



February 18, 2019

## NOTICE

The Kaweah Delta Health Care District Board of Directors will meet in a Human Resources Committee meeting at 11:00AM on Wednesday, February 26, 2020 in the Kaweah Delta Medical Center – Acequia Wing – Executive Conference Room {305 W. Acequia, Visalia}.

All Kaweah Delta Health Care District regular board meeting and committee meeting notices and agendas are posted 72 hours prior to meetings in the Kaweah Delta Medical Center, Mineral King Wing entry corridor between the Mineral King lobby and the Emergency Department waiting room.

The disclosable public records related to agendas are available for public inspection at the Kaweah Delta Medical Center – Acequia Wing, Executive Offices (Administration Department) {1st floor}, 400 West Mineral King Avenue, Visalia, CA and on the Kaweah Delta Health Care District web page <http://www.kaweahdelta.org>.

KAWEAH DELTA HEALTH CARE DISTRICT  
Nevin House, Secretary/Treasurer

A handwritten signature in black ink that reads 'Cindy Moccio'.

Cindy Moccio  
Board Clerk & Executive Assistant to CEO

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Governing Board  
Legal Counsel  
Executive Team  
Chief of Staff

<http://www.kaweahdelta.org>

**KAWEAH DELTA HEALTH CARE DISTRICT BOARD OF DIRECTORS  
HUMAN RESOURCES COMMITTEE**

Wednesday, February 26, 2020

Kaweah Delta Medical Center / 400 W Acequia Ave  
Executive Conference Room (1<sup>st</sup> floor Acequia Wing)

ATTENDING: Directors; Lynn Havard Mirviss (Chair) & Garth Gipson; Gary Herbst, CEO; Dianne Cox, VP Human Resources; Regina Sawyer, VP Chief Nursing Officer, Linda Hansen, Director Human Resources; Brittany Taylor, Sr. Physician Recruiter; George Ortega, Recording

**OPEN MEETING – 11:00AM**

**Call to order** – *Lynn Havard Mirviss, Human Resources Committee Chair*

**Public / Medical Staff participation** – Members of the public wishing to address the Committee concerning items not on the agenda and within the subject matter jurisdiction of the Committee may step forward and are requested to identify themselves at this time. Members of the public or the medical staff may comment on agenda items after the item has been discussed by the Committee but before a Committee recommendation is decided. In either case, each speaker will be allowed five minutes.

- 1) **Physician Recruitment Report**– Update on Medical Staff recruitment efforts - *Brittany Taylor, Sr. Physician Recruiter*
- 2) **HR Committee Mission and Purpose**
- 3) **Retention/Turnover Report 2018 & Revisit HR Annual Report**
- 4) **Policies** - Discuss changes to current policies – *Dianne Cox, VP Human Resources*
  - a) **HR. 94 Employee Handbook**
  - b) **HR.221 Employee Reduction in Force** {revised}
  - c) **HR.70 Meal & Rest Periods** {revised}
  - d) **HR.49 Education Assistance-** {revised}

**Adjourn** – *Lynn Havard Mirviss, Human Resources Committee Chair*

*In compliance with the Americans with Disabilities Act, if you need special assistance to participate at this meeting, please contact the Board Clerk (559) 624-2330. Notification 48 hours prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to the Kaweah Delta Health Care District Board of Directors meeting.*

## Kaweah Delta Physician Recruitment and Relations Medical Staff Recruitment Report - February 2020

Prepared by: Brittany Taylor, Director of Physician Recruitment and Relations - btaylor@kdhcd.org - (559)624-2899

Date prepared: 2/18/20

<b>Central Valley Critical Care Medicine</b>	
Hospitalist	4
Intensivist	2

<b>Delta Doctors Inc.</b>	
OB/Gyn	2
Laborist	1

<b>Kaweah Delta Faculty Medical Group</b>	
Family Medicine Associate Program Director	1
Family Medicine Core Faculty	1

<b>Key Medical Associates</b>	
Internal Medicine/Family Medicine	2
Hospitalist	1

<b>Other Recruitment</b>	
Orthopedic Surgery - Hand	1
Palliative Medicine	1

<b>Somnia</b>	
Anesthesiology - Cardiac	1

<b>Valley Children's Health Care</b>	
Maternal Fetal Medicine	2
Neonatology	1

<b>Valley Hospitalist Medical Group</b>	
GI Hospitalist	2

<b>Visalia Medical Clinic (Kaweah Delta Medical Foundation)</b>	
Dermatology	2
Family Medicine	3
Gastroenterology	2
Internal Medicine	3
Neurology	1
OB/GYN	3
Orthopedic Surgery	1
Otolaryngology	2
Pediatrics	1
Radiology - Diagnostic	1
Rheumatology	1
Urology	3

Candidate Activity								
Specialty/Position	Group	Last Name	First Name	Availability	Board Certification	CA Licensed	Referral Source	Current Status
Family Medicine	Visalia Medical Clinic (Kaweah Delta Medical Foundation)	Bland, D.O.	Scott	08/21	American Board of Family Medicine, Eligible	None	Direct - 9/15/19	Pending site visit in Summer 2020
Family Medicine	Key Medical Associates	Dougherty, MD	Michael	07/21	American Board of Family Medicine, Eligible	None	Key Medical Associates - 12/12/19	Site visit: 12/13/19; Offer extended
Family Medicine	Visalia Medical Clinic (Kaweah Delta Medical Foundation)/ Key Medical Associates	Kim, M.D.	Matthew	07/20	American Board of Family Medicine, Eligible	Active	Direct - Current KDH Resident	Site visit pending dates
Family Medicine	Visalia Medical Clinic (Kaweah Delta Medical Foundation)/ Kaweah Delta Faculty Medical Group	Schultheiss, MD	Christine	08/20	American Board of Family Medicine, Certified	None	Physician Empire - 1/27/2020	Currently under review
Family Medicine	Delta Doctors, Inc.	Macias, M.D.	Lea	10/20	American Board of Family Medicine, Eligible	Active	Direct - Current KDH Resident	Site Visit: 11/25/19; Offer accepted
Family Medicine - Program Director	Kaweah Delta Faculty Medical Group	Martinez, M.D.	Mario	05/20	American Board of Family Medicine, Certified	Active	Internal Referral	Site Visit: 11/22/19; Offer accepted
Family Medicine	Key Medical Associates	Janvelian, M.D.	Vladimir	09/20	American Board of Family Medicine, Eligible	Active	Carson Kolb - 11/28/18	Site Visit: 2/15/19; Offer accepted; Start date pending
Family Medicine	Visalia Medical Clinic (Kaweah Delta Medical Foundation)	Patty, M.D.	Christina	08/20	American Board of Family Medicine, Eligible	Active	Direct - Local Candidate	Site Visit: 2/5/19; Offer accepted; Start Date: 8/31/20
Hospitalist	Central Valley Critical Care Medicine	Diramerian, M.D.	Liza	08/20	TBD	None	Referral - Dr. Umer Hayyat	Site Visit: 12/17/19; Offer pending
Hospitalist	Central Valley Critical Care Medicine	Kim, M.D.	Erica	08/20	American Board of Internal Medicine, Eligible	Active	Vista Staffing - 1/8/2020	Site visit pending dates
Hospitalist	Central Valley Critical Care Medicine	McIntyre, M.D.	Alexia	08/20	TBD	None	Vista Staffing - 1/4/2020	Currently under review
Hospitalist	Central Valley Critical Care Medicine	Shah, M.D.	Vatsal	08/20	American Board of Internal Medicine, Eligible	None	Vista Staffing - 1/3/20	Site Visit: 2/24/2020
Hospitalist	Key Medical Associates	Jamil, M.D.	Asma	07/20	TBD	Active	KMA - 1/13/2020	Site visit: 1/24/2020

Candidate Activity								
Specialty/Position	Group	Last Name	First Name	Availability	Board Certification	CA Licensed	Referral Source	Current Status
Hospitalist	Key Medical Associates	Pursley, M.D.	Sarah	08/20	American Board of Family Medicine, Eligible	None	KMA - 1/2/2020	Site Visit: 1/10/2020
Hospitalist	Central Valley Critical Care Medicine	Hayyat, M.D.	Umer	08/20	American Board of Internal Medicine, Eligible	In progress	Practice Link	Site Visit: 8/14/19; Offer accepted
Hospitalist	Central Valley Critical Care Medicine	Upton, M.D.	Tracy	08/20	American Board of Internal Medicine, Eligible	Active	Vista Staffing - 9/12/19	Site Visit: 10/17/19; Offer accepted
Intensivist	Central Valley Critical Care Medicine	Aboud, M.D.	Hussain	08/20	American Board of Internal Medicine, Certified; Critical Care Medicine, Eligible	None	PracticeLink - 12/9/19	Site Visit: 1/31/20; References Requested
Intensivist	Central Valley Critical Care Medicine	Arab, M.D.	Talal	08/20	American Board of Internal Medicine, Certified	None	Vista Staffing - 1/18/20	Site visit pending dates
Intensivist	Central Valley Critical Care Medicine	Emami, M.D.	Nader	07/20	American Board of Internal Medicine, Certified; Critical Care Medicine, Eligible	None	Comp Health 10/1/19	Site visit pending dates
Intensivist	Central Valley Critical Care Medicine	Kelker, M.D.	Tariq	TBD	American Board of Surgery - General, Certified; American Board of Critical Care, Eligible - results pending	Active	MDstaffers - 10/11/19	Site visit pending dates
Intensivist	Central Valley Critical Care Medicine	Matthews, M.D.	Lawrence	08/20	American Board of Internal Medicine, Certified; American Board of Critical Care, Eligible	None	Direct - PracticeLink 12/31/2019	Site visit pending dates
Intensivist	Central Valley Critical Care Medicine	John, D.O.	Avinaj	08/21	TBD	None	Vista Staffing - 10/25/19	Site visit: 12/13/19; Offer accepted
Intensivist	Central Valley Critical Care Medicine	Rubinchkova, M.D.	Yelena	05/19	American Board of Internal Medicine, Eligible	None	Fidelis Partners - 8/14/19	Site Visit: 10/21/19; offer accepted
Internal Medicine	Visalia Medical Clinic (Kaweah Delta Medical Foundation)	Malik, M.D.	Sara	08/21	American Board of Internal Medicine, Eligible	None	Direct - Dr. Umer Hayyat's spouse	Pending site visit in Spring 2020

