Employee Handbook

Welcome to Our Team of Miracle-Makers



Miracles made daily.







Welcome!

Dear new employee,

Welcome to Jackson Health System, and congratulations on your new position! By choosing to work for Jackson, you have become an important part of South Florida's most comprehensive healthcare provider and largest academic safety-net system, providing a single high standard of quality care to the residents of Miami-Dade County and visitors from around the world.

Every one of us is an ambassador, a caregiver, and health professional – when you take those roles seriously, you become a critical part of our mission and vision. When we work together, we deliver the Jackson Miracle Experience for our patients and their loved ones. Our taxpayer-owners count upon us to be stewards of Jackson's cherished mission and champions of its best future.

Since opening its doors in 1918, Jackson has grown from a 13-bed community hospital to an internationally recognized hub of clinical excellence. Our services range from routine care to rare life-saving procedures. Together we will ensure that Jackson's second century builds upon the reputation we have built during our first hundred years.

Thank you in advance for your commitment and contributions, which ensure Jackson's continued success. I invite you to email me at MyView@jhsmiami.org, to follow Jackson on your favorite social media platforms, and to truly embrace your new role as part of our miracle-making team. We look forward to your successful and long-term career with us at Jackson!

Sincerely,

Carlos A. Migoya

President & Chief Executive Officer

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INTRODUCTION

Overview of Jackson Health System and the Public Health Trust

For nearly a century, Jackson Health System has been a cornerstone of the South Florida community, providing comprehensive medical care to all who need it. Jackson opened its doors in 1918 as a 13-bed community hospital and has grown into an internationally recognized medical system, offering routine care to rare, life-saving procedures.

With more than 11,000 employees, Jackson also has numerous nationally acclaimed programs offering the latest treatment options in a variety of medical specialties that attract patients from around the world.

It is an integrated healthcare delivery system consisting of six hospitals, its centerpiece, Jackson Memorial Hospital, Holtz Children's and Women's Hospital, Jackson Rehabilitation Hospital, Jackson Behavioral Health Hospital, and two community hospitals, Jackson North Medical Center and Jackson South Community Hospital; two long-term care nursing facilities; a mental health network; medical clinics in county corrections facilities; and numerous urgent care centers and clinics.

Governed by the Public Health Trust, a dedicated team of citizen volunteers acting on behalf of the Miami-Dade Board of County Commissioners, Jackson Health System is committed to building the health of the community by providing a single, high standard of quality care for the residents of Miami-Dade County.



A Century of Milestones

- 1916 Construction begins on new \$150,000 Spanish-style hospital on NW 10th Avenue and 10th Street.
- 1918 Miami City Hospital, nicknamed "The Alamo" by employees, opens on June 25 in the midst of an influenza epidemic.
- Just days after the death of James M. Jackson, the hospital's first president, the Miami city commissioners vote to change the hospital's name to Dr. James M. Jackson Memorial Hospital.
- Jackson Memorial treats more than 700 victims after the Great Hurricane of 1926 hit South Florida, operating relief stations through the city.
- 1946 Jackson becomes the only hospital in the region to offer radium treatment for cancer.

- 1952 The University of Miami Leonard M. Miller of Medicine opens beginning Jackson's longtime affiliation with UM.
- 1956 Dr. Robert S. Litwak, Chief of Thoracic Surgery at Jackson, performs the first open-heart surgery in Florida.
- Jackson treats burn patients with innovative silver nitrate treatment after the cruise ship, Yarmouth Castle, catches fire.
- 1977 Jackson's Kidney Transplantation Center opens, performs 24 transplants in one year.
- 1986 The Best in Medicine names Jackson Memorial one of the top 25 medical facilities in the U.S., the only public hospital to make the list.
- 1992 Ryder Trauma Center opens just weeks before Hurricane Andrew devastates South Miami-Dade.
- The Public Health Trust creates Jackson Health System, acquires Deering Hospital which is renamed Jackson South Community Hospital.
- 2006 Jackson Health System adds Parkway regional Medical Center, which becomes Jackson North Medical Center.
- More than 65% of Miami-Dade voters support Jackson's new Miracle-Building Bond Program. Over the next five to seven years, Jackson will invest \$1.4 billion into building new facilities and modernizing existing ones.
- Jackson Health System purchases a 27 acre parcel of land in the City of Doral that will be home to Jackson West.

JHS Mission, Vision and Values

"An Academic Health System with a Public Healthcare Mission"

Mission

To build the health of the community by providing a single, high standard of quality care for the residents of Miami-Dade County.

Vision

Our strategic vision is to be a nationally and internationally recognized, world-class academic medical system and to be the provider of choice for quality care.

Values

- Service Excellence & Quality
- Commitment
- Compassion
- Teamwork & Communication
- Integrity & Stewardship
- Respect
- Confidentiality
- Inclusion

The Jackson Health System Pillars of Success

The organizational goals of Jackson are illustrated by our "Pillars of Success". The Pillars represent Jackson's commitments and responsibilities as an organization: At Jackson Health System, we believe that our professional and ethical values and behaviors are essential to the success and vitality of our organization, and to the health and treatment of our patients.

As you approach each day here at Jackson, remember that you are working for an organization that cares deeply about the cultural climate that each of us creates. A focus on excellence, commitment, compassion, teamwork, communication, integrity, respect, confidentiality and the cultivation of an inclusive environment helps us preserve our beliefs and encourages us to be the very best every day.



Service

Improve patient satisfaction scores.

Our goal: Fewer complaints, higher customer satisfaction, higher customer retention, improved word of mouth

Quality

Provide care of the highest quality, embrace innovation and creative improvements

Our goal: Improved products or processes, reduced defects and rework, reduced waste

People

Improve the health standard of people in the local community – people taking care of people Our goal: Reduced turnover, improved productivity, improved morale

Finance

Practice fiscal responsibility

Our goal: Controlled costs, improved collections, higher profit margins

Growth

Expand our capabilities and presence in the community

Our goal: Larger market share, greater value, increased sales or customers, increased volume

The Jackson mission, vision and values are based on these pillars, as are the Standards of Excellence on which all employees are expected to base their job performance and level of service to our patients. By supporting the Pillars, you help to ensure our success as an organization.

JHS STANDARDS

Standards of Excellence

The Jackson Values are supported by the "Standards of Excellence." Each staff member is a personal and valued representative of the Jackson Health System (JHS) and its care facilities, and is expected to be sensitive and responsive to the needs of the JHS patients, its visitors, suppliers, and other staff members.

To support this philosophy and achieve the single high standard of care to which the JHS is dedicated, each staff member shall follow the "Standards of Excellence". Individual performance will be evaluated based on these standards.

- Acknowledging Others
- Teamwork and Collaboration
- Responsible and Responsiveness
- Confidentiality and Privacy
- Pride and Care of the Environment and Self
- Respect and Telephone Effectiveness
- Service Recovery

Diversity

Jackson is highly diverse in terms of the patients and families we serve from the surrounding community of Miami-Dade County and beyond. Our workforce reflects that diversity in many ways—our organizational diversity efforts focus on the differences and similarities that people bring to the workplace.

The concept of workforce diversity includes dimensions beyond those specified by law in terms of equal opportunity and non-discrimination – it also includes the dimensions which influence people outside of race, ethnicity and gender, such as profession, education, parental status, or geographic location.

Practicing a welcoming attitude toward diversity means to be inclusive of everyone, and creates a culture for making differences work. Embracing diversity and respecting others allows us to learn from others who are not the same, and appreciate the advantage of diverse perspectives. The diversity of the Jackson workforce uniquely positions us to serve our community, and one of our eight core values is upholding b a "culture of inclusion." We encourage employees to be aware of their attitudes toward people who are different from themselves and to value differences that enrich the institution.

EMPLOYEE CODE OF CONDUCT & GENERAL POLICIES

Compliance, Ethics, and Code of Conduct

JHS policies and procedures have been established to provide the best possible environment for employees in which to work, learn and provide services to the public. Such policies include guidelines for employees, for the administration, for protecting employee rights, and for providing an atmosphere in which everyone's highest potential can be reached.

JHS has established policies covering a wide range of issues relevant to employees and others at JHS. The following is a partial listing of some policies of which you should be aware. The list does not include every policy of JHS. Additional personnel-related policies are covered throughout this resource guide and in other JHS administrative documents.

Because policies are updated from time-to-time, the most recent versions of the policies are available to all employees through their department/unit supervisors, Employee/Labor Relations & Workforce Management Department or the employee intranet/NetPortal PHT Policies under 'Content Directory'.

Employee Code of Conduct

JHS Standards and Code of Conduct are designed to support an environment of business ethics and responsibility. It is not always easy to know the right thing to do in business situations that you may encounter. Accordingly, we aim to help you understand what is expected of you and how to carry out your responsibilities. These expectations and responsibilities can seem quite complex, as we operate under many different laws and regulations, but the important things to remember are to be honest, fair, respectful and responsible, with each other and with those whom we come into contact with.

The goals of the PHT/JHS Corporate Compliance Program, and this Code are:

- To safeguard the PHT/JHS tradition of strong moral, ethical and legal standards of conduct
- Identify and drive out criminal and unethical conduct
- Establish a structure that encourages employees to report concerns internally rather than externally, without fear of retaliation

Corporate Compliance Hotline

The policy of the Public Health Trust/Jackson Health System (PHT/JHS) is primarily to conduct its business lawfully and ethically and in full accordance with applicable federal, state and local laws, regulations and policies. Compliance Policies and Procedures and Standard Operating Procedures are established to promote ethical and lawful business behavior; and to ensure that a high standard or individual and organizational ethical and legal business practices are maintained and enforced throughout JHS. By maintaining these standards, we enhance our operations, improve the quality of the health care services we provide, and reduce the overall delivery cost of healthcare services to our community.

If you are aware of any dishonest or unethical behavior, or improper business practices, you may anonymously report such an incident to the Compliance Hotline without fear of retribution/retaliation.

The Compliance Hotline is available 24 hours a day, 7 days a week by dialing toll-free **1-800-684-6457** (24/7 strictly confidential, live operator).

The initial attempt for reporting should be to a Supervisor/Manager/Director, and then to the Compliance Integrity Hotline or the Office of Corporate Compliance.

Equal Employment Opportunity

Jackson Health System is committed to the principals of equal employment opportunity. Accordingly, we will not discriminate on the basis of race, color, religion, national origin, citizenship, sex, sexual orientation, gender identity or expression or expression, age, disability, special disabled veteran status, or any other protected veteran status, newly separated veteran status, Vietnam era veteran status, or any other status or condition protected by federal, state and local laws prohibiting job discrimination. We will also reasonably accommodate disabled applicants to enable them to be considered for and perform the duties of those positions for which they are qualified.

Jackson Health System adheres to a policy of non-discrimination in employment and strives affirmatively to provide an equal opportunity of employment for all applicants as required by:

- The Equal Pay Act of 1963 (EPA), as amended: Makes it illegal to pay different wages to men and women if they perform equal work in the same workplace.
- Title VI of the Civil Rights Act of 1964 (Title VI), as amended: Prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving Federal financial assistance.
- Title VII of the Civil Rights Act of 1964 (Title VII), as amended: Prohibits discrimination on the basis of pregnancy, childbirth, or a medical condition related to pregnancy or childbirth.
- The Pregnancy Discrimination Act (PDA), as amended: Prohibits discrimination in employment on the basis of race, color, religion, sex, or national origin.
- The Age Discrimination in Employment Act of 1967 (ADEA), as amended: Prohibits discrimination on the basis of age for people who are age forty (40) or older.
- Title IX of the Education Amendment of 1972 (Title IX): Prohibits discrimination on the basis of sex in education programs and activities receiving financial assistance in education programs and activities receiving Federal financial assistance.
- Section 504 of the Rehabilitation Act of 1973, the Americans with disabilities Act of 1990 (ADA), and ADA Amendments Act of 2008, all as amended: Prohibits discrimination against a qualified person with a disability in employment, public accommodations, public services, transportation, and telecommunications.
- The Florida Civil Rights Act of 1992 (FCRA), Sections 760.01-760.11 and 509.092, Florida Statutes: Secures for all individuals within the state freedom from discrimination because of race, color, religion,

sex, national origin, age, handicap, or marital status.

- Veterans are provided reemployment rights in accordance with the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA), the Vietnam Era Veterans Readjustment Assistant Act of 1974 (VEVRAA), and Section 295.09, Florida Statutes, which also stipulates categorical preferences for employment.
- The Genetic Information Nondiscrimination Act of 2008 (GINA): Prohibits discrimination on the basis of genetic information.
- Any other Federal, State, or Local Ordinance that prohibits discrimination based on race, color, religion, ancestry, national origin, sex, pregnancy, age disability, marital status, citizenship, gender identity, gender expression, familial status, or sexual orientation in housing, credit and finance, public accommodations and employment. In addition, all of the above-referenced laws prohibit retaliation against a person because the person complained about discrimination, filed a charge of discrimination, or participated in an employment discrimination investigation or lawsuit.

See JHS Policy & Procedure Manual, Code No. 361, <u>Equal Opportunity and Affirmative Action</u> for more information.

Anti-Discrimination and Retaliation

Jackson Health System recognizes its obligations to work towards an environment in which diversity is valued and equal employment opportunities are protected from discrimination and retaliation in accordance with federal, state, and local laws.

The Office of Employee/Labor Relations and Workforce Management shall investigate all complaints according to hospital policies and procedures. This authority is delegated from the President to the Chief Human Resources Officer, and carries the obligation to ensure the hospital community adheres to the hospital's policies prohibiting discrimination and retaliation. See JHS Policy & Procedure Manual, Code No. 378 Discrimination and Retaliation and federal/state compliance regulation below.

Qui Tam Action -Whistleblower Action: The FFCA and FCA both offer certain protections against retaliation for bringing an action under either Act. The Whistleblower action is an action brought by an individual(s) against violators of federal law on behalf of other or themselves and government. Any employee who is discharged, demoted, harassed, or otherwise experiences discrimination as a result of bringing an action because of whistleblower activity is entitled to all relief necessary to make the employee whole.

Billing and Reimbursement

PHT/JHS is committed to ensuring that its billing and reimbursement practices comply with all Federal and State laws, regulations, guidelines and policies. Further, we are dedicated to ensuring that bills are

accurate and reflect current payment methodologies that patients and customers receive timely bills, and that questions regarding billing are answered timely and accurately.

Federal Civil False Claims Act (FCA) and Florida False Claims Act (FFCA):

The FCA was originally enacted due to Civil War profiteering by government contractors, and prohibits anyone from knowingly defrauding the government by presenting false documentation or statements to either receive or avoid payment. The FCA covers fraud involving any federally funded program, and expands the government's ability to effectively identify and recover losses it suffers due to fraud. The FCA encourages individuals to uncover, report, and prevent fraud (Whistleblower Act). Violation of the FCA can result in financial civil penalties. The FFCA is an expanded version of the FCA at the state level. The FFCA allows the Attorney General's Medicaid Fraud Control Unit (MFCU) to recover damages in civil lawsuits against those who commit Medicaid fraud.

The Deficit Reduction Act of 2005 (DRA): The DRA mandates additional important compliance elements for healthcare agencies (which expanded the law to the state level) receiving \$5 million or more in Medicaid payment each year. In order to comply with the DRA, PHY/JHS must educate employees about the False Claims Act (FCA), and the Florida False Claims Act (FFCA), employees' rights to be protected as whistleblowers, and PHT/JHS policies and procedures for detecting and preventing fraud, waste and abuse.

