



April 24, 2022

NOTICE

The Board of Directors of the Kaweah Delta Health Care District will meet in an open Human Resources Committee meeting at 3:30PM on Wednesday May 04, 2022 in the Kaweah Health Specialty Clinic Conference Room 325 S. Willis St., Visalia, CA 93291.

All Kaweah Delta Health Care District regular board meeting and committee meeting notices and agendas are posted 72 hours prior to meetings (special meetings are posted 24 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 Kaweah Health 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 <https://www.kawahhealth.org>.

KAWEAH DELTA HEALTH CARE DISTRICT
Mike Olmos, Secretary/Treasurer

A handwritten signature in black ink that reads "Cindy Moccio". The signature is written in a cursive, flowing style.

Cindy Moccio
Board Clerk, Executive Assistant to CEO

DISTRIBUTION:
Governing Board
Legal Counsel
Executive Team
Chief of Staff
<http://www.kawahdelta.org>

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

Wednesday May 4, 2022

KAWEAH HEALTH SPECIALTY CLINIC CONFERENCE ROOM
325 S. Willis St., Visalia, CA 93291

ATTENDING: Lynn Havard Mirviss (Chair); Garth Gipson; Gary Herbst, CEO; Dianne Cox, Chief Human Resources Officer; Keri Noeske, Chief Nursing Officer; Brittany Taylor, Director Physician Recruitment/Relations; Raleen Larez, Director of Employee Relations; George Ortega, Recording

OPEN MEETING – 3:30 PM

CALL TO ORDER – *Lynn Havard Mirviss, Human Resources Committee Chair*

PUBLIC PARTICIPATION – Members of the public may comment on agenda items before action is taken and after it is discussed by the Board. Each speaker will be allowed five minutes. Members of the public wishing to address the Board concerning items not on the agenda and within the jurisdictions of the Board are requested to identify themselves at this time. For those who are unable to attend the beginning of the Board meeting during the public participation segment but would like to address the Board, please contact the Board Clerk (Cindy Moccio 559-624-2330) or cmoccio@kaweahhealth.org to make arrangements to address the Board.

- 1) [Physician Recruitment Update](#) – Medical staff recruitment efforts update- *Brittany Taylor, Director Physician Recruitment/Relations*
- 2) [Human Resources Updates](#)– *Dianne Cox, Chief Human Resources Officer*
 - (a) Leadership Team Ideal Work Environment Presentation
- 3) **Policies**
 - (a) [Event Participation Pay {new}](#)
 - (b) [Team Member COVID-19 Symptomatic Testing {new}](#)
 - (c) [Team Member COVID-19 Vaccination and Asymptomatic Surveillance Testing {new}](#)
 - (d) [HR.216 Progressive Discipline {revised}](#)
 - (e) [HR.234 PTO, EIB, Healthy Workplace, Healthy Families Act {revised}](#)
 - (f) HR.66 Payroll Deductions {no changes}
 - (g) HR.17 Language Resource Assistant Program {no changes}
 - (h) HR.242 Personal Medical Leave {no changes}

*Mike Olmos – Zone I
Secretary/Treasurer*

*Lynn Havard Mirviss – Zone II
Vice President*

*Garth Gipson – Zone III
Board Member*

*David Francis – Zone IV
President*

*Ambar Rodriguez – Zone V
Board Member*

MISSION: Health is our Passion. Excellence is our Focus. Compassion is our Promise.

- (i) HR.147 Pregnancy Disability Leave of Absence {no changes}
- (j) HR.75 Differential Pay-Shift, Holiday, Weekend {no changes}
- (k) HR.65 Payment of Wages {no changes}
- (l) HR.74 Telecommuting {no changes}
- (m) HR.236 Computer and Communication Devices and Social Media Code of Conduct {no changes}
- (n) HR.148 Personal Leave of Absence {no changes}
- (o) HR.243 Leave of Absence {no changes}
- (p) HR.173 Employee Emergency Relief {no changes}
- (q) HR.234 Extended Illness Bank (EIB) Donations {no changes}

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.

Medical Staff Recruitment Report April 26, 2022



**Physician Recruitment and Relations
Medical Staff Recruitment Report - April 2022**

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

Date prepared: 4/26/2022

Central Valley Critical Care Medicine	
Intensivist	2

Delta Doctors Inc.	
OB/Gyn	1

Frederick W. Mayer MD Inc.	
Cardiothoracic Surgery	2

Kaweah Health Medical Group	
Audiology	1
Chief Medical Officer/Medical Director	1
Dermatology	2
Endocrinology	1
Family Medicine	3
Gastroenterology	2
Neurology	1
Orthopedic Surgery (Hand)	1
Otolaryngology	2
Pulmonology	1
Radiology - Diagnostic	1
Rheumatology	1

Kaweah Health Medical Group (Cont.)	
Urology	3

Oak Creek Anesthesia	
Anesthesia - Critical Care	1
Anesthesia - General	4
Anesthesia - Obstetrics	1
CRNA	3.5

Orthopaedic Associates Medical Clinic, Inc.	
Orthopedic Surgery (Trauma)	1

Other Recruitment	
Neurology - Inpatient	1

Sequoia Oncology Medical Associates Inc.	
Hematology/Oncology	1

Valley Children's Health Care	
Maternal Fetal Medicine	2
Neonatology	2
Pediatric Cardiology	1

Candidate Activity

Specialty/Position	Group	Last Name	First Name	Availability	Referral Source	Current Status
Anesthesia	Oak Creek Anesthesia	Sanguino, M.D.	Luis	08/23	Curative - 3/30/22	Currently under review
Anesthesia	Oak Creek Anesthesia	Sinha, M.D.	Ashish	05/22	Medicus Firm - 2/16/22	Site Visit: 4/5/22
Anesthesia	Oak Creek Anesthesia	Gonzalez, M.D.	Henry	ASAP	Medicus Firm - 2/21/22	Site Visit: 3/22/22; Offer accepted
Anesthesia	Oak Creek Anesthesia	Kim, D.O.	Christopher	08/23	Medicus Firm - 3/16/22	Currently under review
Anesthesia - Cardiac	Oak Creek Anesthesia	Nagm, M.D.	Hussam	06/22	Direct/Referral	Site Visit: 11/9/21; Tentative Start Date: 6/1/22
Anesthesia - Critical Care	Oak Creek Anesthesia	Tsytsikova, M.D.	Libby	08/22	Medicus Firm - 3/2/22	Site Visit: 5/9/22
Cardiothoracic Surgery	Independent	Williams, M.D.	Julio	TBD	Direct - 4/19/22	Initial Screening: 4/22/22
Certified Registered Nurse Anesthetist	Oak Creek Anesthesia	Havlicak	Ashley	TBD	Direct/Referral	Site Visit: 4/29/22
Certified Registered Nurse Anesthetist	Oak Creek Anesthesia	Knittel	Michael	03/22	Direct - 10/19/21	Offer accepted; Start Date: 4/5/22
Certified Registered Nurse Anesthetist	Oak Creek Anesthesia	Lopez	Ramon	03/22	Direct - 11/2/21	Offer accepted; Start Date: 4/5/22
Chief Medical Officer/Medical Director	Kaweah Health Medical Group	Quackenbush, M.D.	Todd	ASAP	Direct - 3/1/22	Interview: 3/28/22; Offer accepted; contract in process
Family Medicine	Kaweah Health Medical Group	Edmonds, D.O.	Sheena	04/22	Direct	Offer accepted; Start date: 4/18/22
Family Medicine Core Faculty	Kaweah Delta Faculty Medical Group	Rangel-Orozco, M.D.	Daniela	08/22	Kaweah Health Resident	Site Visit: 10/28/21; Offer accepted; Start Date: 8/1/22
Gastroenterology	Key Medical Associates	Eskandari, M.D.	Armen	11/21	Direct	Offer accepted; Start Date: 4/5/22
Hospitalist	Central Valley Critical Care Medicine	Obad, M.D.	Nashwan	ASAP	Vista Staffing Solutions - 1/10/22	Offer accepted; Start Date: 4/27/22
Hospitalist	Valley Hospitalist Medical Group	Kaur, M.D.	Kamalmeet	08/22	Direct	Offer accepted; Tentative Start Date: August 2022
Intensivist	Central Valley Critical Care Medicine	Athale, M.D.	Janhavi	09/22	Comp Health - 1/6/22	Offer extended; contract under review
Intensivist	Central Valley Critical Care Medicine	De Freese, M.D.	Marissa	TBD	Direct/referral - 1/18/22	Site visit pending dates
Intensivist	Central Valley Critical Care Medicine	Mfone, M.D.	Fuhbe	TBD	PracticeMatch - 4/18/22	Currently under review
Intensivist	Central Valley Critical Care Medicine	Soto-Arape, M.D.	Ivan	TBD	HealthPlus Staffing	Pending offer
Intensivist	Central Valley Critical Care Medicine	Sourial, M.D.	Mina	09/22	PracticeMatch - 4/11/22	Site Visit: 5/13/22
Internal Medicine/Sleep Medicine	Kaweah Health Medical Group	Sarrami, M.D.	Kayvon	08/22	Direct - 11/27/21; Fiancé is current 2nd Year Anesthesia Resident at KH.	Site Visit: 1/10/22; Offer accepted; Tentative Start Date: August 2022

