Tights are not appropriate at any time during work hours except when being worn as pantyhose under a dress, skirt, skort, capris, or pants.

Leggings: Leggings are not appropriate at any time unless worn under a dress, tunic, skirt, skort, capris, or pants.

Sweatshirts: Loose or tight fitting sweatshirts are not appropriate. PCMH sweatshirts and holiday / seasonal sweatshirts are allowed on Casual Fridays only or when extreme weather conditions exist as listed above under the "Jeans" section.

Sweatpants: Sweatpants are not appropriate attire at any time.

Buttons/Pins: Campaign, slogan or informational buttons / pins are not to be worn unless they have been supplied by PCMH or specifically approved by the CEO.

Jewelry: The wearing of excessive jewelry should be avoided and in some departments is prohibited. Check with your Departmental Manager if you have any question regarding the appropriateness.

Cosmetics: Cosmetics and fragrances should be used in moderation or avoided in consideration of other employees and patients.

Hair: Hair should be clean, neat and kept in good taste, extreme hair colors and/or cuts are not allowed or professional in appearance. Mustaches, sideburns and beards must be neatly trimmed. Hair must not interfere with the employee's job functions. Employees with direct patient contact / clinical duties must wear longer hairstyles tied back or in an upward style to avoid interference with patient care.

Body Piercing & Body Art: Any display of excessive or extreme body piercing is strictly prohibited and may include but not limited to the following: *Pierced eyebrows, nose, lips, chin, cheeks, tongue, abdomen or numerous ear piercings.* Any display of *tattoos, branding,* or other forms of body art are prohibited. Clothing or covering **is required** to conceal body art that is not normally concealed by clothing. Any employee displaying excessive or extreme body piercing will be expected to remove or cover the body piercing jewelry.

Shoes: Shoes should be comfortable, neat, clean, shined, and sturdy. Leather dressy sandals, solid color canvas slip-on are acceptable when seasonally appropriate. No flip flops or beach type shoe or sandal is acceptable. Employees in clinical departments and employees in the service departments, such as Engineering, Environmental, and Dietary **are required** to wear closed toe shoes at all times. Tennis shoes are acceptable on Casual Fridays or as approved by Departmental Managers and Administration.

Fingernails: Fingernails are to be neat and manicured and a length short enough to allow for accurate performance of all job duties. Artificial nails are a health concern due to bacterial growth and are not appropriate to be worn by Clinical, Environmental, or Dietary Departmental employees.

Call Back Attire: Employees who are on call may, when called in, wear casual street clothes that are in good taste. To promote a professional appearance the employee should put on a lab coat and wear their hospital ID badge. Clothing not appropriate to wear when called in includes: shorts, pajama pants, cutoffs, tank tops, halter tops, or short-skirts.

ID Badge: Employees must wear their identification badge at all times while on duty and the badge must be located above the waist at eye level in an upright and readable position. Employees who lose an identification badge or entry access key will be assessed a twenty-five dollar (\$25) replacement fee.

To show our support for the local area schools, employees may wear tasteful school mascot T-shirts and sweatshirts on Casual Fridays when special school events are taking place, i.e. homecoming. Approval of licensed / mascot attire will be at the discretion of administration.

All employees are expected to comply with this policy when on duty. Employees attending PCMH sponsored events, including representing PCMH at off-site programs, are expected to adhere to this dress code policy.

As a health care entity serving the public, we expect our employees to adjust their professional business attire to fall within these guidelines. If an employee is dressed inappropriately to meet with our patients and visitors, he/she may be asked by his/her Department manager to leave and change into more suitable business attire. All time away from the job for this purpose will be unpaid time and may be documented as an unscheduled absence. Continued non-compliance with this policy will result in counseling; repeated violations could result in further disciplinary action up to and including dismissal.

If an employee feels there are extenuating circumstances regarding inappropriate attire, and the employee or manager desires an exception to the action outlined in the policy, a written request detailing the circumstances must be submitted to the Human Resources Director for Senior Management review. The decision of the Senior Management Team will be final.

Department Managers will ensure conformity to this Dress Code Policy. Employees are encouraged to ask their Department Manager in advance of wearing questionable attire or of the acceptability of such attire. In most cases if an employee feels they must ask for approval, most likely the attire is not appropriate.

DRUG AND ALCOHOL ABUSE

PCMH is committed to a drug/alcohol free workplace. Any employee who comes forward asking for help will be assisted by PCMH in seeking help with medical treatment and rehabilitation.

The distribution, receipt, or use of a controlled substance is not permitted. No employee shall have in his/her possession or be under the influence of intoxicating beverages or drugs on the hospital premises

except when prescribed by a physician, and such prescription is permitted only when it does not impair the job performance of the employee. When an employee is taking prescription drugs or over-the-counter drugs which may alter the employee's job performance or impact safety on the job, the employee must notify his/her supervisor or Manager of his/her temporary inability to perform the duties of the job. The Hospital reserves the right to enforce compliance whether the employee is on duty or enters the Hospital as a visitor.

If an employee is discovered having alcoholic products or illegal drugs on PCMH property, proper disciplinary action will be taken immediately to ensure the safety and wellbeing of the patients, visitors, and other employees.

Employees suspected of being in violation of this regulation may be tested at any time. If an employee refuses to take a drug test, it will be grounds for summary dismissal.

TOBACCO FREE WORKPLACE

As a health care provider, PCMH strives to provide our employees with a work environment that offers the opportunity and resources to optimize their personal health and wellbeing. In accordance with our philosophy and the convincing evidence of the negative effects of tobacco use, it is the intent of administration that PCMH maintains a tobacco free environment.

It is our responsibility, as a healthcare provider, to address known hazards to our employees and our patients and to create a healthful, safe and comfortable environment. To accomplish this, PCMH became totally tobacco free effective January 1, 2005.