Cost Reporting

We are required by Federal and State laws to submit certain reports of operating costs and statistics and comply with cost reporting requirements. We have a duty to disclose current, accurate and complete cost and pricing data where disclosure of such data is required under applicable Federal or State laws and regulations.

As a participant in the Medicare program, we are required to submit information to achieve settlement of costs relating to health care services rendered to Medicare beneficiaries. To that end, we must be particularly careful to ensure that hours worked and costs incurred are applied to the account for which the effort was required.

Recovery Audit Contractor (RAC): Centers for Medicaid & Medicare (CMS) program to detect and correct past improper payments made by the government to the healthcare agency (in this case, PHT/JHS). The RAC, reviews improper payments through detection and collection of overpayments, the identification of underpayments and the implementation of corrective actions that will prevent future improper payments. Currently the RAC only deals with Medicare recoveries, and will start Medicaid RAC on 1/1/2012, as well.

Health Insurance Portability Accountability Act (HIPAA)

HIPAA affects all covered entities including: health plans, health care clearinghouses, health care providers who conduct certain financial and administrative transactions. HIPAA also affects individuals including business associates and you (the PHT/JHS employee).

Portability – Makes it easier for you to change your health insurance in any way or change health insurance companies.

Accountability - This means your records are kept private and secure, or there are consequences/penalties. Only those people who must have information about you to provide care or to process your records should know your private health information.

HIPAA has three main parts that may be likened to three legs of a stool. If any one leg is removed, the stool will fall. The three parts are: Privacy, Electronic Security and Electronic Transactions:

- Confidentiality of Patient Information The HIPAA privacy Rule protects the privacy of every person's health information (PHI). It applies to "health information" in all forms; written, oral, electronic and any other form. The term health information" is broadly defined to include medical records, claims, payment information and almost all information related to a person.
- The Electronic Security Rule ensures the integrity of, and control access to, electronic health information. It's designed to protect electronic information from alteration, destruction, loss and accidental or intentional disclosure to unauthorized persons.
- The Transactions Rule enables entities to communicate efficiently with one another regarding claims processing, payment establishing who is and isn't covered under health plan, and determining a patient's level of eligibility for services.

Minimum Necessary Rule only allows those who must know information to provide care or do the work necessary to complete business responsibilities are legally and ethically allowed to know and use the information. They must make sure they guard PHI so it does not become known or used by anyone else. PHI must be kept confidential. Do not give information about a patient to anyone who is not directly involved in the care of the patient unless the patient gives an official consent or unless the law requires it.

It's important to abide by HIPAA because...

- If patients are afraid to give us all their health information because we don't keep it private, they will not receive the care they need and may suffer
- If patients think we don't protect their personal information, they will go someplace else.
- Accurate research to improve healthcare will NOT occur if patient holds back private information
- Healthcare cannot be cost effective without accurate information

PATIENT INFORMATION SHOULD NOT BE SHARED WITH ANYONE WHO DOES NOT HAVE LEGAL REASON TO KNOW ABOUT THE PATIENT

Ways to Protect Privacy

- Not talking about patients in public places like the cafeteria, elevator, hallway, the lobby, by the water cooler, in lounges, waiting rooms or parking garages
- Being sure no one can see your computer screen while you are working
- Never sharing your access/password code
- Logging off when you're not working on your computer
- Changing your password code and notifying your supervisor if your code becomes known by anyone
- Not leaving information on answering machines or emails because you do not know who may retrieve your messages
- Leaving only your name and your number on message machines when asking patients to call back
- Being sure you are in a private area when listening to or reading your messages
- Knowing who you are speaking to on the phone. If you're not sure, get a name and number to call them back after you find out it is okay to do so
- Being sure no one around you can overhear your conversation, especially in an office or waiting room
- Using ONLY standard phone because cellular phones can be scanned
- Never leaving documents unattended (store, file, shred or destroy according to departmental policy)
- Making sure your fax numbers are correct and use cover sheet that includes a confidentiality statement
- Giving your supervisor any papers or material with patient information you find anywhere such as, classroom, lounges, cafeteria, floor, wastebaskets, etc.

Other Ways to Protect Patient Privacy

- If you happen to see a patient in a public place, be very careful in greeting them. They may not want others to know they have been a patient
- When calling patients in waiting rooms for appointments or talking to them in our healthcare facilities, talk to them in a way that does not disclose their full name, doctor or reason for their visit to others who may overhear
- Even when a patient has someone with them, they may not want that person to hear their private information so ask the person to wait outside. If the patient requests them to stay, that is okay.
- Do not post patient's names and diagnosis or doctor's name and private information in any public areas such as waiting rooms, nursing stations or assignment boards.
- Do not email patient information when sending it outside of the PHT/JHS computer system.

Social Media Use

JHS participates in social media to promote better communication with the community. However, we have policies and procedures in place defining appropriate use of social media by individuals working at Jackson.

Individuals are responsible for exercising good judgment regarding the reasonable use of social media, including never posting patient information or photographs on a social media page or forum unless prior

consent is given from the Office of Communications and Outreach or shared from an official Jackson account. Reasonable use of social media must not interfere with one's employment obligations. When we participate in social media activity, we must only do so in an official capacity when on company time.

Emergency Care

PHT/JHS will provide treatment to all individuals, regardless of the ability to pay, who have an emergency condition. PHT/JHS employees may not delay such treatment or the provision of an appropriate medical screening in order to inquire about the individual's method of payment or insurance coverage. An individual may only be transferred from PHT/JHS to another facility in limited circumstances only after the individual has been stabilized and in accordance with the requirements set forth under governing Federal and State laws.

Emergency Medical Treatment and Labor Act (EMTALA): EMTALA requires hospitals with an emergency room must treat and stabilize any and all individuals who come to the ER regardless of the patient's insurance status or ability to pay for the care. If the patient has an emergency medical condition, the hospital must treat the patient to stabilize them.

Quality of Service

Our mission is to provide quality health care to all people regardless of ability to pay includes a requirement to support the needs of all members of our team who are involved in and provide care to the community. The Jackson Quality Corporate department establishes a comprehensive program to promote quality and safety objectives throughout the organization.

Arrangements with Physicians and Referral Services

Arrangements between physicians and hospitals must be structured and administered to ensure compliance with numerous federal and state laws and regulations. The federal laws that focus on arrangements with physicians include the Stark Law and the Anti-Kickback Statute.

Stark Law ("Physician Self-Referral Law"): The Stark Law is a strict liability statute that prohibits physicians from referring patients to facilities where the physicians or immediate family has a financial relationship. The law also prevents someone from presenting a bill or claim for payment that resulted from the prohibited referral. It is meant to prevent physician conflicts of interest limiting their ability to benefit financially from referrals, and to keep health care costs down by limiting over-utilization of services and unfair competition.

Anti-Kickback Law: A criminal statute that prohibits anyone or corporate entity from offering kickbacks to, or accepting kickbacks for offering clients or items paid for by federal monies. The purpose of this law is to protect patients and federal healthcare programs from fraud and abuse.

Gifts, Entertainment and Business Gratuities

In accordance with Miami-Dade County Code 2-11.1 (e) (3), it is the policy of the PHT/JHS to prohibit employees from soliciting or demanding any gift. In addition, the PHT/JHS prohibits any employee from accepting, soliciting or receiving any gift having a value of more than one hundred dollars (\$100.00) from patients, relatives or friends of patients, or from firms or individuals doing business with or soliciting business form the PHT.

Procurement Activities

Jackson's procurement activities are governed by the Procurement Regulation. The Regulation's purpose is to govern the procurement of goods, services, and construction, including professional services, for the Public Health Trust. The Regulation is advisory in that it is intended to provide guidance to Trust staff in the conduct or an orderly administrative process.

It is the policy of the Trust to promote competition and transparency in public procurement. Any Jackson employee involved in procurement activities, including contract negotiations, must be certain to abide by the Procurement Regulation and Miami-Dade county's Conflict of Interest and Code of Ethics Ordinance.

Physician Credentialing

Jackson's Corporate Credentialing Office manages medical staff and affiliated medical staff applications, as well as the credentialing of all Jackson physicians, dentists, podiatrists and many mid-level practitioners.

We are committed to maintain all appropriate credentials, professional licenses and certifications. We are required to maintain current status with our credentials and must follow the ethical standards required by our respective disciplines.

Excluded Parties

Jackson will not retain any employee, contractor or vendor who has been debarred, excluded or otherwise been deemed ineligible for participation in Federal and State healthcare programs, who has been convicted of or charged with committing a healthcare fraud-related criminal offense, or who does not have a current license, registration or certification.

In addition, all employees, contractors or vendors must be in good standing with the relevant State authorities that grant such license, registration or certification.

Conflict of Interest

PHT/JHS employees must disclose whether he/she has a Conflict of Interest (COI). A COI exists when the private interests of an employee prevents the employee from acting or making decisions in the best interest of JHS. The COI policy helps to prevent fraud, corruption, questionable association and behaviors.

Outside Employment

If you decide to seek work elsewhere while working for us, please contact your manager or your Human Resources Representative for assistance in determining whether potential outside employment is not contrary, detrimental or adverse to JHS, and does not appear to be a conflict of interest as contemplated under Florida law, the Code of Miami-Dade County, or JHS Policy & Procedure Manual Code Numbers 158- Conflict of Interest, 319 – Personal Leave, Leave of Absence, Mandatory Leave, Union Leave, and 379 – Alternate Work Policy – Dual, Joint or Shared Employment.

Before accepting or engaging in any outside employment, all employees of JHS must complete and submit a "Request for Outside Employment" form to his/her respective Department Heads and Vice President in charge of the Department, for approval. This form is available in Human Resources and on the JHS Intranet Portal. After completing this form, Human Resources shall provide the employee with an "Outside Employment Statement" form which must be completed by the employee and filed with the Supervisor of Elections located at 2700 NW 87th Avenue, Doral, Florida 33172-1632 by noon of July 1st of each year. The "Outside Employment Statement" indicates the source of the outside employment, the nature of the work being done, and any amount or types of consideration received by the employee.

Requests for outside employment must be renewed annually, even in cases where the type of outside employment has not changed. For more information, on prohibitions and procedure see: JHS Policy & Procedure Manual, Code No. 311, <u>Outside Employment</u>.

Marketing and Advertising Activities

Consistent with the laws and regulations that may govern such activities, we may use marketing and advertising activities to educate the general public, provide information to the community, increase awareness or our services and recruit colleagues.

We present only truthful, honest, fully informative and non-deceptive information in these materials, advertisements and announcements.

Disciplinary Action

We are expected to perform job duties and responsibilities in a manner that reflects the highest ethical and professional standards of conduct in accordance with the JHS Policy & Procedure Manual and any stated rules of a division, department or other established work unit.

Alcohol and Drug-Free Environment

Alcohol and drug abuse ranks as one of the major health problems in the United States. You are our most valuable resource, and your safety and health are vital concerns of ours. We are therefore committed to providing a safe working environment to protect you and our patients, to provide the highest level of service, and to minimize the risk of accidents and injuries.

JHS recognizes that alcohol abuse and drug use pose a significant threat to our mission, goals and commitment to provide quality health care to our community. The unauthorized possession, use, sale, manufacture or distribution of alcohol, controlled substances, illegal drugs or drug paraphernalia on JHS property is strictly prohibited. Employees are prohibited from reporting to duty under the influence of alcohol, illegal or legal drugs and/or controlled substances not covered by a doctor's order.

While certain states have legalized possession and/or use of marijuana, the possession and/or use of marijuana remains illegal under federal law. Therefore, Associates who possess or use marijuana are still subject to this policy, even in states that have stopped criminal prosecution for, or otherwise claim to "legalize," possession or use of marijuana. See JHS Policy & Procedure Manual, Code No. 337, Drug Free Work Place for more information.

Record and Retention

It is our policy to maintain an effective, comprehensive and standardized Records Management Program that complies with federal and state statutes for the storage, retention and disposition of public records.

Reporting to the Public Health Trust Board of Trustees

At least annually, the Chief Compliance Officer shall report to the PHT/JHS Board of Trustees concerning (1) the PHT/JHS adherence to standards of conduct contained in the Corporate Policy on the Code of Conduct, and (2) the compliance program in general.

Reservation of Rights

PHT/JHS reserves the right to amend the Code of Conduct, in whole or in part, at any time and solely at its discretion, in accordance with the provisions set forth by the PHT/JHS administrative policies and procedures.

Office of Government Relations

The Office of Government Relations is the lobbying arm of the institution and all efforts are placed on promoting the legislative agenda set forth by the President and Public Health Trust Board. We work with policy decision makers at the local, state and federal levels to uphold the hospital's mission and to promote the ability of this institution to effectively serve the health care needs of the community through representation, advocacy and service.

We closely monitor public policy, legislative and regulatory initiatives relative to healthcare. In addition, this office works to ensure that we maintain an open dialogue with policy makers in a manner that is beneficial to the overall goals of the organization. The office of Government Relations falls under the jurisdiction of the Executive Office.

Political Activities

It is the policy of Jackson Health System (JHS) to maintain an impartial position for the administration of medical services and programs for all Miami-Dade County citizens. The policy requires impartial public service and the right of employees to vote and exercise other basic rights of citizenship. Please refer to JHS Policy & Procedure Manual, Code no. 365 for explicit guidelines on Political Participation. For questions or more information, please contact the Office of Government Relations at 305-585-6754.

Disruptive Behavior

The purpose of the Disruptive Behavior policy is to:

- 1) Uphold the goal of the Public Health Trust (PHT) and Jackson Health System's goal to create and maintain a culture of safety and quality.
- 2) Define and describe actions and behaviors which hinder or do not contribute to that goal, and to describe the means by which such actions and behaviors will be addressed.
- 3) Establish the general policies and procedures that all JHS employees must follow as a condition of employment.
- 4) Ensure that all JHS staff conducts themselves in a professional, collaborative, and appropriate manner, while providing services to patients and the public.
- 5) Provide a formal procedure for further investigation and resolution of inappropriate conduct and disruptive behavior displayed in the workplace.

This policy requires all individuals working at JHS (including management, non-management, clinical and administrative staff, licensed independent practitioners, governing body members, contract/agency workers, students, volunteers, physicians, residents, other practitioners as defined by the Medical Staff Bylaws, and all others who represent JHS) to treat others with respect, courtesy, and dignity through teamwork, and to conduct themselves in a professional manner. These standards of behavior safeguard the JHS tradition of strong moral and legal standards. Behavior resulting in a complaint from a medical staff member, a member of the hospital clinical or administrative staff, individuals in contact with the medical staff members, employees at the hospital, or patients will be responded to according to this policy. JHS maintains a zero tolerance approach towards intimidating, disruptive, and illegal behaviors that may contribute to a work environment which may impact staff safety, quality of patient care, or criminal behaviors.

JHS leadership is committed to providing education to all new staff and existing staff, contractors, students, and volunteers on safety and quality, as well as defining acceptable versus disruptive behaviors. For more information, see JHS Policy & Procedure Manual, Code No. 359, <u>Disruptive Behavior</u>. See also JHS Policy & Procedure Manual, Code No.: 323A <u>Sexual Misconduct</u> - **Sexual Exploitation Abuse/Assault**, Code No. 323 <u>Sexual Harassment/Intimidation</u>, Code No. 378 <u>Anti-Discrimination and Retaliation</u>, and Code No. 305 <u>Corrective Action</u>.

Harassment

Because we value the dignity of all people, JHS is committed to maintaining a work environment that is free from discrimination, where all employees are free to devote their full attention and best efforts to his/her job. Harassment, either intentional or unintentional, has no place at JHS. Harassment includes but is not limited to: Making derogatory comments, including telling jokes, about someone's race, color, religion, creed, sex, gender identity or expression, age, national origin, citizenship, marital status, sexual orientation disability, or veteran status.