Candidate Activity

Specialty/Position	Group	Last Name	First Name	Availability	Referral Source	Current Status
Medical Oncology	Sequoia Oncology Medical Associates	Mohammadi, M.D.	Oranus	08/23	PracticeMatch - 3/31/22	Phone Interview: 4/18/22
Medical Oncology	Sequoia Oncology Medical Associates	Palla, M.D.	Amruth	08/22	Direct/referral - 1/26/22	Site visit pending dates (Nov/Dec 2022 - Tentative)
Neonatology	Valley Children's	Al Kanjo, M.D.	Mohamed	08/23	Valley Children's - 3/14/22	Site Visit: 4/7/22; Offer pending
Neonatology	Valley Children's	Sharma, M.D.	Amit	TBD	Valley Children's - 3/1/22	Site Visit: 3/29/22; Offer extended
Neonatology	Valley Children's	Singh, M.D.	Himanshu	08/22	Valley Children's - 3/31/21	Site Visit: 4/19/2021; Offer accepted. Start date 8/29/2022
Pediatric Cardiology	Valley Children's	Ozdemir, M.D.	Ege	08/22	Valley Children's - 3/1/22	Site Visit: 3/23/22; Offer extended
Pediatric Hospitalist	Valley Children's	Mittal, M.D.	Daaman	07/22	Valley Children's - 2/17/22	Site visit: 2/21/22; Offer accepted; Start Date: 8/1/22
Pediatrics	Kaweah Health Medical Group	Galindo, M.D.	Ramon	09/22	Direct/referral - 6/28/21	Site visit: 9/14/21; Offer accepted; Tentative Start Date: 08/2022
Pediatrics	Kaweah Health Medical Group	Renn, M.D.	Caitlin	05/22	LocumTenens.com	Offer accepted; Tentative Start Date: May 2022
Pediatrics	Kaweah Health Woodlake Clinic	Alosh, M.D.	Humam	04/22	Direct - 1/2022	Offer accepted; Start Date: 4/19/22
Physical Therapist	Kaweah Health Medical Group	Khoury	Nadia	06/22	CliniPost - 4/15/22	Phone Interview: 4/26/22 at 8:30am
Rheumatology	Kaweah Health Medical Group	Li, M.D.	Zi Ying (Kimmie)	08/22	Direct - 11/27/21	Phone Interview: 12/15/21; Site Visit: 4/5/22; Will decide on location in November 2022.
Urology	Kaweah Health Medical Group	Aram, M.D.	Pedram	45108	PracticeMatch - 3/1/22	Site Visit: 5/26/22

Leadership Presentations _ 4.19.22

Strategic Plan Ideal Work Environment April 2022



[kawahhealth.org](https://www.kawahhealth.org)



Year Round RN Program

Offered Through COS

- Designed for working adults
- Classes 2 evenings a week and clinical every other weekend
- Cohort of 20 students every 2 years
- This year's program:
 - Application period was November 1 – February 1
 - Notification letters went out on April 1
 - Class starts on May 24
 - Clinical starts on July 9



Year Round RN Program

Congrats to This Year's Class



Sonia Najar
CNA, 2N



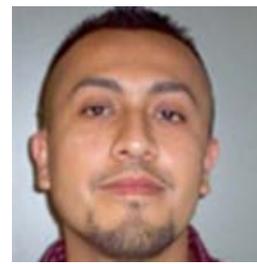
Crystal Cruz
CNA, 2S



Kenia Guzman
CNA, 2S



Guadalupe Velasquez
CNA, 3N



Gilberto Maldonado
CNA, 4N



Daniel Alcala
CNA, 5T



Jennifer Stewart
LVN, 5T



Ofelia Legaspi-Velasquez
CNA, Float Pool



Jasmin Playda
CNA, Float Pool



Damian Soto
CNA, Float Pool



Angelica Alvarado
CNA, OB



Dylan Bledsaw
Surgical Tech, OR



Yereli Serrano
Tele Sitter

Kaweah Health School of Nursing

Powered by Unitek College

- Partnership to help address RN workforce shortages
- Combines online courses with onsite lab, skills, and clinical
- Ready in Fall 2022/Jan 2023 (pending regulatory approval)
- Starting 20 students 2 times per year
 - Advanced placement
 - 2-year program for BSN
 - 3-year program for BSN full



Pulse Surveys

FY22 Schedule

SAQ	<p>Date: April 15 - May 1 (slight date change) Audience: Previous SAQ workgroups Purpose: A quick check-in to see how we are doing on key items from last year's SAQ Survey</p>
BENEFITS	<p>Date: May 9 - 23 Audience: All employees Purpose: A quick check-in to get your thoughts on this year's benefits and new ideas</p>
WORK ENVIRONMENT	<p>Date: June 13 - 27 Audience: All employees Purpose: A check-in to see how we are doing on key items from last year's Employee Engagement Survey</p>

FY22 Quarter 2 Ideal Work Environment

Ideal Work Environment Metrics Performance

Decrease New Hire Turnover Rate	Goal	Baseline		Comments
Decrease new hire turnover rate	12%	13%	In Progress	
Kaweah Health Team Members Satisfaction	Goal	Baseline		Comments
EE - Weighted average of 27	4.08	4.04	In Progress	Pulse survey end of FY
PE - Overall I am satisfied working at Kaweah Health	3.99	3.97	In Progress	Pulse survey end of FY
RE - TBD	TBD	TBD		
Decrease Employee Turnover Rate	Goal	Baseline		Comments
Decrease Employee Turnover Rate	13%	14%	In Progress	Pulse survey end of FY
I Get the Training I need to Do a Good Job	Goal	Baseline		Comments
EE - I get the tools and resources I need to provide the best care/services for our customers/patients	4.01	3.97	In Progress	Pulse survey end of FY
EE - I get the training I need to do a good job	3.96	3.92	In Progress	Pulse survey end of FY
PE - I get the tools and resources I need to provide the best care/services for our customers/patients	9.69	3.67	In Progress	Pulse survey end of FY
RE - TBD	TBD	TBD		
Kaweah Health Team Works Well Together	Goal	Baseline		Comments
EE - My unit/department works well together	4.01	3.97	In Progress	Pulse survey end of FY
EE - Employees in my unit/department help others accomplish their work	3.96	3.92	In Progress	Pulse survey end of FY
EE - Communication between shifts is effective in my unit/department	3.69	3.67	In Progress	Pulse survey end of FY
EE - Employees in my unit/department treat each other with respect	4.21	4.17	In Progress	Pulse survey end of FY
PE - Different departments work well together at Kaweah Health	3.93	3.91	In Progress	Pulse survey end of FY
RE - TBD	TBD	TBD		

Better than target; at target; worse than target; pending/in process

New Hire Turnover Rate

Champions: ~~Dan Allain~~, Raleen Larez, Dianne Cox

Problem / Goals & Objectives

Problem Statement: Kaweah Health is facing the same challenges as many employers in the labor market and needs to respond accordingly through enhanced training and onboarding checkpoints to welcome staff.

Goals and Objectives: Decrease new hire turnover to **12%**, by improving the onboarding process, recognizing new employees for outstanding work, and ensuring leader's accountability to new employees.