Extent of the Policy:

Tobacco use is prohibited both inside and outside on all hospital property and/or property that the hospital utilizes. This prohibition includes the storage shed, maintenance sheds, parking lots and employees' personal vehicles parked on the hospital premises. PCMH employees are not also allowed to smoke on the property of the Putnam County Ambulance District and the Putnam County Care Center per their request.

Smoking is not permitted in hospital vehicles at any time.

All tobacco products, including smokeless products, are included in this prohibition.

Breaks:

Due to the unique nature of the health care field, employees are expected to be available at all times during their shift. Therefore, employees are not allowed to leave the hospital premises during their meal or non-meal breaks without permission of their supervisor. Even with permission to leave the hospital premises, employees are expected to refrain from tobacco use while on meal or non-meal breaks off the hospital premises. This will prevent employees from carrying tobacco odors into patient rooms when employees return from breaks.

Hospital Sponsored Events:

Events sponsored by the hospital, both on premises and at external locations, such as the hospital Christmas party, will be tobacco free.

Smoking Cessation Assistance:

PCMH offers information on smoking cessation programs and self-help materials for those employees who want to quit tobacco use. Further information about these services is available through the Respiratory Department.

To provide assistance to those employees who want to quit tobacco use, PCMH provides approved tobacco cessation materials, including patches and medications, free of charge to our employees.

As a requirement for receiving these materials free of charge, an employee must agree to attend a group tobacco cessation counseling provided free by PCMH. If an employee misses a counseling session, then the employee will no longer receive the materials free of charge.

PCMH will continue to offer this program to employees, including new hires; however, PCMH will only pay for the tobacco cessation materials once for each employee. Example, if an employee uses the program now but doesn't quit tobacco use, the PCMH will not pay for that employee to try again in six months.

Administration of the Policy:

PCMH will be consistent in administering this policy. Violations of the tobacco free policy will be subject to the standard disciplinary actions of the hospital as described in this employee handbook. If an employee doesn't abide by the policy, he/she will be given a verbal warning on the first offense and a written on the second offense. A third offense will result in the employee's termination.

Employees who have questions regarding this policy should contact their supervisor or the Director of Human Resources.

Nondiscrimination:

An employee's use of tobacco outside of working hours while off the hospital's premises will not be cause for any disciplinary action by PCMH. Nor will PCMH pursue a policy of discharging employees or refusing to hire applicants because they are tobacco users.

HARASSMENT/ SEXUAL HARASSMENT

It is the policy of PCMH to provide an environment in which employees and patients are treated with courtesy, respect and dignity. PCMH will not condone harassment of any kind in the workplace and will discipline any employee guilty of committing such conduct. This policy covers harassment towards employees, patients, and visitors to the hospital, clinics, and hospital sponsored activities.

Prohibited sexual harassment includes unsolicited and unwelcome contact or attention. This includes but is not limited to the following:

- Offensive written contact; such as sexually suggestive or obscene letters, notes, invitations, emails;
- Offensive verbal contact, such as sexually suggestive or obscene comments, threats, slurs, jokes about gender specific traits, sexual propositions;
- Physical contact; such as intentional touching, pinching, brushing against another person's body, impeding or blocking movement, assault, coercing sexual intercourse; or
- Visual contact, such as leering or staring at another's body, gesturing or displaying sexually suggestive objects or pictures, cartoons, posters, magazines, or Internet sites.

Sexual harassment also includes continuing to express sexual or social interest after being informed directly that the interest is unwelcome or using sexual behavior to control, influence or affect the career, salary or work environment of another employee. (Note: a key point is that the term "unwelcome" is determined by the recipient of the harassment. It is not at the discretion of the person who makes the comments or gestures to decide whether that behavior is welcome or not).

It is not permitted to suggest, threaten or imply that failure to accept a request for a date or sexual intimacy will affect an employee's job prospects. For example, it is forbidden to either imply or actually withhold support for a promotion, or change of assignment or suggest that a poor performance evaluation will be given because an employee has declined a personal proposition. Also, offering benefits such as promotions, favorable evaluations, favorable assigned duties or shifts, recommendations or reclassifications in exchange for sexual favors is forbidden.

Any employee who believes that he/she has been subjected to harassment of any kind shall immediately report the conduct to the Manager. All persons who witness harassment, not just the victims, have an obligation to report the conduct to their supervisor. If the Manager is the employee doing the harassment, the employee should report to the Manager to the Director of Human Resources who will investigate the incident thoroughly. All employees involved in the investigation will be treated respectfully. PCMH will make every effort possible to respect the confidentiality and maintain the anonymity of all parties involved during the investigation.

At the conclusion of the investigation, a confidential written report will be retained in the Human Resources Office. If the investigation indicates that harassment has occurred, immediate steps to remedy the situation will be taken. Offenders will be subject to disciplinary action, up to and including termination of employment.

No employee will be subject to any form of retaliation or discipline for assisting the investigation or for making a harassment complaint. Complaints of such retaliation will be promptly investigated.

WORKPLACE VIOLENCE

PCMH is strongly opposed to violence of any kind in the workplace. If any employee or patient feels threatened in any fashion, this should be reported to the supervisor or Manager immediately. PCMH will not tolerate any form of violence against its employees or its patients. All employees will be subject to severe discipline, including immediate discharge, for any violent or threatening behavior toward coworkers or patients. PCMH employees with willful or unwillful intent to cause harm cannot bring weapons onto hospital property while either on or off duty. Upon notification of a violation of this policy, the employee concerned will be contacted at once by the Director of Human Resources and, after proper investigation, may be subjected to disciplinary action up to and/or including termination.