The term "harassment" for all purposes includes, but is not limited to, offensive language, jokes, or other verbal, graphic or physical conduct relating to an employee's race, sex, religion, color, national origin, age, disability, sexual orientation or other protected class status as required by applicable law. In short, we view this type of conduct as a violation of this policy.

Definition of Sexual Harassment

Unwelcome sexual advances, requests for sexual favors, and other verbal or physical contact of a sexual nature constitute sexual harassment when:

- Submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment;
- Submission or rejection of such conduct by an individual is used as a basis for employment decisions affecting such individual;
- Such conduct unreasonably interferes with an Associate's work performance or creates an intimidating, hostile, or offensive working environment.

Sexual harassment may be verbal, physical, written, or visual. Examples of sexual harassment may include, but are not limited to: sexual or suggestive comments, repeated propositions, offensive sexual joking, the display of sexually suggestive objects or pictures, sexually-oriented comments about an individual's body, offensive touching, patting or grabbing, and pressure for sexual favors in return for special treatment on the job. All such conduct violates this policy.

Members of the JHS community who hold positions of authority over others must take particular care to avoid actions that are or can be considered sexually abusive or harassing. It shall be a violation of the policy on sexual harassment for any officer, employee, or agent to sexually harass, as defined below, any officer, employee, or agent. Any officer, employee, or agent found to be guilty of such misconduct shall be subject to appropriate sanctions, depending on the circumstances, which may result in disciplinary action up to and including termination. See JHS Policy & Procedure Manual, Code No. 323, Sexual Harassment/Intimidation.

Internet Access

Jackson Health System is required to maintain a high level of IT Enterprise services and availability to customers and to the IT Enterprise. It is essential for JHS to promote its primary goal of being a patient-focused organization by supporting a secure, reliable, robust, and interoperable computing environment.

Internet access is important to each individual at JHS and is used as an efficient and effecting research and communication tool. Internet connectivity also is vulnerable to information security breaches if used incorrectly. See JHS Policy & Procedure Manual, Code No. 912 <u>Internet Usage</u> for proper usage.

JHS Identification Badge

Your identification badge is part of your uniform and must be worn at all times while on JHS premises. Employees are required to wear JHS identification badges at eye level with your name, department/division and photograph clearly visible while on duty. This is the only way in which visitors or others can identify you as a JHS employee.

If your ID badge is lost or stolen, report it to your supervisor immediately. You may not loan your badge to anyone else, under any circumstances. If you do so, you will be subject to disciplinary action. When you separate from employment, you are required to return your ID badge to your supervisor.

Vendors, contractors, external reviewers, and volunteers are required to wear a JHS ID badge or temporary identification card.

All visitors within JHS patient care facilities are required to display identification. If you see anyone in a patient area who is not wearing either a JHS ID badge or visitor identification, it is your responsibility to report such a person to the Security Services Department.

To replace a lost badge, you must pay \$25.00 at the cashier's office and report to security services to pick up the badge. Your manager/supervisor must also send an email to security noting a replacement badge is needed.

Smoke Free Environment

Jackson Health System property and facilities is Smoke-Free. This means that in addition to the buildings, which are already smoke-free, smoking is not permitted in any outdoor areas, including parking garages or in parked vehicles.

We offer the Jackson Health System Smoking Cessation program free of charge to employees, patients, family members and visitors. Our goal is to continuously offer encouragement and education toward a smoke-free lifestyle. JHS is committed to reducing the overall incidence of tobacco use by providing tobacco dependence treatment to all JHS patients, employees and visitors who smoke, thereby promoting health care maintenance and decreasing the likelihood of tobacco-related illnesses or conditions. Tools to quit smoking, such as nicotine replacement therapy, are provided to program participants. To register for the program, please call 305 585-5319, email stopsmoking@jhsmiami.org or visit us online at www.jhsmiami.org/smokefree.

The JHS Smoking Cessation Program provides services under the auspices of UM AHEC. The JHS Smoking Cessation Program consists of a Tobacco Cessation Program Coordinator and facilitators who are trained and certified by the Florida AHEC Network on tobacco treatment. See JHS Policy & Procedure Manual, Code No. 400.080, JHS <u>Smoking Cessation</u> Program. If you are interested in more information about our tobacco cessation program, please call 305-585-5319.

Workplace Violence

Because we value your health and safety, we are committed to maintaining a work environment free of violence. The Jackson Health System has a zero tolerance policy for violence at the workplace and will take appropriate disciplinary action and/or criminal prosecution against any employee or non-employee who violates the policy.

Confidentiality: In order to ensure the safety of all employees who comply with the law, any information related to violence or JHS's response to violence will only be disclosed on a need to know basis or as required by law.

For more information on Workplace violence, see also JHS Policy & Procedure Manual, Code No. 359, Disruptive Behavior and references below:

Joint Commission Leadership Standard LD.03.01.01:

http://www.jointcommission.org/assets/1/18/SEA_40.PDF

Healthcare Wide Hazards - Workplace Violence

http://www.osha.gov/SLTC/etools/hospital/hazards/workplaceviolence/viol.html

Violence - Occupational Hazards in Hospitals: http://www.cdc.gov/niosh/docs/2002-101/

EMPLOYEE MANAGEMENT, DEVELOPMENT AND ADVANCEMENT

Background Investigations and Credentialing

It is the policy of JHS to obtain credentialing and background verification on applicants and contractors seeking employment at JHS. Clinical personnel shall meet and maintain the current state requirements for licensing, certification, and/or registration at all times. Offers of employment are contingent upon obtaining a completed application, a satisfactory background investigation and a credentialing verification conducted by Human Resources, Talent Acquisition Services or the HR Compliance Department. This policy provides a standard procedure to establish an individual's background and current competence to provide quality care, treatment, and services.

Immigration and Reform Act of (1986)

JHS complies fully with the Immigration and Reform Act of 1986, as amended, which prohibits discrimination against applicants for employment on the basis of national origin or citizenship and establishes penalties for hiring illegal aliens. The United States Department of Justice, Immigration and Nationalization Services require that an I-9 form be completed for every employee within his or her first three (3) days of work. The purpose of this form is to verify that an individual is eligible to work in the

United States and to provide information about the requirements of eligibility for employment in the U.S. As required by law, Talent Acquisition Services does not specify which documents (from the list of acceptable documents. provided on the form) are to be presented. I-9 documentation is retained for a period of three (3) years after the employee's date of hire or one (1) year after termination, whichever comes later.

<u>Verification of employment eligibility in accordance with the U.S. Citizenship and Immigration Services (USCIS)</u>

The U.S. Citizenship and Immigration Services (USCIS), formerly Immigration and Naturalization Service (INS), requires that U.S. employers must check to make sure all employees, regardless of citizenship or national origin, are allowed to work in the United States. If you are not a citizen or a lawful permanent resident, you may need to apply for an Employment Authorization Document (EAD) to prove you may work in the United States. All JHS employees are required to maintain current documentation that establishes eligibility to work in the U.S. The Human Resources Capital Management Division will track and monitor all Employment Authorization Documents to ensure compliance as required by law.

Orientation

New employees including agency staff, interns, students and volunteers must complete the online self-study orientation. All JHS employees and medical residents are required to attend the in-class New Employee Orientation session, including the Service Excellence component. Employees with direct patient care may also be required to attend the Clinical/Nursing Orientation program as well as a Departmental/Unit Orientation.

Rehired Employees

All new and rehired employees are required to attend the JHS New Employee Orientation program during the first week of employment according to the annual schedule with the exception of employees rehired within six (6) months of initial separation. All Employees must complete the New Employee Orientation self-study/on line program as directed by the department of Education and Development. Completion of the self-study/on-line program must be verified upon entering New Employee Orientation. For more information on orientation requirements, see the JHS Policy & Procedure Manual, Code No. 342, See also specific departmental orientation policies in the JHS Policy & Procedure Manual.

Job Description

Each employee will be provided with a copy of the competency based job description which identifies the primary duties and responsibilities of his or her position, and forms the basis of his/her performance evaluation. A job description is a concise, detailed document that may also be used for recruiting new talent, pricing positions externally, setting performance objectives and standards, and identifying training and development needs. Since business conditions may evolve over time and divisional/departmental needs may change, it is the responsibility of the immediate supervisor to advise the Compensation department that a new/revised job description is required for a particular position.

Probationary Period

As a new employee, to obtain permanent status, you shall first serve a probationary period. The probationary period gives the employee and the supervisor time to observe and adjust to the position. Sometimes an employee is unable to meet the required standards in the new job after completing the orientation, training and probation period. In this case the employee might be terminated, or returned to his or her previous position in the System.

Unless the Pay Plan, JHS policy, or a collective bargaining agreement provides otherwise, an employee who is newly hired will remain in probationary status for a period of six (6) or twelve (12) months depending on the employee's classification. Unless a collective bargaining agreement provides otherwise, employees who are promoted will have a three (3) month probationary period. At any time prior to the end of the probationary period, the employee's Vice President or his/her designee may terminate the employee from the position with our without cause. Although no charges are required and no appeal is permitted, the employee will be informed of the termination in writing. For further information, please see JHS Policy & Procedure Manual, Code No. 304 on <u>Probationary Periods</u>, <u>Trial Periods and Evaluation Periods</u>

Appearance Standards (Attire and Dress Code)

JHS prides itself on its professional image. A properly attired and well groomed employee helps to create a favorable impression and further promote a positive image. Therefore, a neat, clean and professional appearance is required of all employees. Proper attire in a hospital setting is important because it generates confidence, trust and respect for the employee and the hospital. When you choose your clothing, please be mindful of the diverse cultures in the community and respect the standards of those cultures, which may be more conservative than your own.

- Uniformed personnel must keep their uniforms neat and clean. If you are not required to wear a uniform, you must dress in neat, clean clothing that shows respect for your profession.
- Employees who provide direct patient care and have hair that is shoulder length or longer must wear their hair fastened back. No scarves, long ties, or ribbons are permitted.
- Nails should be clean with smooth edges. Artificial nail enhancements such as tips, wraps, appliqués, acrylics, and gels are prohibited. Anything applied to the nail other than polish is considered an enhancement. Artificial nails or enhancements can increase the risk of colonization and the transmission of pathogens to patients, therefore these enhancements are forbidden for employees with direct patient contact.

If you arrive at work and your supervisor feels you are not properly dressed or groomed, he or she may send you home to change and return in acceptable attire. If this happens repeatedly, it will be considered cause for discipline. See also JHS Policy & Procedure Manual, Code No. 313, Appearance Standards.

Annual Mandatories

Annually, all employees will complete an online mandatory educational program covering a variety of topics including: Safety Management, Back Safety, Fire Safety, Electrical Safety, Hazardous Materials,

Corporate Compliance, Domestic Violence, Violence in the Workplace, Infection Control, Stroke Education and a variety of other topics depending on the position or job requirements. The deadline for completion is before the end of year or earlier as designated by Human Resources.

Corporate Compliance Training Program

The General Compliance Training Program is provided to all new employees in New Employee Orientation (or within the first 30 days of hire). General Corporate Compliance training currently covers:

- General Compliance
- Standards & Code of Conduct
- PHT/JHS Corporate Compliance Hotline
- Stark & Anti-Kickback Laws
- Conflict of Interest
- Recovery Audit Contractor
- Health Insurance Portability and Accountability Act (HIPAA)
- Federal Exclusion & Sanction list
- Florida's Sunshine and Public records laws

All employees will undergo General Corporate Compliance training annually. In addition, there is a mandatory *Specific Compliance* training requirement for all new employees whose job requirements include the assignment of diagnosis or procedures codes and submission of a claim. *Specific Compliance* training is required within thirty days of employment or transfer into a new position that falls into specific compliance training requirements.

Compliance Training is required for:

- Covered persons all PHT/JHS employees, contractors, agents, and vendors
- Relevant covered personal Only those who work directly or are in a supervisory role in the
 assignment or diagnosis or procedure codes or in the submission of claims for reimbursement to
 Federal health care programs plans
- Relevant covered contractors all contractors, vendors, agents and third parties engaged to bill or submit reimbursement claims under a federal healthcare program, e.g. collection agencies, billing companies, etc.

What does it take to be a compliant employee?

- Abiding by all applicable laws, regulations, and policies
- Awareness of legal and ethical obligations
- Recognizing areas of vulnerability
- Reporting suspicious and/or improper activities
- Promoting ethical behavior through PHT/JHS
- Maintaining commitment to ethical behavior her at PHT/JHS
- Improve the quality of care provided to patients

When should you comply?

• Everyone should comply for the duration of their employment at PHT/JHS

Areas monitored by Compliance:

- Coding, Billing & Reimbursement conducting claims and reviews, and education
- Disclosure of confidential information and electronic data transmission, i.e. Health Insurance and Portability and Accountability Act (HIPAA), Privacy Act
- Emergency Medical Treatment and Active Labor Act (EMTALA)
- Physician Contract review for Stark law & anti-Kickback Implications
- Conflict of Interest
- Recovery audit contractor (Medicare & Medicaid)
- Education and training on state and federal regulatory requirements
- Federal Sanction and Exclusions Lists

Why should we be compliant?

- Because it's the right thing to do
- Protects employees from personal liability
- Implement voluntary and mandated changes
- May lower penalties and fines
- Provide procedure to promptly correct misconduct (PHT compliance Policy and Procedures, Standard and code of Conduct)
- Enhances patient quality of care
- Cost-effective
- Demonstrates to the community that PHT/Jackson Health System has a strong commitment to honesty and responsible corporate citizenship
- Accurate view of employee and contractor behavior and relationships
- Helps a provider fulfill its legal duty
- Reinforce employee's natural sense of right and wrong

Employment of Veterans

It is the policy of JHS to give special consideration to the employment of war veterans, who will receive preference in accordance with the intent and requirements of Chapter 295 of the Florida Statutes, as amended, from time to time and in accordance with all applicable laws.

Medical Staff Appointment, Reappointment, and Privileging/Credentialing

We recognize that a single organized Medical Staff is responsible for the quality of medical care at all facilities subject to the ultimate authority of the Public Health Trust. In a clinically integrated setting such

as JHS, the cooperative efforts of the Medical Staff, the President/Chief Executive Officer, and the PHT are necessary to fulfill our mission of providing one single high standard of care to its patients.

To that end, all Licensed Independent Practitioners and the Health Professional Affiliates seeking employment at JHS must apply for Medical Staff membership through the Physician Services Administration. Licensed Independent Practitioners include physicians (M.D., D.O.), dentists (D.D.S.), oral surgeons (D.M.D.), psychologists (Ph.D.; Psy.D.) and podiatrists (D.P.M.). Health Professional Affiliates include, but are not limited to: physician assistants, certified nurse anesthetists, nurse midwives, advanced registered nurse practitioners, registered nurse first assistant, and physicist.

Medical staff membership is a privilege entitling members to attend to JHS patients. Applications for staff appointment or reappointment must contain a request for the specific clinical privileges requested by the applicant, be supported by the documentation of the applicant's relevant recent training and/or experience, and be submitted in writing on a JHS prescribed form. Requests for privileges and for modification of privileges will be processed as provided for in the Public Health Trust Bylaws and the Rules and Regulations of the Medical Staff.

All members of the Medical Staff are subject to the PHT Medical Staff Bylaws, all duly adopted rules and regulations governing the Medical Staff, JHS policies and procedures and all JHS continuous quality improvement activities.

