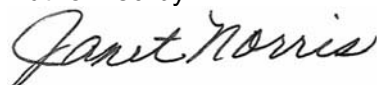


QUEEN OF THE VALLEY MEDICAL CENTER

HUMAN RESOURCES POLICY MANUAL

Subject: CONDUCT, COUNSELING, DISCIPLINE AND DISCHARGE	Page 1 of 10
Section: Employee Relations	Effective Date: 6/04
Policy #: 530.0	Date Revised: 5/05; 5/08; 6/11
Originating Person: Janet Norris, Interim VP, Human Resources; Jill Gruetter, Employee & Labor Relations Program Manager	Authorized by:  Janet Norris, Interim VP, Human Resources

VALUES CONTEXT

Practicing within the context of our core values of Dignity, Excellence, Service and Justice ensures the provision of respect for each person, accountability, commitment to quality, opportunities to serve each other and a sense of community among all persons.

PURPOSE

This policy is to provide guidelines to managers for addressing employee conduct issues. It is also intended to identify examples of behavior that may result in disciplinary action. It should be noted it is the intent of this policy to identify many, but not all, offenses that may lead to corrective action up to and including termination. It is also the purpose of this policy to distinguish non-disciplinary from disciplinary actions. Additionally, this policy clarifies proper record keeping and consideration of disciplinary actions subsequent to their completion.

It is not the purpose of this policy to address employee issues resulting from performance below expectations (see Performance Management policy). However, in some instances performance and conduct issues may occur with regard to the same employee. In these instances, corrective action may be taken using guidelines and practices in this and Queen of the Valley Medical Center (QVMC) Performance Management policy.

CANCELLATION

This policy supersedes all previous policies, memoranda, or other correspondence applicable to conduct, counseling, discipline and discharge, or directly related subjects. Issues covered in earlier dated materials, which are not addressed in this policy, will be resolved in writing by the Vice President of Human Resources, and within the spirit and intent of the guidelines of this current policy; earlier dated materials do not apply.

CONSIDERATIONS/REGULATIONS/RELATED ISSUES

Applicable State and Federal Regulations

Performance Management Policy #555.0
Problem Resolution Policy #560.0

RESPONSIBLE PERSON(S)

This policy applies to all Queen of the Valley employees, contract employees, temporary employees, registry personnel and/or any other individuals representing Queen of the Valley Medical Center.

DEFINITIONS

- I. **CORRECTIVE ACTION** - Any disciplinary or non-disciplinary approach of which the intent is to correct an employee's misconduct or poor performance.
- II. **NON-DISCIPLINARY ACTION** - Includes pre-disciplinary measures which address an employee's conduct at an informal level. Non-disciplinary corrective actions include both verbal and written counseling, Employee Assistance Program ("EAP") intervention, involuntary transfer, education programs and other measures intended to resolve issues specific to an employee.
- III. **DISCIPLINARY ACTION** - Includes disciplinary measures which address employee conduct at a formal, written level. A formal disciplinary action includes but is not limited to written warnings, suspensions, non-accrual of PTO ("paid time off"), demotions, and termination.
- IV. **MISCONDUCT** – Includes lawful or unlawful behavior. Willful or wanton disregard for, and deliberate violation of the expected standards of may lead to disciplinary action up to and including termination.
- V. **COMMON KNOWLEDGE** - A fact that is so generally known that it may be accepted as true without proof.

POLICY

- I. **MANAGEMENT CONSIDERATION** - Since the purpose of a corrective action is to promote a quality work environment, management must be concerned not only with the effect of a penalty on a person, but its effect on the employee's work group as well. When considering application of corrective actions, the following points should be carefully considered:
 - A. As much as practical, it is expected that a manager will counsel an employee regarding her or his behavior on an on-going basis and address employee misconduct at the earliest stage.
 - B. Corrective disciplinary action should be administered uniformly, without discrimination or bias, and removed from personality conflicts. In some instances, treating an employee differently from co-workers may be appropriate if the employee's conduct or performance warrants different treatment.