PROFESSIONAL ATTITUDE

PCMH'S purpose is the care of the sick and injured. All employees need to be quiet and courteous at all times. Employees are not to argue with fellow employees, patients, visitors, or physicians, and avoid engaging in personal conversations in the presence or within hearing range of patients. Managers shall not reprimand subordinates in the presence of others.

Employees are to maintain a courteous relationship with visitors, Medical Staff, Board Members, Supervisors, and fellow employees.

GIFTS AND GRATUITIES

Employees are not to solicit or encourage personal gifts or gratuities from patients or their relatives. Any monetary gifts given to employees shall be transferred to the Accounting office to be deposited in an account for employee activities. Failure to transfer monetary gifts to the Accounting office may be grounds for disciplinary action, up to and including termination.

Non-monetary gifts (excluding food items) from sales people, vendors, contractors, or patient/ family members should be brought to Human Resources.

COMMUNICATION

Bulletin boards exist at various locations throughout the facility for posting of official notices or items. However, all other notices or items must be cleared by the Administration prior to posting on the bulletin boards.

Hospital telephone lines must be available for emergency use. Therefore, employees are asked to keep personal phone calls to a minimum.

When using the telephone, employees should remember to use good telephone habits; Answer promptly in a pleasant, courteous and businesslike manner; identify yourself by name and department; transfer calls tactfully; and give accurate and appropriate answers.

EMPLOYEE HEALTH REQUIREMENTS

PCMH has a designated employee health nurse to assure that certain health requirements are met by our employees.

Employees will be expected to follow current Infection Control Policies for working in this health care facility.

IN-SERVICE AND EDUCATION

Continuing education requirements for an individual's professional renewal of license is the responsibility of the employee.

Department in-service programs will be provided in house periodically to meet specific educational needs in our departments.

It may be necessary to attend an outside seminar to benefit the hospital. When requested to attend, or attendance is approved by the CEO/COO, the Hospital will reimburse expenses and wages based on the travel policy.

CERTIFICATIONS

Employees who obtain a specialty certification at the mandate of PCMH will not be required to reimburse the Hospital for expenses incurred to become certified.

Employees who obtain a specialty certification of their own accord or by state mandate will be required to reimburse the Hospital one hundred percent (100%) of the expenses incurred to become certified if they cease employment before the end of one (1) year from the completion of the certification.

Failure to complete the one year obligation, the employee will be required to repay PCMH a prorated amount. Example: An employee leaves after six months will be required to reimburse the hospital 50%.

EMPLOYEE ASSISTANCE PROGRAM

Any employee who is experiencing problems or concerns in their personal or professional life should contact Human Resources for sources of qualified assistance.

DISCIPLINE

All employees are expected to observe basic rules of good conduct. It is essential that all employees of PCMH understand these rules and the penalties involved in non-compliance.

There are certain basic rules that should not be violated under any circumstances. Violations of these rules can result in disciplinary action, up to and including termination.

DISCIPLINARY PROCEDURE

Discipline should be a learning process that benefits both the employee and employer and should be directed toward the employee's commitment to improve his/her performance or behavior.

The basic principles to be followed in administering discipline are governed by the concept of "progressive discipline". However, some infraction may require a deviance from this system. Under progressive discipline, the employee is notified of the problem and given an opportunity to correct it prior to the imposition of discharge. It is hoped that through the progressive discipline procedures, the employee's behavior will be corrected and that the employee will become a satisfactory employee. The progressive discipline procedure is as follows:

- A. For minor or less serious offenses:
 - 1. A verbal warning, documented by the supervisor.
 - 2. If no improvement is shown in the employee's behavior within the designated time frame, a written warning may be issued by Human Resources.
 - 3. Failure to comply with the written warning may result in a suspension without pay. The length of the suspension will be determined by the Manager and the Director of Human Resources. The length of the suspension must be approved by the CEO. Sick leave and vacation will not be approved for use during this time.
 - 4. If the above three (3) steps have failed, discharge is appropriate.
- B. For serious offenses:
 - 1. If the violation is of a serious nature, the employee may be suspended without pay, pending investigation of the circumstances, or may be terminated. Sick leave and vacation will not be approved for use during suspension periods.
 - 2. No previous warning need be given in the case of a suspension or discharge due to gross violation of conduct or rules.

An investigation will be completed by the Director of Human Resources or his/her designee within five (5) working days of a suspension event. This investigation provides Administration an opportunity to interview those individuals involved and to review statutes and laws. In cases where patients, visitors and/or employees' safety is concerned, the CEO may make an exception to this policy and either suspend or terminate the employee involved immediately.

Any employee who has been reprimanded or disciplined in any manner must still be treated with respect and courtesy by other employees.

SERIOUS OFFENSES

The following offenses are extremely serious, and due to their severity, will usually subject an employee to immediate dismissal. This list is not all inclusive.

- Physical altercations and weapons
- Patient abuse/ neglect
- Solicitation/ distribution of drugs and/or alcohol
- Theft
- Unlawful activity

DISCIPLINARY PROBATIONARY EMPLOYEE

An employee can be placed on probationary status as a result of a disciplinary action. The purpose of disciplinary probation is to allow administration a period of time to evaluate the disciplined employee's efforts to conform to acceptable behavior. While under a disciplinary probation period, the employee will not be able to accrue or use any sick leave or vacation.

Completion of the probationary period does not constitute an on-going commitment of employment.

GRIEVANCES

Putnam County Memorial Hospital (PCMH) recognizes that employees have the need to express concerns and resolve work related problems. This grievance policy has been established to provide a fair and timely process for solving problems that cannot be resolved through normal problem solving channels. While it is hoped that most problems can be resolved between the employee and immediate supervisor, any employee may file a grievance through this grievance process without jeopardizing their employment.

A grievance is defined as a claim by an employee of an improper interpretation, application or violation of the policies, rules and regulations that govern the conduct of employees.