Nepotism (Employment of Relatives)

In striving to maintain a high level of professionalism in the workplace and in furtherance of its commitment to equal employment opportunity to all qualified persons, it is the policy of JHS not to hire, promote or retain relatives or persons who have a significant personal relationship into an employment relationship where there is managerial authority or direct influence of one over the other, where there is an identified conflict of interest, or where there is perceived favoritism between management and the employee within the department, division, or unit because of that relationship. "Relatives" refers to individuals related by blood, marriage, or adoption, or persons who have a significant personal relationship to the management staff member. Examples of significant personal relationships are people sharing a home, dating, and/or intending to marry. In some cases, a request may be made for an exception to this policy to the Senior Vice President of Human Resources.

Transfers

At JHS, we pride ourselves on providing great career opportunities for our employees and encourage the advancement of employees to positions that meet their qualifications, objectives and interests. You share in the responsibility for your career development, along with immediate supervisors and other members of management. You are obligated to keep your skills current, and are strongly encouraged to make your career interests expressly known to your supervisors.

Once an employee has completed his or her probationary period, he or she may be considered for a promotion (placement in a higher job classification) or transfer to another JHS department or facility.

Employees who are in classifications or statuses which do not have probationary periods must have worked 2,080 hours in their current classification to be considered for a promotion or transfer. Transferred employees will serve a new probationary period as defined by a collective bargaining agreement in the new position and, if performance is not satisfactory, will be returned to the original position and division unless a basis for termination exists or disciplinary action is warranted. Employees who transfer into patient care divisions which provide care and/or services to vulnerable patient populations, (i.e., pediatrics, nursing homes, mental health, etc.) will undergo a Level 2 criminal background screening.

ATTENDANCE/TIME OFF/LEAVE OF ABSENCE

Attendance/Hours of Work

JHS expects regular and punctual attendance of its employees. This means you should be at your workstation on time, fully able and ready to work. Accordingly, we take into consideration your attendance when evaluating your job performance. Employees may work across many different shifts. Please check with your supervisor for your exact working hours.

Work Schedules

The standard workweek at JHS begins at 12:01 midnight each Sunday and ends at 12:00 midnight the following Saturday, unless otherwise stated in a collective bargaining agreement. An employee's work schedule may change with a minimum of 30 days' notice to the employee and/or the union.

The employee may agree to work the new work schedule within less than 30 days. This does not apply to work areas where the Public Health Trust has traditionally used mixed weekly work schedules on a regular work basis to meet demands for service.

Time/Card Swipe

Employees are responsible for clocking in and out using a method known as two-factor authentication. Employees will place a finger on the Kronos time clock AND swipe their Jackson ID badge. You may not clock in or out for another employee. If your Jackson ID badge is ever missing, contact your Supervisor immediately. Your supervisor must be made aware if you have worked overtime, charge duty, without a break, or a shift where differential pay is due.

Overtime

Please do not work unauthorized overtime, fail to properly maintain accurate time records, falsify time records, or ask someone to falsify time records in violation of this policy. Your supervisor must approve all overtime before it is worked. The rate of overtime pay is time and one-half per hour. Shift differential starts at 3:00 P.M. unless a collective bargaining agreement provides otherwise. There is no automatic overtime paid for holidays.

Absenteeism and Tardiness

Absenteeism is defined as failure to report as scheduled or working less than one-half of the scheduled

shift. To report an unplanned, FMLA and/or medical leave, employees are required to **call 1-877-562-8677**.

Excessive absenteeism is defined as unplanned absences in excess of four occasions during any six-month period. In addition, two or more absence occasions within any two-month period following receipt of a record of counseling, written reprimand, and/or suspension for absenteeism, may result in disciplinary action. If you are absent for three days and have not called the appropriate supervisor, this is considered abandonment and you may be terminated.

Tardiness is defined as arriving at the work unit after the scheduled starting time. Excessive tardiness is defined as reporting late to duty two or more times in a pay period. Tardiness that follows a set pattern will result in counseling and/or disciplinary action. You will be docked time if you are eight or more minutes late.

Meal Periods

We provide you with rest and meal periods during your workday according to applicable laws. Employees working 8 ½ hour shifts normally are granted a 30-minute meal period in each regular shift. The immediate supervisor will schedule the actual time of the meal period with consideration given to the essential work activity requirements of the unit. Meal periods will normally be unpaid time except in those instances listed in the following procedures:

Non-Union Employees. An employee required to work two (2) or more hours beyond his or her normal work shift will be granted an additional one-half (1/2) hour meal period with pay.

Unionized Employees. Employees working other than 8 ½ -hour shifts will receive meal periods in accordance with applicable collective bargaining agreements.

Rest Breaks

Employees may be granted two paid rest breaks of up to fifteen (15) minutes each for each eight (8) hour tour of duty, at the discretion of the immediate supervisor. Breaks will usually be given at established times, but may be rescheduled or omitted if work requirements dictate.

Employees in classifications covered by a collective bargaining agreement will receive rest breaks in accordance with the applicable agreement.

Lactation Accommodation

JHS is committed to promoting a family-friendly work environment by providing services and programs to help employees achieve a work-life balance. Towards that end, management will provide employees a reasonable break time, an appropriate space, and a supportive work climate for breast-feeding mothers who wish to express milk during work hours for a period up to one year following a child's birth. The time should run concurrently with the employee's paid break.

JHS will provide a secure private space in proximity to the lactating employee's work area. The location may be the place where the nursing mother works if there is adequate privacy (e.g., employee's private office or other secured/private space). Areas such as restrooms, closets, or storage areas are not considered appropriate spaces for lactation purposes. The lactation break time for exempt and non-exempt employees will be considered a paid break. Breaks should be no longer than thirty (30) minutes.

An employee who has a need for a lactation accommodation should inform their supervisor and discuss any relevant workload or scheduling needs. The supervisor will review available space in the division/department and prepare to provide appropriate nearby private space and allow reasonable break time. Employee will be responsible for successful performance of assignments/work duties. For more information, see JHS Policy & Procedure, Code No. 398, <u>Lactation Accommodation</u>.

Requests for Time Off

We recognize the need for you to take time off during the year for rest and relaxation. We encourage you to do so by using your earned paid time off. Requests for time off should be made at least 60 days prior to the implementation date or in accordance with collective bargaining agreements.

Paid Personal Leaves, Vacation, FMLA and Other Leaves of Absence

JHS provides a certain number of paid hours per year to be used for rest, relaxation, vacation, sickness, bereavement, and other personal needs. To define the policy and procedures of the Jackson Health System with respect to absence from work related to the following types of leave:

- Paid Personal Leave (PPL) and Extended Illness Leave (ESL)
- Training Leave
- Bereavement Leave
- Jury Duty or Court Witness Leave
- Voting Leave
- FMLA (Family and Medical Leave Act) Leave
- Medical Leave
- Educational Leave
- Extended Planned Personal Leave of Absence
- Military Active or Reserve Duty Leave
- Domestic Violence Leave
- Mandatory Non-Disciplinary Leave
- Infection Control Furlough
- Release Time for Union Stewards and Association Representatives and other Leaves for Bargaining Unit Employees

Review JHS Policy & Procedure Manual, Code No. 319, <u>Personal Leave</u>, <u>Leave of Absence</u>, <u>Mandatory Leave and Union Leave</u> for more information.

COMPENSATION AND BENEFITS

COMPENSATION

Overtime Pay

It is the policy of JHS to minimize overtime. In the event that overtime is worked, full-time hourly employees will be compensated at the rate of time-and-one-half their normal rate of pay for hours worked in excess of the scheduled workday. Additionally, hourly employees authorized to work in excess of the standard forty (40) hour work week shall be paid at the rate of time-and-one-half of the normal rate of pay, provided that overtime hours worked are not included in determining the standard work week.

Starting Pay

Starting pay is based on related experience and relative internal equity. For some union-represented job classifications, the "in-hire step" has been developed for some hard-to-fill classifications based on labor market shortages, extreme competitiveness in the market for qualified candidates, and the fact that some of these classifications are essential to the Trust's ability to provide the highest quality of patient care. The Talent Acquisition and Compensation departments in HRCM will provide guidance in interpreting the hire-in/starting pay guidelines.

Merit Increases

Merit increases may be granted on the basis of demonstrated performance, or merit, rather than because a particular amount of time has passed. This practice applies to employees in classifications having salary ranges, and the recommendation for an increase is typically made in conjunction with the employee's annual performance evaluation (at the anniversary of his or her most recent hire or transfer). It is the responsibility of the employee's immediate supervisor to determine whether his or her performance justifies a merit increase. Supervisors must indicate approval or disapproval by completing and signing the merit increase section of the Personnel Action Memorandum (PAM) form. An employee's salary may not exceed the maximum of the established salary range without written authorization from the Senior Vice President of Human Resources.

Pay Periods and Paycheck Distribution

Automatic payroll funds are deposited every two weeks and employees may view their paperless paycheck online through <u>Lawson Employee Self-Service</u>. Direct deposit provides a convenient way to have your paycheck electronically deposited into a checking account or savings account.

Direct Deposit

Direct deposit provides a convenient way to have your paycheck electronically deposited into a checking or savings account. Employees may add/change their direct deposit in <u>Lawson Employee Self-Service</u>.

Savings Bonds

All employees may purchase United States Savings Bonds through the Payroll Savings Plan. To arrange a purchase, contact the HR Shared Service Center at Employee Service Center at 305-585-6771.

Payroll Errors and Paycheck Corrections

JHS makes every effort to ensure that employees receive the correct amount of pay in each paycheck and that employees are paid promptly on the scheduled paydays.

If you receive an underpayment in your check, you have a right to receive the amount you are owed. If there is an error in your paycheck, bring it to the attention of your supervisor immediately. The payroll department will verify the error and correct the problem as soon as possible.

If an administrative error results in an overpayment to an employee, the employee must return the overpayment to JHS as soon as possible. No employee is entitled to keep any pay in excess of the amount he or she has earned. JHS has the right to recover the funds, and the employee will have ten (10) days to voluntarily return the overpayment and/or sign a repayment acknowledgement form.

Garnishment and Bankruptcy

JHS is obligated by federal, state and county law to deduct or garnish wages from employee paychecks when child support, bankruptcy collection, etc. are owed and/or overdue. Deduction from wages occurs when the Payroll Department receives a summons and/or levy from a federal or state institution. Garnishments remain active until the Payroll Department receives a release or an amendment of these federal and state decrees.

Change of Status

It is important that you report any changes of name, address, telephone number, emergency contact information, designated beneficiaries and dependent or marital status to your supervisor and the HR Shared Service Center at 305-585-6771 (or appropriate Satellite HRCM office) so that employment records can be kept up-to-date, necessary changes to benefits can be made, and to ensure that you receive important information such as Open Enrollment forms, W2s, and other necessary documents.

Total Rewards Program

Jackson Health System is committed to being an industry leader in providing total rewards to employees, to motivate and meet the needs of a diverse workforce through a family-friendly program of benefits, and attract and retain top talent (in other words, people like you!)

BENEFITS

Eligibility for Benefits

All full-time or part-time JHS employees who work a minimum of 30 hours per week or 60 hours in a biweekly pay period are eligible to receive benefits. Newly eligible employee benefits become effective the first of the month following 60 days of employment. (For example, if an employee begins work on July 7th and completes 60 consecutive workdays, his/her benefits will begin on November 1st.)

Annual Open Enrollment and New Hire Enrollment

Eligible new hires are provided with enrollment forms during the new employee orientation, which they are to complete and return to the Employee Benefits Office.

Every year in October/November, there is an opportunity for employees to make changes to insurance coverage and Flexible Spending Accounts for the upcoming year. This process is called "Open Enrollment" and the date and options are announced in advance so employees are aware of the exact deadlines.

Qualifying Life Events (30 Days)

Outside of the Open Enrollment period, at any time during the rest of the year, employees may ONLY make changes to their Flexible Spending Accounts or insurances coverage if they experience a "qualifying life event." Some common examples of qualifying life events are marriage, divorce, birth or adoption of a child, loss of employment, gaining employment, or loss of dependent coverage from another group plan. (A detailed list of qualifying life events is provided in the Flexible Benefits Plan Reference Guide.) The forms necessary to make a change during the year MUST be received in the Employee Benefits Office within 30 days of the qualifying life event (for example, if you get married on May 6, in order to add your spouse to your coverage you must submit your application no later than June 6, or you will have to wait until the next Open Enrollment period).

Medical Insurance

Employees may select from various tiers of coverage. Please visit www.JacksonBenefits.org or www.myfbmc.com The phone number for the FBMC Service Center is 305-585-6512.

Dental Insurance

Employees may select individual, employee-plus-one, or family coverage under a group dental insurance plan to which JHS and employees contribute. Employees may choose from a number of insurance carriers depending on their individual and family needs.

Vision Plan

The Vision plan offers a network of providers that service eye care needs.

Flexible Benefits Plan

Our Flexible Benefits Plan is intended to help employees reduce their Federal Income and Social Security taxes and increase their take home pay. The employee's share of the benefits costs is deducted from his or her salary before Federal Income and Social Security taxes are calculated. Benefits costs include health, dental and vision fees, and diagnostic tests/health screenings. For a complete list of eligible expenses, please visit www.myfbmc.com.

Life Insurance

JHS provides group term basic life insurance valued at one time the employee's base salary at no cost to the employee. Employees may purchase additional coverage between one and five times their annual base salary up to a maximum coverage of \$2 million, through the Optional Life insurance plan. Premiums for Optional Life are based on the employee's age and amount of coverage purchased, and are payroll deducted.

Short Term and Long Term Disability Insurance

The Flexible Benefits Plan offers both short term and long term disability insurance plans. Employees may choose either plan or both plans for maximum protection from loss of income due to disability. Both plans provide up to sixty percent (60%) of employee's salary.

Survivor Benefits

In case of an employee's death of causes unrelated to work, and if the employee has worked less than ten years, the employee's beneficiary will receive an amount equal to two weeks play plus \$2,000; if the employee has more than ten years of service but less than twenty years of service, the beneficiary will receive four week's pay plus \$4,000; and if the employee has 20 or more years of service, four weeks plus \$6,000 will be paid. There will be a payout of 100% of extended illness leave accrual balance, regardless of length of service.

Accidental Death Insurance

JHS provides, at no cost to employees, Group Accidental Death and Dismemberment (AD&D) insurance of \$25,000 in the event of death or dismemberment on the job.

Critical Illness Insurance

Employees may purchase a Critical Illness insurance policy, which pays a lump sum benefit if the employee is diagnosed with a life-threatening illness.

Universal Life Insurance

Employees may purchase additional life insurance beyond that provided by the Group Term Life Insurance and Optional Life Insurance described above.

ARAG Legal Insurance

This comprehensive legal plan helps protect you and your family by assisting with wills, trusts, adoptions and more.

Pet Assure Program

Pet Assure is a post-tax discount program that enables members to receive discounts and savings on pet medical care, products and maintenance supplies, as well as many services catering to pets. The program also offers a lost pet recovery service.

UNUM Accident Insurance

Covers a wide variety of injuries and accident related expenses.

Tax Sheltered Annuity Programs

JHS offers tax deferred annuity (403B) and deferred compensation (457) plans. Both of these plans help employees save for their retirement through pre-tax payroll deductions. Employees may participate in either or both of the plans and contribute up to the IRS annual caps. A list of companies participating in the JHS 403B and/or 457 Plans are available in this Guide.

Retirement Plans

Currently JHS has two retirement plans:

Florida Retirement System (FRS). This is a state-operated retirement plan. Only eligible employees hired prior to January 1, 1996 are members of this plan.