Plan

(brief description of tasks, consider feedback loop, measures for success & communication plan)

#	Task	Start Date	Due Date	Who	Status R/Y/G
1	Pulse Survey with questions focused on retention (6 months?)	2021	1/2022	Hannah and HR	●
2	30/60/90 day touch points, Manager/Director/VP	2021	1/2022	Jamie	●
3	New Hire VP quarterly Luncheon and Recognition (modified for scheduling purposes – welcome cards now being distributed)	2021	6/2022	VPs	●
4	Standardized Onboarding at the unit level – training and education to be included	2021	6/2022	Hannah	●
5	Evaluate use of sign-on bonus with retention guideline based on staged payouts	2021	6/2022	HR	●
6	Pulse and stay survey at 1 st year anniversary	2021	3/2022	Hannah and HR	●

Critical Issues / Deliverables

Critical Issues (ie. Barriers):

Have not met 12% goal – information to be shared with Retention Committee starting April 2022.

Deliverables:

1 Started January 2022 – results to be shared with the Retention Committee starting April 2022.

2 Started January 2022 (60 days and six months checkpoints) – results to be shared with the Retention Committee starting April 2022.

3 Executives are distributing Welcome cards to new hires; luncheons were difficult to schedule.

4 All departments use a standardized 48-hour checklist for newly hired or transferred employees.

5 Most positions now receive a sign-on bonus; amounts greater than \$2,500 have a work commitment attached.

6 Stay surveys are underway beginning March 2022 – results to be shared with the Retention Committee starting April 2022.

Kaweah Health Team Member Satisfaction

Champions: ~~Dan Allain~~, Raleen Larez, Dianne Cox

Problem / Goals & Objectives

Problem Statement: Kaweah Health staff satisfaction is below goal and initiatives are in the works to address concerns around retention.

Goals and Objectives: Utilizing the Employee Engagement, Physician Engagement, and Resident surveys, gauge the satisfaction of the entire Kaweah Health Team. Improve the survey scores to:

- EE – Weighted average of 27 – 4.08
- PE – Overall I am satisfied working at Kaweah Health – 3.99

Plan

(brief description of tasks, consider feedback loop, measures for success & communication plan)

#	Task	Start Date	Due Date	Who	Status R/Y/G
1	Cascading information/knowledge, review communication strategies, staff meetings mandatory	2021	6/2022	VPs	●
2	Communication, timely responses, weekly summary updates, email etiquette	TBD	TBD	HR	●
3	Staff participation and input with department processes and changes, along with employee engagement group participation	2021	6/2022	Dan/ Raleen	●
4	On time performance evaluations	2021	6/2022	VPs/ Directors	●
5	Measure through pulse survey	2021	6/2022	Hannah/ HR	●

Critical Issues / Deliverables

1 Monthly leadership meetings are distributed to leaders for staff meeting/communication updates; we continue with monthly communication board updates; in person staff meetings are starting to occur again.

2 We have not established communication etiquette rules this year. Consider for FY23 with Service Standards.

3 Staff participation and input will be evaluated in the June 2022 Pulse Survey; it has been on the goals of Directors for FY2022.

4 A report has been completed and distributed to the Executive Team for follow up.

5 The Pulse Survey is scheduled for June 2022.

Decrease Employee Turnover

Champions: ~~Dan Allain~~, Raleen Larez, Dianne Cox

Problem / Goals & Objectives

Problem Statement: Kaweah Health is facing employment challenges in recruitment and retention and more focus on retention is critical.

Goals and Objectives: Develop tools, assessments, and programs to increase employee retention and decrease the overall Kaweah Health Team member turnover rate to 13%.

Critical Issues / Deliverables

1 Ongoing in monthly Leadership meetings; a Certification Program will kick off FY2023.

2 Ongoing; Kaweah offers many recognition programs through our Employee Connection Committee.

3 Stay surveys are underway beginning March 2022 – results to be shared with the Retention Committee starting April 2022.

4 Executive rounding has included executives shadowing employees.

5 Ongoing implementation of market adjustments; the Pulse Survey for employee benefits is scheduled for May 2022.

6 The Pulse Survey is scheduled for June 2022.

Plan

(brief description of tasks, consider feedback loop, measures for success & communication plan)

#	Task	Start Date	Due Date	Who	Status R/Y/G
1	Provide initial and refresher training on Just Culture awareness/Safety	2021	6/2022	Hannah	●
2	Develop real time Recognition Program Complete	2021	6/2022	Dan/ Raleen	●
3	Stay Interviews, Press Ganey Pulse Survey Complete	2021	3/2022	Hannah and HR	●
4	A day in the life of an employee Complete	2021	6/2022	Execs Rounding/ Shadowing	●
5	Evaluate annually and as market dictates, Wage, benefits, retention bonus	2021	6/2022	HR	●
6	What's working? - Survey	2021	6/2022	HR	●

On target / not yet started (not due); delay/slight concern; off target/serious concerns

I Get the Training I Need to Do a Good Job

Champions: ~~Dan Allain~~, Raleen Larez, Dianne Cox

Problem / Goals & Objectives

Problem Statement: The most recent Employee Engagement survey suggested there was room for improvement in ensuring Kaweah Health team members have the tools and equipment they need to provide world class services.

Goals and Objectives: Utilize the Employee Engagement, Physician Engagement, and Resident surveys, gauge the satisfaction of the entire Kaweah Health Team. Improve the survey scores to:

- EE – I get the training I need to do a good job – 3.96
- EE – I get the tools and resources I need to provide the best care/services for our customers/patients – 4.01
- PE - I get the tools and resources I need to provide the best care/services for our customers/patients – 4.01

Plan

(brief description of tasks, consider feedback loop, measures for success & communication plan)

#	Task	Start Date	Due Date	Who	Status R/Y/G
1	Assess initial and ongoing training and equipment needs, at hire and annually	2021	6/2022	HR	●
2	Train on new equipment, procedures, and processes before implementation Develop Educational bundles and roll out prior to implementation of new process, products or equipment	2021	6/2022	Unit Directors and Unit educators	●
3	Assess trends in Midas/events reported to Risk to determine focus of the educational topics	2021	6/2022	Dan/ Raleen	●
4	Success measured through our pulse survey	2021	6/2022	HR/ Hayash	●

Critical Issues / Deliverables

1 and 2 Onboarding Checkpoints administered through Press Ganey should give us some insight. These started March 2022.

3 Midas does not provide an option to pull reports based on topic. This process will have to remain manual. Will consider for FY23.

4 Pulse survey June 2022 will better understand needs of team members and where training/tools may be lacking.

Kaweah Health Team Works Well Together

Champions: ~~Dan Allain~~, Raleen Larez, Dianne Cox

Problem / Goals & Objectives

Problem Statement: There is a need to continue to align the efforts of all Kaweah Health teams to ensure world class service.

Goals and Objectives: Utilizing the Employee Engagement, Physician Engagement, and Resident surveys, gauge how well the Kaweah Health Team works together. Improve the survey scores to:

- EE – My unit/department works well together – 4.30
- EE – Employees in my unit/department help others accomplish their work – 4.25
- EE – Communication between shifts is effective in my unit/department – 4.08
- EE – Employees in my unit/department treat each other with respect – 4.21
- PE – Different departments work well together at Kaweah Health – 3.93

Plan

(brief description of tasks, consider feedback loop, measures for success & communication plan)

#	Task	Start Date	Due Date	Who	Status R/Y/G
1	Engage (focus groups) What are individual's definition or perception of working well together? Use open ended questions in a Pulse Survey	TBD	TBD	HR	●
2	Engage and collaborate with all stakeholders on decision making and process changes, physician, nursing, etc. – Will launch committee with results to identify action items and develop smaller focus groups	TBD	TBD	HR	●
3	Civility training: being civil with each other, professionalism and collegial interaction training	2021	6/2022	HR	●
4	Setting parameters for conversations to be effective, de-escalation of argumentative communications	2021	6/2022	HR	●
5	Hardwire SBAR usage as best practice throughout organization	2021	6/2022	HR/Clinical Leadership	●
6	Pulse survey to measure progress	2021	6/2022	HR	●

Critical Issues / Deliverables

- 1 Pulse not done; discussions occurring on what working well together looks like.
- 2 Discussions occurring.
- 3 and 4 HR/Raleen now offering weekly training to leaders on employee relations, civility, difficult conversations.
- 5 SBAR process being revamped as part of organizational throughput initiative.
- 6 The Pulse Survey is scheduled for June 2022.