Candidate Activity								
Specialty/Position	Group	Last Name	First Name	Availability	Board Certification	CA Licensed	Referral Source	Current Status
Neonatology	Valley Children's Hospital	Ali, M.D.	Anum	08/20	American Board of Pediatrics, Certified	None	Valley Children's - 12/10/2020	Site Visit: 12/17/20
Neonatology	Valley Children's Hospital	Chouthai, M.D.	Nitin	TBD	American Board of Pediatrics - Neonatology, Certified	None	Valley Children's - 1/21/2020	Site Visit: 2/21/2020
Neonatology	Valley Children's Hospital	Ibonia, M.D.	Katrina	03/20	American Board of Pediatrics; Neonatal-Perinatal, Certified	Active	Valley Children's - 8/1/2019	Site Visit: 8/27/19; Offer accepted; Start date: 3/9/20
Neurology	Kaweah Delta Medical Center	Bajwa, M.D.	Sami	07/20	American Board of Psychiatry and Neurology, Certified; Vascular Neurology, Eligible; Clinical Neurophysiology/EEG, Eligible	Active	Direct - Referred by Dr. Ahmer Khalid, Adult Hospitalist	Site visit pending dates
OB/GYN	Delta Doctors, Inc.	Guerrero-Hall, M.D.	Karla	07/20	TBD	None	Pacific Companies - 2/4/2020	Site visit pending dates
Orthopedic Surgery - Hand	Orthopaedic Associates Medical Clinic, Inc.	Seiler, M.D.	Lucas	07/20	American Board of Orthopaedic Surgery, Eligible	Active	Direct - Referred by Orthopaedic & Associates Medical Clinic, Inc.	Site visit: 2/10/20
Otolaryngology	Visalia Medical Clinic (Kaweah Delta Medical Foundation)	Badran, M.D.	Karam	08/20	American Board of Otolaryngology – Head and Neck Surgery, Eligible	Active	Fidelis Partners - 8/8/2019	Site Visit: 10/14/19; Offer extended
Otolaryngology	Visalia Medical Clinic (Kaweah Delta Medical Foundation)	Neel, M.D.	Gregory	08/20	American Board of Otolaryngology – Head and Neck Surgery, Eligible	None	AAO-HNS Job Posting	Site Visit: 1/31/20; Offer extended
Otolaryngology	Visalia Medical Clinic (Kaweah Delta Medical Foundation)	Roos, D.O.	Jason	05/20	American Osteopathic Board of Otolaryngology, Certified	In progress	Direct	2nd Site Visit: 1/27/20; Offer accepted
Pediatric Hospitalist	Valley Children's Hospital	Goodrich, M.D.	John	TBD	American Board of Pediatrics, Certified	Active	Valley Children's - 2/3/2020	Site Visit: 3/16/2020
Pediatrics	Visalia Medical Clinic (Kaweah Delta Medical Foundation)	Currie, D.O.	Kristen	03/20	American Board of Pediatrics, Certified	In progress	Practice Match - 9/17/19	Site Visit: 10/28/19 Offer accepted; Start date: 3/16/20

**Candidate Activity**

Specialty/Position	Group	Last Name	First Name	Availability	Board Certification	CA Licensed	Referral Source	Current Status
Radiation Oncology	Sequoia Radiation Oncology Medical Associates	Chang, D.O.	Tangel	05/20	American Board of Radiology - Radiation Oncology, Certified	Active	ASTRO Conference 2017	Site Visit: 10/7/19; 2nd visit: 10/28/19; Offer accepted
Urology	Visalia Medical Clinic (Kaweah Delta Medical Foundation)	Akhtar, M.D.	Hadi	08/21	TBD	None	PracticeLink - 1/31/2020	Currently under review
Urology	Visalia Medical Clinic (Kaweah Delta Medical Foundation)	Glass, M.D.	Michael	ASAP	American Board of Urology, Certified	None	Fidelis Partners - 2/12/2020	Currently under review
Urology	Visalia Medical Clinic (Kaweah Delta Medical Foundation)	Talanki, M.D.	Varun	08/21	TBD	None	HealthCareers - 1/24/2020	Pending phone interview with Dr. Ford

## **Kaweah Delta Health Care District HUMAN RESOURCES COMMITTEE**

**MISSION AND PURPOSE:** The Human Resources Committee of the Board serves to ensure furtherance of the Kaweah Delta goal of providing an Ideal Work Environment for our employees and volunteers. Members provide support and guidance with regard to Human Resources strategies and programs for recruitment and retention.

**SPECIFIC RESPONSIBILITIES:** Review of annual HR Report of Recruitment and Retention, as well as updates on Employee Engagement initiatives and the bi-annual survey and follow up action planning process. In addition, the Committee reviews additional information on specific strategies on total rewards (compensation and benefits), workforce analysis and staffing with associated analytics, organizational development programs, wellness, and compliance with regulatory agencies. The Committee assists with furthering the development of the Human Resources function over time.

**MEETING FREQUENCY:** The Committee will meet every other month or as is practically necessary.

Adopted by the Human Resources Committee on June 19, 2018 and approved by the Board of Directors on June 25, 2018.

**Report of Retention and Turnover  
January 2019 – December 2019**

# High Level Data

## January 2019 – December 2019

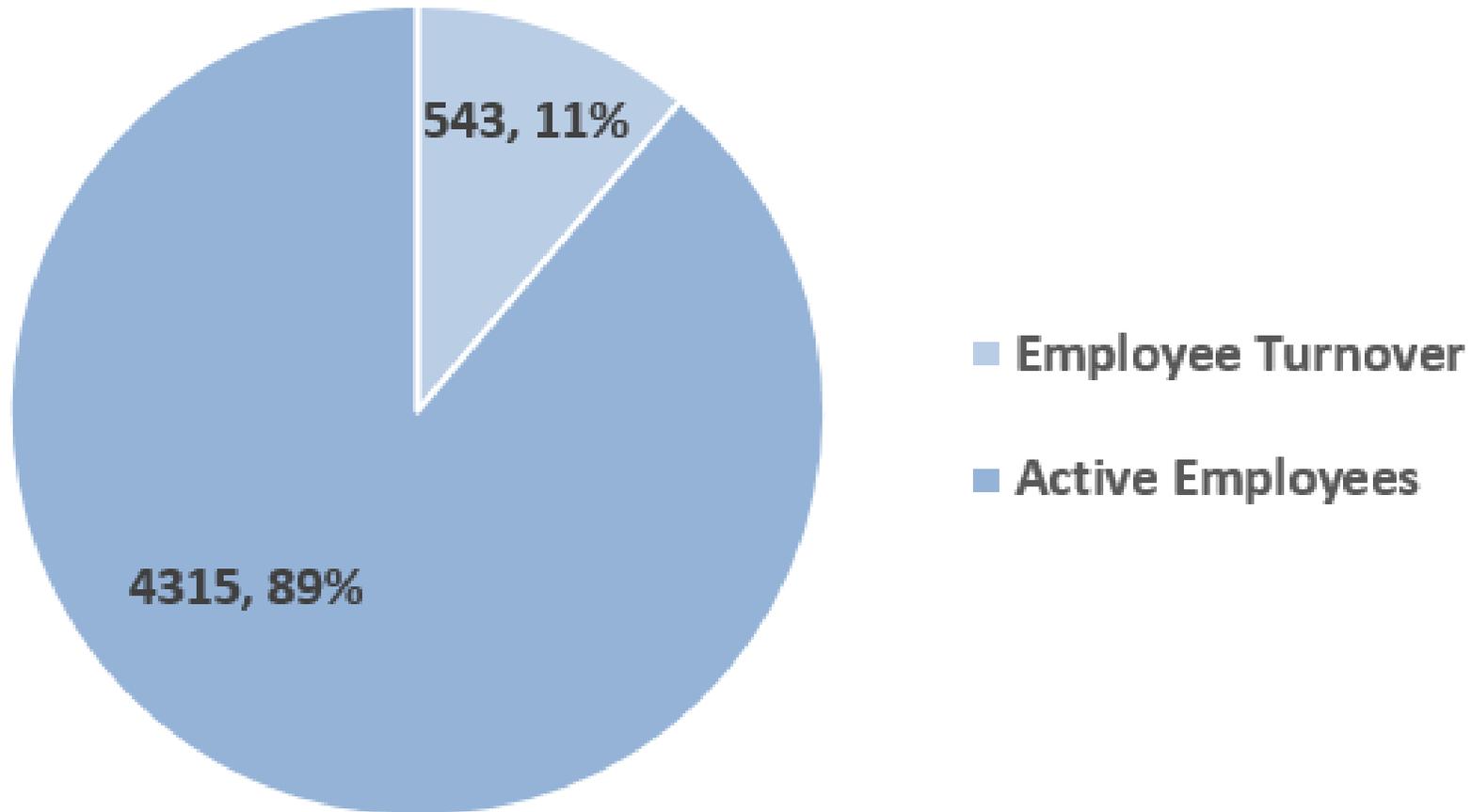


*PHC= Private Home Care, LD= Light Duty, GME= Residents, PD= Per Diem*

# District Employee Turnover

January 2019 – December 2019

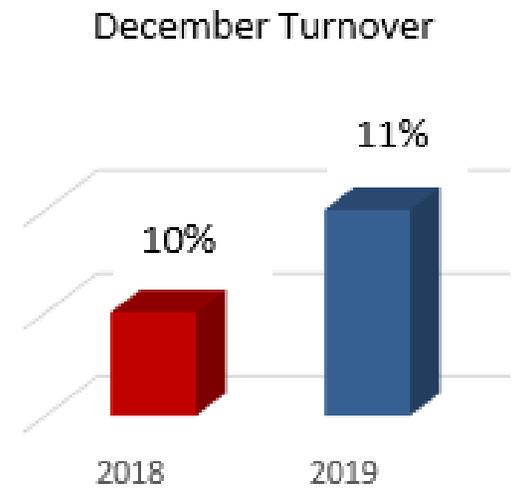
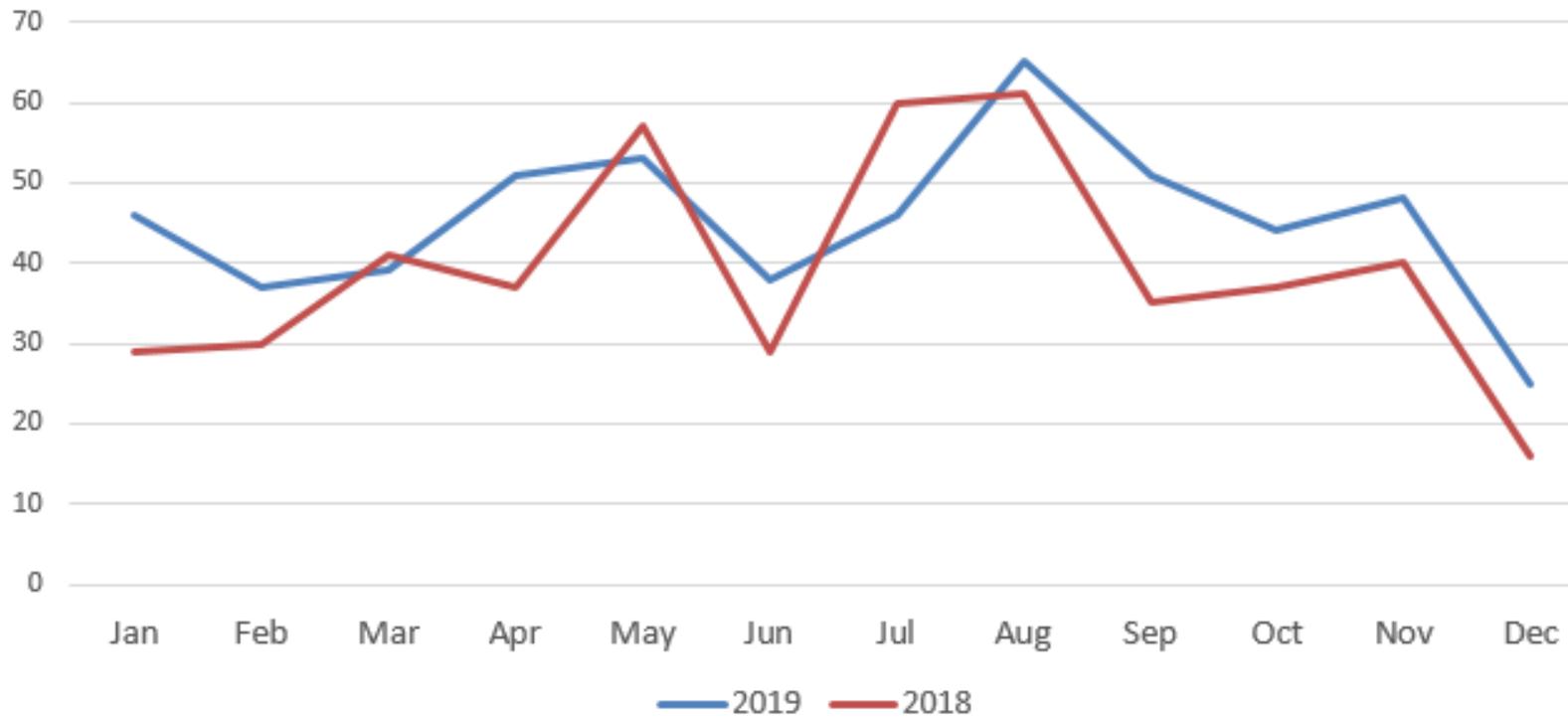
~Includes FT/PT Employees~



