



**Health System**  
**EMPLOYEE HANDBOOK**

This Handbook and its contents apply to employees of Huntsville Hospital, Madison Hospital, HH Women & Children Hospital, Heart Center Inc., and HH Physician Network.

**July 11, 2022**

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## INTRODUCTION

Welcome to the HH Health System Care Team. You are joining a dynamic company that provides essential services and lifesaving care across northern Alabama.

Our mission at HH Health System is to provide quality care that improves the health of those we serve. I hope you will share with me the pride that is reflected in the professionalism and dedication of the employees who make HH Health System a great place to work. As a health care professional, you have made an important career choice.

If you have any questions, the Human Resources Department will assist you. Thank you for joining the exceptional staff of HH Health System. I look forward to working with you to build a brighter future for you, our hospital, and our community.



**Jeff Samz**

CEO, Huntsville Hospital Health System

## EMPLOYEE HANDBOOK GUIDANCE

This handbook provides a general, but not all inclusive, summary of the current policies and procedures of HH Health System which are available to any employee on the HH Health System intranet. For the purposes of this handbook, employees of HH Health System include: Huntsville Hospital, Huntsville Hospital for Women's & Children, Madison Hospital, Heart Center, Inc., and Physician Network. This handbook is intended as a set of guidelines for HH Health System's policies, practices, benefits, and programs and may not contain all of the information you need to know. The policies and procedures and the provisions of this handbook are established to assist managers and employees in making day-to-day employment decisions. They are not considered to be all-inclusive. Thus, when a situation arises where the literal interpretation and/or application of a particular guideline would cause a result that HH Health System deems unacceptable, HH Health System reserves the right to deal with such situation in a manner that is best for the organization and its customers (patients, physicians, contractors, and other members of the public).

The language in this handbook and the policies and procedures are not intended to create a contract, in whole or in part, express or implied, between HH Health System and its employees. This means that you and HH Health System have an employment-at-will relationship. In such a relationship, you may end your employment with HH Health System at any time and for any reason. HH Health System may also exercise its right to end the employment relationship at any time and for any reason. This handbook does not guarantee employment for any specific period of time.

Our policies, practices, and programs may require review from time to time due to changes in health care practices, accreditation standards, governing laws, and other circumstances. Accordingly, HH Health System's administration may, at its sole discretion, modify, amend, cancel, or establish new policies, practices, benefits, programs, and the provisions of this handbook with or without notice. Additionally, HH Health System reserves the right to deviate from the guidelines described in this handbook if circumstances require.

Nothing in this handbook shall be interpreted to limit the right of management to exercise any of the functions and prerogatives of management whether or not described below. Nothing in this handbook is intended nor shall anything be interpreted to give rise to any claims, whether in contract, tort, or otherwise, on the part of any employee as a result of management's exercise of its prerogatives.

If you have any questions regarding any of the material contained in this handbook or in the policies and procedures, the Human Resources Department will assist you.

## STATEMENT OF PHILOSOPHY

HH Health System has adopted a Fair and Just Culture approach, based on personal responsibility and accountability, as a means to improve quality and reduce errors. Our approach compliments our safety journey, which is about being safe, caring, and kind with the goal of being a high reliability organization. Within a Fair and Just Culture we believe:

- Being safe is our first priority as we encourage employees to utilize Universal Reliability Tools to improve human performance and Universal Relationship Tools to increase communication and teamwork.
- Focusing on system design, as well as policies and procedures blocks predictable mistakes.
- Our employees will make an occasional human error and mistakes are learning opportunities.
- Leaders must identify the difference between honest mistakes and knowing violations. Honest mistakes should not be punished whereas deliberate acts or knowing violations should have fair consequences.
- An open and fair culture encourages the reporting of errors.

A Fair and Just Culture avoids blaming individuals when errors occur and focuses its energy on identifying and correcting system-level causes of error. Open communication about errors helps foster a non-punitive culture of safety and reliability. We have adopted the Performance Management Decision Guide (PMDG) to respond and treat employees fairly when performance does not meet expectations.