Schwartz Rounds

April 2022



kawahhealth.org



Schwartz Rounds

“A Patient’s Story” Boston Globe Magazine July 16, 1995

“At age 40 I was diagnosed with advanced lung cancer. In the months that followed, I was subjected to chemotherapy, radiation, surgery and news of all kinds, most of it bad. It has been a harrowing experience for me and my family. And yet the ordeal has been punctuated by moments of exquisite compassion. I have been the recipient of an extraordinary array of human and humane responses to my plight. These acts of kindness – the simple human touch of my caregivers – have made the unbearable bearable.”

- Kenneth B. Schwartz

Schwartz Center for Compassionate Healthcare

**Founded in 1995, by Kenneth Schwartz
shortly before his death.**

**Dedicated to strengthening the human
connection at the heart of healthcare.**

In Kenneth's words...

- *“In my new role as patient, I have learned that medicine is not merely about performing tests or surgeries, or administering drugs. These functions, important as they are, are just the beginning. For as skilled and knowledgeable as my caregivers are, **what matters most is that they have empathized with me in a way that gives me hope and makes me feel like a human being, not just an illness. Again and again, I have been touched by the smallest kind gestures – a squeeze of my hand, a gentle touch, a reassuring word. In some ways these quiet acts of humanity have felt more healing than the high dose radiation and chemotherapy that hold the hope of a cure.**”*
- *- Kenneth Schwartz, 1995*

Schwartz Rounds

- Over 430 healthcare organizations throughout the US, Canada, Australia, New Zealand and in more than 150 sites throughout the UK and Ireland provide Schwartz Rounds.
- Offers healthcare providers a regularly scheduled time during their fast-paced work lives to openly and honestly discuss the social and emotional issues they face in caring for patients.
- After listening to a multidisciplinary panel's brief presentation on a identified case or topic, caregivers in the audience are invited to share their own perspectives on the case and broader related issues.

Schwartz Rounds – Examples of Topics

- The Cases that Inspire Us/Keep Us Going
- Devastating Diagnoses/Delivering Difficult News
- Invisible Members of the Team: Reflections from Transport, Housekeeping, Radiology, Lab, etc
- The Power of Gratitude; Giving and Receiving Thanks
- Hoping for a Miracle: The Intersection of Faith & Evidence Based Medicine
- Coping with the Moral Distress of Health Inequity
- Challenging Family Dynamics in Health Care

Schwartz Rounds – Research Outcomes

Caregivers who participated in multiple Schwartz Rounds reported the following:

- (1) Improved teamwork, interdisciplinary communication and appreciation for the roles and contributions of colleagues from different disciplines.
- (2) Decreased feelings of stress and isolation and more openness to giving and receiving support.
- (3) Increased insight into the social and emotional aspects of patient care; increased compassion toward patients and increased readiness to respond to patient and family needs.

Schwartz Rounds...And so we begin...

- Thank you all for your commitment to supporting this important work!

Know the signs of stroke

B E F A S T

BALANCE

Sudden loss of balance

EYES

Sudden change in vision

FACE

Sudden facial droop

ARM

Sudden arm or leg weakness

SPEECH

Sudden speech difficulty

TIME

to call **911**

FAST emergency treatment may reduce disability and save your life

Detecte un derrame cerebral

R Á P I D O

ROSTRO
CAÍDO EN
UN LADO

ALTERACIÓN
DE BALANCE

PÉRDIDA
DE FUERZA
EN UN BRAZO
O PIERNA

IMPEDIMENTO
VISUAL

DIFICULTAD
PARA
HABLAR

OBTENGA
AYUDA RAPIDO,
LLAME AL
911

Un tratamiento **RÁPIDO** puede reducir la incapacidad o salvar su vida

Know the signs of stroke

B E F A S T

BALANCE

Sudden loss of balance

EYES

Sudden change in vision

FACE

Sudden facial droop

ARM

Sudden arm or leg weakness

SPEECH

Sudden speech difficulty

TIME

to call **911**

FAST emergency treatment may reduce disability and save your life

Detecte un derrame cerebral

R Á P I D O

ROSTRO
CAÍDO EN
UN LADO

ALTERACIÓN
DE BALANCE

PÉRDIDA
DE FUERZA
EN UN BRAZO
O PIERNA

IMPEDIMENTO
VISUAL

DIFICULTAD
PARA
HABLAR

OBTENGA
AYUDA RAPIDO,
LLAME AL
911

Un tratamiento **RÁPIDO** puede reducir la incapacidad o salvar su vida

Kaweah Helps

April 2022

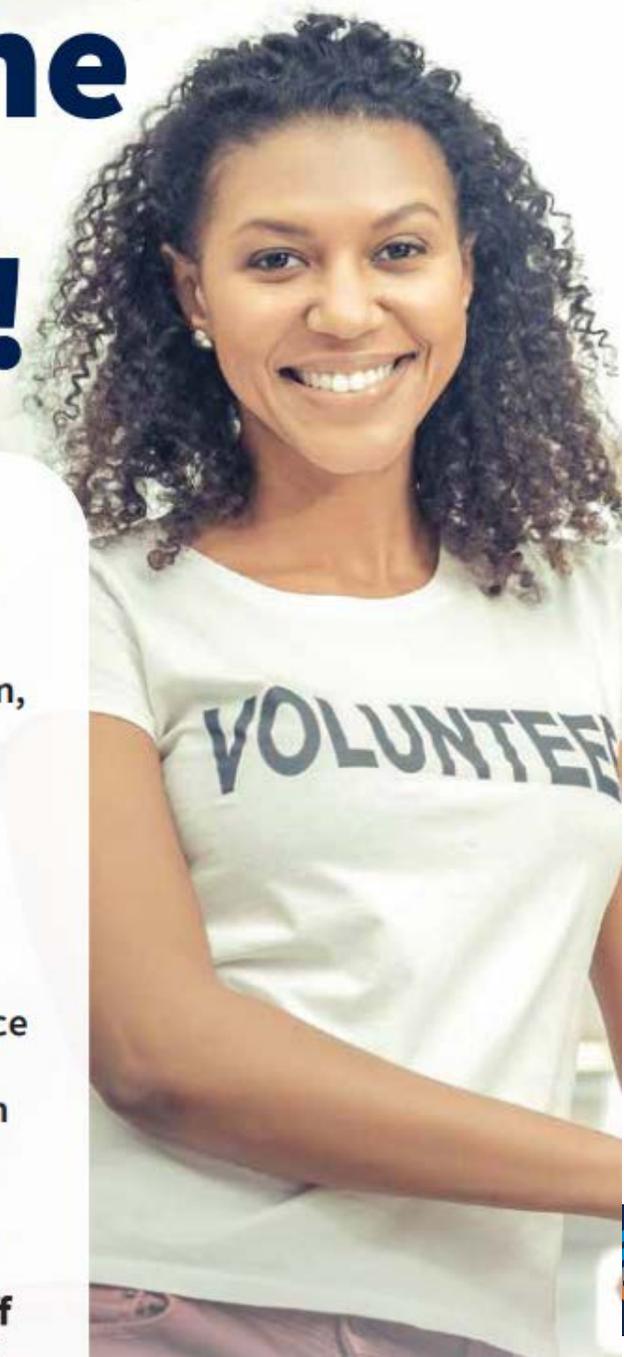


kawahhealth.org





Join the Team Today!



What is Kaweah Helps?

An employee volunteer program that helps with service projects and needs in the community. By offering a variety of opportunities such as clean-up, construction, beautification, refurbishments, planting trees, etc., we hope to offer programs that will give our employees the chance to give back outside of our hospital setting.

How does it work?

Employees will sign up to be a part of the Kaweah Helps team and be notified of service projects in the community. They will volunteer their time and work with the team to ensure the job is completed.

How do I sign up?

Employees will go to Kaweah Compass and click the link under **Working Here > Fun Stuff > Kaweah Helps** or go to Kaweahhealth.org/



Policy Event Participation Pay

Policy Number:	Date Created:
Document Owner:	Date Approved:
Approvers:	
Event Participation Pay	

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

POLICY:

Kaweah Health recognizes the value of having leaders at community events and fairs. All leaders are encouraged to participate and, in order to ensure coverage, Kaweah Health will compensate employees for the time. Hourly employees will be compensated with pay (hours over 40 in one week causing overtime should be avoided if possible; hourly employees may be able to flex as leaders allow) and exempt employees may flex time and/or may be paid their exempt rate.