# Employee Terms by Month

## January 2019 – December 2019

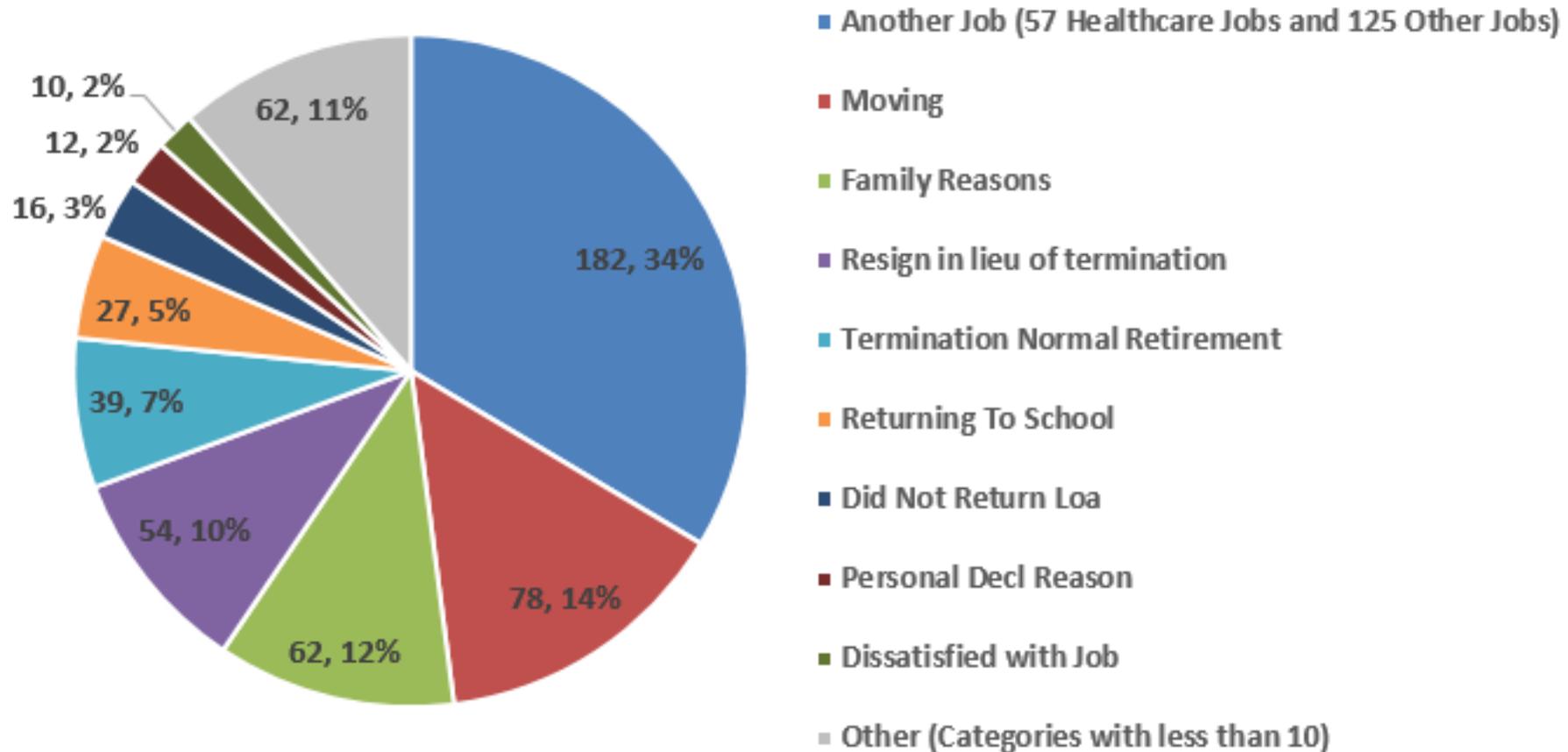
~Includes FT/PT Employees~



# Reasons FT & PT Employees Left

January 2019 – December 2019

~Includes 543 FT/PT Employees~



## Terms by Generation

January 2019 – December 2019

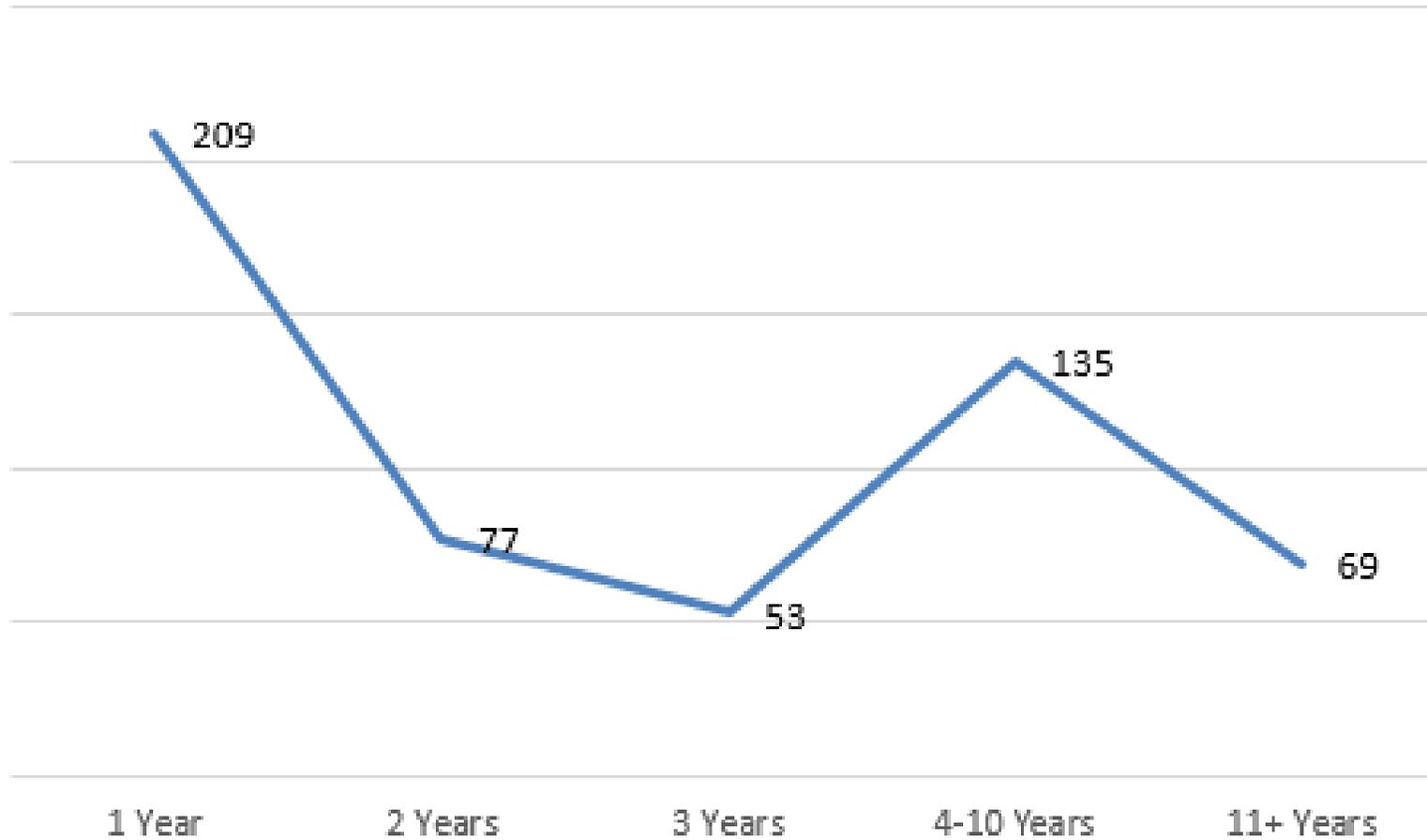
~Includes 543 FT/PT employees who termed~

<b>Categories</b>	<b>#of Terms</b>	<b>Active FT/PT Employees</b>	<b>% of Category Turnover</b>
<b>Silent Generation (1927-1945)</b>	2	18	11%
<b>Baby Boomers (1946-1964)</b>	80	739	11%
<b>Gen X Baby Busters (1965-1980)</b>	113	1459	8%
<b>Gen Y Millennials (1981-2000)</b>	348	2099	17%
<b>Gen Z Digitals (2001+)</b>	0	0	0%