The objectives of this grievances policy are:

1. To provide employees with an accepted means of expressing their concerns and airing their grievances.
2. To resolve employee grievances on a fair and equitable basis and as promptly as possible.
3. To alert Administration to the existence of employee dissatisfaction and provide an opportunity to eliminate the causes of such dissatisfaction.
4. To improve employee attitudes and morale.

Employees are encouraged to use the grievance process without fear of adverse effects on their employment or their relationship with their Manager or Administration.

During orientation each new employee will be given an employee handbook, which includes the grievance policy. The Director of Human Resources (HR) or his/her designee will go over the grievance policy with new employees during orientation.

All written grievances reported by an employee will be investigated by the Director of HR or his/her designee.

If the grievance pertains to HIPAA, the grievance should be reported to the HIPAA Committee immediately for investigation.

CONFIDENTIALITY

Everyone involved in the investigation, including witnesses of the event, will be expected to maintain confidentiality concerning the grievance and its resolution. The privacy of all individuals involved will be protected as much as possible.

EMPLOYEE GRIEVANCE FORM

Each department will have copies of the Employee Grievance Form readily available in their department. Copies of the grievance form will also be available from HR.

The employee having the concern or complaint should fill out a Grievance Form. The following items on the form must be completed:

1. Nature of the grievance
2. Pertinent dates
3. Parties involved
4. Employee's requested resolution
5. Signature of employee filing the grievance

After the completion, the Grievance Form should be filed with the HR Department within two (2) working days following the incident. (Working days are identified as Monday through Friday)

INVESTIGATION OF THE GRIEVANCE

Upon receipt of the Employee Grievance Report, the HR Department will note the date received and will enter the grievance in the Employee Grievance Log maintained by HR.

Within one (1) working day from the receipt of the Employee Grievance Report, the HR Department will begin the initial assessment of the incident. The Director of HR or his/her designee will begin requesting written statements from all individuals involved in the grievance.

Within five (5) working days from receipt of the Employee Grievance Report, the HR Department will review the written statements and will follow up with interviews of the individuals involved. In order for

HR to expedite the investigation, it's important for employees to respond in a timely manner. After reaching a decision on the grievance, the HR Director or his/her designee will make a recommendation to the CEO.

The CEO will then review the recommendation from HR and all documentation from the grievance investigation.

Within five (5) working days of the receipt of the recommendation of HR, the CEO will review the recommendation, including all supporting documentation, and will make his final decision. A Grievance Resolution will be issued with the CEO's decision and this resolution will be forwarded to the employee who filed the grievance.

The employee will be asked to sign the Grievance Resolution and will be given a copy of the Resolution Form. By signing the Grievance Resolution, the employee is stating that they have been informed of the resolution of the grievance. The employee is not signing that he/she agrees with the resolution.

APPEAL PROCESS:

The CEO has the final decision on all personnel matters.

TERMINATIONS

PCMH recognizes three (3) types of terminations:

RESIGNATIONS

Hourly employees are required to give two (2) weeks written notice. Salaried employees and Managers are required to give four (4) weeks written notice.

Notice is the time the employee is on the job and does not include vacation or sick leave hours. If an employee needs to take PTO during his 2 week (or 4 week) notice, the employee should extend the ending date by the number of days of PTO used in order to be eligible for the payout of unused vacation. This notice period can be waived by the CEO under unusual circumstances.

Proper notice will be considered when determining payout of unused PTO. Any employee who wants to appeal the decision of PTO payout must do so within 15 days of their final check.

Proper notice for contract employees is stated in their contracts.

DISCHARGED

An involuntary discharge is termination which has been initiated by PCMH and could result from a number of reasons.

The CEO will determine PTO pay out eligibility for discharged employees.

RETIREMENT

Employees may retire at any age of their choice. Retiring employees will be paid for any unused PTO if they have given proper notice of their retirement.

MISCELLANEOUS

REFERENCES / EMPLOYMENT VERIFICATION

PCMH may receive inquiries regarding an employee's work record during or after employment at PCMH. Reference verification requests are completed in Human Resources. A written authorization from the employee will be requested to provide any information other than job title and employment dates for various employment inquiries.

CARE OF EQUIPMENT

Accidental breakage or loss of hospital property or equipment should be reported to the Manager or designee immediately so repair or replacement can be arranged. Equipment or property that is not functioning properly should be tagged and taken out of service immediately to maintain a safe environment.

Property of PCMH should not be removed from the premises except while conducting hospital business.

CONFLICT OF INTEREST

Conflicts of interest can occur if an employee or a relative of an employee has a vested interest in or receives any direct or indirect monetary advantage, other than his/her salary, from his/her status as an employee. In the event that a conflict of interest becomes known to the Administration, the employee may be required to file a written declaration disclosing such possible conflict of interest.

ACTIVITIES COMMITTEE

Putnam County Memorial Hospital has established an Activities Committee to oversee special employee functions throughout the year. The committee will be supported by various activities throughout the year. The Activity Committee has the oversight and designates the use and distribution of the funds for the various employee activities throughout the year.

NOTARY PUBLIC

The service of a Notary Public is available for all patients, employees, volunteers, and members of the Medical Staff at PCMH. The person wanting to utilize this service will need to contact the Business Office or Administration Office to make an appointment.

SOLICITATION

PCMH tries to maintain an atmosphere consistent with the wellbeing of our patients, to prevent disturbances in the operation of the hospital, and to protect employees from undue interference in their work or use of the facilities. Therefore, non-employees may not come onto hospital property at any time to distribute written materials or to solicit membership, support, contributions, or sale of goods on behalf of any organization, fund, activity, or cause, without the authorization of the CEO.

Any materials, personnel or messages represented on behalf of county government, school district, or civic organizations may be excluded with this policy with permission of the CEO.