The PMDG provides guidance for addressing errors with tests and actions to consider. Below is a listing of each test:

1. **Deliberate Acts/Knowing Violations Test** – An error resulting from a conscious choice by the employee to engage in harmful actions with disregard for known risks. In these instances corrective action is directed at the individual employee leading to remedial or punitive action. More details can be found in the Rules of Conduct within the Employee Handbook.

2. **Incapacity Test** – An employee has a responsibility to report to work fit for duty and in some instances the employee's fitness for duty may be questioned. If an employee is unable to safely perform the essential functions of their position due to ill health or a medical condition, an assessment of duty, occupational health referral, or potential leave of absence may be offered. If an employee cannot safely perform the essential functions of their role because substance abuse is suspected, substance abuse testing, a fitness for duty evaluation or potential leave of absence may occur. If a deliberate act or policy violation was made by the employee due to substance abuse a disciplinary action may also occur. Employees who self-report or ask for assistance will be given the opportunity for assistance and treatment options to consider.

3. **Compliance Test** – In some instances we must examine why an employee chooses to work around or deviation from policy and procedures. An employee may believe he or she is justified in their actions and may choose noncompliance. We will coach the employee to improve situational awareness and to make better choices. If normalized deviance has occurred, we will investigate to ensure other employees in the same work area are compliant with policy and procedure. When coaching is not successful and repetitive violations continue, Huntsville Hospital may choose to assess the employee for job fit considerations and additional disciplinary action may occur.

4. **Substitution Test** – In an instance when an employee makes an unintended action or human error, we will console the individual. We will examine the process and/or system where the error occurred for design flaws. We may choose to modify the process and/or system to prevent errors in the future. When performance expectation is violated by the employee, the Performance Management Decision Guide (PMDG) may be utilized to determine appropriate future action.

A detailed description of the Fair and Just Culture approach is contained under the Rules of Conduct section of this handbook. It is important for every employee to read and understand this information. It forms the basis for both day-to-day work performance and if deemed necessary, employee discipline when the violation of a policy is determined to be a deliberate act with malicious intent, a knowing violation, and/or repetitive in nature.

## **ABOUT HUNTSVILLE HOSPITAL AND HH HEALTH SYSTEM**

HH Health System is all about people. Since 1895, when the tiny Huntsville Infirmary opened, our focus has been on serving people. More than a century later, Huntsville Hospital is a 941 bed, community-based, not for profit institution that is the state's second largest hospital with more than 800 physicians on the Medical Staff. The hospital also serves as a teaching facility for UAB's Family Practice and Internal Medicine Residency Programs.

While Huntsville Hospital is the major referral hospital and trauma center for patients in north Alabama and southern Tennessee, the hospital has expanded its service throughout the region with the development of HH Health System. HH Health System is the third largest publicly owned hospital system in the nation with more than 2,200 beds and 15,000 employees. Visit our main website at [www.huntsvillehospital.org](http://www.huntsvillehospital.org) to view a full list of affiliate providers that comprise HH Health System.

## **THE HEALTH CARE AUTHORITY OF THE CITY OF HUNTSVILLE**

The Health Care Authority of the City of Huntsville, which does business as "HH Health System," is a government entity that is a political subdivision of the State of Alabama. The hospital is governed by the Health Care Authority of the City of Huntsville, a nine-member volunteer board. Although members of its board are appointed by the City Council of Huntsville from a list of nominees that is submitted by the Health Care Authority, HH Health System belongs to the community and is not a department of the City of Huntsville.

## **HUNTSVILLE HOSPITAL FOUNDATION, INC.**

Huntsville Hospital Foundation is the nonprofit fundraising arm of HH Health System. Its mission is to develop relationships and financial resources to support the programs, projects, and services of the hospital. Thanks to the generosity of its donors, the Foundation raises millions of dollars each year to provide state-of-the-art equipment and program support to benefit our patients.

Employees may contribute to the Foundation by joining more than 4,300 employees who are members of The Lifesaver Club, the hospital's employee giving club. Payroll deduction is the easiest way to donate, and gifts of any amount are gratefully accepted. Contributions may be unrestricted, or they may be designated for a specific department or hospital program, even the department in which you work. Memorials, tributes, and other special gifts are also welcome. All gifts to the Foundation are fully tax-deductible.