# Employee Terms by Tenure

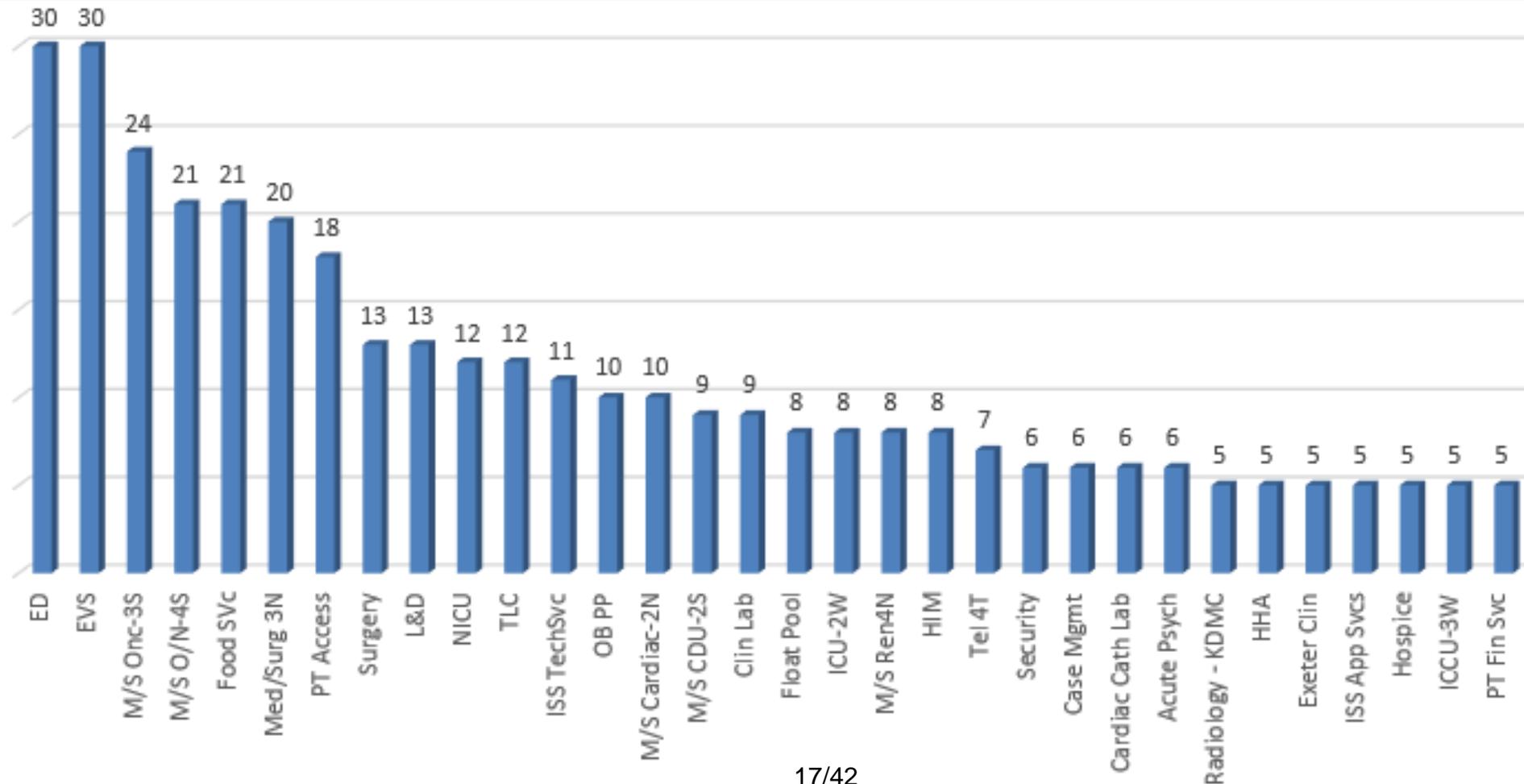
January 2019 – December 2019

~Includes 543 FT/PT Terms~



# Departments with 5+ Termed FT/PT Employees

January 2019 – December 2019



# Top Termed Departments by Month January 2019 – December 2019

ED- 30 Terms



EVS- 30 Terms



M/S Onc 3S- 24 Terms



M/S Ortho 4S- 21 Terms



Food Svc-21 Terms

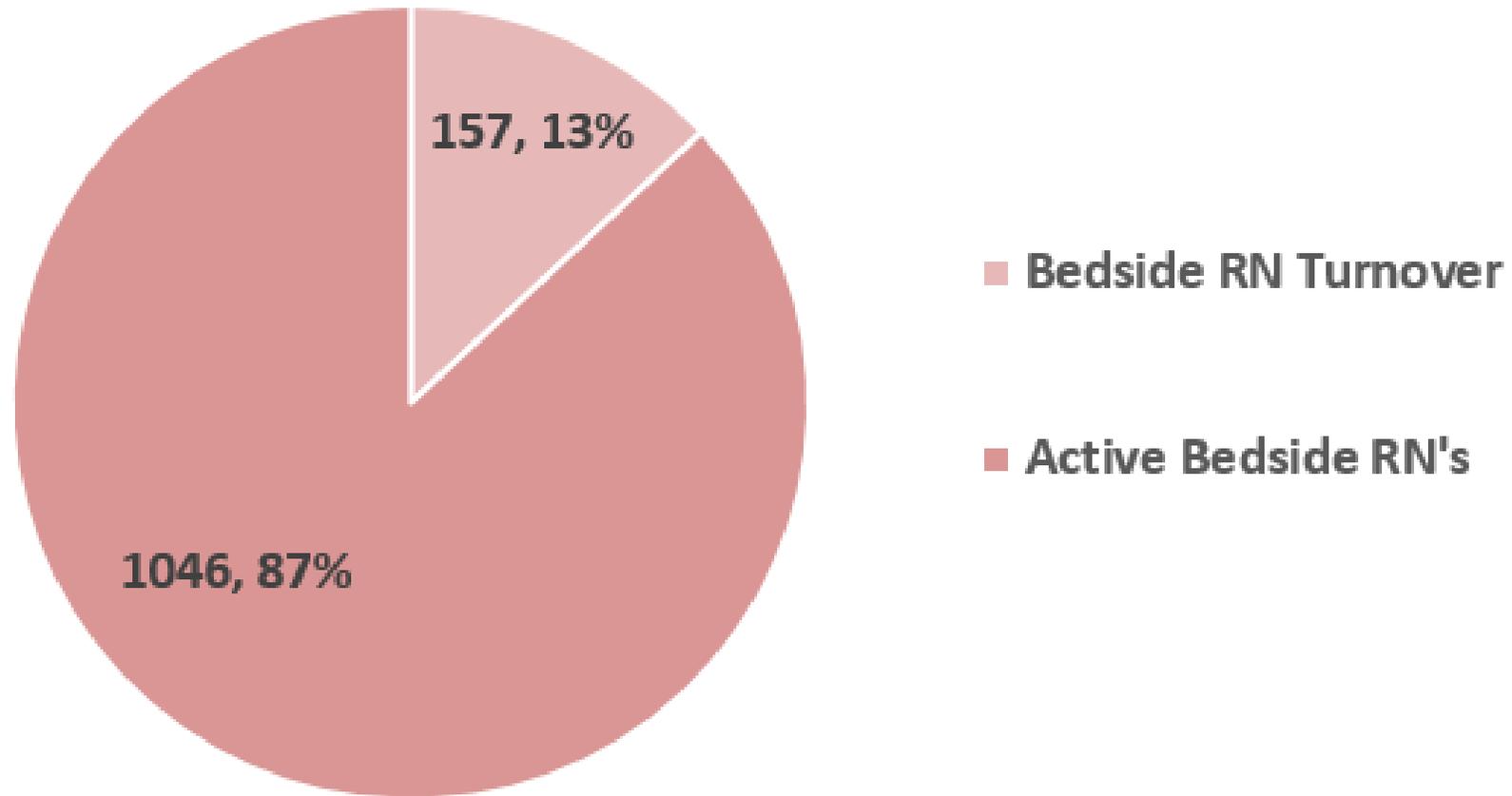


# Reasons for the top 3 termed departments January 2019 – December 2019

ED		EVS		M/S Onc 3S		M/S Ortho 4S		Food Svc	
Reasons	# of Terms								
Moving	6	Resign in lieu of termination	8	Another Job	7	Another Job-Healthcare	5	Another Job	4
Career Advancement	5	Family Reasons	7	Another Job-Healthcare	5	Family Reasons	3	Family Reasons	3
Another Job	3	Another Job	5	Resign in lieu of termination	4	Another Job	3	Personal Decl Reason	3
Resign in lieu of termination	3	No Show	3	Family Reasons	3	Moving	2	Resign in lieu of termination	3
Another Job-Healthcare	2	Attendance	2	Moving	3	Resign in lieu of termination	2	Job Performance	2
Family Reasons	2	Moving	2	Misconduct	1	Did Not Return Loa	1	No Show	2
Mandatory Lay Off	2	Health Reasons	1	Termination Normal Retirement	1	Dissatisfied with Job	1	Returning To School	2
Personal Decl Reason	2	Personal Decl Reason	1			Expired License or WorkPermit	1	Did Not Return Loa	1
Returning To School	2	Termination Normal Retirement	1			No Show	1	Dissatisfied with Job	1
Did Not Return Loa	1					Personal Decl Reason	1		
Eliminate Commute	1					Returning To School	1		
End of Fixed-Term Contract	1								
<b>TOTAL</b>	<b>30</b>		<b>30</b>		<b>24</b>		<b>21</b>		<b>21</b>