PHT Defined Benefit Retirement. Eligible employees hired on or after January 1, 1996, are automatically enrolled in this plan.

Retirement Benefits

Current eligible employees of JHS (those who have worked 60 hours or more per pay period) are automatically enrolled in the PHT Defined Benefit Retirement Plan. JHS pays an employer contribution towards this plan, and the employee pays a 3% pre-tax contribution. Retirement age is 65 with at least six (6) years of services. However, an employee may retire at any age with full benefits after completing 30 years of service. An employee with at least six (6) years of service may retire prior to reaching age 65 with reduced benefits (there is a 5% reduction in benefits for each year under age 62). The amount of pension depends on average annual earnings and the length of service with JHS.

An employee who completes eight (8) years of membership service in the retirement plan and becomes totally and permanently disabled may qualify to retire under Disability Retirement.

Personal Leave

Full-time or regular part-time employees are eligible for paid personal leave hour after the completion of 1,040 hours of continuous service. Paid personal leave hours are provided to cover time off from work that is either planned and/or unplanned.

New full-time employees may take paid recognized holidays during the first six (6) months of employment.

IHS Recognized Holidays

Eligible employees will receive eleven (11) paid holidays per year as listed below:

New Year's Day

Martin Luther King Jr. Day

President's Day

Thanksgiving Day

Memorial Day Friday after Thanksgiving

Independence Day Christmas Day

Labor Day

Tuition Reimbursement

JHS encourages employees to gain education, skills and qualifications for the enhancement of their job performance and advancement opportunities. Full-time and regular part-time employees who have completed six months of continuous employment are eligible for tuition reimbursement. For more information, contact the HR Shared Service Center at 786-466-8378 or e-mail <u>tuition@jhsmiami.org</u>.

Domestic Partner Benefits

Domestic Partners are eligible for coverage as dependents at Jackson Health System. In order to register a domestic partnership, individuals:

- Must be at least 18 years of age or older and competent to contract.
- Must not be married under Florida law, a partner to another domestic partnership relationship, or a member of another civil union.
- May not be related to the other by blood.
- Must consider themselves to be a member of the immediate family of the other partner and to be jointly responsible for maintaining and supporting the Registered Domestic Partnership.
- Must agree to immediately notify the Consumer Services Department, in writing, if the terms of the Registered Domestic Partnership are no longer applicable or one of the domestic partners wishes to terminate the domestic partnership.
- Must reside in the same primary residence.

For information about registering a domestic partnership, please contact the HR Shared Service Center at 305-585-6771; the application form for registering a domestic partnership is available on the Miami-Dade County website at www.miamidade.gov/csd/domestic partner_faq.asp

Federal Credit Union

The services of the Dade County Federal Credit Union are available to all JHS employees and their relatives. The Credit Union has convenient locations throughout the Miami-Dade area and operates Monday through Friday, with some locations offering Saturday hours. Visit www.dcfcu.org for a map and the hours at each of the following locations, as well as phone numbers and a list of services.

Resources for Living

The Resources for Living program is designed for anyone who needs a little help managing life events, big or small. You and anyone in your household up to the age of 26 can call the confidential hotline at 786-466-8377 24 hours a day, and seven days a week. Services include but are not limited to:

Counseling services

- Work-life balance services
- Legal/financial services
- Identity theft fraud resolution consultation
- Web resources

Counseling services are available face-to-face, by phone, or video conference. You and anyone living in your household can receive up to three counseling sessions per issue, per person, per year with a licensed network professional at no cost to you. You do not have to worry about co-pays or deductibles. Resources are available to help assist with:

- Work/life balance
- Family and relationship
- Depression
- Conflict management
- Alcohol/substance abuse
- Stress management

Parking and Transportation Options

If you are required to pay for parking at the location where you work, you may pay your parking fees through a payroll deduction. Employees may sign up, through payroll deduction, to purchase monthly discount passes with the option to park at Metro Rail garages. For more information, please contact the HR Shared Service Center at 305-585-6771 or visit them in Jackson Medical Towers on the 1st floor.

For parking on the Jackson Memorial Campus, call or visit the Parking Authority Office for the most updated information as rules, prices as information may change. The parking office is located in: Park Plaza West, Ground Level, Room 207 (PPW-G-207), Phone 305-585-6997 (5-6997). Hours: 7:30 a.m. – 5:00 p.m., Monday-Friday.

Requirements:

- \$10.00 nonrefundable registration fee and Employment Authorization Letter from your Supervisor may be needed. JHS ID badge and vehicle registration required.
- JHS ID Badge and job shift information letter is required at the time of purchase.
- Ramp parking is accommodated by available parking spaces.
- Payment for registration fee or stickers must be paid by credit card or money order. Cash is not accepted.

Varied shifts (3:00 p.m.-11:00 p.m. and 11:00 p.m.-7:00 a.m.) may receive preferred parking. The supervisor must send a memo to the Miami Parking Authority. Temporary relief employees may purchase a parking card or stickers with a memo from their supervisor. Parking *Chip Coins* should not be left in your vehicle and remember to pay for *Chip Coins* at the designated pay station(s) at respective parking garages.

Metro-Rail/Tri-Rail

Purchase or pick up Metro Rail passes at the HR Shared Service Center, Jackson Medical Towers, Suite 106, 1500 NW 12th Avenue. Call 305-585-6771 for more information. Allow about one month for processing payroll deduction and about the same amount of time for cancellation.

Tri-Rail Information

Tri-rail serves Palm Beach, Broward and Miami-Dade Counties. As a member of Tri-Rail's Employer Discount Program (EDP), you can enjoy:

- Special tax benefits
- 25% discount off the price of monthly and 12 trip tickets
- Convenient ticket purchasing at all train stations

To join the EDP and receive a Membership Identification Card, complete the online EDP Membership Application by visiting www.tri-rail.com. After completion of the form, your application will be submitted electronically to your employer's EDP Contact Person. Please allow 30 days for a response that will either approve or deny your application. You will not be able to purchase discounted EDP tickets until you receive your EDP ID Card. Call 1-800-TRI-RAIL (874-7245) or visit the website for assistance.

<u>Van Pools:</u> JHS employees currently take advantage of three van pools, which provide group carpooling on a regular basis. The number of employee van pools can be increased if there is sufficient interest. For more information contact South Florida Van Pool by e-mail at <u>info@vpiinc.com</u> or call **1-800-VAN-RIDE** (826-7433).

CORRECTIVE DISCIPLINE/TERMINATION

Employee Terminations

Resignations

To enable us to arrange for a proper transition of duties in the event you should choose to resign, we ask that you give reasonable notice regarding your resignation to your manager. A non-management employee wishing to leave in good standing should submit his or her notice of resignation at least two (2) weeks before the last day of work. Other employees should submit at least a one-month notice of resignation unless shorter notice is approved by the supervisor or provided by the applicable collective bargaining agreement. Failure to comply with this procedure may be cause for denying an employee future employment with JHS. Every employee who resigns is granted an exit interview and should contact Talent Acquisition services to schedule an exit interview prior to resignation.

See also JHS Policy & Procedure Manual, Code No. 309, <u>Employee Resignations and Separation</u> for more information.

Layoffs

Only the President/CEO of JHS may declare a layoff. This action may be necessary due to a shortage of

work or funds, the elimination of a position, or changes in the organization. Layoffs will be applied institution wide; however, no permanent status employee will be laid off while there are temporary, provisional or probationary employees serving in the same class or position for which the permanent employee is eligible. The names of employees laid off for any of the reasons mentioned above will be placed on a recall list for a period of two (2) years. If the position is recalled within this period, the employee will be reappointed according to his or her position on the recall list. Employees will be notified in advance or in accordance with the notification requirements of the applicable collective bargaining agreement.

Return of Property

The supervisor shall provide an employee with an exit interview outlining exiting process by completing the Separation Checklist **ATTACHMENT A.** The form is designed to assist the supervisor and ensure all JHS property is returned by the employee no later than the separation date, or as agreed upon by the employee and supervisor. In the case of job abandonment, termination, or reduction in workforce, the supervisor will coordinate the completion of the Separation Checklist with the appropriate HR department/office.

ID Badge/Keys/Door access cards

Upon separation or resignation, the supervisor will sign off on the Separation/Resignation Checklist that all issued ID Badges, key(s) and door access card(s) have been returned or indicate that none were issued.

Property/Equipment

On the Separation/Resignation Checklist, the supervisor will sign-off that all JHS issued property or equipment has been returned (e.g. pagers, radios, cellular telephones, lap-tops, Blackberries, etc.) or indicate that none were issued.

IT Notification

Upon initiation and approval of a Lawson MSS separation action, the JHS Information Technology (IT) Department is automatically notified to cancel employee's system access code(s). In the event of an involuntary and/or immediate termination (only), the supervisor should send an email to <u>JHS-Termination-Admin@jhsmiami.org</u> and indicate: Full Name, Badge ID, Lawson ID, Department Name and Date of Termination.

Final Paycheck

Resigning employees will be issued a final paycheck, which will include any unused personal leave, holiday leave, extended illness leave (extended illness bank payable in % increments based on years of service) and converted sick leave to which they are entitled.

If there is an existing debt to JHS, monies due may be deducted from the final paycheck in accordance with payroll policies and applicable contractual agreements. The final paycheck may be withheld if the HR Records Administration department is unable to verify an MSS separation action and/or has not received an Employee Separation Checklist Form and/or Final Processing Form from the employee's direct

supervisor or department director. See also JHS Policy & Procedure Manual, Code No. 309, <u>Employee Resignations and Separation</u> for more information.

Suspension, Dismissal, Demotion and Appeals

Any employee may be reprimanded, suspended without pay, demoted or dismissed by the Vice President (or designee) for any cause which endangers the efficiency of the organization. "Demotion" generally means being placed in a job of lower status, responsibility and pay. (See the "JHS Standards of Conduct and Performance Guidelines" section of this resource guide for more information about demotions.) A vacant position may be filled by the demotion of an employee in accordance with JHS policy.

Except as otherwise provided in this section, a permanent status employee may appeal any disciplinary action, except a reprimand, to a Hearing Examiner within fourteen (14) days. Such an appeal is to be filed in writing with the Director of Employee/Labor Relations & Workforce Management, or designee, who will then request the appointment of a Hearing Examiner in accordance with the rules. The Examiner will act as a fact-finding official, considering all available information related to the action, and will then transmit these facts and any advisory findings to the President/CEO who may sustain, reverse or modify the suspension, demotion or the dismissal. This section also applies to exempt employees when required by the terms of a collective bargaining agreement or as approved in an Administrative Order.

Employees indicted by a Grand Jury or against whom information has been filed by a State Attorney or a United States Attorney for a felonious offense may be automatically suspended without pay in accordance with JHS policy.

Probationary/Trial Employees

A probationary employee may be discharged without charges or hearing. If an employee is in a trial period and his or her services are not satisfactory, the employee may be dismissed, or returned to the position from which he or she was promoted, and/or the division from which he or she transferred. A written statement will to be given to the employee.

Prior to the expiration of the probationary period or of the trial period, the Vice President (or designee) shall determine whether an employee's performance has been satisfactory or unsatisfactory. A probationary employee may be terminated at any time. If an employee's performance has been satisfactory, or if the Vice President (or designee) fails to notify the employee otherwise prior to expiration of the probationary/trial period, the employee will obtain permanent status automatically.

Summary of the Disciplinary Process

When an incident occurs that shows an employee has violated a law, rule, regulation or policy, the employee may be subject to progressive disciplinary action unless the nature of the violation requires a more serious penalty such as termination.

All eligible employees whose classifications are not covered by a collective bargaining agreement will receive written notice of the presentation of a Record of Counseling or Disciplinary Action Report within 21 days of the facts causing the action unless there are extenuating circumstances. The notice gives the date, time, and place of the presentation and the alleged violation. Notice is given at least 48 hours in advance of the presentation. After the presentation, the employee has an opportunity to provide a response/rebuttal to the supervisor who has authority to make the final decision. As soon as possible after receipt of the employee's rebuttal, the supervisor will make the final decision. If the final decision is a demotion, suspension or termination, the employee has 14 days to request an appeal in accordance with the disciplinary action policy. In an appeal, a Hearing Examiner listens to the employee/representative and the hospital and makes a recommendation to the President of the Public Health Trust. The President has 30 days to make the final decision which may be appealed to the Circuit Court or further to the District Court of Appeals.

Although progressive discipline is desirable whenever possible, certain infractions are considered intolerable acts that warrant strict disciplinary action. The employee may be placed on administrative leave until the investigation and /or disciplinary process has been completed. While charges may also be based on causes other than those enumerated here, the following are cause for reprimand, suspension without pay, demotion or dismissal:

- Conviction of a felony or a misdemeanor involving moral turpitude
- Physical and/or verbal threats or fighting on JHS premises
- Sleeping on duty
- Unauthorized use, possession or distribution of intoxicants, illegal drugs, designer drugs, controlled substances; use of or possession of other drugs which would adversely affect an employee's performance on or off JHS premises and, conduct which brings reproach upon JHS
- Intentional falsification of a time record or failure to report absence from duty to supervisors in a timely manner
- Making a false claim for leave
- Making a false statement or statements on application for employment and related documents.
- Access, misuse, divulge, and/or breach of confidential information, (this includes protected health information covered under the Health Insurance Portability and Accountability Act of 1996 (HIPAA)).
- Mistreatment of patients.
- Misappropriating JHS funds or appropriating property of JHS or others, including patients and employees, for personal use or illegally disposing of property of JHS or others, including patients and employees.
- Arrest(s) for a misdemeanor or felony, which adversely reflects upon the employee's performance of job responsibilities and position with the JHS.
- Concealing or possessing any weapons, firearms, or explosive weapons while on JHS premises in violation of the law.
- Negligence or willful conduct causing damage to public property or waste of public supplies.

- Failure to maintain job-required licensure and/or certification.
- Inability to properly perform essential job duties by reason of a permanent or chronic physical or mental ailment or defect.
- Loss of driver's license and driving privilege by due process of law where duties of the employee's position require the operation of a motor vehicle.

Other Infractions

- Incompetence or inefficiency in the performance of duty.
- Rude, antagonistic or offensive conduct towards supervisors, fellow employees, patients or to the public.
- Insubordination or breach of discipline by violation of any lawful or official regulation, by failure to obey any lawful or reasonable direction from a supervisor, or by argumentative and disruptive statements criticizing orders, rules and policies.
- Conduct unbecoming an employee of the Jackson Health System whether on or off duty, provided allegations shall be specific and shall describe the conduct which is the basis of the charge.
- Failure to abide by safety regulations
- Absence without leave or failure to report for work after leave of absence has been disapproved, revoked or cancelled by an appropriate authority.
- Violation of departmental rules/policies.
- Frequent absence from place of duty during regular work hours or refusal to perform a reasonable amount of emergency work after regular hours when directed to do so.
- Being involved in an excessive number of accidents resulting in personal injury or injury to others.
- Operation of JHS-owned or utilized vehicle in wanton disregard for the safety of others. None of the foregoing shall be deemed to prevent the dismissal, demotion or suspension of an employee for any cause which is justifiable, even though such cause is not contained among those enumerated above. A permanent status employee may have the right of appeal.

Counseling and Disciplinary Actions

Employees in classifications covered by a collective bargaining agreement should refer to the procedures in their agreement.