"Honoring Care Champions" is a Lifesaver Club program that makes it possible for grateful patients to give donations in honor of outstanding hospital employees or physicians who make their hospital stay more enjoyable. These "Care Champions" receive a note and a beautiful pin recognizing their commitment to excellent healthcare. The Foundation awards other gifts to employees who are honored with additional grateful patient donations. For more information about the Foundation or Lifesaver Club, please call 256-265-8077.

## **CORPORATE COMPLIANCE**

HH Health System has adopted a set of values: integrity, excellence, innovation, accountability, compassion, equality, and safety. Integrity and honesty direct our dealings with people outside the hospital, including patients, families, businesses, and government agencies. HH Health System is required to comply with all federal and state laws, especially those focused on preventing fraud and abuse and to report any behavior that may be considered illegal or unethical. Corporate Compliance is the method to ensure that each of us does what is right and trustworthy every time we deal with anyone. Employees not only have the responsibility for being honest, we have the responsibility for reporting concerns about possible violations of rules and policies. Employees who make a good faith report of wrongdoing will not suffer negative actions as a result of the report. Reports will be kept confidential as much as possible. Employees may also report safety and quality concerns to The Joint Commission (TJC). Some examples of fraudulent or wrongful acts include:

- Violating laws protecting patient privacy (HIPAA)
- Stealing money, property, or anything of value
- Receiving pay or documenting time not worked
- Profiting from insider knowledge of the hospital, using your position to influence business, or soliciting personal gifts from hospital contractors
- Any dishonest act
- Violation of a state professional licensure or other regulatory agency
- Misuse of electronic, social, or other media that violates hospital policy and/or patient privacy
- Activities that could make up a False Claim

Purpose: The FCA exists to fight fraud, or false claims, against the federal government.

What is a false claim?: A false claim may take many forms, including, for example, overcharging for a product or service, failing to perform a service, delivering less than the promised amount or type of goods or services, underpaying money owed to the government, and charging for one thing while providing another. Other actions that could be considered a False Claims are: billing a patient for a medical procedure, service, or item that was not provided; billing for research that was not performed, or inappropriately changing or destroying any hospital record (medical or other).

Applicability: In general, the False Claims Action covers fraud involving any federal agency or program with the exception of tax fraud.

Damages and Penalties: Under the FCA, anyone who knowingly submits or causes the submission of false claims to the government is liable for damages of up to three times the erroneous payment plus civil penalties of \$5,500 to \$11,000 per false claim.

Mechanism: A private individual, called the whistleblower or relator, who reports information regarding false claims is authorized to file a case in federal court (on behalf of the government) against those entities that committed fraud. These are called qui tam suits. The Department of Justice then decides (on behalf of the government) whether to join the whistleblower or relator in prosecuting these cases.

Whistleblower or Relator's Share: If the case is successful, the whistleblower may share in the recovery. The amount of the relator's share depends on multiple factors, including whether the relator planned and initiated the false claim.

Whistleblower or Relator Rights and Protections: The FCA provides a remedy for whistleblowers who are discharged, demoted, suspended, or "in any other manner discriminated against in the terms and conditions of employment by his or her employer" in retaliation for filing an FCA case.

To receive the benefits of the employment protections of the FCA, courts generally require that an employee demonstrate that: (1) he or she was engaged in an activity protected by the statute in furtherance of a qui tam suit, (2) the employer knew of the employee's qui tam actions, and (3) the employer retaliated against the employee because of those actions. If the court finds a whistleblower was terminated or otherwise mistreated for filing a qui tam lawsuit, the employee is entitled to reinstatement at the same level, two times the back pay owed plus interest, and compensation for any special damages, such as attorney's fees, sustained as a result of the discrimination.

Compliance with all legal and regulatory guidelines is the minimum standard of performance at HH Health System. We should strive to meet or exceed requirements. Employees are required to complete Corporate Compliance training and must sign an annual Affirmation Statement. HH Health System has a Department of Corporate Compliance and a Corporate Compliance Officer who supervises the Compliance Program. If you think someone has committed fraud or an illegal act, you are required to report it immediately to a manager, the Corporate Compliance Officer, or the Corporate Compliance Department. To make a report, notify [compliance@hhsys.org](mailto:compliance@hhsys.org) or call 256.265.6885. If you want to make an anonymous report you should call 1.800.442.0959. The line is available 24 hours a day, 7 days a week.