At no time shall any employee solicit any patient or visitor for any purpose, nor shall any employee distribute any non-hospital material to patients or visitors. Employees may only engage in solicitation of other employees when both employees are on non-working time and only in areas to which patients do not have access.

SAFETY AND SECURITY

SAFETY COMMITTEE

Safety procedures have been established and an appropriate committee formed to assure compliance with all applicable federal, state, and health regulations. The purpose of the safety program is to establish a working environment free from recognized hazards that could cause injury or death, and to provide an in-service program to increase safety awareness among all employees.

The safety program has been designed to give employees a stronger voice in providing a safer workplace. The Safety Committee is the strongest voice for the employee. The Safety Committee will review safety hazards and concerns and will engineer controls to eliminate or safeguard these hazards.

EMPLOYEE SAFETY RESPONSIBILITIES

Your personal commitment to maintaining a safe work environment and your cooperation in acting in a safe manner is mandatory. It is a condition of continued employment that every employee shall abide by the safety policies set forth by PCMH:

- Read safety manuals
- Attend safety meetings
- Participate in drills in order to learn the responsible actions during an emergency situation.
- A constant awareness of potentially hazardous conditions
- An operating knowledge of current safety policies and procedures.
- Promptly report any potentially hazardous conditions and/or equipment.

REPORTING SAFETY HAZARDS

All employees are responsible for reporting hazards, malfunctioning equipment and all accidents occurring on hospital premises immediately. Failure to do so not only hinders the removal of hazards and/or repair of equipment, but puts other employees or patients in jeopardy. Failure to report an incident and/or injuries immediately will be cause for disciplinary action.

Prompt reporting of potentially hazardous conditions to the Safety Committee by completing an Event Report. The Event Report may be obtained from your Manager.

Any employees with questions regarding rules and regulations on safety and procedures should direct them to the safety manager.

PHOTO BADGES / SECURITY ACCESS CARDS

All employees are required to wear their photo ID badges while on duty. ID badges should be worn with the photo facing out. Photo and all print on the ID badges must be visible and worn at eye level.

Employees will receive their initial photo ID badge free of charge. Should an employee lose his/her photo ID badge, he/she must pay a \$25 fee for a new badge.

Each employee will be issued an access code card at the beginning of their employment. This access card will be used to gain entry into the hospital, and in some cases, to gain entry into protected areas within the hospital. Employees are responsible for knowing where their access card is. If the card is lost and is not reported, the employee could be subjected to disciplinary process. The cost of replacing the card is \$25. **If an access card is lost, the employee must report the loss immediately.**

All external doors, with the exception of the main entrance, are locked at all times. Access is granted via employee security badge. The main entrance of the hospital is open 24 hours for patient access.

EMERGENCY WARNINGS

In case of emergencies, employees will be notified by an overhead page. The current Hospital Alert Codes are:

Evacuation – Facility Alert-Evacuation-Describe Location

Fire – Code Red-Location

Hazardous Spill – Facility Alert-Hazardous Spill-Location

Severe Weather – Weather Alert-Threat/Location-Instructions

Missing Person – Security Alert-Description

Active Shooter/Hostage

Bomb Threat – Security Alert-Threat- Location

Combative Patient/Person – Security Alert-Security Assistance-Requested Location

Mass Casualty – Medical Alert- Mass Casualty- Description

Medical Emergency – Code Blue-Location

Hostage – Security Alert – Hostage Situation - Location

Additional information regarding emergencies is covered in the Emergency Preparedness Handbook.

LOST AND FOUND

Articles found on the premises are to be turned in to the Business Office. Inquiries regarding patient lost articles should be referred to the Nursing Department. The Business Office shall be notified of all lost articles.

PARKING

PCMH provides designated parking for its employees, patients, and visitors.

Employees need to drive slowly through the parking lots and driveways. Vehicles are not to block the ambulance drive, emergency entrance, or the loading/unloading area at the rear entrance of the hospital.

PERSONAL PROPERTY

Employees are responsible for their personal property. Money and other valuables should be kept on the person. The Hospital is not responsible for lost or stolen possessions.

RIGHT TO INSPECT

PCMH reserves the right to inspect packages, lockers and any other item representing a potential security risk.

TRAVEL

PCMH considers personnel attendance at educational offerings to be important in helping us stay abreast of current and new standards of care within the hospital community. PCMH encourages their employees to attend educational opportunities to further their education.

TRAVEL REQUESTS:

All travel expenses must be accounted for in the Department's annual approved budget.

Any employees wishing to attend seminars or travel to outside meetings must fill out a Travel Request Form and be approved by the Manager.

Any travel that is not budgeted for must be approved by the CEO.

All travel expenses approved by the Manager must be presented to Administration/ CEO for final approval.

If Travel Request Procedure is not followed, the Hospital may NOT reimburse the employee for travel expenses incurred.

MILEAGE:

Mileage will be reimbursed for use of personal vehicle at the current IRS rate.

MEALS:

While traveling for meetings and/or training for the hospital, employees will be reimbursed for meals as follows:

- \$35.00 a day

PCMH will not reimburse employees for any alcoholic drinks.

RECEIPTS:

The employee should get itemized receipts for any expenses during their traveling and give these receipts with the completed Expense Reimbursement Form to Accounts Payable. Reimbursement checks are issued through Accounts Payable and are not part of payroll.

INFORMATION TECHNOLOGY

COMPUTER SECURITY AND USAGE

PCMH is the owner of its electronic information assets, to include all computer and network hardware, software and media furnished by PCMH, to include Internet and e-mail services, as well as the data files generated by or residing on such equipment. No employee has a right to privacy regarding any information in any PCMH computer or information system such as the Internet or e-mails that employees send or receive or any data stored on any PCMH property.