- C. **Reasonable Investigations** - A reasonable investigation should be conducted by the manager/supervisor to solicit sufficient information to determine the events, which have resulted in consideration of discipline. Investigations will normally include providing an employee an opportunity to present an explanation of events related to any issue needing consideration of corrective action. Exceptions must be approved by the employee's managing Vice President or Vice President of Human Resources (VP, HR). The manager should consider discussing her/his findings with the Employee Relations Specialist or VP, HR to ensure that disciplinary actions are within guidelines applicable to the organization as a whole.
- D. **Authority to Discipline** - Verbal counselings, written counselings and written warnings may be issued by the supervisor or manager. Suspensions, demotions or terminations must be reviewed and approved by the HR Department prior to issuance. Should a question arise, the final decision as to the appropriateness of a corrective action is at the discretion of the employee's managing Vice President.
- E. **Check Previous Records** – It is recommended that available records and information concerning the employee be checked to determine such considerations as length of service with the organization, past disciplinary actions and the employee's performance record.
- F. **Consistent Treatment for Similar Cases** - Each case should be treated in a manner consistent with similarly situated cases previously considered within the department and organization; Human Resources should be consulted on this matter. As it is rare that any two cases are alike, mitigating and aggravating circumstances and differing facts may result in different corrective actions.
- G. **Skipping Steps in the Disciplinary Process** - Disciplinary action, including suspension or termination, may be preceded by counselings and/or written warnings unless the offense is so severe that it warrants more serious action. Appropriate corrective action is at the discretion of the Medical Center and steps may be skipped in light of circumstances and/or mitigating or aggravating conditions relevant to the case at hand.
- H. Employees may respond to the receipt of a formal disciplinary action through the Grievance or Problem Resolution process (as applicable).

II. **RULES OF CONDUCT**

Each employee is expected to perform under reasonable standards of conduct. It is expected that the employee will show a positive regard for the duties assigned and the obligations which the organization has the right to expect from the employee over the entire period of employment.

If, in the opinion of the employee's manager/supervisor, the employee shows willful or wanton disregard for, and deliberately violates, the expected standards of behavior, the manager/supervisor should take appropriate corrective action.

The following are not intended to be all-inclusive or exhaustive, but rather examples of types of actions that may lead to corrective action. Some standards of behavior are **common knowledge** and it is not necessary to list them as expectations.

- A. **Possible Behaviors That May Lead to an Employee's Termination** – The following are examples of behaviors that may result in an employee's termination, with or without a previous disciplinary record. Termination, or any other corrective action, will be based on mitigating and aggravating circumstances considered during the investigative process.
1. Abuse and/or neglect of a patient, co-worker, customer or other work-related contact. (See Suspension Pending Investigation section IV.B. below)
 2. Falsifying or altering employment applications, physical examination questionnaires, work records, time cards or other records.
 3. Falsifying a patient's medical record, including omissions or pre-charting.
 4. Unauthorized use of a prescription pad or providing an unauthorized prescription.
 5. Unauthorized removal or possession of the organization's property away from the premises or hidden from management knowledge of its whereabouts.
 6. Unauthorized removal or possession of anyone else's property.
 7. Giving away the organization's property, neglect or intentional conduct causing misuse, waste, or damage to the organization's property, such as, but not limited to tools, machinery, equipment, supplies, products, structure and facilities, etc.; or, using such property for personal reasons without authorization and/or releasing such property to others without proper authorization.
 8. Deliberate or negligent damage to patient, employee or others' property.
 9. Refusal or delay in performing appropriately assigned regular or temporary duties; including being asked to work overtime.
 10. Feigning illness or the misrepresentation of reasons in applying for a leave of absence, sick leave, or other time off from work.
 11. Consumption of alcohol during working hours, consumption of alcohol in advance of coming to work and detectable in odor or behavior.
 12. Improper use of drugs, whether legal or illegal, leading to impaired performance during working hours. Additionally, failure to use prescription drugs appropriately and/or as directed by a medical provider, resulting in potential risk to the employee or others.

13. Fighting, threatening or aggressive behavior, disruptive, or other similar conduct while on the organization's premises.
14. Possessing any firearms or weapons (pistol, revolver, rifle, shotgun, ammunition, explosive, incendiary, knife, etc.) in or on the organization's property, including parking areas, any related facilities, walkways, and off-site QVMC facilities or at QVMC-sponsored events. Mace, pepper spray or similar protective devices are acceptable if only used or displayed under emergency and justifiable conditions.
15. Disrespectful conduct, use of insulting, abusive, or obscene language to or about other employees, management, patients, physicians, volunteers, customers or other contacts.
16. Conduct or horseplay endangering life, safety, or the health of others.
17. Excessive absenteeism and/or tardiness or continued failure to properly follow absence notification procedures.
18. Unauthorized verbal or written disclosure or release of information and/or records regarding patients, physicians, volunteers and/or the organization's employees or operations.
19. Careless performance of duties, gross negligence including failure to maintain reasonable standards of workmanship or productivity.
20. Off-duty misconduct for which there exists a connection to the employment situation.
21. Willful and repeated violation of the organization's policies and procedures.
22. Sexual harassment, discrimination, immoral, lewd or similar inappropriate acts.
23. Performance below expectations (see Performance Management policy)

B. Possible Corrective Actions up to and Including Discharge - The following behaviors illustrate unacceptable conduct which may result in appropriate corrective action including but not limited to: verbal counseling, written counseling, written warning, suspension, non-accrual of ETO/PTO, demotion and/or termination. More serious action may be taken for repeated or multiple offenses regardless of whether the offenses are similar or dissimilar.