The Progressive Discipline Process: Progressive discipline is a process that includes increasingly formal efforts to provide feedback to an employee so he or she can correct a problem with performance or behavior. The goal of progressive discipline is not to punish an employee but to assist him or her in overcoming performance/behavior problems. If this does not work, progressive discipline ensures that the organization has proceeded fairly in an attempt to correct a performance problem and, if necessary, terminate employees who are unwilling to comply or improve. Progressive discipline is not always practical as certain infractions are considered "intolerable" or "major" acts that warrant strict disciplinary action.

The chart on the next page illustrates the progressive discipline process at Jackson. For each of the steps outlined, a minimum of 48 hours of written notice must be provided to the employee. The employee has the right to a written rebuttal, as stipulated in the collective bargaining agreements and according to JHS policy. See JHS Policy & Procedure Manual, Code No. 305, Corrective Action.

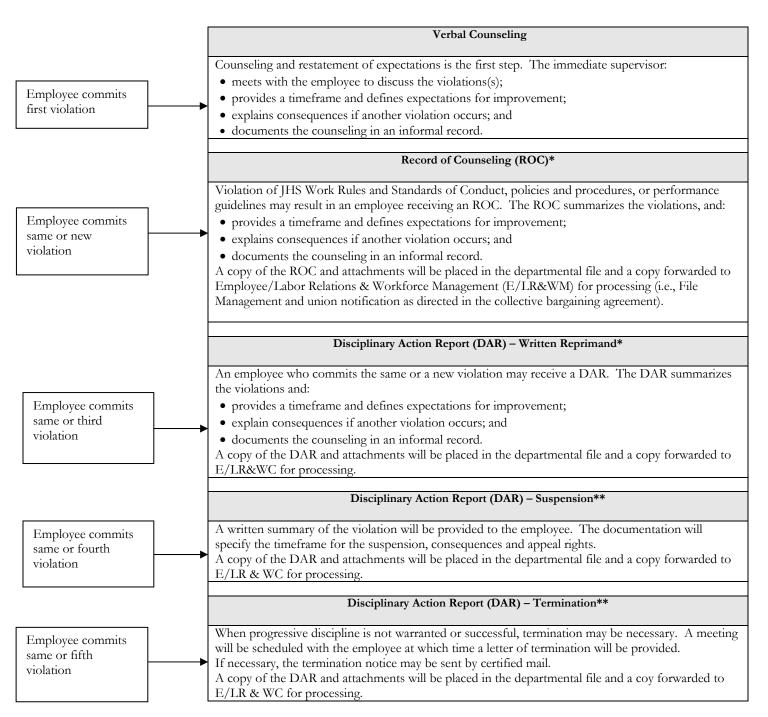
Disciplinary Hearings

The determination of the Vice President (or designee) shall be final in each instance, after which an employee may be able to appeal. Employees in classifications covered by a collective bargaining agreement should refer to the procedures in their agreement. Disciplinary appeals are processed through the Employee/Labor Relations & Workforce Management Department, or its designee, and heard before a Hearing Examiner. The President of the PHT has the right to accept, modify or reject the recommendation of the Hearing Examiner.

The Hearing Examiner has the power to administer oaths, subpoena witnesses and, with the approval of the President of the Trust, compel the production of records, files, books or documents relevant to the procedure. Hearings are conducted in accordance with the rules of civil procedure in the Circuit Court, or according to the County Code or rules adopted by the Board of County Commissioners. Accordingly, failure of a witness to appear or failure to produce requested documents could result in a Contempt of Court charge.

Once an appeal has been received by the Employee/Labor Relations & Workforce Management Department, the hearing will normally commence within sixty (60) days. In the event a properly requested hearing is not commenced in a timely manner, an employee who has been dismissed may be temporarily reinstated until a decision is reached by the President. After the Hearing Examiner has provided a set of recommendations, the President has thirty (30) days in which to make a decision. At any time, however, these requirements can be waived if the employee and JHS reach a mutual agreement.

If you have questions or require more information about any of the topics covered in this section, please call Employee/Labor Relations and Workforce Management at 305-585-7268. See JHS Policy & Procedure Manual, Code No. 305 <u>Corrective Action</u> for further information.



* If there are no violations for 2 years, the employee may request to have the Record of Counseling (ROC) and/or

Written Reprimand stamped "No Longer In Effect." (This does not apply to any other level of discipline.)

** Employees may exercise their right to appeal through policy and/or collective bargaining agreement.

HEALTH, SAFETY, AND SECURITY

Employee Health Services (EHS)

Services Provided:

- Physical exams, drug testing and immunizations for new employees
- Drug testing for employees suspected of substance abuse
- Job related injuries, illness and exposures: Reporting and treatment
- Immunizations: Hepatitis B, Chickenpox, Tetanus, Measles, Mumps, Rubella
- Tuberculosis screening and preventative therapy
- Respirator Fit Testing

Injury or Illness on Duty

Report to EHS for the following:

- Suspected or known exposure to any communicable disease, e.g., Chickenpox, Meningitis, TB, Measles, Needle sticks or body fluid splash.
- Symptoms of a communicable disease including rash, upper respiratory infections, diarrhea, open draining wounds and conjunctivitis. Employee must get cleared before returning to work.
- Job-related injury or illness on duty, report as soon as it happens.
- After any leave of absence or unplanned absence greater than four days, the employee must bring a medical certification and clearance letter from the doctor.
- After any work-related injury evaluation outside of EHS, the employee must call immediately to make an appointment with Employee Health Services.
- New Employee Requirements for Continuing Employment After Physical
- MMR vaccine or positive titers, chickenpox titer, TB test (skin or blood), or negative chest x-ray.
- All requirements must be completed within 30 days of first day on duty

Returning to Work Following a Leave or Work-Related Injury

The employee must be cleared by Employee Health Services prior to reporting to assigned work areas. A doctor's note is required for any medical absences, including absences due to communicable diseases. A medical leave certification form is not a substitute for a medical clearance form.

Please obtain clearance for:

- After unplanned absences of four (4) or more consecutive working days.
- After any medical leave.
- After any hospitalization.
- After absence from work for any reason, that exceeds two full pay periods.
- If the employee was absent for any reportable communicable disease outlined in JHS Policy & Procedure Manual, Code No. 355, Infectious and Communicable Diseases.
- If the employee was off duty as a result of an occupational injury or illness. (See JHS Policy & Procedure Manual, Code No. 347, Injury on Duty).

- Whenever the employee requests restricted duty or any modification of job assignment as a result of a medical condition.
- Whenever the Health Office directed the employee to obtain clearance, also see JHS Policy & Procedure Manual, Code No. 347, Injury on duty, and Code No. 324, Illness on Duty).
- Following a counseling or Disciplinary Action Report (DAR) that requires Health Office involvement. (See JHS Policy & Procedure Manual, Code No. 335, Sick Leave Benefits).
- Whenever a supervisor feels an employee's condition renders him or her unable to work.

Risk Management

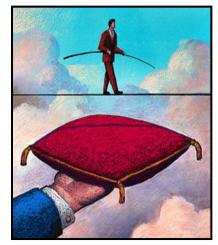
Risk Management identifies and evaluates areas of high risk that may lead to financial loss for the institution. The goal of Jackson Health System Risk Management Program is to:

- Develop and implement the internal Risk Management Program that, in part, coordinates, the identification, monitoring, evaluation and development of risk reduction strategies in conjunction with the Quality Improvement Program.
- Track and trend events reported into Quantros to identify areas of high risk.
- Motivate, educate and support the staff to utilize the in-house reporting mechanisms appropriately and in a timely fashion.

Areas of professional liability for Clinicians

- Medication administration
- Change in patient condition unaddressed by staff
- Observation of signs and symptoms of adverse reactions to treatments and failure to react
- Patient education and discharge documentation
- Supervision of care given by ancillary/subordinate staff (patient care assistants/nurse aides)

Risk control and prevention measures minimize injuries to patients and staff



Florida law requires healthcare personnel to report adverse incidents to Risk Management. Reporting is mandatory and non-punitive in nature. Adverse Incidents are to be reported immediately via Quantros Event Reporting System or via telephone to Risk Management. Routine events – report to Risk Management via Quantros or by telephone within three business days.

Sexual misconduct allegations that are made by patients against a healthcare provider are reported as outlined in Administrative Policy 272 and immediately to Risk Management, Security and Division Director.

Event Reports: Incident Reports

Incident reports are completed to identify and document facts of any event not consistent with routine hospital operation or care of the patient. Hospitals are required by law to maintain an event report tracking system.

Serious/adverse incidents that result in injury are to be reported to Risk Management, **immediately** via Quantros or by telephone:

- Death
- Brain damage
- Spinal damage
- Permanent disfigurement
- Fracture or dislocation of bones or joints
- A resulting limitation or neurological, physical or sensory function which continues after discharge from the facility
- Any condition that requires specialized medical attention or surgical intervention resulting from an
 emergency medical intervention, other than an emergency medical condition, to which the patient has
 not given his or her informed consent
- Any condition which required transfer of the patient, within or outside the facility, to a unit providing
 a more acute level of care due to the adverse incident; rather than the patient's condition prior to the
 adverse incident
- The performance of a surgical procedure on the wrong patient, a wrong surgical procedure, a wrong surgical site, or a surgical procedure otherwise unrelated to the patient's diagnosis or medical condition
- Required the surgical repair of damage resulting to a patient from a planned surgical procedure where
 the damage was not a recognized specific risk as disclosed to the patient and documented through the
 informed consent process
- A procedure to remove unplanned objects remaining from a surgical procedure

Documentation

- Use only hospital-approved abbreviations
- Chart promptly and accurately
- Be objective and factual
- Be precise and concise
- Write addendum if needed
- Time, date, and your name



Environment of Care and Safety Management

Environment of Care/Safety Management includes programs on general safety and fire safety, security, equipment management, utilities management, hazardous materials and waste management, and emergency management, which are designed to provide a safe and hazard-free environment for patients, visitors and employees. Employees are expected to be familiar with, to adhere to, and to support administrative and departmental policies and procedures as well as federal, state, and local regulations pertaining to safety and environment-of-care issues.

Safety Phone Numbers:

JHS Environmental Health & Safety Dept.	Institute Building, Suite 340	305-585-2903
JHS Security and Parking Administration	Park Plaza West Building, Suite G309	305-585-5201
JHS Emergency Management Dept.	Institute Building, Suite 340	305-585-2903
JMH Engineering Services	Annex Building, 4th Floor	305-585-1302
JNMC Engineering Services	2 nd Floor Shop	305-654-5098
JSCH Engineering Services	East Central Energy Plant, 1st Floor	305-256-5260
JHS Environmental Services	East Tower, Suite B029	305-585-7270

Safety Management

- Maintain a safe working environment at all times; eliminate and immediately report all hazards to your manager/supervisor
- Use appropriate personal protective equipment (PPE) at all times
- Inspect all equipment at the beginning of each working shift; do not use damaged equipment
- Review all required training materials and instructions to ensure your safety
- Be familiar and comply with administrative and department-specific safety policies and procedures
- Cooperate with all drills, exercises and safety inspections (environmental tours, fire-related, hazardous waste audits, etc.)
- Immediately report injuries sustained on the job to your manager/supervisor
- Report suspicious odors by following facility-specific protocol on appropriate phone number(s)to call

Communicable Disease and Control

Healthcare acquired diseases can cause dangerous complications and even death for both patients and healthcare workers. The employee is the patient's best line of defense. Guidelines for preventing and controlling disease can be found in the Infection Control Manual JHS NetPortal PHT Policy manual, at www.jhsmiami.org. The Bloodborne Pathogen Exposure Control Plan is also available on the NetPortal. To report an infection or for additional information, call 305-585-6820. During nights and evenings, call 305-996-0459.

Jackson North: 305-654-5215 (nights 305-996-0459) Jackson South: 305-256-5165 (nights 305-996-0459)

Hand Hygiene

The easiest, most effective way to reduce the spread of infections to our patients, and to decrease your risk of contracting a Bloodborne pathogen or other infections is hand hygiene.

This means disinfecting hands with alcohol based hand gel (preferred) or soap and water for visibly soiled hands or with C. difficile patients.

Perform hand hygiene before and after contact with a patient or their environment (touching bedside table, IV pole or any other item in the patient's room). This is a JHS administrative policy.

Ask your supervisor to provide you with a 2 oz. bottle of Purell to carry with you. Proper hand hygiene is a JHS administrative policy and all staff must comply.

Personal Protective Equipment

Protective equipment required to prevent exposure to a workplace hazard and any related medical exams are provided free of charge to employees. Employees who do not use protective equipment when required may be disciplined up to and including termination. Communicable Disease and Control (305-585-6820), Occupational Health Services (786-466-8381) and the Environmental Health and Safety Departments (305-585-2903) maintain information on available personal protective equipment and can provide consultation to assist in selection of appropriate equipment to use. Call Occupational Health Services to arrange for related physical exams.

OSHA requires that JHS provide you with personal protective equipment (PPE) so that you can safely provide patient care. Examples of PPE include:

- Gloves
- Masks
- Protective eyewear/face shields
- Protective clothing (gowns)

Gloves

- Must be worn when contacting body fluids, non-intact skin or contaminated areas
- Change gloves when contaminated
- Discard gloves immediately after use
- When removing gloves, do not touch the outside of the gloves
- Perform hand hygiene immediately after gloves are removed
- Gloves do not fully protect your hands from getting contaminated with bacteria

Eyewear/Masks/Goggles

• Used to protect eyes, nose and mouth

- Use them when there is a risk of a splash, spatter or spray of body fluids
- Replace masks immediately if they become wet
- Wash hands immediately after removing these devices
- Eyeglasses do NOT take the place of goggles

Infection Prevention and Control Contacts

Location	Phone	Beeper
Jackson Memorial Hospital	305-585-6820	305-996-0459
Jackson South Community Hospital	305-256-5165	
Jackson North Medical Center	305-654-5215	
TB Control	305-585-6629	305-314-2881
For Needlestick or bodily fluid exposure	786-731-5038	

Infection Control resources are located on the employee intranet, such as:

- Infection Control Manual
- OSHA Bloodborne Pathogen Exposure Control Plan

Infection Control Precautions

- Standard Precautions
- Respiratory Hygiene/Cough Etiquette
- Transmission Based Precautions/Isolation When Indicated
- Contact Precautions
- Droplet Precautions
- Airborne Infection Isolation
- Protective Environment

Contact Precautions/Transmission-Based Precautions

Multi Drug Resistant Organisms (MDROs), Lice, Scabies

- Private room when possible
- Sign on door and label on chart
- Gown and gloves for patient contact
- Hand hygiene with soap and water or alcohol-based hand rub
- Disposable or dedicated patient care equipment

Respiratory Hygiene/Cough Etiquette

- Respiratory Hygiene/Cough Etiquette signs are posted in the Emergency Dept. waiting area, clinic waiting areas and other public areas of the JHS
- Masks and tissues should be available for visitor/patient use
- Wall mounted alcohol based hand rub dispensers are installed in these areas and should be checked regularly to make sure they are not empty
- If a patient or visitor is coughing, they should be given a surgical mask to wear
- Cough and Fever: Patients should wear a procedure/surgical mask. If not possible, patient should use tissue when coughing and sneezing



Droplet Precautions (Influenza, Pertussis, Meningococcal, Meningitis)

- Private room when possible
- Sign on door and label on chart
- Wear procedure/surgical mask when physically close to patient
- Place procedure/surgical mask on patient for transport out of the room

Airborne Infection Isolation (Tuberculosis, Chickenpox, Measles...)

- Private room with negative airflow required
- Sign on door and label on chart
- Keep door closed at all times
- Wear N95 particulate respirator prior to entering room
- For transport out of the room, place surgical mask on patient



MDRO's are bacteria that are resistant to many or most antibiotics and are commonly spread from patient-to-patient. They can cause infections that prolong hospital stay, are more difficult to treat, and are more frequently associated with death.