# Bedside RN Turnover

January 2019 – December 2019  
~Includes FT/PT Bedside RNs~



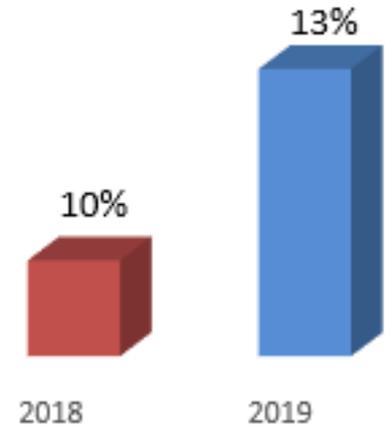
# Bedside RN Terms by Month

## January 2019 – December 2019

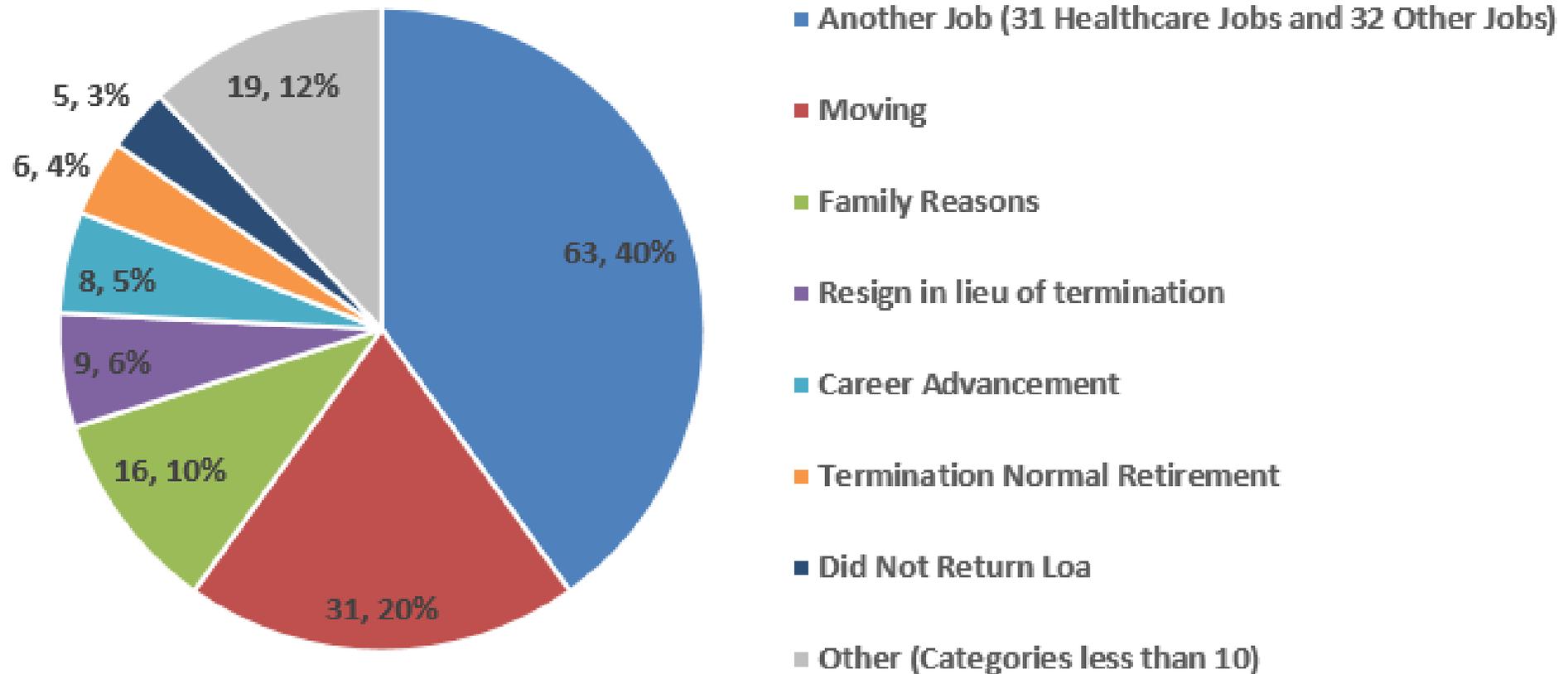
~Includes FT/PT Bedside RNs~



December Bedside Turnover



# Reasons Bedside RNs Left January 2019 – December 2019 ~Includes 157 FT/PT Bedside RNs~



# Bedside Terms Broken Down by Generation

January 2019 – December 2019

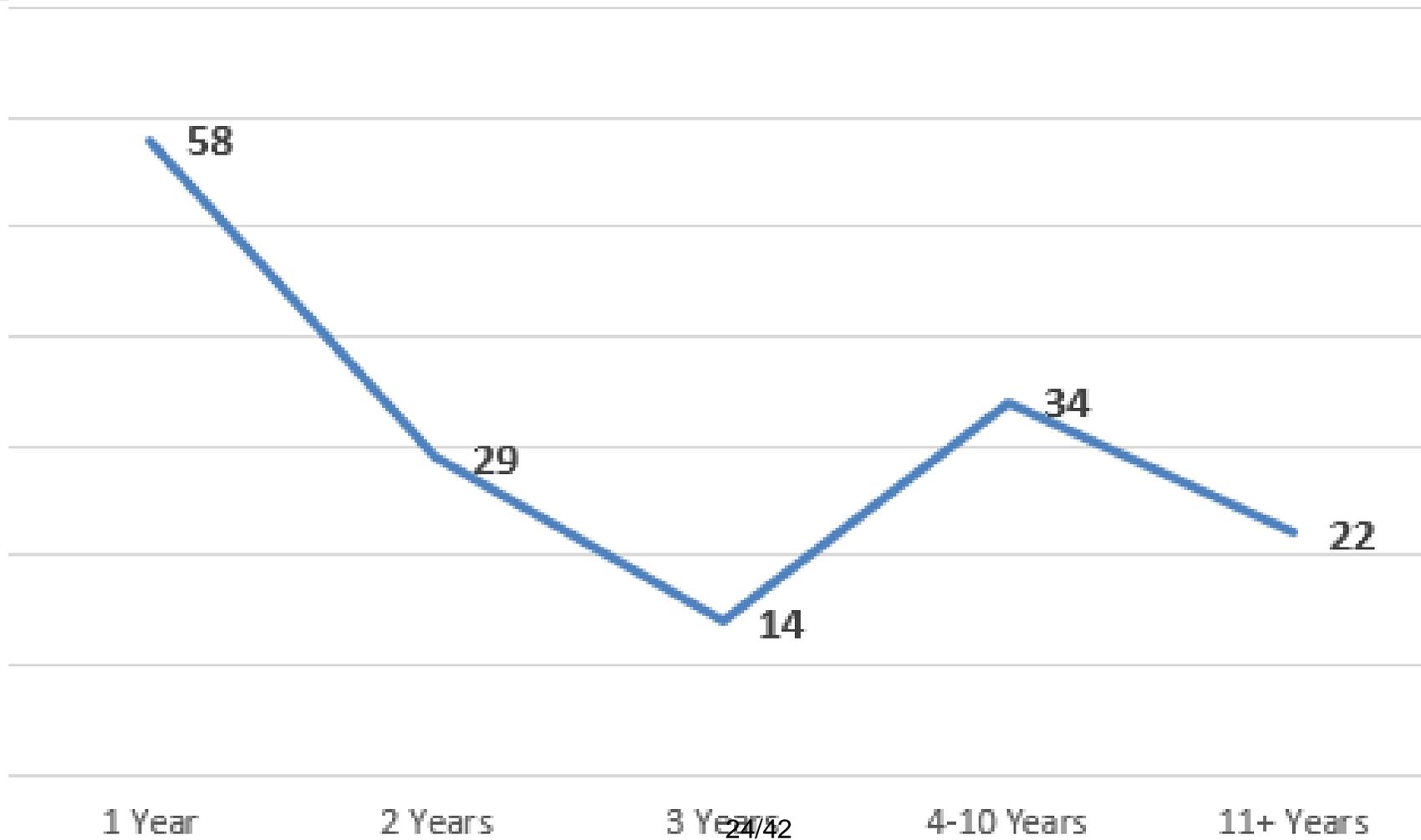
~Includes 157 FT/PT Bedside RNs who termed~

<b>Categories</b>	<b># of Terms</b>	<b># of FT/PT employees</b>	<b>% of Category Turnover</b>
<b>Silent Generation (1927-1945)</b>	0	1	0%
<b>Baby Boomers (1946-1964)</b>	16	123	13%
<b>Gen X Baby Busters (1965-1980)</b>	40	351	11%
<b>Gen Y Millennials (1981-2000)</b>	101	570	18%
<b>Gen Z Digitals (2001+)</b>	0	0	0%