1. The performing of excessive personal business using the organization's property without proper authorization, to include, but not limited to telephones, mail services and/or postage, copying equipment, property or facilities. In addition to applicable discipline, employees may be expected to reimburse the organization for charges accumulated through use of the organization's property for personal reasons within legal parameters.

2. Absence from work or unsatisfactory work performance due to other employment; or the performance of inappropriate work for other employers during a leave of absence.
3. Unsatisfactory assignment completion, delay or failure to perform work as requested or assigned.
4. Consumption of food and/or beverages in unauthorized places or at inappropriate times during the conduct of business.
5. Smoking in non-designated areas. The organization provides a smoke-free work environment and defined smoke areas.
6. Deliberate failure to observe, or inattention to, safety rules and regulations.
7. Participation in gambling activities on premises except for minor sports or similar related pools, normally with minimal investments not to exceed \$10.00.
8. Solicitation and distribution of literature (or other items) by employees and non-employees alike is prohibited during working time, with the exception of health related and/or charitable activities specifically approved by the CEO or his/her designee. (See policy #1010.0 Solicitation and Distribution of Literature.)
9. Soliciting tips, gifts, or other gratuities or favors from patients or their families, or accepting gifts with more than a nominal value.
10. Endorsing or selling outside services and products.
11. Improper or unauthorized parking on the organization's premises.
12. Repeated failure to wear name badge as required.
13. Failure to wear uniforms when required by the organization's policy.
14. Sleeping on the job, wasting time (loafing), inattention to duty, negligence, and intentional slow down of productivity or intentional disruption of the work force.
15. Abuse of the organization's benefits and privileges.
16. Insubordinate behavior such as disobeying an order, verbally abusing a supervisor, co-worker, customer or other visitor, or other actions intended, or resulting in, disharmony among co-workers.
17. Attempting to influence religious beliefs of patients or others.

18. Failure to immediately report accidents, theft, abuse, or similar misconduct toward patients, visitors, other employees, physicians or volunteers or of their property or of Queen of the Valley property.
19. Giving unauthorized medical or health advice.
20. Insubordination.
21. Limited acts of harassment, discrimination or other unlawful behavior.
22. Inappropriate use of health care equipment for self-diagnosis or evaluation of friends or co-workers.
23. Violation of any current or revised Queen of the Valley or departmental policies or practices, including but not limited to those contained in this manual.
24. Working outside scope of practice.
25. Failure to comply with the Licensure and Certification requirements as outlined in the Licensure/Certification for Employees Policy #1125.0.
26. Failure to comply with the TB Testing requirements as outlined in the Physical Exams and Tests Policy #430.0.
27. Failure to comply with the Orientation, Education and Training requirements as outlined in the Orientation, Education and Training Policy #905.3.
28. Failure to comply with the return to work requirements as outlined in the Return to Work After Illness or Injury Policy #435.0.

III. **NON-DISCIPLINARY ACTION**

Before determining what corrective action is appropriate, it is recommended the manager conduct a reasonable investigation and discuss, as appropriate/desired, her/his findings, with the Employee Relations Specialist or VP, HR.

IV. **APPROPRIATE INVESTIGATION**

It is essential that the manager in concert with the Employee Relations Specialist conduct an appropriate investigation that normally includes:

- A. Gathering of relevant, tangible evidence (e.g., time card, photographs, witness statements, etc.).
- B. Review the employee's personnel file for years of service, performance history, and previous disciplinary history.
- C. Meet with the employee to get the employee's recollection of the events.

- D. If disciplinary action needs to be taken, meet with the Employee & Labor Relations Program Manager or VP, HR to discuss consistency of corrective actions taken for similar offenses within the Medical Center.
1. **Verbal Counseling(s)** – Manager verbally indicates what violation has occurred and provides future expectations. Documentation of conversation(s) should be dated and signed and kept by the manager/supervisor. This is not a disciplinary action and is not placed in the employee's personnel file.
 2. **Written Counseling** – Manager provides a written notification of what violation has occurred and future expectations. This is not a disciplinary action and is not placed in the employee's personnel file.
 3. **Employee Assistance Program, Education or other Remedial Action** – Manager provides a written notification of future expectations for employee's participation in employee assistance (voluntary), education or other remedial action. While this is not intended to be a disciplinary action and is not placed in the employee's personnel file, mandatory referral to EAP, education sessions or remedial actions may be components of a disciplinary action. Managers may mandate EAP, education or other remedial actions separate from a disciplinary action in instances where individuals in a leadership role are not meeting conduct or performance standards.