## CODE OF CONDUCT

HH Health System is a public corporation and relies upon public trust for its success. All employees have a legal and ethical duty to be honest when working with people inside and outside the organization. Employees have a duty to avoid using their position or knowledge of the hospital for personal benefit. Consistent with our Code of Conduct, any employee who is in a position to make business decisions on behalf of the hospital must report (“disclose”) an actual or potential Conflict of Interest to Human Resources. Employees with a possible conflict of interest are required to report it to their supervisor and obtain approval in advance. This includes but is not limited to outside financial or commercial interest which conflicts with, or gives the impression of conflicting with, their decisions or actions for the hospital. This includes financial interest in an outside enterprise which does business with or competes against the hospital or its affiliates, unless such business is insubstantial. Vendor sponsored travel should be reported and approved by hospital management prior to accepting the offer. Employees may not accept any arrangement that endorses or gives the appearance of endorsing a vendor’s product unless written authorization is given. Employees may be required to complete a Conflict of Interest Disclosure Statement before accepting travel offers from suppliers or contractors. For additional information, please refer to the organization’s Conflict of Interest Policy, which is available on the hospital’s intranet.

## CONFIDENTIAL INFORMATION

HH Health System maintains a large volume of confidential data concerning its patients, employees, and business arrangements. As an employee, you may have access to information concerning patients, employees, or contracts. If you have such access, you are to use it only in the course of performing your duties and only to the extent necessary to perform those duties.

## HIPAA: HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT

The Health Insurance Portability and Accountability Act (HIPAA) is a Federal Law designed to protect patient information. It does so through the use of Privacy Standards and Security Standards (electronic and physical). The Hospital has implemented a program covering HIPAA requirements. Training for HIPAA is required annually for all employees and is located in Net Learning. The program emphasizes the importance of privacy and security.

Each employee, physician, volunteer, and student has a responsibility to safeguard Protected Health Information (PHI) in any format: spoken, written, or electronic. PHI includes all information about patients and can be as basic as the patient’s name or other personal information. Protected Health Information should be accessed or shared only when necessary to do your job. Approved use of PHI is limited to treatment of the patient, payment for treatment, and operations of the hospital (TPO). PHI should be disposed of in approved receptacles in non-public areas.

As an employee, if you overhear someone discussing PHI, you should keep this information to yourself. HH Health System has assigned a Privacy Officer to ensure that privacy is maintained. If you believe that a violation of privacy or unauthorized disclosure of PHI has occurred, you should report that to your manager or call the Privacy Officer at 256-265-9257 or [privacyofficer@hhsys.org](mailto:privacyofficer@hhsys.org). The Privacy Officer will investigate every report of a privacy violation that occurred within the last six months.

Ensuring patient privacy is the responsibility of every employee. You can do your part by adhering to the following basic requirements:

- Only access patient information when you need it to treat the patient or providing services for payment. Other uses of Protected Health Information (such as hospital operations) will be covered in your job description.
- **You shall not access the patient records of your family members (to include minor children), co-workers, or anyone else other than provided for in your job responsibilities.** HIPAA allows patients to receive a list of all disclosures of their PHI. Therefore, the hospital monitors and audits access to patient records.

- Always use care when discussing PHI with another caregiver. Make sure the other person has a job-related reason for the information. Whenever possible, make arrangements so that your conversation is not overheard.

**Security of Protected Health Information:**

- Obtain (written or verbal) approval from your manager or director before taking PHI to an offsite location. Department leaders should develop an alternative process to ensure security of PHI off-site.
- Do NOT store PHI on any portable electronic device unless it is encrypted or otherwise protected by the Information Technology (IT) Department's Security Officer.
- Do NOT store PHI on personal electronic devices unless authorized by the IT Security Officer.
- Do NOT store PHI on any local computer hard-drive ("C drive") unless approved by the IT Department's Security Officer.
- Notify the Security Officer and Compliance Officer immediately of any loss, or suspected loss, of an electronic device that may have PHI stored on it (desktop computer, flash drive, camera, phone, laptop/notebook, or any portable device).