# RN Terms by Tenure

January 2019 – December 2019

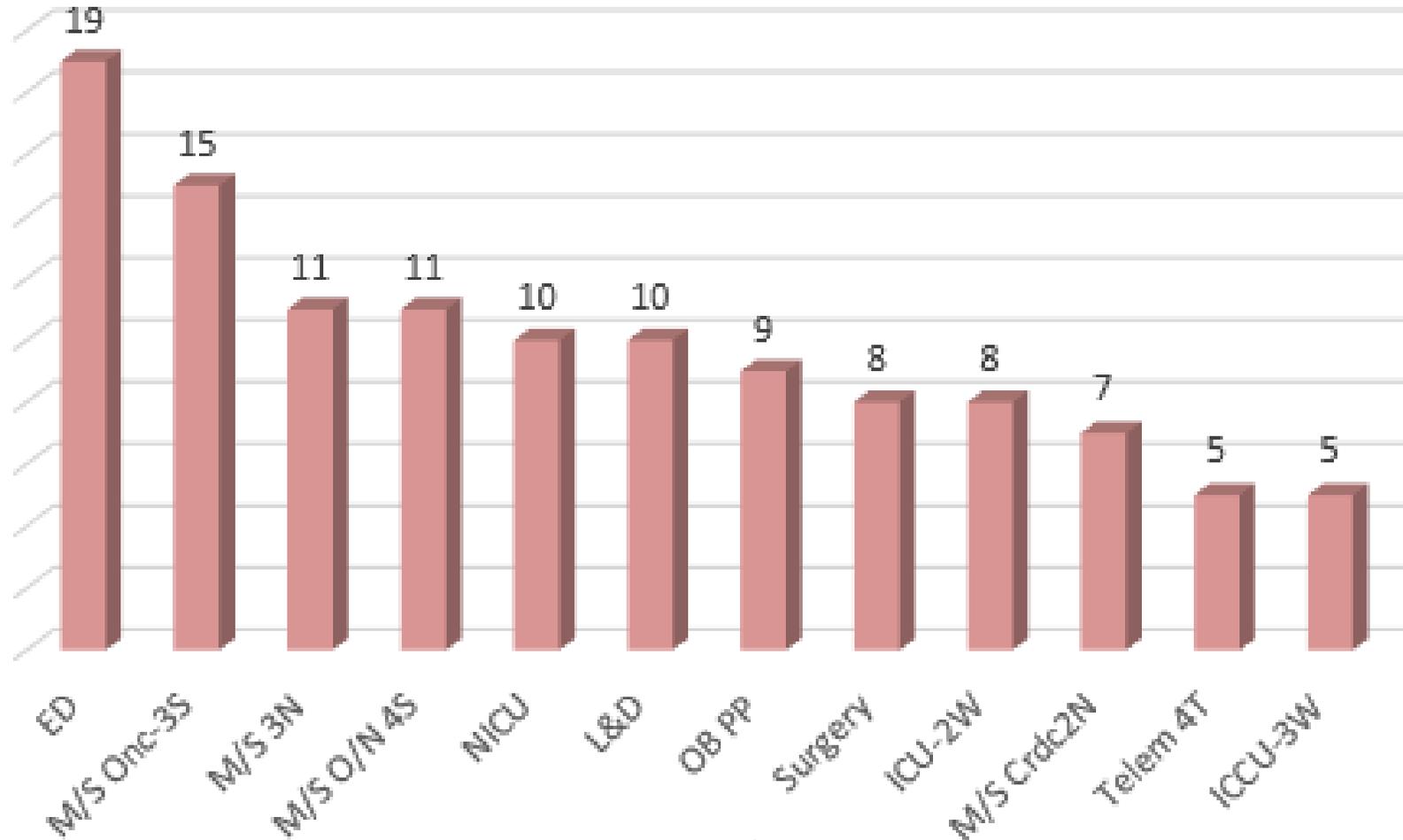
\*Includes 157 FT/PT Bedside Terms\*



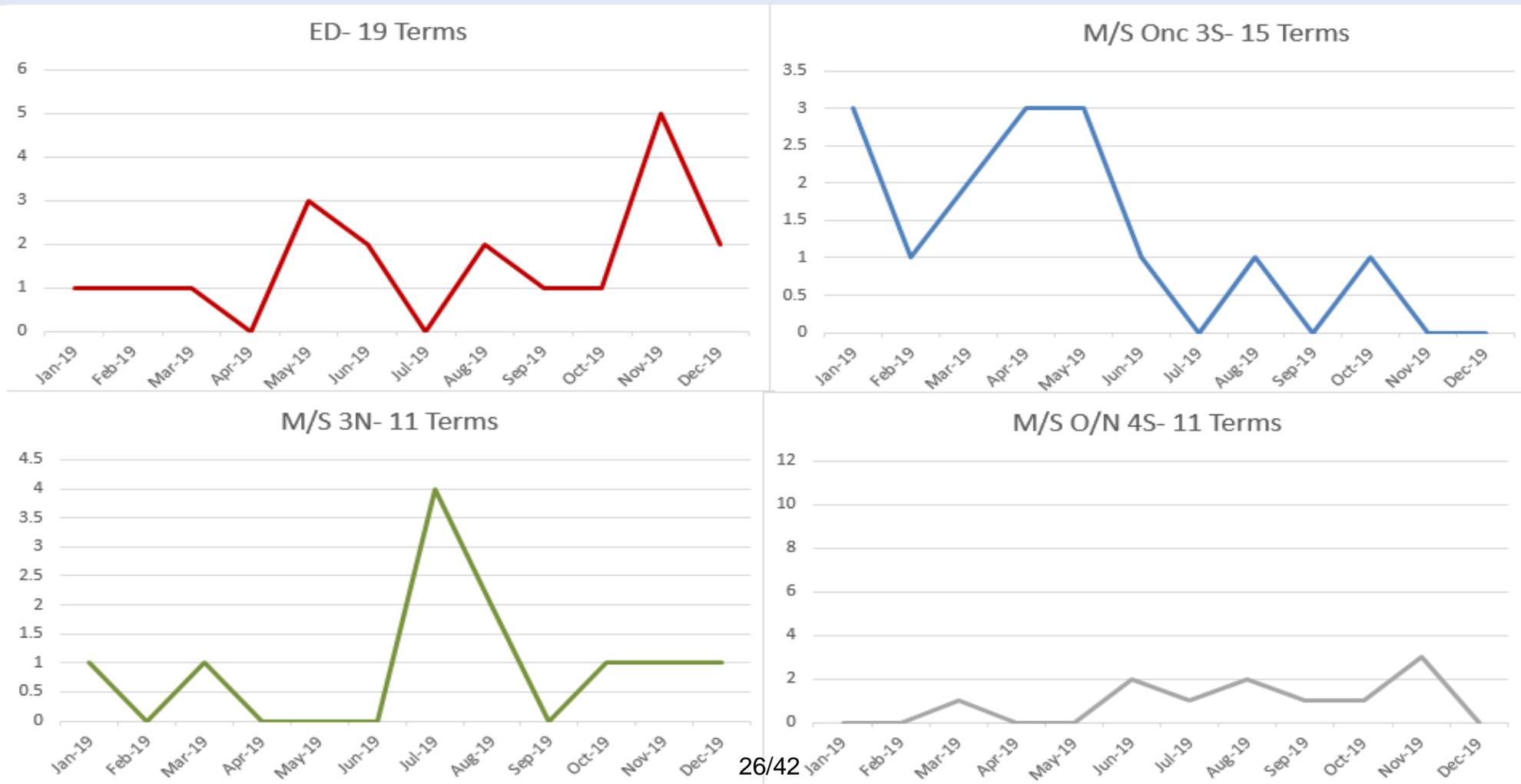
# Departments with 5+ Bedside RN Terms

January 2019 – December 2019

~Includes FT/PT Bedside RNs~



# Top Bedside Termed Departments by Month January 2019 – December 2019



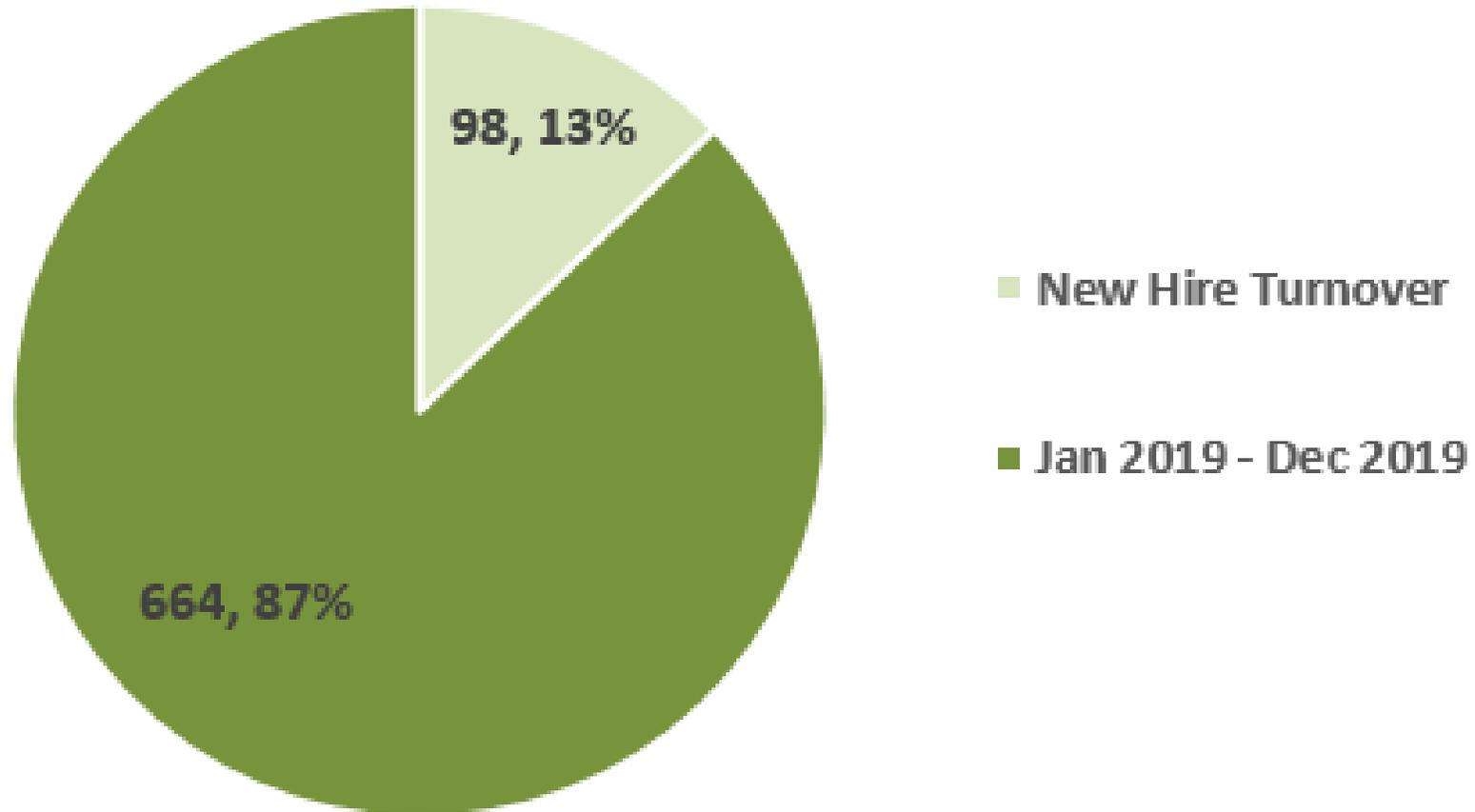
## Reasons for the top 3 termed departments January 2019 – December 2019

ED		M/S Onc 3S		M/S 3N	
Reasons	# of Terms	Reasons	# of Terms	Reasons	# of Terms
Moving	6	Another Job	7	Resign in lieu of termination	5
Career Advancement	5	Another Job-Healthcare	4	Another Job	2
Family Reasons	2	Family Reasons	2	Another Job-Healthcare	2
Another Job-Healthcare	1	Moving	1	Moving	1
Did Not Return Loa	1	Termination Normal Retirement	1	Termination Normal Retirement	1
Eliminate Commute	1				
Personal Decl Reason	1				
Returning To School	1				
Another Job	1				
<b>Total</b>	<b>19</b>		<b>15</b>		<b>11</b>

# New Hire Turnover

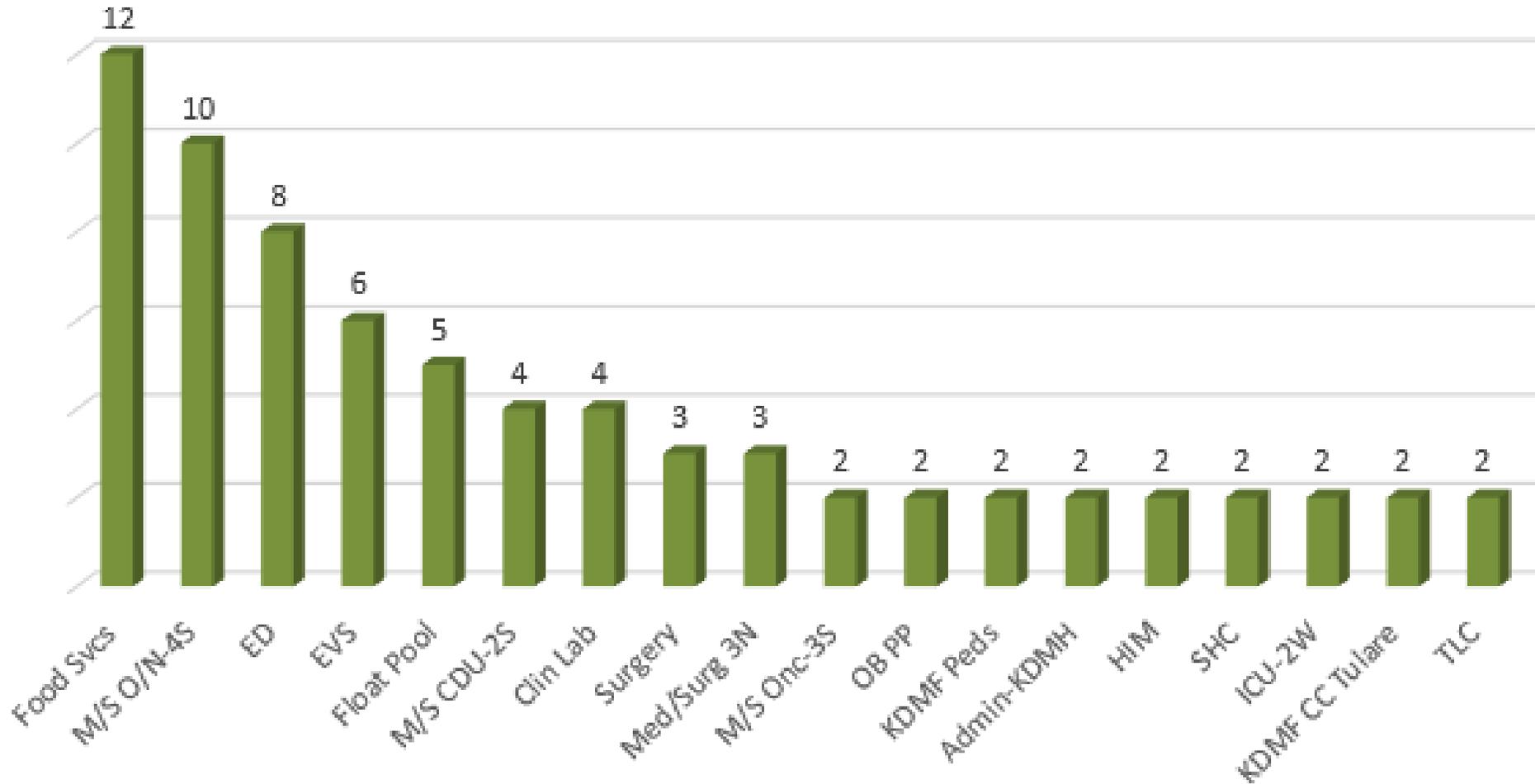
(Hired and termed within 12 months)