It is essential that systems and equipment be protected from misuse, unauthorized use, and unauthorized access. Any employee who intentionally and without proper authorization, directly or indirectly, damages or destroys any computer, computer system, computer network, program, or data, or causes any such acts to occur, will be subject to disciplinary actions.

Additional information is provided in the HIPAA Security Manual.

ACCEPTABLE USE POLICY

Though there are a number of reasons to provide a user network access, by far the most common is granting access to employees for performance of their job functions. This access carries certain responsibilities and obligations as to what constitutes acceptable use of the Hospital network. This policy explains how hospital information technology resources are to be used and specifies what actions are prohibited. While this policy is as complete as possible, no policy can cover every situation. Questions on what constitutes acceptable use should be directed to the user's Department manager and /or the IT Department.

Since inappropriate use of the Hospital systems exposes the Hospital to risk, it is important to specify exactly what is permitted and what is prohibited. The purpose of this policy is to detail the acceptable use of the Hospital information technology resources for the protection of all parties involved.

SCOPE:

The scope of this policy includes any and all use of the Hospital IT resources, including but not limited to, computer systems, e-mail, the network, PDA / Smart Phones, and the Hospital Internet connection. Please be reminded that electronic media and services provided by the Hospital are Hospital property and their purpose is to facilitate and support Hospital business.

POLICY:

Monitoring and Privacy

Users should expect no privacy when using the Hospital network or the Hospital resources. Such use may include but is not limited to: transmission and storage of files, data, and messages. The Hospital reserves the right to monitor any and all use of the computer network without the user's permission. To ensure compliance with hospital policies this may include the interception and review of any e-mails, or

other messages sent or received, inspection of data stored on personal file directories, hard disks, and removable media. E-mail and Web filtering software will be used and monitored to provide the highest level of network security and patient information confidentiality.

E-mail Use

Limited personal usage of the Hospital email systems is permitted as long as A) such usage does not negatively impact the Hospital computer network, and B) such usage does not negatively impact the user's job performance.

- The following is never permitted: spamming, harassment, communicating threats, solicitations, chain letters, or pyramid schemes. This list is not exhaustive, but is included to provide a frame of reference for types of prohibited activities.
- The user is prohibited from forging e-mail header information or attempting to impersonate another person.
- E-mail is an unsecure method of communication, and thus information that is considered confidential or proprietary to the Hospital may not be sent via e-mail, regardless of the recipient, without proper encryption.
- E-mail systems were not designed to transfer large files and as such e-mails should not contain attachments of excessive file size.
- Attachments to e-mail messages should not be opened unless the sender is a business contact or the user is expecting an attachment from the sender. Any other e-mail messages with attachment should be deleted at once.

Confidentiality

Confidential data must not be A) shared or disclosed in any manner to non-employees of the Hospital, B) should not be posted on the Internet or any publicly accessible systems, and C) should not be transferred in any insecure manner. Please note this is only a brief overview of how to handle confidential information, and other policies may refer to their proper use of this information in more detail.

Network Access

The user should take reasonable efforts to avoid accessing network data, files, and information that are not directly related to his or her job function. Existence of access capabilities does not imply permission to use this access.

Unacceptable Use

The following actions shall constitute unacceptable use of the Hospital network. This list is not exhaustive, but is included to provide a frame of reference for types of activities that are deemed unacceptable. The user may not use the Hospital network and or systems to:

- Engage in activity that is illegal under local, state, federal, or intentional law.
- Engage in any activities that may cause embarrassment, loss of reputation, or other harm to the Hospital or Hospital employees.
- Disseminate defamatory, discriminatory, vilifying, sexist, racist, abusive, rude, annoying, insulting, threatening, obscene or otherwise inappropriate messages or media.
- Engage in activities that cause an invasion of privacy.
- Engage in activities that cause disruption to the workplace environment or create a hostile workplace.
- Make fraudulent offers for products or services.
- Perform any of the following: port scanning, security scanning, network sniffing, keystroke logging, or other IT information gathering techniques when not part of an employee's job function.
- Install or distribute unlicensed or "pirated" software.
- Reveal personal or network passwords to others (including family, friends, or other members of the household when working from home or remote location).

Instant Messaging

Instant Messaging is not permitted for any purpose.

Overuse

Actions detrimental to the computer network or other Hospital resources, or that negatively affect job performance are not permitted.

Web Browsing

The Internet is a network of interconnected computers of which the Hospital has very little control. The employee should recognize this when using the Internet, and understand it is a public domain and he or she can come into contact with information, even inadvertently, that he or she may find offensive, sexually explicit, or inappropriate. The user must use the Internet at his or her own risk. The Hospital is specifically not responsible for any information the user views, reads, or downloads from the Internet.

Personal Use

The Hospital recognizes the Internet can be a tool that is useful for both personal and professional purposes. Personal usage of the Hospital computer systems to access the Internet is permitted during lunch, breaks, and before / after business hours, as long as such usage follows pertinent guidelines

elsewhere in this policy and does not have a detrimental effect on the Hospital or on the user's job performance. Employees are not permitted to be involved with any electronic communication that contains ethnic slurs, racial epithets, or anything that may be constructed as harassment or disparagement of others based upon their race, national origin, sex, sexual orientation, age, disability, religious, or political beliefs. The Hospital prohibits any illegal activities or activities contrary to the Hospital policy or business interest.

Copyright Infringement

The Hospital's computer systems and networks must not be used to download, upload, or otherwise handle illegal and / or unauthorized copyrighted content. Any of the following activities constitute violations of this acceptable use policy, if done without permission of the copyright owner: A) copying or sharing images, music, movies, or other copyrighted material using Peer-to-Peer (P2P) file sharing or unlicensed CD's and DVD's; B) posting or plagiarizing copyrighted material; and C) downloading copyrighted files which the employee has not already legally procured. This list is not meant to be exhaustive, copyright law applies to a wide variety of works and applies to much more than is listed above.