Any violation of policy that is determined to be a deliberate act with malicious intent, a knowing violation or repetitive in nature is subject to disciplinary action up to and including discharge.

## SECTION I EMPLOYMENT AND GENERAL INFORMATION

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### DIVERSITY AND INCLUSION

HH Health System has a deep commitment to enhancing diversity within the organization. Diversity is often defined as differences based on age, race, sex, religion, national origin, disability, military status, genetic information, sexual orientation, gender identity or any other status prohibited by federal, state, or local law. Diversity also includes but is not limited to differences based on geographic location, personal habits, educational background, and work experience.

As an organization we are committed to creating a workplace that reflects the diversity of our community. We support the wellbeing of all employees, patients, and visitors and strive to create a diverse, welcoming, and inclusive work environment. A core value of all HH Health System hospitals is equality, which is defined as the guarantee of fair treatment, access, opportunity, and advancement for all races, nationalities, religions, gender or age, while striving to identify and eliminate barriers that have prevented the full participation of some groups by bringing historically excluded individuals and/or groups into Huntsville Hospital Health System processes.”

### SOCIAL NETWORKING

HH Health System recognizes that the Internet provides various opportunities to participate in interactive discussions and share information by using, posting, commenting, liking, sharing, or otherwise interacting with others using Social Media and other platforms including; but not limited to chat rooms, personal blogs, Facebook, Instagram, Twitter, TikTok, Snapchat, LinkedIn, YouTube, Vimeo, Pinterest, Tumblr, and wikis (collectively “Social Media”). However, the Internet and Social Media pose risks to HH Health System’s confidential and proprietary information, reputation and brand, and compliance with various regulations and laws. Indeed, the improper use of Social Media can expose the organization and its employees to discrimination and harassment claims, defamation claims, privacy claims, as well as other litigation. These guidelines are intended to build on longstanding workplace conduct of diversity and inclusion, and to minimize associated business and legal risks.

Unless specifically authorized by an officer of HH Health System, employees cannot use HH Health System owned equipment, including computers, licensed software, mobile devices, and other electronic equipment, or facilities on work time, to access, use, post to, comment on, or otherwise engage with Social Media unless it is for business purposes. This includes all forms of Social Media and networking sites that are not affiliated with HH Health System.

HH Health System understands that individuals may choose to engage in Social Media during non-work time. You are fully and solely responsible for the material, comments, and statements you post. However, HH Health System’s No Harassment Policy, Code of Conduct, Confidential Information Policy, Standards of Behavior and The Health Insurance Portability and Accountability Act (HIPAA) apply to our employees’ behavior while on the Internet and Social Media. Violations of these and any other HH Health System policies while on the Internet or Social Media carry the same consequences as they would if the violations occurred in the workplace. Social Media should not be used in a manner that violates policy or employee obligations. For example, employees are prohibited from using Social Media to:

- Violate HH Health System’s IT resources and communication systems policies;
- Violate HH Health System’s confidentiality and proprietary rights related policies;
- Violate or otherwise engage in behavior that violates the Standards of Behavior policy;
- Circumvent or otherwise violate HH Health System’s Code of Conduct or ethics policies;
- Engage in or make comments or posts that could reasonably be interpreted as obscene, degrading, inciting violence, defamatory, culturally insensitive, maliciously false, discriminatory or harassing based on age, race, sex, religion, national origin, disability, military status, genetic information, sexual orientation, gender identity, or any other trait protected by federal, state or local law;

- Engage in unlawful harassment or discrimination based on age, race, sex, religion, national origin, disability, military status, genetic information, sexual orientation, gender identity, or any other trait protected by federal, state or local law;
- Violate any other laws or ethical standards.

Employees who violate these policies may be subject to discipline, up to and including termination of employment in accordance with HH Health System’s Fair and Just Culture approach for workplace accountability.