What Can We Do to Prevent Spread of MDROs?

- Follow Standard and Contact precautions
- Practice excellent hand hygiene
- Clean and disinfect equipment and environment every shift
- Monitor and improve your adherence to the above three principles

How Do We Rapidly Identify Persons Who May Have Active Tuberculosis?

- Evaluate for signs and symptoms:
- Greater than 2-3 weeks of illness
- Cough, fever, weight loss, night sweats, etc.
- Place surgical mask on patient





- Move patient to an Airborne Infection Isolation Room*
- Personnel to wear a N-95 respirator
- You are Empowered to institute this Policy Pending M.D. orders

REMEMBER: Infection Prevention Is In Your Hands!

How Do We Address Bioterrorism Agents?

- JHS/UM has an established bioterrorism program
- In the event of a bioterrorism event the protocol will implemented
- All JHS staff have the opportunity to participate as part of the Bioterrorism Response Team

How Do We Safely Dispose of Waste?

- Items contaminated with blood and body fluids should be placed in red bags.
- Food and paper waste should be placed in clear bags.

What Do We Do With Laundry?

- Store clean linen covered
- All used linen is contaminated and should be handled carefully using PPE, and placed in laundry bag and securely closed to prevent spillage

How Do We Clean and Disinfect the Environment and Equipment?

Use a hospital approved cleaner/disinfectant, follow manufacturers' recommendations and refer to Environmental Services and/or institutional policies and procedures.

Bloodborne Pathogens (BBPs)

Bloodborne pathogens are infectious microorganisms in human blood that can cause disease in JHS is in compliance with OSHA standards through development & implementation of our Bloodborne Pathogen Plan (BPP). Each employee is required to complete the annual OSHA update

Hepatitis B & C, HIV

Hepatitis B & C, HIV may be acquired by contact with an infected patient: The most infectious body fluid is blood. Of course, any bodily fluid that contains blood is considered most infectious. *Other Potentially Infectious Materials* means

- 1. The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any bodily fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids;
- 2. Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and

3. HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Like many diseases, the transmission of Bloodborne Pathogens (BBPs) can be prevented by the use of:

- Infection control precautions such as Standard Precautions (includes hand hygiene)
- Correct use of personal protective equipment (PPE)
- Safer medical devices

Transmission of Bloodborne Pathogens

Exposure comes from one of the following:

- Needle stick or injury from another sharp object
- Body fluid contact with broken skin
- Splashes to the eyes and mucus membranes (mouth, nose, etc.)

Risk of exposure from a needle stick:

- Human Immune Deficiency Virus (HIV/AIDS) = 0.3%
- Hepatitis B = 6 to 30%
- Hepatitis C = 1.8%

The best way you can protect yourself is to treat all patients that you come into contact with as having a BBP. Since many patients may not know they are infected with a BBP, treating each patient as if they are infected will decrease your risk of contracting a BBP. This is called Standard Precautions and it includes:

- Always performing hand hygiene
- Using the appropriate PPE
- Disposing of sharps correctly and safely

Hepatitis B Vaccine: Offered Free by Employee Health Services

HBV is the most contagious BBP and is preventable by pre-exposure vaccination. Vaccine must be offered free of charge to all new employees unless:

- Employee declines vaccine (you can change your mind later and get vaccine)
- Employee has previously completed vaccination series
- Antibody testing reveals immunity
- Vaccine is contraindicated for medical reasons

Biohazard Warning Labels

- Warning labels required on:
- Regulated waste containers
- Refrigerators/freezers used to store specimens



Any container used to store, transport or ship infectious material

Work Practice Controls

- These practices reduce the likelihood of exposure. Examples include:
- Hand hygiene before/after patient contact or removing gloves
- Not bending or breaking sharps
- No consumption of food or drink at a work stations
- No application of cosmetics/lip balm, or handling contact lenses

Handling Regulated Waste

- Must be placed in closable, leak-proof containers
- Must be covered when transporting
- Must be in a red bag or display a biohazard label
- If you handle any type of waste that has been contaminated with BBPs, it is important that you wear gloves when handling the waste and that you follow the above OSHA requirements. Soiled linen, unless it is bloody, can go into the regular blue linen bags

Handling Contaminated Laundry

- Handle as little as possible
- Must be bagged at location where used
- Must be transported in red bag if heavily contaminated with blood
- Do not sort or rinse laundry at bedside

Safer Medical Devices

Selection of medical devices is the responsibility of the Value Analysis Team (VAT).

VAT reviews new equipment, trials the new equipment, and makes recommendations for purchase of newer, safer equipment. VAT also reviews product complaints.

If you have a new device you would like to see available, or if you have a product complaint, contact your unit's VAT representative

Exposure to Infectious Material

- Wash area immediately with soap and water
- Flush splashes with water
- Irrigate eyes with saline or clean water
- For deep lacerations that require immediate attention, report to the Emergency Room
- Contact Occupational Health Services 24/7 needle stick reporting hotline at 786-371-5038

Back Safety: Sprains and Strains

Back Injuries Can Be Caused By	Maintain Good Posture. Do Not
Poor posture	Slouch
Lack of exercise	Sit with no support
Smoking	Twist
Being over-weight	Bend at the waist
	Sit or stand in one position too long
Ways To Help Your Back	
Sit With Good Posture	Provide lower back support
	Keep both feet flat on the floor
	Arrange your work area to avoid twisting
	Tip your work up to eye level
	Shift your position often
Stand With Good Posture	Shift your weight often
	Wear low heel shoes
	Put one foot up on a stepstool or low box to vary position
	Get help when needed
Lift Correctly With Good Posture	Bend your knees, not your back, keep your back straight
,	Plan your lifts first – think ahead
	Get close to the lift and spread your feet apart for balance



National Patient Safety Goals

The purpose of the National Patient Safety Goals is to improve patient safety. The goals focus on problems in health care safety and how to solve them. The requirements highlight problematic areas in healthcare and describe evidence and expert-based solutions to the problems. They also focus on systemwide solutions wherever possible.

NPSGs are fundamental to all patient care and <u>MUST</u> be observed by all staff. NPSGs compliance will be evaluated by the Joint Commission Surveyors and will impact the organizational accreditation survey score. For information, click on <u>National Patient Safety Goals</u> for the easy to read version and the complete chapter on the NSPGs.

Do Not Use These Abbreviations

Dangerous

DO Write

U (unit)	Write: unit
IU (International Unit)	Write: International unit
QD Q.D., qd	Write: daily
QOD Q.O.D., q.o.d., qod	Write: every other day
Trailing zero (Never write a zero after the decimal	Write: amount and measurement without a trailing
point.)	zero.
(example: X.0 mg)	(example: x mg)
Lack of leading zero	Write: a zero before a decimal point
(example: .X mg)	(example: 0.x mg
MS (morphine sulfate)	Write: morphine sulfate
MSO ₄ (morphine sulfate)	Write: morphine sulfate
MgSO4	Write magnesium sulfate

ALL INCORRECT ORDERS WILL BE RETURNED WITHOUT EXCEPTIONS

Security Management

- Wear identification badges at all times; report lost or damaged badges to your manager/supervisor to have them replaced
- Ensure that medication storage areas remain secured/locked at all times
- Report malfunctioning security access controls and door alarms immediately to 305-585-6111
- Immediately report security breaches, trespasses, thefts, and acts of violence to 305-585-6111

Hazard Communication & Material Safety Data Sheets/Safety Data Sheets

Chemicals and other hazardous substances are used every day in healthcare settings. The Occupational Safety and Health Administration (OSHA) Hazard Communication Standard "Right to Know" of 1970 allows employees to learn about hazardous substances that are used, how to handle the substances safely, and what to do if they are exposed to them. Each department within JHS is required to compile an inventory list of chemicals and other hazardous products used throughout their units/offices, while making sure that all containers are labeled, stored and handled properly. This inventory should be reviewed annually for accuracy and Material Safety Data Sheets/Safety Data Sheets (MSDS/SDS) must be accessible for each hazardous product identified. Air quality monitoring is performed routinely wherever dangerous chemicals or other hazards cannot be eliminated. To obtain a MSDS that is not on file, visit the employee intranet/NetPortal or call 1-800-451-8346.

Hazardous Materials and Waste Management

• Be familiar with toxic/hazardous substances used/stored in all areas where you work; review inventory list of hazardous products.

- Be able to obtain Material Safety Data Sheets (MSDS) or Safety Data Sheets (SDS); instructions listed
 under "Employee Resources" section of the main JHS intranet portal; fax-on-demand capability is also
 available system-wide.
- Ensure that all hazardous products are appropriately identified/labeled and properly stored/contained.
- When dealing with chemicals, make sure: they are approved and that you are trained on proper use/storage, safe handling, appropriate disposal methods, and spill response.
- Be knowledgeable of all Jackson Health System Administrative policies and department-specific procedures and protocols regarding the safe handling of hazardous materials and drugs.

Emergency Management and Fire Safety

- Immediately become familiar with the JHS Emergency Operations Plan and your role in the event of an emergency
- Be familiar with JHS and department-specific policies and procedures regarding: fires, bomb threats, hurricanes, and your responsibilities during each
- Be familiar with how to report needed repairs, and how to obtain necessary supplies

Fire Safety Management

- JHS Fire Plan Administrative Policy & Procedure #112
- JHS Smoke Free Policy Administrative Policy & Procedure #115
- JHS Medical Gas Zone Valve Emergency Shut-Off Administrative Policy & Procedure #400.047.
- Be familiar with the steps to follow during a fire: **R.A.C.E.** Rescue, Alert, Confine, Extinguish.
- Follow **P.A.S.S.** for fire extinguisher usage. <u>Pull, Aim, Squeeze, Sweep</u>
- Explore your work areas to find horizontal and vertical evacuation routes and fire alarm pull stations
- Be familiar with the location of all fire exits and fire response equipment.
- Report fire emergencies to the appropriate phone number (JMH–305-585-6123; varies for satellite facilities)
- Participate in fire drills (quarterly, all buildings, all shifts, documented)

Do not use or bring into a Jackson Health System facility any prohibited electrical equipment such as:

- Toaster Ovens (due to heating element and design)
- Hot Plates
- Portable Space Heating devices (all types)
- Popcorn Makers
- Aromatherapy Heating Oil Lamps
- Electric Skillets
- Electric Barbecue/Hibachi Grills
- Clothes Iron

- Electric Smokers and other similar type products (for cooking/warming purposes)
- Slow Cookers
- Deep Fryers
- Electric Woks
- Electric Griddles
- Sandwich Makers/Presses/Grills and other similar type products (for cooking/warming purposes)

- Nuwave Pro Infrared Ovens and other similar type products (for cooking/warming purposes)
- Halogen lamps
- Cotton Candy Machines
- Funnel Cake Fryers
- Hot Dog Rollers/Steamers or similar type equipment
- Snow Cone Machines and other similar type concession equipment for individual use
- Smoke/Fog Machines/other similar type products
- Flat Irons/Curling Irons

Discard of trash, gloves, masks, candy/food wrappers etc. in appropriate waste receptacles. Discarding of these items in light fixtures, stairwells, and corridors is prohibited.

If you have any questions about maintaining a safe environment or responding to fire/smoke emergencies, contact Environmental Health & Safety at 305 585-2903.

Medical Equipment Management

- Medical Equipment is labeled with preventive maintenance inspection dates
- Clean equipment must be stored separately from soiled equipment
- Damaged equipment must be identified and placed out-of-service
- Know the appropriate phone number to dial to contact Biomedical/Clinical Engineering at your specific assigned campus
- Electrical hazards must always be eliminated including the use of non-approved electrical devices— Administrative Policy & Procedure #228

Utility Systems Management

- Air vents must remain unobstructed
- Report air quality repairs to manager/supervisor and or to facility-specific Engineering/ Maintenance Department
- Know how to report elevator emergencies Administrative Policy & Procedure #239
- Know department-specific plans regarding responding to power failures and water emergencies

Decontamination Team for Chemical Emergencies

Employees are encouraged to volunteer for the Decontamination Team, which is trained to respond when incidents or acts of terrorism expose large numbers of people to dangerous chemicals. The team acts to remove these chemicals as quickly as possible to prevent serious injury or death. Although Emergency Care Center and Trauma Center staff can respond to small events, large events require additional people. Volunteers must be able to complete extensive training, wear a disaster pager at all times and participate in drills. Volunteers required to wear protective suits and respirators must complete a physical exam. Other assignments are available. Since this is an approved JHS function, any injury or illness that occurs as a result of training or an event is covered by Workers' Compensation. Call the Florida Poison Information Center at Jackson Memorial Hospital at 305-585-8904 for more information or to volunteer.

Emergency Alert Codes and Basic Staff Response

This quick reference provides a brief overview to assist employees in responding to emergency situations.

Emergency	Description	Explanation & Staff Response
Code	1	
G 1 D1 1	D 1 /51 /	
Code Black	Bomb Threat/	If a call is received, obtain as much information from the caller as
	Hospital Ordered	possible and report all information to 585-6123 (i.e. location, description,
	Bomb Search	activation, and deactivation). Notify manager/supervisor and area staff
		members. If a suspicious or out-of-place package/container is observed,
		do not touch it; report it to 305-585-6123. Secure/isolate the area.
		Emergency Operator will notify appropriate individuals to coordinate a
		search. Be prepared to evacuate only if instructed to do so. Complete
		and submit an incident report. Wait for "All Clear" announcement.
C 1 D1	0 1 1	Reference: Administrative Policy & Procedure #133.
Code Blue	Cardiopulmonary	Dial 585-6333 and report your name and the location of the cardiac
	Arrest	arrest.
C 1 B		Reference: Administrative Policy & Procedure #123.
Code Brown	Hurricane/Tornado/	Monitor weather conditions. Call employee hotline for updates at 305-
	Severe Weather	585-8000. Obtain information/instructions from manager/supervisor.
		Follow established division or department-specific policies and
		procedures. Security Uniformed Services will implement lockdown.
		Reference: JHS Hurricane Response Plan and Administrative Policy & Procedure
6.1.6	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	#268.
Code Gray	Aggressive/Combative	Protect/defend yourself. Notify Security Services at 305-585-6111.
	Patient/Visitor	Notify manager/supervisor. Provide for the safety and security of all
		persons by moving away from violence and attempting to de-escalate
C. I. C.	T , 1/E , 1	situations. Complete and submit an incident report.
Code Green	Internal/External	An incident where the relocation of patients necessary, or where there is
	Disaster	an anticipated or actual arrival of a large number of patients into the
		Emergency Department and/or Trauma Center. Immediately report the
		emergency to manager/supervisor and/or Executive Senior Hospital
		Administration / Administrator-In-Charge (AIC). If necessary, incident
		command will be established. Obtain information/instructions from
		manager/supervisor. Follow established division or department-specific
		policies and procedures. Reference: JMH Emergency Operations Plan and Mass
Code	Hazardous Material	Casualty Incident (MCI) protocols. Secure/isolate the area. Obtain PPE and spill kits and clean up smaller
		spills. Report larger spills to 305-585-6123. Notify manager/supervisor.
Orange	Spill	
		Assist those who may have been contaminated, only if your exposure is unlikely. Prepare to assist with evacuating if necessary. Complete and
		submit an incident report. Wait for "All Clear."
		Reference: Administrative Policy & Procedure #263.
Code Pink	Infant/Pediatric	· ·
Coue Pilik	Abduction	Notify Security Services at 305-585-6111. Notify manager/supervisor and area staff members. Conduct an immediate search of the area.
	ADductiOH	
		Security Uniformed Services will establish appropriate perimeters and

		implement lockdown if necessary.
Code Red	Fire/Smoke	Follow R.A.C.E. Rescue individuals from the immediate danger of the
		fire. Alert by dialing 585-6123, activating nearest fire alarm pull-station, and notifying manager/supervisor and area staff members. Confine by closing all doors and windows and turning off medical gases. Extinguish fire if it is safe to do so by following the instructions on the extinguisher and using the P.A.S.S. technique (Pull, Aim, Squeeze, Sweep). Knowledge of location of fire response equipment is essential for safe response. Follow horizontal evacuation procedures and/or vertical evacuation procedures according to established division or department-specific policies and procedures. Complete and submit an incident report. Wait for "All Clear" announcement. Reference: Administrative Policy & Procedure #112.
Code White	Hostage Situation	Notify Security Services at 305-585-6111. Maintain communication with Security Dispatch. Stay as calm as possible. Security Uniformed Services will establish appropriate perimeters and implement lockdown if necessary. Notify manager/supervisor. Complete and submit an incident report. Wait for "All Clear" announcement.