~Includes FT/PT Employees~



## Departments with more than 2 termed new hires

Numbers include those who were hired and termed within 12 months



## Departments with 10+ transfers IN/OUT

Department	Transfers IN	Department	Transfers OUT
6010-Intensive Care Unit	19	7183-KD Exeter Health Clinic	27
6030-CVICU	14	6170-Nursing Float Pool	23
6380-Obstetrics	14	6177-Orthopedics/Surgery-4S	19
7010-Emergency Department	13	7010-Emergency Department	18
6170-Nursing Float Pool	12	6012-Critical Care Float Pool	15
		6151-ICCU-3W	15
		8440-Environmental Svcs	13
		8790-Case Management	10

# Human Resources Annual Report

**August 2019**

This annual report will focus on retention and recruitment of employees. Retention is the strategic focus of all of our initiatives in Human Resources and Organizational Development, other than regulatory and legal compliance with The Joint Commission, California Department of Public Health and other regulatory agencies and Federal and State law.

Major Strategic Focus areas:

- Leadership Development
  - 4<sup>th</sup> cohort of Lead Academy for 40 leaders.
  - Rollout of Kaweah Care Culture tools, including “RELATE” for leaders (RELATE is the acronym for Reassure, Explain, Listen, Answer, Take Action, Express Appreciation).
  - Integration of new Mission and Vision with leaders and employees.
  - Implementation of Just Culture imbedded within our Kaweah Care Culture.
  
- Competitive Compensation and Benefits
  - Annual market and minimum wage adjustments, including almost \$6 million in adjustments for Registered Nurses on June 30, 2019.
  - Piloting a Retention Bonus for Registered Nurses, beginning in late August.
  - Continuation of our Pay for Performance annual performance evaluation program with a merit opportunity of up to 4%.
  - New voluntary benefits offered in 2019 and more proposed for 2020. Wellness is a focus with our “Be Well, Live Well” program that we continue to expand.
  
- Employee Engagement
  - The bi-annual survey was taken in May 2019 with 92% participation. Results have been shared with the Board and leaders; we are facilitating staff meetings for input and action planning through October, with results to the Board in December.

## **Retention and Recruitment** - Turnover Analysis, Presumptions and Propositions

The healthcare jobs market continues to grow and is trending up for 2019. At the same time, national hospital turnover increased by .9%, bringing the turnover rate up to 19.1%. Kaweah Delta is currently at 11%.

- Kaweah Delta’s employment is now at 5,100, which represents a growth of approximately 300 employees over the past year.

- Overall retention is 89%; turnover is at 11%, just below the California Hospital Association benchmark.
- Turnover tends to decline from August through December and then picks up in January through May. June and July are variable. This trend of upward turnover during the first half of the year is important to consider in staffing strategies.
- Employees leaving for another job has increased to 36%, but not all are leaving for jobs in healthcare. We have created new codes in our system and our tracking will improve over time. Moving and leaving for Family Reasons are our next largest areas of turnover. We have implemented Exit Interviews.
- Millennials represent our largest percentage of turnover.

**Registered Nurses:** Nationally, the hospital turnover rate of Registered Nurses is stated to be at 17.2%, while the California Hospital Association reports 11%. Kaweah Delta is currently at 12%. It is calculated that the average cost of turnover for a bedside RN is \$52,100; it takes close to three months to recruit an RN. By 2024, it is expected that there will be a shortage of 1.13 million RN's nationally. Our goal is to reduce turnover and the reliance on travelers through retention and recruitment strategies for now and the next five to ten years. What we know:

- Almost 57% of Kaweah Delta RN's leave within three years of employment; 23% in the first year and 23% in the second year.
- We currently have over 76 full time bedside RN open requisitions.
- We have 65 RN travelers; 12 pending start and 3 open requests (as of 8/1).
- Our FY 2019 Travel RN average rate was \$96.25.
- The competition for Travelers is heating up and the cost is going to increase (Fresno is back to \$120 rate for Labor and Delivery).
- The local competition for RN's is driving up compensation and recruitment costs for local RN's.
- The turnover rate for out-of-area RN's is higher but not significantly to deter the effort to hire out of the local market.
- The out-of-area turnover is lower than Fresno, Clovis and Lemoore.
- Since 2011 we have hired 181 RN's out of area and retained 76. Without those 76 would be facing a much larger shortage and increased cost for Travelers.
- Even with our turnover rate of out of area RNs, it is more cost effective to hire than to utilize contract labor.

Presumptions:

- Future RN turnover is uncertain; the wage adjustments are too new to assess the impact. Our population of millennials is increasing and it is

reported their commitment to an organization is three years. The trend now is that all other employees' average just less than five. We will continue to have "moving" and "retirements" as a challenge. Potential recruitment at Adventist Tulare may provide another challenge.

- We know that we cannot fill all of our RN openings and reduce the number of travelers solely with recruitment in our local market. Thus, an opportunity to increase recruitment is outside of our local area, including out of state.

#### Recommendations for consideration:

- Retention is the first line of defense in stabilizing staffing. We will continue to provide competitive compensation and benefits. Most importantly, we continue development of our leaders and want to mandate daily leader rounding on employees and patients to enhance the work environment and patient experience.
- We continue to financially support growth of local RN educational programs to fill RN recruitment needs locally, but seeing the results of these initiatives are three to five years out.
- Most effective will be to grow our paid student nursing program to consistently build talent pipeline of new graduate RNs. This program connects students to KD early in educational career and reduces RN onboarding and orientation time.
- We plan on conducting a marketing campaign to former Kaweah Delta RN employees.
- We will increase outreach beyond our local market through career events, advertising and HRSA virtual job fairs (with a commitment to remain in medically underserved area). To do this, we will select target markets outside of California, where wages are lower. We will need to educate RN Managers to be open to these candidates as there is a current concern with retention of out-of-state employees.
- We are designing recruitment incentives and overall benefit programs and options to appeal to generational workforce needs as well as employee tenure with the greatest risk of turnover.
- Relocation monies will increase to surrounding areas such as Fresno and Clovis to encourage RNs to move to Visalia. Candidates must prove relocation and will have a three- to five-year commitment.

- We are developing a support role for Educational Assistance in HR to include how to tap into Federal and State educational benefits, scholarships and loan repayments. We will review our own loan repayment program as well, considering monies for a three- to five-year commitment.
- In the works are manager-led employee satisfaction meetings with all new hires at 30 days (Recruitment- Welcome Aboard), 90 days (Manager/Director-How's It Going), 180 days (Employee Relations - Stay Interviews with an HR representative), and 365 days (performance evaluations). These meetings are to explore how the new employee is assimilating in the unit.

Source: NSI Nursing Solutions, Inc., 2018 National Health Care Retention & RN Staffing Report



<b>Policy Number:</b> HR.94	<b>Date Created:</b> 06/01/2007
<b>Document Owner:</b> Dianne Cox (VP Human Resources)	<b>Date Approved:</b> 03/01/2020
<b>Approvers:</b> Board of Directors (Administration)	
<b>Employee Handbook/Human Resources Policies</b>	

**Printed copies are for reference only. Please refer to the electronic copy for the latest version.**

The purpose of this policy is to familiarize employees with the policies, rules, and other key aspects of Kaweah Delta related to employment.

**POLICY:** All employees will receive this listing of all Human Resources’ Policies located in Kaweah Delta’s PolicyTech System upon hire. Employees will receive written periodic updates via email as pertinent policies and procedures are modified.

**PROCEDURE:**

1. Kaweah Delta employees are expected to read and familiarize themselves with the information included in the policies noted. Employees with questions regarding items in the policies are encouraged to discuss their questions with management or a Human Resources Department representative.
2. Kaweah Delta reserves the right to modify, rescind, delete, or add to the provisions of the Policies from time to time in its sole and absolute discretion. Every attempt will be made to provide all employees with notification of such changes when they occur. Revisions will be distributed to all employees through the Kaweah Delta email system.

*Also Reference: Kaweah Delta Code of Conduct, HR. 236*

*“Responsibility for the review and revision of this Policy is assigned to the Vice President of Human Resources. In some cases, such as Employee Benefits Policies, Summary Plan Descriptions and Plan Documents prevail over a policy. In all cases, Kaweah Delta will follow Federal and State Law, as applicable, as well as Regulatory requirements. Policies are subject to change as approved by the Governing Board and will be communicated as approved after each Board Meeting. It is the employee’s responsibility to review and understand all Kaweah Delta Policies and Procedures.”*



Policy Number: HR.221	Date Created: 06/01/2007
Document Owner: Dianne Cox (VP Human Resources)	Date Approved: Not Approved Yet
Approvers: Board of Directors (Administration), Board of Directors (Human Resources), Dianne Cox (VP Human Resources)	
<b>Employee Reduction in Force - or- Reassignment Resulting in Demotion</b>	

**Printed copies are for reference only. Please refer to the electronic copy for the latest version.**

**POLICY:**

The District is committed to continued growth and increased productivity and will make all reasonable attempts to avoid cutbacks and reductions in force (RIF) or demotions whenever feasible. However, when the District experiences circumstances it cannot for which it would prove fiscally or managerially irresponsible to maintain the existing staffing levels in one or more departments, it may decide in its discretion to implement a reduction in force or realignment, changes will be made in accordance with the following procedure guidelines. The District reserves the right to deviate from the guidelines contained in this policy when it determines, in its sole discretion that such deviations(s) is/are appropriate.

**GUIDELINESPROCEDURE:**

I. Appropriate Staffing

District Management will determine the appropriate number of employees needed to effectively staff their departments. Staffing patterns will include the number of employees needed by department number, job number and full or part time status. Because of their separate but equal importance within the workforce, Full-time employees, and part-time employees and per diems are considered separate classifications.