### **General Provisions for Responsible Use of Social Media**

HH Health System respects the right of employees to use Social Media and social networking sites and does not want to discourage employees from self-publishing and self-expression. However, employees are expected to follow HH Health System policies and guidelines set forth herein when using Social Media.

1. If you are not an official spokesperson for HH Health Systems and you make comments or generate content identifying or associating HH Health Systems, make clear that you are speaking for yourself, not on behalf of HH Health Systems and that all opinions are your own. Consider using the following disclaimer: “The postings on this site [or this content] are my own and do not necessarily represent the positions, strategies, or opinions of HH Health Systems or of any person or company affiliated or doing business with HH Health System.” At a minimum you should disclose that opinions are your own.
2. Employees may not publicly discuss patients, customers, or products outside hospital authorized communications. Employees may not post information or pictures on private; Social Media sites for educational purposes or any purpose without the express permission from an officer of HH Health System Administration and/or HH Health System Marketing.
3. Employees are prohibited from disclosing patient, proprietary, confidential, and nonpublic information to which employees have access. Such information includes, but is not limited to, patient information and x-rays, customer information, trade secrets, financial information, and strategic business plans.
4. Employees should be respectful, fair, courteous, and responsible when posting, liking, sharing, commenting, or re-tweeting information. Do not post, comment on, like, or share false information or rumors. Remember that everything you post can be preserved for years, even deleted material, and may be copied or even archived. In addition, you can be held personally liable for commentary that is considered defamatory, obscene, proprietary, or libelous by any offended party, not just HH Health System. Examples include posts or comments that are meant to intentionally harm someone’s reputation; that include slurs and derogatory terms, symbols, or photos; that threaten violence; or attacks someone or a group of people based on a protected trait including but not limited to their age, race, sex, religion, national origin, disability, sexual orientation, gender identity, or any other trait protected by federal, state or local law.
5. Review the terms of use of all sites you visit and ensure your use complies with them. Similarly, respect all copyright and other intellectual property laws including laws governing copyright, fair use of copyrighted material owned by others, trademarks and other intellectual property, including HH Health System’s own copyrights, trademarks and brands.
6. Employees cannot use social networking sites to harass, bully, threaten, or discriminate against employees, patients, or anyone associated with or doing business with HH Health System, or engage in conduct that would not be permissible in the workplace even if the conduct occurs on a home computer after work hours. Examples of such behavior include: (a) offensive, insensitive, and hate-filled posts that may constitute a hostile work environment on the basis of race, gender, or any other characteristic; (b) posting an emblem or target on the face of a person’s likeness in the midst of an online argument; (c) making racially charged, culturally insensitive, or derogatory comments about a person or group of people (d) belittling an employee’s actual or perceived sexual orientation; or (e) engaging in hurtful personal gossip unrelated to collective terms and conditions of employment, such as criticisms of an employee’s or patient’s physical appearance.
7. Employees must not post on personal blogs or other social media, including private group forums, photographs of other employees, patients, or customers without their permission. Employees cannot post privileged information, including copyrighted information or HH Health System issued documents.

8. This policy and these guidelines are not intended to preclude or dissuade employees from engaging in activities protected by state or federal law.

### **Employer Monitoring**

All content of HH Health System's IT resources and communication systems are the property of HH Health System. Employees should have no expectation of privacy whatsoever in any message, files, data, document, fax, telephone conversation, social media post, conversation or message, or any other kind of information or communications transmitted to, received or printed from, or stored or recorded on HH Health System's electronic information and communication systems.

Employees are expressly advised that HH Health System reserves the right to monitor, intercept, save, store, print, and review, without further notice, your activities using the organization's IT resources and communications systems or other equipment, including but not limited to social media postings and activities, and you consent to such monitoring by your acknowledgment of this policy and your use of such resources and systems.

Employees are also cautioned that they should have no expectation of privacy while using the Internet or Social Media regardless of the resources used to access the Internet or Social Media. Your postings can be reviewed by anyone, including HH Health System. The organization reserves the right to monitor comments or discussions about HH Health System, its employees, patients, and customers, including products and competitors, posted by anyone on the Internet or Social Media. HH Health System reserves the right to use content management tools to monitor, review, or block content on blogs that violate HH Health System rules and guidelines.