Peer-to-Peer File Sharing

Peer-to-Peer (P2P) networking is not allowed on the hospital network under any circumstance.

Streaming Media

Streaming media is not permitted for any purpose other than training purposes.

Bandwidth Usage

Excessive use of the Hospital bandwidth or other computer resources is not permitted. Large file downloads or other bandwidth-intensive tasks that may degrade network capacity or performance must be performed during times of low Hospital-wide usage.

Remote Desktop Access

Use of remote desktop software and / or services is allowed as long as it is provided by the Hospital. Remote access to the network must conform to the Hospital's Remote Access Policy.

Circumvention of Security

Using Hospital-owned or company-provided computer systems to circumvent any security systems, authentication systems, user-based systems, or escalating privileges is expressly prohibited. Knowingly taking any actions to bypass or circumvent security is expressly prohibited.

Use for Illegal Activities

No Hospital-owned or Hospital-provided computer systems may be knowingly used for activities considered illegal under local, state, federal, and international law. Such actions may include, but are not limited to:

- Unauthorized Port Scanning
- Unauthorized Network Hacking
- Unauthorized Packet Sniffing
- Unauthorized Packet Spoofing
- Unauthorized Denial of Service
- Unauthorized Wireless Hacking
- Any act considered an attempt to gain unauthorized access to or escalate privileges on a computer or other electronic system.
- Acts of Terrorism
- Identity Theft
- Spying
- Downloading, storing, or distributing violent, perverse, obscene, lewd, or offensive material as deemed by applicable statutes.
- Downloading, storing, or distributing copyrighted material

The Hospital will take all necessary steps to report and prosecute any violations of this policy.

Non-Hospital-Owned Equipment

The use of personal or non-Hospital owned equipment is not encouraged and requires permission from IT and Management.

Personal Responsibility / Liability for Content / Social Media

Each individual employee, physician, volunteer, or other associate of the Hospital or its affiliates is personally responsible for his or her content on social media networks and other online communications. Any communications should reflect an individual's personal point of view and not the viewpoint of the Hospital. Employees shall not represent, claim, or imply they are speaking for, or representing on behalf of the Hospital. Unless an individual employee is authorized to speak on behalf of the Hospital in online communications, the content should be clear that such communications are the individual's personal opinions and do not reflect the opinion of the Hospital or its affiliated entities (see Social Media Disclaimer). If employees, physicians, volunteers, or other individuals associated with the Hospital acknowledge their relationship with the Hospital on an online community, they shall include disclaimers in their online communications advertising they are not speaking officially on behalf of the Hospital. Content or information posted or published remains available for infinite periods of time. Before posting or publishing, content should be considered carefully and caution should be exercised. Employees should exercise good judgment and strive to be accurate, fair, and responsible when using

social media networks. This applies to all employees who access, use, post, publish, or otherwise utilize social media networking or Internet-based websites including but not limited to Facebook, Twitter, LinkedIn, MySpace, YouTube, blogs, media sites, or other similar online venues.

Social Media Disclaimer

Employees are solely responsible and liable for the content they post or publish and the Hospital shall not be liable for any errors, omissions, losses or damages claimed or incurred due to any content posted or published by an employee.

All employees are to post the following disclaimer with any posting on the above listed social media venues.

“The perceptions, opinions, beliefs, and attitudes expressed through social media websites and other public forums are those of the user and are not aligned with the policies, standards, beliefs, and practices of the Putnam County Memorial Hospital or its affiliates. Putnam County Memorial Hospital DOES NOT endorse any user submitted opinion, material, content and / or links or assumes any liability for any actions of participating user/s.”

Personal Storage Media

The Hospital reserves the right to restrict the use of personal storage media, which includes but is not limited to: USB or flash drives, external hard drives, personal music / media players, and CD/DVD writers, on the Hospital network. The user must take reasonable precautions to ensure viruses, Trojans, worms, malware, spyware, and other undesirable security risks are not introduced into the Hospital network. Use of personal storage media must conform to the Hospital Mobile Device Policy.

Software Installation/Use

Installation/use of non-Hospital-supplied programs is prohibited. Numerous security threats can masquerade as innocuous software- malware, spyware, and Trojans can all be installed inadvertently through games or other programs. Alternatively, software can cause conflicts or have a negative impact on system performance.

Security Incident Reporting

If a security incident or breach of any security policies is discovered or suspected, the user must immediately notify his or her Department Manager and/or Administration and follow any applicable guidelines. Examples of incidents requiring notification include but are not limited to:

- Suspected compromise of login credentials (user name, password, etc.)
- Suspected virus/malware/Trojan infection
- Loss or theft of any device containing hospital information
- Any attempt by any person to obtain a user’s password over the telephone or by email
- Any other suspicious event that may impact the hospital’s information security

Users must treat a suspected security incident as confidential information, and report the incident only to his or her supervisor. Users must not withhold information relating to a security incident or interfere with an investigation.

Applicability of Other Policies

This policy is part of the Hospital's cohesive set of security policies. Other policies may apply to the topics covered in this policy and as such the applicable policies should be reviewed as needed.

Accidental Access of Inappropriate Email and Internet Sites

Occasionally a user may accidentally access an inappropriate website or receive inappropriate email. PCMH is not liable for the content of such accidental access or the receiving of inappropriate email. It is the responsibility of each user to notify his/her Department Manager or the IT Department of the inappropriate content.

Enforcement

This policy will be enforced by the Hospital Administration. Violations will be considered for the severity, intent and the result of any such violation and may result in disciplinary action, which includes suspension, restriction of access, or more severe penalties including termination of employment. Where illegal activities are suspected, the hospital will report such activities to the applicable authorities. If any provision of this policy is found to be unenforceable or voided for any reason, such invalidation will not affect any remaining provisions, which will remain in force.