V. **DISCIPLINARY ACTION**

Should corrective action warrant a response greater than those described above, the following disciplinary actions should be used:

- A. **First Level: Written Warning** - Manager issues a written statement to an employee stating what violation has occurred. This is the first level of formal discipline.
- B. **Second Level:** - The following actions require consultation with Human Resources and approval from the issuing manager's supervisor prior to release. There are three types of second level formal discipline and additional tools are also described below.
 1. **Suspension** - Unpaid time off work notice issued to an employee for more serious or multiple offenses. Multiple suspensions, suspensions pending investigation, or demotions may occur prior to termination. Suspensions, or suspensions pending investigation, may be of varying lengths. Suspensions are often progressive in severity. Suspensions, or suspensions pending investigation of less than one week are only applicable to non-exempt employees. Employees may not apply PTO to days of suspension without pay.
 2. **Suspension Pending Investigation**

- a. **Appropriate Use.** Suspensions pending investigation are normally reserved for situations when the employee should no longer be on the job because of concern regarding fitness for duty. An employee may be considered unfit for duty if they appear under the influence of drugs or alcohol; if improperly attired or in a “readiness state” due to lack of cleanliness or other unacceptable feature; is excessively emotional, or other physical or behavioral unacceptability normally expected of a person about to provide service to customers or co-workers. Additionally, an employee who places him/herself or others at a safety risk would be unfit for duty. Also, if an employee is suspected to have engaged in misconduct considered egregious or severe, such as diversion of drugs or Medical Center property, abuse of patients, customers or co-workers, the employee may be suspended until fitness for duty is determined. In cases of suspension pending investigation, efforts are made to conduct said investigation and make determinations as to the disposition of the case as quickly as possible.
 3. **Non-Accrual of PTO** - A written notice of non-accrual of PTO benefits for a period of time. Such non-accruals will prevent additional accrual of PTO hours into the employee’s payroll “bank” and applies only to exempt employees. This is a second level discipline and may be in varying amounts and repeated.
 4. **Demotion** - A notice which informs an employee of a reduction in her/his responsibility, pay and/or title. This is a second level disciplinary action.
 5. **Other Tools** - Other tools such as, but not limited to, requirements to provide medical certifications, last chance agreements, involuntary transfers or suspensions pending investigation, may be utilized to correct employee behavior.
- C. **Third Level: Termination** - A written notice of the reasons for discharge from employment. This action requires consultation with the Employee Relations Representative or VP, HR and prior approval from the issuing manager’s leader.
- VI. **INTRODUCTORY EMPLOYEES** – Normally, an introductory employee who is unable to satisfactorily meet management expectations will not be processed through the disciplinary steps. Instead, she/he will be discharged at any time before the expiration of the introductory period.
- VII. **PROGRESSIVE COUNSELING AND DISCIPLINE** - While progressive discipline is intended as a means to correct employee behavior, steps may be repeated or omitted as appropriate. Selection of a corrective action is at the discretion of management in light of mitigating and aggravating circumstances and organization practices.
- VIII. **FILING OF DOCUMENTS** - Non-disciplinary records such as a manager’s notes concerning verbal and written counseling, will be maintained by the manager until corrective action is taken at which time they will be attached to the written corrective action. Original copies of formal disciplinary actions will be forwarded to HR to be placed in the

employee's personnel file. The employee must sign these actions before they are forwarded to HR. If the employee refuses to sign the document, a witness should sign, verifying delivery of the document.

- IX. **REMOVAL FROM CONSIDERATION** - Memorandums and letters documenting written warnings, suspensions, non-accrual of PTO, and demotions will remain in the employee's personnel file until the employee has a period of four consecutive years without disciplinary action. Once an employee has completed four consecutive years without disciplinary action, that employee may request the previous disciplinary action(s) be removed and given to the employee.

All disciplinary actions and performance evaluations, whether similar in nature to a current event or not, will be considered as a basis for further corrective action up until the time they are removed from the employee's file.

METHODS OF DISSEMINATION

Human Resources Policy Manual

RESOURCE PERSON'S JOB TITLE

Vice President, Human Resources
Employee & Labor Relations Program Manager