### **Contacts for Questions Regarding this Policy**

For general questions about this Social Networking Policy, including but not limited to what is considered confidential and proprietary information or to report violations, please contact the Employee Relations Specialist, Director of Human Resources, or Vice President of Human Resources.

### **Reporting Violations**

HH Health System requests and strongly urges employees to report any violations or possible or perceived violations of this Social Networking Policy or related policies to supervisors, managers, or the Human Resources Department or the Corporate Compliance hotline. Violations include discussions of HH Health System and its employees, patients, or customers, any discussion of proprietary information, and any unlawful activity related to posting on social networks. HH Health System investigates and responds to all reports of violations of these rules and guidelines and other related policies. HH Health System reserves the right to take legal action where necessary against employees who engage in prohibited or unlawful conduct, and violations may result in disciplinary action up to and including termination of employment.

HH Health System prohibits taking negative action against any Employee for reporting a possible deviation from this policy, for cooperating in an investigation, and for engaging in any protected activity on social media. Anyone who retaliates against an employee for reporting a possible deviation from this policy, for cooperating in an investigation, or for engaging in any protected activity, will be subject to disciplinary action, up to and including termination.

## **EQUAL OPPORTUNITY EMPLOYER**

HH Health System is an equal opportunity employer and values the differences each employee brings to the work place. It pledges to take the necessary action to prevent discrimination in all aspects of employment, including recruitment, hiring, compensation, training, discipline, separation from employment, and other terms and conditions of employment, because of age, race, color, religion, creed, sex, national origin, disability, veteran status, genetic information, sexual orientation/identification, or other reasons prohibited by state and federal statutes, executive orders, and regulations.

The diversity of our workforce greatly enhances our strength as a hospital and our ability to provide quality care. Therefore, we strive to recruit and retain a work force that reflects the diversity of the communities we serve. We accomplish this by attracting a diverse pool of candidates for job opportunities and encouraging all

employees to maximize their potential. In addition, we maintain an environment that is supportive of diversity. Along these lines, we remain committed to providing equal employment opportunities for all qualified employees and applicants without regard to age, race, sex, religion, national origin, disability, military status, genetic information, sexual orientation, gender identity, or any other status prohibited by state and federal statutes, executive orders, and regulations. We can only achieve our mission and vision by maintaining true diversity and ensuring a work environment that is free of any form of discrimination. This objective is each employee's responsibility, regardless of position. You can help in the following ways:

- Respect and value diversity and any differences that employees bring to the workplace.
- Become aware of and strive to correct your own biases.
- Stop others when you hear them making inappropriate comments regarding individual differences.
- Include others who may be different.
- Get to know people from other backgrounds and share experiences.
- Make an effort to understand others' points of view.
- Deal with conflicts right away instead of carrying grudges.
- Recognize each person as an individual.

## **DISCRIMINATION COMPLAINT PROCEDURE**

HH Health System is an Equal Employment Opportunity employer and will provide training to their managers. Each employee is responsible for respecting the rights of their coworkers and for assisting in the prevention of harassment through the following acts:

- Refraining from participation in, or encouragement of, actions that could be perceived as unlawfully discriminatory;
- Reporting acts of unlawful discrimination in accordance with this policy; and
- Encouraging any employee, who confides that he or she has been subjected to unlawful discrimination to report these acts in accordance with this policy.

The failure to take action to stop known discrimination or report known discrimination shall be grounds for discipline. Each manager shall be responsible for creating an atmosphere free of discrimination and for preventing acts of unlawful discrimination. This responsibility includes:

- Monitoring the work environment on a daily basis for signs that unlawful discrimination may be occurring;
- Counseling all employees on the types of behavior prohibited and the hospital's procedures for reporting and resolving complaints of unlawful discrimination;
- Stopping any observed unlawful discrimination; and
- Notifying a human resources official of any reported or suspected violations of this policy.

If an employee has a question about the hospital's policy and procedure against unlawful discrimination or the procedure to be followed in lodging a complaint, the employee should contact the hospital's Vice President of Human Resources, Director of Human Resources, or an Employee Relations Specialist.