GLOSSARY OF ABBREVIATIONS

ACLS- Advanced Cardiac Life Support

CEO- Chief Executive Officer

CLIA- Clinical Laboratory Improvement Amendment

CNA- Certified Nurse's Aide

COBRA- Consolidated Omnibus Budget Reconciliation Act (Continuation of health insurance after termination of employment)

COO- Chief Operating Officer

CPR- Cardiac Pulmonary Resuscitation

EDL- Employee Disqualification List

FMLA- Family Medical Leave Act

FT- Full-time

HIPAA- Health Insurance Portability and Accountability Act of 1996

HR- Human Resources

LOA- Leave of Absence

MHA- Missouri Hospital Association

PCMH- Putnam County Memorial Hospital

POA- Power of Attorney

PP- Pay Period

PRN- Position Required as Needed

PT- Part-time

PTO- Paid Time Off

RHC- Rural Health Clinic

UR- Utilization Review

USERRA- Uniformed Services Employment and Reemployment Rights Act of 1994

DEFINITIONS

Blogging: The process of writing or updating a “blog”, which is an online, user-created journal (short for web log”).

Instant Messaging- A text-based computer application that allows two or more Internet-connected users to “chat” in real time.

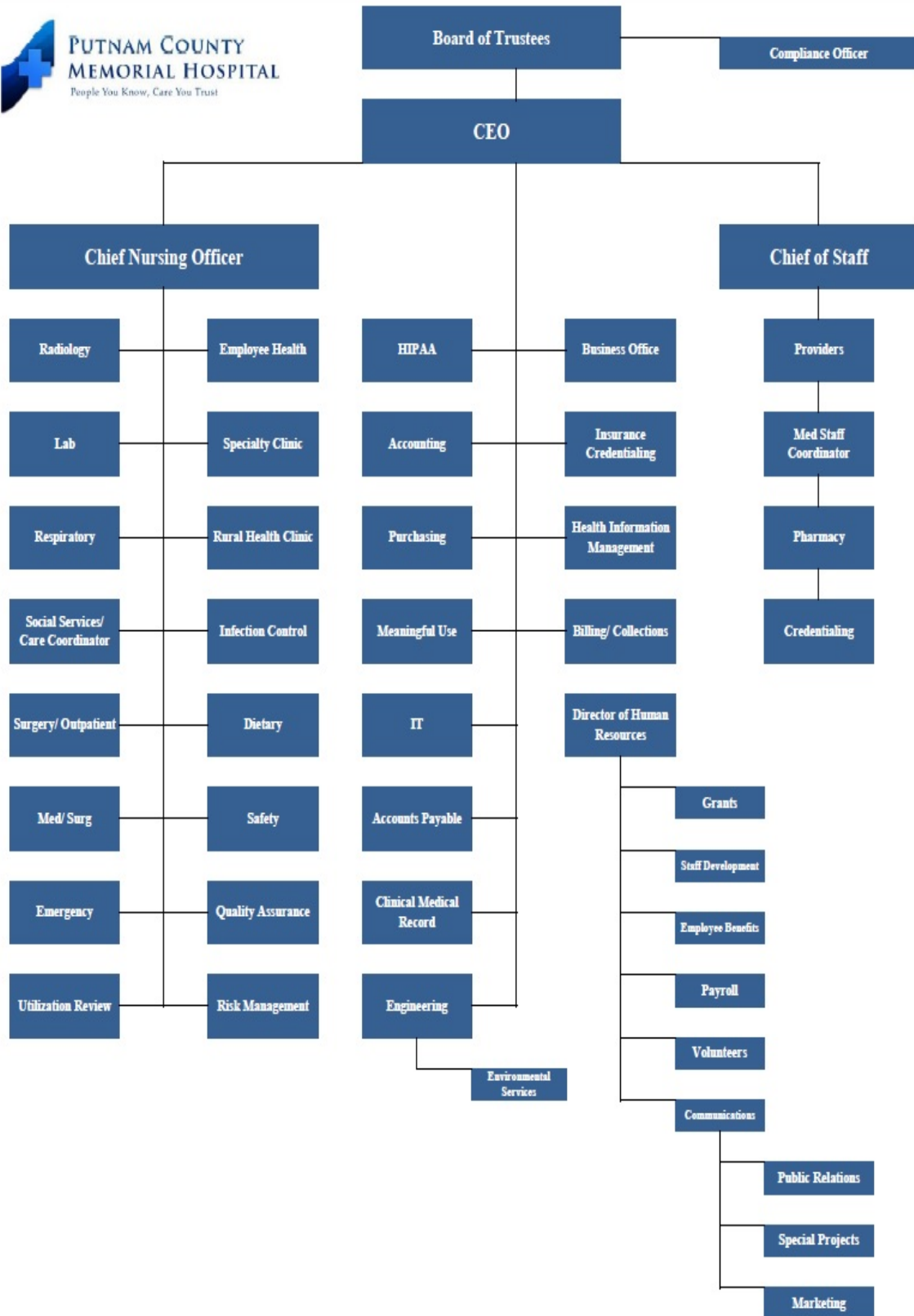
Peer to Peer (P2P) File Sharing: A distributed network of users who share files by directly connecting to the user’s computers over the Internet rather than through a central server.

Remote Desktop Access: Remote control software that allows users to connect to interact with, and control a computer over the Internet just as if they were sitting in front of that computer.

Streaming Media: Information, typically audio and/or video, that can be heard or viewed as it is being delivered, which shows the user to start playing a clip before the entire download has completed.

ADDENDUM A
CHAIN OF COMMAND

(see next page)



Putnam County Memorial Hospital Emergency Call Tree