Emergency Management and Disaster Preparedness

Jackson Health System, as a major public healthcare facility with the only level one Trauma Center in Miami-Dade County, must be prepared to respond to any type of disaster. This includes natural disasters (e.g. hurricanes, earthquakes, flooding and tsunamis), man-made disasters (e.g. nuclear power plant incidents and industrial incidents, multiple vehicle traffic accidents, plane crashes etc.), acts of terrorism or the use of weapons of mass destruction (e.g. biological, bomb, burn, blasts, chemical, and nuclear attacks), public health crises (e.g. SARS, pandemic and avian influenza, other contagious diseases) and other incidents adversely impacting the wellbeing of our employees, patients, visitors, students, volunteers (e.g. public riots, civil disturbances, etc.)

All employees, faculty, business partners and other agents of Jackson Health System are required to participate during such disasters and emergencies, whether federally declared or not. This responsibility is a condition of employment (and continued employment) with Jackson Health System. At the time of application for employment, all candidates sign an acknowledgement and agreement that as employees of the Public Health Trust and Jackson Health System, they are required to work during period of natural or man-made disasters. They are also advised if they refuse or fail to respond they may be subject to disciplinary action up to and including termination.

Pursuant to the provisions of the American Disabilities Act (ADA) of 1990, JHS will provide reasonable accommodations to qualified individuals with a disability if an accommodation is requested. If for any reason a candidate is qualified for an accommodation under the ADA, he/she is required to disclose that

information at the time of application.

If it is determined by Jackson Health System that an employee cannot perform the essential functions of the job, the candidate may be disqualified for employment.

All JHS employees are required to provide and maintain accurate contact information and agree to update that information when it changes, or periodically upon request of the Public Health Trust. Failure to provide current, accurate, or complete information will result in disciplinary action up to and including termination.

JHS works collaboratively with Miami Dade County Healthcare Preparedness Coalition, Our Regional Domestic Security Task Force, Miami Dade County Emergency Operation Center, City of Miami and Miami Dade County Fire Rescue/EMS, Miami Dade Public Health Department, Miami Dade County Medical Examiner's Office and City of Miami and Miami Dade County Law Enforcement agencies. JHS can request assistance, as needed, from our local, state and federal partners through these agencies.

The Jackson Health System Emergency Operations Plan is an all-hazards emergency/disaster preparedness plan that describes the various types of emergencies that could potentially affect Jackson Health System and Miami-Dade County. The Hospital is committed to continue delivering healthcare services to the citizens of Miami-Dade County during disaster or emergency situations. The Hospital has a responsibility to the community, its business partners and its employees to successfully prepare for emergencies, mass casualties, disasters, etc.

Severe Weather

During severe weather and hurricane season, employees need to be prepared and be in contact with their department. Please become familiar with your department's emergency response plan, provide your current phone numbers, and keep informed about hospital emergency updates. As a storm approaches, employee can stay informed by monitoring their emails and calling the Employee Hotline at 305-585-8000.

Emergency Operations Center

The CEO or Designee or AIC has the authority to activate the Emergency Operations Plan (EOP). Employees will be notified of the EOP activation by their Managers, MCI pagers, Communicator Mass Notifications systems, radio or television announcements, etc. and are required to contact the JHS Employee Hotline (305-585-8000) for information updates and notification of clearance to return to work. Employees are further required to ensure their Department Managers have accurate telephone contact information for them, including but not limited to telephone/cell phone numbers/beepers as appropriate.

The plan (and/or department policies/protocols/plans) also defines the role of each employee, department, facility and affiliated agency during the course of such events. Each division is responsible for complying with the provisions of the Emergency Operations Plan and related policies and

procedures.

Jackson Health System will provide specialized training, medical clearance, protective equipment and supplies necessary for staff to carry out their assigned responsibilities during an incident. These responsibilities include, but are not limited to, providing appropriate patient care, decontamination and containment measures.

Any employee who has accepted the responsibility, and has been fully trained and has received the medical clearances, to be a part of a specialized disaster response team (e.g. decontamination team) is subject to 24-hour on-call. If the employee refuses an assignment, fails to complete any part of the required training, medical screening, or fails to report to duty when called in for a disaster or a drill, her or she will be subject to disciplinary action, up to and including termination.

All other employees who are not assigned to a specialized disaster response team may be subject to 24-hour on-call during a pending/ongoing emergency and may be required to work irregular hours or asked to report to alternate work locations other than the official duty station. An employee may also be asked to perform duties other than those specified in his or her official job description. Employees who fail to complete any part of the hospital's required emergency management training, fail to comply with JHS policy or fail to report to duty when called in for a disaster, drill, or exercise will be subject to disciplinary action, up to and including termination.

JHS complies with the Joint Commission requirements of maintaining a Hospital Incident Command System (HICS) which provides direction in disaster management and recovery initiatives. HICS is part of the National Incident Management System (NIMS). HICS defines roles, responsibilities and reporting channels for everyone involved in disaster response and recovery.

It is the policy of the Public Health Trust to grant disaster privileges to volunteer practitioners i.e. Licensed Independent Practitioners (LIPs), Health Professional Affiliates (HPAs) and Other Volunteer Practitioners (OVPs) for the provision of medical care in the event of a disaster. Their privileges will be for the duration of the disaster only. These practitioners will follow credentialing processes according to JHS policy or determining qualifications of volunteer health professionals in the event of a disaster. Jackson Health System will compensate employees who work during an emergency period according to JHS policy.

Employees who do not report for their scheduled work assignment prior to, during, or after the emergency period and whose person or property is not demonstrably and substantially harmed as a result of an emergency situation will:

- 1) Not be paid for hours not worked except from appropriate accrued leaves banks, and
- 2) Be subject to disciplinary action up to and including dismissal in accordance with the progressive disciplinary policy of the Public Health Trust

Hurricane Preparedness and Assistance

Jackson provides support and information for employees to help them prepare for and recover from severe weather situations at home. Please see the employee intranet for checklists, information about local resources, and information about employee disaster recovery loans.

Security Management and Services

Working Together for a Secure and Safe Hospital

The key to a safe and secure hospital environment is not only the presence of a professional Security Department, but also personal commitment and participation by the entire staff. Contact the Security. Supervisor on duty if you have a safety or security concern, or if a member of Security Services does not meet your expectations of excellence.

Courtesy Services to the Public

- Provide general information and assistance to patients, visitors, and staff
- Provide parking lot/garage escorts for visitors and staff
- Provide assistance in entering locked personal vehicles and offices
- Enforce hospital parking rules and regulations
- Provide jump-starts for dead batteries
- Present specialized crime and accident prevention programs to meet unit needs

Security

- Patrols all JHS facilities and perimeters
- Issues visitor identification badges to all visitors and vendors entering the facilities
- Investigates unusual incidents, suspicious persons, and suspected criminal activity
- Assists clinical staff with violent or disruptive patients
- Assists and supports the Visitor Control program
- Coordinates and liaisons with local law enforcement agencies
- Responds to all calls for assistance by staff and visitors
- Acts as a resource to all hospital departments and staff for security related issues
- Enforces hospital safety and security policies and procedures

Population and Age-Specific Care

Population Specific Care is a health initiative that requires healthcare provider to identify and respond to the developmental and health needs of their patients including: Culture, language, sexual orientation, spirituality/religion, disability, race, socioeconomic status, and age.

IHS Focus on Population-Specific Health

As part of the JHS initiative to promote population-specific healthcare, we are (1) Improving access to healthcare for all healthcare population throughout the community, close to where the patient lives and

works; (2) Hiring highly skilled physicians, nurses, and allied health professionals who understand the importance of population specific care; (3)Establishing a system that is sensitive and effective in meeting the holistic needs of all healthcare populations; (4)Providing materials, instructions, and assistance to all of our patients based on their specific needs.

Age-Specific Care

The Joint Commission (TJC) requires that all members of a health care facility who have patient contact be competent in age specific characteristics and needs. Individuals with patient contact must receive education and training related to the characteristics and needs of the age groups they come in contact with. If a nurse is employed in pediatrics and is responsible for the care of children from infancy to the age of twelve, the nurse must receive education and training for that age-range of children. However, if a nurse is employed at a medical center that cares for all age groups and is expected to float to all areas of the facility based on need, then the nurse must receive education and training for all age groups. The training must include characteristics and needs throughout the life span. Click here to read Age Specific Needs Throughout the Lifespan.

Domestic Violence and the Workplace

Domestic violence is a serious healthcare problem. Statistics tell us that a woman is abused by an intimate partner every nine seconds. Victims come from all cultures, ethnic backgrounds, religions, financial status, and sexual orientation. It is the responsibility of all employees to identify and assess any adult patient who may be the victim of abuse, but who does not fall under the protection of the Adult Protective Service Act. This includes victims of domestic abuse, physical assault and sexual violence. Domestic Violence refers to a pattern of behaviors that are used by a person to gain control and power over an intimate partner. Behaviors may include repeated battering and physical injury, psychological abuse, sexual assault, keeping someone isolated from friends and family, threatening and financial control.

Since Florida law does not provide for mandatory reporting of domestic violence or rape, the victim should be given the opportunity to make a police report if he/she is willing. In cases involving domestic violence, the victim is referred to the social worker who can assist the victim by providing information and a referral to local community resources. For the safety of the victim care must be taken when giving victims telephone numbers, etc. Employees who may be victims can be referred to the JHS Resources for Living at 305-585-6096.

In cases involving physical assault by gunshot wound or other life threatening injury indicating an act of violence, the police must be notified.

Steps to provide help and Related JHS policies:

Section 400 – Identification and Assessment of Adult Victims of Abuse – JHS Policy 400

Section 401 – Abuse and/or Neglected Children - JHS Policy 401

Section 100 – Photographs of Patients – JHS Policy 127

Section 100 – Notification of Gunshot – JHS Policy 186

Section 200 – Domestic Violence in the Workplace – JHS Policy 201

JACKSON MEMORIAL MEDICAL CAMPUS: JHS Public Safety: Security Services - (Call 85-6111 from an internal phone; 305-585-6111 from an external phone; or, *81 from a campus pay phone).

CORRECTIONS, SATELLITE OR CLINICAL FACILITY: Employees will **FIRST** follow the emergency call procedures in the facility and then call JHS Public Safety/Security at 305-585-6111.

OTHER FACILITIES: Employees will first call "9-1-1" (or, depending upon telephone programming, "9-9-911).

- Notify the EWLS/supervisor of the possible need to be absent and discuss possible leave/transfer/scheduling options;
- Discuss with the EWLS/supervisor/legal support plans to return to work.
- If necessary and available, make alternate arrangements to receive a paycheck; and work with EWLS/Security/supervisor to ensure that adequate safety measures are in place.

Employee Responsibilities:

All employees shall participate in Domestic Violence Education. In any case in which immediate threats, injury or violent acts are occurring or have just occurred: Contact Security Services immediately (856111); and then Call 911 and report the problem, and Contact your supervisor. Employees working in corrections, satellite or clinic facilities will first, follow their emergency call procedures then call Security Services at 305-585-6111. Failure to make such a report may constitute grounds for disciplinary action.

Abuse and Neglect

Abuse and/or Neglect and Exploitation of Children and Vulnerable Adults

Any person/employee who knows or has a reasonable cause to suspect that a child, or vulnerable adult has been or is being abused, abandoned, neglected or exploited should report that information to DCF Abuse hotline (1-800-96-ABUSE) and follow JHS policies 400 & 401.

A child means any unmarried person under the age of 18, who has not been declared an adult by a court order. A vulnerable adult means a person 18 years or older who is unable to perform normal activities of daily living or is unable to provide for their own care due to a mental, emotional, physical or developmental disability, dysfunction, brain damage or the physical problems of aging.

Abuse may be physical, emotional or sexual. It may include burns, fractures or other identified injuries. The patient may make frequent references to the "anger" or "temper" of a relative or roommate, or refers to a fear of being harmed. Abuse may be identified by anyone.

Related JHS Policies: Section 400 – 401 <u>Abuse and/or Neglected Children</u> and <u>Identification and Assessment of Adult Victims of Abuse</u> – JHS Policy 400.

Steps to Provide Help: Anyone can report suspected neglect by calling 1-800-96-ABUSE (22873).

Employee Handbook Receipt and Acknowledgement

The purpose of the Jackson Health System (JHS) Handbook is to provide you with a summary of some of the current policies of the JHS, basic information about the benefits and services available to JHS employees at the time of publication of this document, and an outline of the rules of employment at Jackson. These rules of employment represent the basic or minimum requirements to which all Jackson employees are required to adhere, with the understanding that there may be additional rules specific to role, department or area of responsibility.

These rules are an integral part of employment at JHS, and have been established to provide guidelines in the delivery of exceptional service to our patients. Please follow these standards, which are essential to the functioning of a safety net health care system and academic teaching hospital such as Jackson.

These rules and regulations do not constitute a contract of employment, express or implied, and provide no guarantee of any kind. Further, JHS reserves the right to change these rules and regulations from time to time. It is your responsibility at all times to understand and abide the current rules. It is also your responsibility to be aware of new policies or rules. This information will be made available through electronic updates and announcements in employee publications, through the Administrative Policies available on the employee intranet, and/or as communicated to you by management.

Employment at JHS may be a voluntary, employment-at-will relationship for an indefinite period. Employment-at-will means that while JHS intends to maintain a positive working environment with employees, employees have the right to end employment at any time and JHS reserves the same right, except if you are covered by a collective bargaining agreement or you are an employee who has permanent status. This at-will relationship remains in full force and effect, notwithstanding any statements to the contrary made by any JHS employee or representatives, or set forth in any other document.

If you are represented by a union, please consult the collective bargaining agreement that may supersede part(s) of this document.

In summary, while this document strives to provide a wide range of information, it should not be understood as a replacement of Jackson's official policies or its comprehensive procedures and guidelines.

If there is a difference between the information in this JHS Handbook and the information contained in current insurance contracts, plan documents, collective bargaining agreements and/or policies or procedures (for example, if one of the aforementioned documents has been updated, but the change is not yet reflected in this edition of the Handbook) then the provisions of the contracts, plan documents, collective bargaining agreements and/or policies will take precedence. The version of this document available on the JHS employee intranet is the only official version and takes precedence over any other versions.

I have read, understand, and agree to comply with the terms described above. I also acknowledge my role as a JHS employee to review and abide with current JHS Administrative policies, procedures and rules and to be aware of new policies or rules. Please acknowledge by complete NEO attestation in the test section.