PROCEDURE:

The Community Engagement Department will keep a list of employees who are available to represent Kaweah Health at community events. These events can include health and community fairs, job fairs, and other community events that offer booth space and are outside of the employee's regular work hours. Once an event date has been established and the logistics of the event are understood, the Community Engagement team will reach out to employees to review roles and expectations and schedule them for timeslots.

I. Pay will be based on the following:

- For hourly employees:
 - a) They will receive their hourly rate from Cost Center 8612.
 - b) If their pay falls into overtime, Cost Center 8612 will pick up the additional cost.
- For exempt employees:
 - a) A flexible schedule to accommodate the event may be authorized.
 - b) If approved by the leader, an employee will be paid their regular base rate through "Other Hours" from Cost Center 8612.
- For GME Residents:
 - a) Residents will be paid their hourly rate through "Other Hours" from Cost Center 8612. The Designated Institutional Officer will need to approve all moonlighting by Residents.

II. Requirements to participate:

- Must be in good standing with their directors. Manager must be aware of the event and approve employee's participation.
- This policy does not apply to employees who are representing Kaweah Health at galas or dinners.

III. Behavioral Expectations:

If employees are representing Kaweah Health at an event, during their regularly scheduled work hours, where alcohol is served, they are not allowed to partake.

**Team_Member_COVID-
19_Symptomatic_Testing_(15672_-1)**

Policy Number: COVID.38	Date Created: No Date Set
Document Owner: Emma Mozier (Director of Medical/Surgical)	Date Approved: Not Approved Yet
Approvers: Emma Mozier (Director of Medical/Surgical), Keri Noeske (Chief Nursing Officer)	
Team Member COVID-19 Symptomatic Testing	

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

DEFINITIONS:

Team Member: Kaweah Health staff, licensed independent practitioners (LIP), or contracted staff.

Symptomatic: A team member reporting any of the following symptoms: fever greater than 100.4, dry cough, fatigue, congestion, runny nose, aches and pains, sore throat, diarrhea, headache, loss of taste and smell, or other symptoms possibly related to COVID-19.

PURPOSE:

- I. To facilitate and provide COVID-19 testing to the Kaweah Health team member per Centers of Disease Control (CDC) guidance.
- II. Identify COVID-19 positive (+) team members and remove from the work setting in order to protect the health of these workers, co-workers, and patients.

POLICY:

- I. COVID-19 Testing
 - A. Team members that are symptomatic for COVID-19 should be prioritized for viral testing with nucleic acid, polymerase chain reaction (PCR), or antigen detection assays; ensure that SARS-CoV-2 testing is performed with a test that is capable of detecting SARS-CoV-2 even with currently circulating variants in the United States.
- II. Symptomatic Team Member Testing During Business Hours
 - A. A symptomatic team member is to isolate, including leaving work if on duty, call Employee Health (EHS) to report symptoms, and be screened by phone for COVID-19 testing. They must also report symptoms to their direct supervisor.
 1. If a team member has tested positive for COVID-19 in the last 90 days, they will be evaluated by the EHS nurse and may not be tested for COVID-19.

2. If the team member is required to test for COVID-19 based on the EHS nurse's evaluation of the team member, they are to isolate at home while waiting for results.
- B. Once lab results are available, the EHS nurse will call the team member and provide instruction.
1. If positive, the investigative questionnaire is completed and shared with Infection Prevention (IP) for contact tracing.
 2. If negative, the team member is not further evaluated by EHS and follows up with their direct supervisor if they feel unwell to come to work.
 - a. If they continue to be symptomatic and have an exposure or another reason they require testing again, they are to contact EHS again.
 3. Team member is instructed to quarantine for a specific number of days per current CDC guidelines/recommendations. Onset of symptoms is considered day "0".
 4. The team member is to call EHS on the date provided by the EHS staff member to be evaluated for return to work. If they remain symptomatic as their day to return to work approaches, they are instructed to call EHS and speak with the EHS nurse. They are also instructed to notify their direct supervisor of their required time away from work. EHS will notify the Leave of Absence (LOA) team in Human Resources (HR) of the extended time off.
 5. EHS records and tracks positive staff members.
 6. HR notifies all potential COVID-19 team member exposures by unit. The information is emailed out within 1 business day once exposure is confirmed or known.
- III. Weekend/Holiday Testing Process:
- A. A symptomatic team member is to isolate, including leaving work if on duty, call EHS and is directed by voicemail to present to Urgent Care on Court Street for COVID-19 testing. They must also report symptoms to their direct supervisor and notify EHS of the results after testing.
 - B. The following business day, EHS contacts the team member and follows the 'Symptomatic Team Member Testing During Business Hours' process as listed above.
- IV. Exposure Process
- A. Team members who have been identified by IP or the positive employee as having been possibly exposed will receive an email from EHS to watch for symptoms for 14 days from last exposure.
- V. Return to Work Process
- A. Team members with improved symptoms, are fever free (less than 100.4 without fever reducing medication) and/or new onset diarrhea free for a least 24 hours following their COVID-19 quarantine will present to EHS on

the day prior to their return to work date for an evaluation of symptoms and return to work status. A determination by an EHS Nurse on return to work clearance will be made and communicated to the LOA team via email.

- VI. Records maintained in EHS
 - A. Phone call logs with identifying information, date/time, symptoms, whether tested or not, and results.
 - B. COVID Positive team member spreadsheet
 - C. COVID Absence Spreadsheet with dates off work due to COVID
 - D. Investigative questionnaires
 - E. Workers Compensation documents when exposure is deemed work related and employee files a worker's compensation claim.

Related Documents:

None

References: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

"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."

**Team_Member_COVID-
19_Vaccination_and_Asymptomatic_Surveillance_Testi
ng_(15671_-1)**

Policy Number: COVID.36	Date Created: No Date Set
Document Owner: Emma Mozier (Director of Medical/Surgical)	Date Approved: Not Approved Yet
Approvers: Emma Mozier (Director of Medical/Surgical), Keri Noeske (Chief Nursing Officer)	
Team Member COVID-19 Vaccination and Asymptomatic Surveillance Testing	

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

DEFINITIONS:

Team Member: a Kaweah Health (KH) employee, licensed independent practitioners (LIP), contract staff, and volunteers.

Fully Vaccinated: Received a single dose of Johnson and Johnson/Janssen COVID vaccine and if eligible received a booster dose after initial vaccination OR received both doses of the Moderna or Pfizer COVID vaccine and if eligible received a booster dose after initial vaccination. Beginning 3/1/22, booster doses must be received within 15 days of booster eligibility (Johnson and Johnson/Janssen is at 2 months from initial vaccination, Moderna or Pfizer is 6 months from 2nd dose of initial vaccination).

Not Fully Vaccinated: An individual that has received no or partial doses of the COVID vaccine. An individual that has received the initial full dose(s) of the COVID vaccine but now is eligible for the booster but has not received it.

PURPOSE: To comply with state and federal COVID-19 vaccination mandates.

POLICY:

I. COVID Vaccinations

- A. All team members are to be fully vaccinated for COVID-19. This includes a booster dose if eligible per manufacturer and Food and Drug Administration (FDA) regulations and timelines. Vaccination records are provided to the organization upon hire and receipt of any subsequent vaccinations. Booster dose's must be received within 15 days of eligibility. If a team member became COVID-19 positive or received Monoclonal Antibody (mAB) treatment, they are not required to get the vaccine or booster dose until 105 days (90 + 15) after the date of their positive COVID test. They may receive the vaccine earlier depending on guidance of their primary care providers.
- B. If an employee declines to be fully vaccinated, they must complete a declination form indicating that they are declining for a sincerely held religious belief or based on a medical exemption. A declination form is to be signed and submitted. A declination for medical reasons must include

a written statement signed by a LIP. If a team member received the initial vaccine series but is now declining the booster dose for the above reasons, a booster dose declination must be completed and submitted.

- C. Failure to be fully vaccinated or failure to submit a signed declination form, including a written statement signed by a LIP for a medical exemption, may result in termination of employment in accordance with state and federal mandates making COVID-19 vaccination a condition of employment.