II. Attrition and or Hiring Freeze

The preferred method to deal with a need to reduce staffing levels the number of employees is through attrition. Attrition occurs when employees who voluntarily terminate and are not replaced. Also staff currently on Personal Leave of Absence can be informed that their job has been eliminated. Also staff currently on Personal Leave of Absence can be informed that their job has been eliminated.

Also a A hiring freeze may be implemented on a District-wide, division-wide, department-wide, or job classification-specific basis or any combination of such basis. Because there are areas where specific training and/or licensure are necessary, if in-service training and/or internal transfer cannot meet the staffing needs, it may be necessary to recruit from outside the current District

workforce. If a hiring freeze is implemented, and qualified employees are not available through internal transfer, jobs may be posted by going through the position control process.

III. Reduction in Force (RIF)

When a department director and VP determine that there are more employees employed within a job classification or department or any unit or units of employment than is necessary to support the District's ~~department's~~ needs, ~~staffing pattern~~ a RIF may be proposed. All requests for RIF's must be approved by the District's Chief Executive Officer.

Once approved, Human Resources department will determine which employees will be reduced by following this policy. For the purposes of this policy each department is considered separately. Each job number in the department is considered separately. Managerial and lead positions will be considered separate job classifications from the positions held by employees that they manage/lead. Also part-time, ~~and~~ full-time and per diem employee categories will be considered separately.

A. Generally, eEmployee reductions will be based on the following factors in the order listed below. However, the District may decide in its discretion to deviate from these guidelines, particularly where patient care or other important functions of the District may be affected.:

1. Employees on Personal Leave of Absence will be reduced first and are not eligible for Reduction in Force benefits.
2. Employees who have not successfully completed introductory period at the a year of District employment.
3. Employees with documented job performance issues based on progressive discipline noted within 18 (eighteen) months of the RIF
4. Employees with the lowest documented job performance evaluations:
  - ~~Below an 8~~
  - ~~Between 9-12~~
  - ~~Between 13-16~~
5. In all other cases, where all considerations ~~above~~ are equal, employees with the longest service based on date of hire with the District will be the deciding factor.
- ~~8.6.~~ Where special skills, licensure, qualifications, experience or other key attributes are important to assist in carrying out the functions of the District, the District may deviate from the above criteria.

B. Reduced employees will have some choices to make and deadlines in which to make them. The deadlines must be met.

1. The right to appeal the reduction (see section X);

- 2. The choice to take a ~~three~~ 3 month RIF Personal Leave of Absence to look for a transfer (see section IV) while receiving salary continuance as reflected on the severance schedule below, ~~or hold for a lump sum. or hold for a lump sum.~~
- or -
- 3. The choice to take a severance lump sum and terminate employment (see section V).

IV. Three month RIF Personal Leave of Absence

It is expected that employees will apply for a transfer to a new District job during their RIF Leave of Absence. Employees who have not been accepted into a new job with the District by the end of the ~~3-three~~ month RIF Personal Leave of Absence will be ~~considered to have voluntarily terminated from~~ their employment ~~and they will become eligible for a severance lump sum.~~ In addition, RIF employees who select the ~~3-three~~ month RIF Personal Leave of Absence, may ~~choose select~~ at ~~anytime any time~~ within the ~~three 3 months personal leave~~ to instead terminate ~~their employment and take select their remaining a Sseverance lump sum.~~ Employees who find a new District job within ~~3-three~~ months will retain their original date of hire ~~and but will not be eligible for the severance salary continuance will end. severance pay.~~

V. Severance Pay and Termination

Severance pay will be paid according to the schedule below. The pay will be based on straight time excluding any differentials or standby pay. Part-time employees will receive one-half the amount on the schedule below. Per diems are not eligible.

	Full-time Employees
Years of Service	Weeks to be Paid
0 - 1	1.00
2 - 4	2.00
5 - 9	3.00
10 - 14	4.00
15 - 20	5.00
More than 20	8.00

~~The average number of hours which the employee worked per pay period during the six month period prior to the Reduction in Force will be reviewed and considered to determine the appropriate status (i.e. Full-time vs. Part-time).~~

Upon termination, e

~~Severance pay will be paid out upon termination of employment or if on a personal leave (see section IV). Employees~~ with unpaid PTO accrued in their banks will be paid ~~out~~ for those ~~hours~~. EIB bank will not be paid out.

In consideration of the severance pay, there is no further financial obligation to the employee on the part of the District aside from earned retirement benefits.

## VI. Reassignment Resulting in Demotion

Based on staffing patterns it is sometimes necessary to change an employee's job duties. When this change results in a ~~lower lower salary grade or salary~~, it is considered a demotion. Employees who are demoted are given the choice of transfer to the new role ~~if~~ offered to them at a lower ~~grade and salary~~, ~~or~~ take a 3 month Personal Leave of Absence ~~with salary severance salary continuation~~ as described in this policy or take ~~a~~ severance ~~lump sum and terminating~~ employment as described in this policy. An employee has the right to appeal the reassignment resulting in demotion (see section IX).

~~An employee who changes job duties, shift, department or supervisor, but has no change in salary grade and or in pay, is not considered a demotion.~~

## VII. Benefits

An employee with Group Health, Dental and Vision Insurance benefits who separates from employment as a result of RIF ~~or demotion~~ is entitled to continue ~~his/her their~~ insurance benefits. For ~~the initial~~ three ~~3~~ months following separation from employment, the employee may continue group health, dental, and vision insurance at the active employee rates. An employee choosing to continue coverage beyond that period of time, may do so at full COBRA rates. For details, see policy entitled CONSOLIDATED OMNIBUS BUDGET RECONCILIATION ACT (COBRA) (HR.129), and/or the RxFlex Summary Plan Description available through Human Resources.

~~An employee who separates from employment as a result of an RIF or demotion, who otherwise meets the eligibility requirements for District retirement, may access the benefits available through that program. For detailed information regarding retirement benefits, see policy entitled RETIREMENT AND TAX DEFERRED SAVINGS PLANS 02(HR. 130), or the Retirement Plan Document.~~

The benefits offered through this policy are only ~~exclusively available for~~ ~~orte~~ employees who separate from employment with the District as a result of a RIF ~~exclusively~~. They are not available to employees who separate from

employment with the District ~~for other reasons such as a result of a resignation or involuntary termination, to employees who are terminated as a result of corrective disciplinary action.~~

VIII. Re-Employment

Employees who separate from employment with the District as a result of a RIF and receive a severance payment are free to reapply for employment with the District. However, if after separation has occurred a former employee is selected to fill a vacancy, their employment will be considered as any other newly hired employee.

IX. Appeal Rights for Reassignment Resulting in Demotion

Employees may not grieve or appeal termination of employment as a result of a ~~reduction in force~~ appeal rights for reassignment resulting in demotion RIF through the policy entitled GRIEVANCE PROCEDURE (HR.215). However, employees who have served greater than one hundred eighty (180) days employment with the District immediately prior to the termination and who have passed introductory period may access their rights under policy entitled NOTIFICATION REQUIREMENTS AND APPEAL PROCESS FOR INVOLUNTARY TERMINATION AND DEMOTION (HR.218).

X. Appeal Rights for Employee Reduction in Force (RIF)

You are entitled to appeal this separation orally, or in writing, by contacting your Vice President no later than the time indicated on your Layoff Notice (typically one business day).

XI. Under special circumstances, alternative severance packages may be developed and offered to employees. Where this is the case, acceptance of an alternate severance package will cause the employee to be ineligible for the benefits offered in this policy.

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~~"These guidelines, procedures, or policies herein do not represent the only medically or legally acceptable approach, but rather are presented with the recognition that acceptable approaches exist. Deviations under appropriate circumstances do not represent a breach of a medical standard of care. New knowledge, new techniques, clinical or research data, clinical experience, or clinical or bio-ethical circumstances may provide sound reasons for alternative approaches, even though they are not described in the document."~~



Policy Number: HR.70	Date Created: 06/01/2007
Document Owner: Dianne Cox (VP Human Resources)	Date Approved: 05/31/2018
Approvers: Board of Directors (Administration), Dianne Cox (VP Human Resources)	
<b>Meal Periods, Rest Breaks and Breastfeeding and/or Lactation Accommodation</b>	

Printed copies are for reference only. Please refer to the electronic copy for the latest version.

**PURPOSE:**

It is important that Kaweah Delta employees receive their meal periods and breaks. Kaweah Delta will facilitate meal and rest periods by relieving employees of duties for specified amounts of time. In addition, Kaweah Delta will provide rest and recovery periods related to heat illness for occupations that may be affected by same (i.e. Maintenance employees who work outdoors). Kaweah Delta supports new mothers who desire to express milk for their infants while at work. Kaweah Delta will provide the use of a room, or other location to the nursing mothers work area for expressing milk.

**MEAL PERIOD POLICY AND PROCEDURE:**

For non-exempt employees working more than five hours per day, Kaweah Delta will provide a 30-minute duty-free meal period. It is each employee's responsibility to ensure that they are taking appropriate meal periods as set forth in the policy.

Meal periods will be unpaid. Non-exempt employees may leave the premises during meal periods, but should notify their supervisor if they do leave, and inform them when they return.

An employee who is not provided with a meal period according to policy must notify their supervisor to attempt to reallocate resources to provide a meal period. Employees unable to take a meal period will be paid for the time.

The beginning and end of each meal period must be accurately recorded on the timecard or timekeeping system.

**REST BREAK POLICY AND PROCEDURE:**

Non-exempt employees are also authorized and permitted to take two, 15-minute rest breaks along with the meal period. Employees must work at least 3.5 hours to be entitled to a rest break. Rest breaks should be taken in the middle of each 4- hour period in so far as it is practicable. These rest breaks are authorized by the department management; but it is each employee's responsibility to ensure that they are taking appropriate rest breaks.

Rest breaks are considered paid-time, and employees should not clock-out and clock-in for taking such breaks. Leaving the premises is not permitted during a rest break.

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**ADDITIONAL INFORMATION:**

Employees may not shorten the normal workday by not taking or combining breaks, nor may employees combine rest breaks and meal periods for an extended break or meal period

Kaweah Delta will provide a reasonable amount of break time to allow an employee to express breast milk for that employee's infant child. The break time will run concurrently, if possible, with any break time already provided to the nursing mother. If it is not possible for the break time that is already provided to the employee, the break time shall be unpaid. Kaweah Delta will make reasonable efforts to provide the nursing mother with the use of a room or other location in close proximity to their work area for the nursing mother to express milk in private.

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**Deleted:** There are several designated lactation rooms that may be found throughout Kaweah Delta. Their locations are the following:¶  
¶  
<#>Mineral King Wing, 2<sup>nd</sup> Floor¶  
<#>Mineral King Wing, 3<sup>rd</sup> Floor¶  
<#>Mineral King Wing, Mother/Baby Department¶  
<#>Support Services Building, 3<sup>rd</sup> Floor¶  
<#>South Campus, next to Urgent Care Lobby¶  
<#>Exeter Health Clinic, in Family Practice Department¶

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