II. COVID Testing for those not fully vaccinated

- A. All team members who meet the definition of not fully vaccinated and work in a location listed below, must routinely test for COVID-19. Frequency of testing is determined by the employee’s weekly schedule and location:

Twice Weekly Testing	Once a Week Testing	PRN/Per Diem
<ul style="list-style-type: none"> - Two or More Shifts/ Week at Main Hospital, Acute Rehab, Skilled Nursing Facility (SNF) - Recommend testing on Monday or Tuesday AND Wednesday or Thursday. 	<ul style="list-style-type: none"> - Works 1 Shift/ Week at Main Hospital, Acute Rehab, SNF or Works in Other Direct Patient Care Areas (Dialysis Center, Acute Psychiatric Hospital, Clinics, Rehabilitation Clinics, Hospice, Home Health, Outpatient Retail Pharmacy and Therapy) - Recommend testing Monday, Tuesday, Wednesday, or Thursday. 	<ul style="list-style-type: none"> - Works Less than 1 Shift Per Week - Testing to take place within 48 hours of scheduled shift.

- B. Testing kits or a location for testing will be provided to team members required to undergo testing. If a team member undergoes testing for COVID-19 at another facility, they may provide proof of negative tests (copy of test result) per the required interval to KH in lieu of testing at KH.
- C. Test results will be logged through an electronic or paper record indicating the team member name, date of test, and result.
- D. If a team member became COVID-19 positive, they are not required to test until the 91st day after the positivity date.

III. Record of Vaccinations and Declinations

- A. Employee Health Services (EHS) will maintain all vaccine records and declination forms (initial and booster).

IV. Personal Protective Equipment (PPE) for team members not fully vaccinated

- A. KH PPE practices for patient care are created regardless of vaccination status and implemented equally.
- B. Refer to the "COVID-19 PPE Grid" for full outline of PPE practices related to COVID-19.
- C. Team members not fully vaccinated have respirators available to them for use. Respirators are discarded daily and when moist, concerned about contamination, or damaged or contaminated with blood, respiratory or nasal secretions, or other bodily fluids. Also discard after contact with a patient in droplet or airborne isolation.

Related Documents:

None

References:

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-34.aspx>

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**COVID Serial Asymptomatic Testing Requirements
IF SYMPTOMATIC OR KNOWN EXPOSURE CALL EMPLOYEE HEALTH 624-2458**

Action Item	Twice Weekly Testing (Two or More Shifts/ Week at Main Hospital, Acute Rehab, SNF)*	Once a Week Testing (Works 1 Shift/ Week at Main Hospital, Acute Rehab, SNF or Works in Other Direct Patient Care Areas**)	PRN/Per Diem (Works Less than 1 Shift Per Week) Within 48 hours of scheduled shift
How will I test?	Depends by location. Some individuals will be testing at home, some will be testing within their department and some will be testing at a centralized location. The testing location is indicated on the weekly unvaccinated employee report from ISS.	Depends by location. Some individuals will be testing at home, some will be testing within their department and some will be testing at a centralized location. The testing location is indicated on the weekly unvaccinated employee report from ISS.	Depends by location. Some individuals will be testing at home, some will be testing within their department and some will be testing at a centralized location. The testing location is indicated on the weekly unvaccinated employee report from ISS.
When do I test?	You will need to complete testing two times per week. Suggest by the end of the day on Tuesday (can test Monday or Tuesday) and Thursday (can test Wednesday or Thursday).	You will need to complete testing one time per week. Suggest by the end of the day on Thursday (can test any day Monday-Thursday).	You will need to test within 48 hours of your scheduled shift.
How do I report my results? How will my results be documented and monitored?	Most individuals will be self reporting their results via Kaweah Compass. Results for those assigned to a centralized testing location will be documented in NAVICA. Leadership will access reports in HR Online to monitor compliance with testing requirements for their staff. ISS has provided job aides and education on how to do this.	Most individuals will be self reporting their results via Kaweah Compass. Results for those assigned to a centralized testing location will be documented in NAVICA. Leadership will access reports in HR Online to monitor compliance with testing requirements for their staff. ISS has provided job aides and education on how to do this.	Most individuals will be self reporting their results via Kaweah Compass. Results for those assigned to a centralized testing location will be documented in NAVICA. Leadership will access reports in HR Online to monitor compliance with testing requirements for their staff. ISS has provided job aides and education on how to do this.
What if I test positive?	Contact Employee Health at 559-624-2458 for direction. A confirmatory PCR test will be completed. You will not be subject to testing for 90 days after a positive COVID test.	Contact Employee Health at 559-624-2458 for direction. A confirmatory PCR test will be completed. You will not be subject to testing for 90 days after a positive COVID test.	Contact Employee Health at 559-624-2458 for direction. A confirmatory PCR test will be completed. You will not be subject to testing for 90 days after a positive COVID test.
What if I refuse to test or do not complete and document the required testing?	Testing of unvaccinated employees is required by State Mandate. If you refuse to complete the required testing, Kaweah Health would consider that a voluntary resignation. For those who do not complete and document the required testing, progress discipline will occur.	Testing of unvaccinated employees is required by State Mandate. If you refuse to complete the required testing, Kaweah Health would consider that a voluntary resignation. For those who do not complete and document the required testing, progress discipline will occur.	Testing of unvaccinated employees is required by State Mandate. If you refuse to complete the required testing, Kaweah Health would consider that a voluntary resignation. For those who do not complete and document the required testing, progress discipline will occur.

*For employees that do not provide direct patient care, but who work in areas where direct patient care is provided, your Manager or Director will notify you of the required testing frequency.

**Other Direct Patient Care Areas Dialysis Center, Acute Psychiatric Hospital, Clinics, Rehabilitation Clinics, Hospice, Home Health, Outpatient Retail Pharmacy and Therapy, and other direct patient care areas.

***Employees who have had a positive COVID test are exempt from testing for 90-days. Unvaccinated employees must resume COVID testing after the 90th day of a positive test.

HR.216 Progressive Discipline



Policy Number: HR.216	Date Created: 06/01/2007
Document Owner: Dianne Cox (Chief Human Resources Officer)	Date Approved: 06/28/2021
Approvers: Board of Directors (Administration)	
Progressive Discipline	

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

POLICY:

Kaweah Health uses positive measures and a process of progressive discipline to address employee performance and/or behavioral problems. Kaweah Health recognizes that the circumstances of each situation must be evaluated individually to determine whether to discipline progressively or to impose more advanced discipline immediately. This policy applies to all Kaweah Health employees, except residents enrolled in the Kaweah Health's Graduate Medical Education (GME) program. Disciplinary actions related to residents in the GME program are handled by the Office of the GME as described in the Resident Handbook.

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The primary purpose of Disciplinary Action is to assure compliance with policies, procedures and/or Behavioral Standards of Performance of Kaweah Health. Orderly and efficient operation of Kaweah Health requires that employees maintain appropriate standards of conduct and service excellence. Maintaining proper standards of conduct is necessary to protect the health and safety of all patients, employees, and visitors, to maintain uninterrupted operations, and to protect Kaweah Health's goodwill and property. Because the purpose of disciplinary action is to address performance issues, it should be administered as soon after the incident(s) as possible. Therefore, depending on the seriousness of the offense and all pertinent facts and circumstances, disciplinary action will be administered promptly.

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Certain violations are considered major and require more immediate and severe action such as suspension and/or termination. Lesser violations will generally be subject to Progressive Discipline.

Any employee who is in Progressive Discipline is not eligible for transfer or promotion within Kaweah Health without review and approval by the hiring manager and Human Resources.

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Progressive Discipline shall be the application of corrective measures by increasing degrees, designed to assist the employee to understand and comply with the required expectations of performance. All performance of an employee will be considered when applying Progressive Discipline.

In its sole discretion, Kaweah Health reserves the right to deviate from Progressive Discipline or act without Progressive Discipline whenever it determines that the circumstances warrant.

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PROCEDURE:

I. The process of Progressive Discipline may include the following, depending on the seriousness of the offense and all pertinent facts and circumstances:

A. Warnings

1. Verbal Warning:

A Verbal Warning explains why the employee's conduct/performance is unacceptable and what is necessary to correct the conduct/performance. This written record of the verbal warning typically remains in the department manager's/supervisors confidential files unless more serious discipline follows.

B. Written Warning:

A Written Warning provides the nature of the issue and outlines the expectations of performance/conduct or what is necessary to correct the situation. This Warning becomes part of the employee's personnel file, along with any pertinent back-up documentation available, and will inform the employee that failure to meet the job standards/requirements of the Warning will necessitate further disciplinary action, up to and including termination.

The department management, in concert with Human Resources, determines the level of corrective disciplinary action that will take place based upon the seriousness of the offense, the existence of any prior disciplinary actions and the entirety of the employee's work record.

1. Level I

Any employee who receives a Level I is subject to further Written Warnings as stated in this policy.

2. Level II

Any employee who receives a Level II is subject to further Written Warnings as stated in this policy.

3. Level III

A Level III is considered Final Written Warning to the employee involved, and includes a written explanation of what is necessary to meet the expectation of performance. A Level III Warning may be accompanied by a suspension. A suspension may be without pay and is generally up to five days or forty hours.

C. Administrative Leave

In the discretion of Kaweah Health, an employee may be placed on Administrative Leave with or without pay at any time to give Kaweah Health time to conduct an investigation or for other circumstances considered appropriate by Kaweah Health. Management may impose an Administrative Leave at any time for an employee(s) if they believe there is a risk to employee or patient safety. Management will notify Human Resources immediately if an Administrative Leave is enforced. When an employee is placed on Administrative Leave, Kaweah Health will make every effort to complete the investigation of the matter within five business days. If Kaweah Health is unable to complete an investigation of the matter within five days the Administrative Leave may be extended.

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After the investigation has been completed, the employee may be returned to work and, in the discretion of Kaweah Health and depending on the circumstances, may be reimbursed for all or part of the period of the leave. If it is determined that the employee should be terminated, compensation may, in the discretion of Kaweah Health, be paid until the Post Determination Review process has been completed. (See policy HR.218).

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D. Dismissal Without Prior Disciplinary History

As noted, Kaweah Health may determine, in its sole discretion, that the employee's conduct or performance may warrant dismissal without prior Progressive Discipline. Examples of conduct that may warrant immediate dismissal, suspension or demotion include acts that endanger others, job abandonment, and misappropriation of Kaweah Health resources. This is not an exclusive list and other types of misconduct/poor performance, may also result in immediate dismissal, suspension or demotion. See Employee Conduct below. .

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E. Employee Conduct

This list of prohibited conduct is illustrative only; other types of conduct injurious to security, personal safety, employee welfare or Kaweah Health's operations may also be prohibited. This includes behavior or behaviors that undermine a culture of safety. Employee conduct that will

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be subject to Progressive Discipline up to and including immediate involuntary termination of employment includes but is not limited to:.

1. Falsifying or altering of any record (e.g., employment application, medical history form, work records, time cards, business or patient records and/or charts).
2. Giving false or misleading information during a Human Resources investigation;
3. Theft of property or inappropriate removal from premises or unauthorized possession of property that belongs to Kaweah Health, employees, patients, or their families or visitors;
4. Damaging or defacing materials or property of Kaweah Health, employees, patients, or their families or visitors;
5. Possession, distribution, sale, diversion, or use of alcohol or any unlawful drug while on duty or while on Kaweah Health premises, or reporting to work or operating a company vehicle under the influence of alcohol or any unlawful drug;
6. Fighting, initiating a fight, threats, abusive or vulgar language, intimidation or coercion or attempting bodily injury to another person on Kaweah Health property or while on duty. Reference policy AP161 Workplace Violence Prevention Program;
7. Workplace bullying which can adversely affect an employee's work or work environment, Reference policy HR.13 Anti-Harassment and Abusive Conduct.
8. Bringing or possessing firearms, weapons, or any other hazardous or dangerous devices on Kaweah Health property without proper authorization;
9. Endangering the life, safety, or health of others;
10. Intentional violation of patients' rights (e.g., as stated in Title XXII);
11. Insubordination and/or refusal to carry out a reasonable directive issued by an employee's manager (inappropriate communication as to content, tone, and/or language)
12. Communicating confidential Kaweah Health or Medical Staff information, except as required to fulfill job duties;

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13. Sleeping or giving the appearance of sleeping while on duty;
14. An act of sexual harassment as defined in the policy entitled Anti-Harassment and Abusive Conduct HR.13;
15. Improper or unauthorized use of Kaweah Health property or facilities;
16. Improper access to or use of the computer system or breach of password security;
17. Improper access, communication, disclosure, or other use of patient information. Accessing medical records with no business need is a violation of state and federal law and as such is considered a terminable offense by KDHCD.
18. Unreliable attendance (See Attendance and Punctuality HR.184)
19. Violations of Kaweah Health Behavioral Standards of Performance.
20. Unintentional breaches and/or disclosures of patient information may be a violation of patient privacy laws. Unintentional breaches and/or disclosures include misdirecting patient information to the wrong intended party via fax transmission, mailing or by face-to-face interactions.
21. Access to personal or family PHI is prohibited.
22. Refusing to care for patients in the event mandated staffing ratios are exceeded due to a healthcare emergency.
23. Working off the clock at any time. For the convenience of the employees, Kaweah Health allows staff to clock in before their start time. However, employees are not permitted to work until their scheduled start time.
24. Failure to work overtime.
25. Use of personal cell phones while on duty if unrelated to job duties anywhere in Kaweah Health.
26. Excessive or inappropriate use of the telephone, cell phones, computer systems, email, internet or intranet.
27. Any criminal conduct off the job that reflects adversely on Kaweah Health.

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Deleted: Cell phones are to be stored in a secure location while on duty.

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- 28. Making entries on another employee's time record or allowing someone else to misuse Kaweah Health's timekeeping system. Deleted: the District
- 29. Bringing children to work, or leaving children unattended on Kaweah Health premises during the work time of the employee. Deleted: District
- 30. Immoral or inappropriate conduct on Kaweah Health property. Deleted: District
- 31. Unprofessional, rude, intimidating, condescending, or abrupt verbal communication or body language.
- 32. Unsatisfactory job performance.
- 33. Horseplay or any other action that disrupts work,
- 34. Smoking within Kaweah Health and/or in violation of the policy. Deleted: the District
- 35. Failure to report an accident involving a patient, visitor or employee.
- 36. Absence from work without proper notification or adequate explanation, leaving the assigned work area without permission from the supervisor, or absence of three or more days without notice or authorization.
- 37. Unauthorized gambling on Kaweah Health premises. Deleted: District
- 38. Failure to detect or report to Kaweah Health conduct by an employee that a reasonable person should know is improper or criminal. Deleted: to the
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- 39. Providing materially false information to Kaweah Health, or a government agency, patient, insurer or the like. Deleted: the District
- 40. Spreading gossip or rumors which cause a hostile work environment for the target of the rumor.
- 41. Impersonating a licensed provider.
- 42. Obtaining employment based on false or misleading information, falsifying information or making material omissions on documents or records.
- 43. Violation of Professional Appearance Guidelines

44. Being in areas not open to the general public during non-working hours without the permission of the supervisor or interfering with the work of employees.

Further information regarding this policy is available through your department manager or the Human Resources Department.

"Responsibility for the review and revision of this Policy is assigned to the Chief 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."

Deleted: Vice President

HR.234 PTO



Policy Number: HR.234	Date Created: 06/01/2007
Document Owner: Dianne Cox (Chief Human Resources Officer)	Date Approved: 06/28/2021
Approvers: Board of Directors (Administration)	
Paid Time Off (PTO), Extended Illness Bank (EIB) and Healthy Workplace, Healthy Families Act of 2014	

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

POLICY:

Paid Time Off (PTO), Extended Illness Bank (EIB) and Healthy Workplace, Healthy Families Workplace Act of 2014 – Paid Sick Leave (PSL) benefits are offered to all employees as defined in this policy. PTO is offered to full-time and part-time eligible employees for leisure, celebration of holidays, short-term illness and other personal needs. EIB is offered to full-time and part-time eligible employees for extended illness and Kin Care. Private Home Care staff, temporary staff/interims and Per Diem staff are not eligible for PTO or EIB but are eligible for Paid Sick Leave (PSL) as defined in this policy. Excessive occurrences of unapproved time off may result in disciplinary action. See Policy HR.184 Attendance and Punctuality.

PROCEDURE:

Eligibility and Accrual for PTO and EIB

Full-time and benefited part-time employees are eligible to receive PTO and EIB. If an eligible employee is changed to a non-eligible status, the PTO and EIB time accrual will cease. The employee will receive a lump-sum payment for all accrued PTO paid at 100% of their hourly rate of pay prior to the status change. During the non-eligible status, the employee will accrue PSL.

If a non-eligible employee is changed to an eligible status, the employee begins accruing PTO and EIB as of the first pay period in which the status change became effective; PSL accrual will cease. At no time will an employee accrue PTO and EIB as well as PSL. An employee accrues either PTO and EIB or PSL.

The rate of PTO and EIB accrual received is based on qualified service hours. Qualified service hours which count toward the accrual rate include the following: regular hours worked (non-overtime), Education Reduced Shift, Flex Time Off, PTO FMLA, PTO unscheduled, PTO/PSL, PTO Sick/Pregnancy, PTO Holiday, PTO/Workers Compensation, Sitter Pay, Sleep Pay, PTO hours, bereavement hours, jury duty hours, training/workshop hours, orientation hours, and mandatory dock hours. Neither EIB nor PTO accruals will be earned while employees are being paid EIB hours.

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Eligibility and Accrual for PSL

PSL eligible employees include Per-Diem, Private Home Care, and Part-Time non-benefit eligible employees. PSL eligible employees will accrue at the rate of one hour per every 30 hours worked (.033333 per hour); accrual begins as of the first pay period. A new employee is entitled to use PSL beginning on the first day of employment. Employees are limited to 24 hours of use of accrued time in each 12-month rolling period. PSL will carry over to the following calendar year not to exceed 48 hours of accrual in any calendar year.

Description	Service Hours	Approximate Yrs. of Service required to obtain this rate	Earned 1 st Pay Period: Accrual (8 & 10hrs up to 80 eligible hrs a pp) (12hrs up to 72 eligible hrs a pp)	Earned at 520 Eligible Hours of Employment: Additional Accrual earned on up to 72 eligible hours a pp.
8hr, 10hr, FT & PT Staff	0	5 years	.038461 (80) – Accrual rate during first 90 days in eligible status	.051282 (96hrs)
8hr, 10hr, FT & PT Staff	10400	5 – 10 years	.057692 (120)	.051282 (96hrs)
8hr, 10hr, FT & PT Staff	20800	10+ years	.076923 (160)	.051282 (96hrs)
12hr FT & PT Staff	0	5 years	.038461 (72)	.051282 (96hrs)
12hr FT & PT Staff	9360	5 – 10 years	.057692 (108)	.051282 (96hrs)
12hr FT & PT Staff	18720	10+ years	.076923 (144)	.051282 (96hrs)

Maximum Accruals

The Maximum PTO accrual allowed is 400 hours. The accrual will cease once the maximum accrual is reached until PTO hours are used or cashed out. The maximum EIB accrual is 2000 hours; the maximum PSL accrual is 48 hours in a calendar year. No Payment is made for accrued EIB or PSL time when employment with Kaweah Delta ends for any reason.

Requesting, Scheduling, and Access to PTO, EIB and PSL

Routine unpaid time off is not allowed. Any requests for unpaid time should be considered only on a case-by-case basis taking into consideration the need for additional staffing to replace the employee and other departmental impacts. It is the responsibility of management to monitor compliance. Employees should be aware that unpaid time off could potentially affect their eligibility for benefits.

In addition, any request for PTO time, whether for traditional holiday, for vacation time, or otherwise must be approved in advance by management. Management will consider the employee's request as well as the needs of the department. In unusual circumstances, management may need to change the PTO requests of employees based upon the business and operational needs of Kaweah Delta. In such situations, Kaweah Delta is not responsible for costs employees may incur as a result of a change in their scheduled PTO time.

AB 1522 Healthy Workplace Healthy Families Act of 2014

An employee may utilize up to 24 hours of PTO or PSL in a rolling 12-month period for the following purposes:

a) Diagnosis, care, or treatment of an existing health condition, or preventative care for, an employee or an employee's family member, as defined as employee's parent, child, spouse, registered domestic partner, grandparent, grandchild, and siblings.

b) "Family Member" means any of the following:

- i. A child, which for purposes of this policy means a biological, adopted or foster child, stepchild, legal ward, or a child to whom the employee stands in loco parentis; this definition of child is applicable regardless of age or dependency status.
- ii. A biological, adoptive, or foster parent, stepparent, or legal guardian of an employee or the employee's spouse or registered domestic partner, or a person who stood in loco parentis when the employee was a minor child.
- iii. A spouse
- iv. A registered domestic partner
- v. A grandparent
- vi. A grandchild
- vii. A sibling

c) For an employee who is a victim of domestic violence, sexual assault or stalking, as specified.

There is no cash out provision for the PSL accrual, including upon termination of employment or with a status change to a benefit eligible position. However, if an employee separates from Kaweah Delta and is rehired within one year, previously accrued and unused PSL will be reinstated.

PSL and PTO time shall be utilized at a minimum of 2-hour increments and no more than the length of the employee's shift.

PTO and PSL time taken under this section is not subject to the Progressive Discipline Policy HR.216.

Time Off Due To Extended Illness

Employees who are absent due to illness for more than three (3) consecutive work days should notify their manager and contact the Human Resources Department to determine if they are eligible for a leave of absence. Accrued EIB can be utilized for an approved continuous leave of absence beyond 24 hours and on the first day of surgery in an acute-care or outpatient surgery center or inpatient admission to the hospital.

Employees who are absent due to illness for more than seven (7) consecutive days should file a claim for California State Disability Insurance. Claim forms are available in Human Resources. State Disability payments will be supplemented with any accrued EIB time by the Payroll Department, and PTO at the employee's request.

Time Off Due to Kin Care

Kin Care allows eligible employees to use up to one-half (1/2) of the Extended Illness Bank (EIB) that they accrue annually in a rolling 12 months to take time off to care for a sick family member. Only employees who accrue EIB are eligible for Kin Care. No more than one-half of an employee's EIB accrual in a rolling 12-month period can be counted as Kin Care. For example, for full-time employees this would mean no more than 24 hours can be utilized as Kin Care in a rolling 12-month period. An employee must have EIB available to use on the day of the absence for that absence to be covered under Kin Care. An employee who has exhausted his/her EIB and then is absent to care for a sick family member cannot claim that absence under Kin Care. Kin Care can be used to care for a sick family member, to include a spouse or registered domestic partner, child of an employee, "child" means a biological, foster, or adopted child, a stepchild, a legal ward, a child of a domestic partner, or a child or a person standing in loco parentis, parents, parents-in-law, siblings, grandchildren and grandparents. A Leave of Absence form does not need to be submitted unless the employee will be absent and use sick leave for more than three continuous workdays. In addition, an employee taking Kin Care does not need to submit a doctor's note or medical certification. However, in instances when an employee has been issued Disciplinary Action and directed to provide a doctor's note for all sick days, then an employee may need to submit a doctor's note.

EIB time taken under this section to care for an immediate family member is not subject to the Progressive Discipline Policy HR.216.

Holidays

Kaweah Delta observes 72 holiday hours each year. Eligible employees may be scheduled a day off and will be paid provided adequate accrual exists within their PTO bank account for each observed holiday. Time off for the observance of holidays will always be in accordance with Kaweah Delta needs.

1. New Year's Day (January 1st)
2. President's Day (Third Monday in February)
3. Memorial Day (Last Monday in May)
4. Independence Day (July 4th)
5. Labor Day (First Monday in September)
6. Thanksgiving Day (Fourth Thursday in November)
7. Day after Thanksgiving Day (Friday following Thanksgiving)
8. Christmas Day (December 25th)
9. Personal Day

Business departments and/or non-patient care areas will typically be closed in observance of the noted holidays. Where this is the case, employees assigned to and working in these departments will be scheduled for a day off on the day the department is closed. Employees affected by department closures for holidays should maintain an adequate number of hours within their PTO bank to ensure that time off is with pay.

In the first 90 days of employment, benefit eligible employees who have not accrued sufficient PTO to cover holidays may be paid and their PTO accrual bank will go into the negative, until accrual is earned back in successive pay periods, unless otherwise specified by the employee.

In business departments and/or non-patient care areas, holidays, which fall on Saturday, will typically be observed on the Friday preceding the actual holiday and holidays, which fall on Sunday, will be observed on the Monday following the actual holiday.

Employees who work hours on some of these holidays may be eligible for holiday differential. For more information of eligibility, see policy HR.75 Differential Pay-Shift, Holiday, and Weekend.

"Responsibility for the review and revision of this Policy is assigned to the Chief 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 Health 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 staff member's responsibility to review and understand all Kaweah Health Policies and Procedures."

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