HH Health System cannot resolve matters that are not brought to its attention. Therefore, any employee who believes that he or she has been treated in an unlawful discriminatory manner should promptly report his or her concerns to the Vice President of Human Resources, Director of Human Resources, or an Employee Relations Specialist, who in turn will ensure that a prompt investigation is conducted.

HH Health System seeks to encourage employees to express themselves freely and responsibly using established procedures. Any act of interference, retaliation, or coercion by a HH Health System employee against another employee which interferes with or discourages such free expression is itself a violation of this policy. HH Health System will not tolerate any retaliation against an employee for making a good faith complaint of unlawful discrimination or for cooperating in an investigation. If you believe that HH Health System has not met its

obligations under this policy, you should contact the Vice President of Human Resources, Director of Human Resources, or an Employee Relations Specialist.

## **EMPLOYMENT PROCEDURE**

Our employment objective is to fill job vacancies with the most qualified individuals who meet our selection criteria. Most open positions are posted on the Internet and HH Health System's Intranet for a minimum of two calendar days. If there is an abundance of qualified applicants already on file in the Human Resources Department or the applicant previously interviewed with the manager, an open position may not be posted. HH Health System will give strong consideration to qualified internal candidates who have successfully completed one year of employment in their current position and meet the requirements of the open position.

## **APPLICATION FOR EMPLOYMENT**

HH Health System expects applicants to complete the application for employment entirely, accurately, and honestly. All information submitted by an applicant must be factual. This includes the information on the employee application, the background check form, and the employee health screening form. If it is found that an applicant has misrepresented or omitted information on these forms, he or she may not be considered for employment and may be terminated if misrepresentations are discovered after an applicant is hired.

## **APPLICATION FOR RE-EMPLOYMENT**

Former employees who are rehired within ninety days of their separation date must successfully complete a drug screen and consumer/criminal background check; however, they will not be required to attend new employee orientation. They may be required to take portions of clinical orientation. These employees will retain their previous seniority date and any unscheduled absences or tardiness occurrences will be reinstated. If they are rehired into the same or similar position, they may retain their original salary. However, if they are rehired into another position, they may be treated as a new hire or transfer, whichever salary is greater.

Former employees who are rehired after ninety days of their separation date must successfully complete all pre-employment screenings. These employees are required to attend new employee orientation. They will not regain their original seniority date and will begin employment with no unscheduled absences or tardiness occurrences.

## **EMPLOYEE HEALTH SCREEN**

Employment offers are contingent upon applicants successfully completing a health screening prior to beginning employment. If applicants do not successfully pass the health screening, they will not be permitted to work.

## **CONSUMER/CRIMINAL RECORD BACKGROUND INVESTIGATION**

A successful candidate will have a complete background investigation. This background investigation includes, but is not limited to, the following: a Social Security number verification, Medicare fraud verification, prior arrest records, criminal conviction records, employment and education history, professional licensure or certification, drug test, and motor vehicle record (if required for position).

Although disqualification is possible, a previous arrest or conviction does not automatically disqualify an applicant from consideration for employment. If a criminal background report contains negative information which in whole or in part may cause HH Health System to take any adverse action, including rejecting a candidate for employment, denying a promotion, or terminating a current employee, HH Health System will provide a copy of the report to the candidate and the Consumer Federal Protection Bureau's summary of rights and wait 5 business



days before making a final decision. The candidate may challenge the information contained in the report during this 5 day waiting period.

In addition, offers of employment are contingent upon the successful completion of the background investigation. If an applicant is found to have falsified any information regarding their conviction or arrest history, the applicant will not be considered for employment, and he or she may be discharged if already employed.

#### **MINIMUM AGE REQUIREMENT**

Applicants must be eighteen years of age and have a high school diploma or GED in most positions. Refer to the individual job description for specific education requirements.

#### **EMPLOYMENT ELIGIBILITY VERIFICATION**

The Human Resources Department is responsible for verifying new employees' eligibility to work in the United States, in accordance with the Immigration Reform and Control Act. New employees must complete a Form I-9, Employment Eligibility Verification provided by the Human Resources Department and provide acceptable supporting documents within three business days after they begin employment with HH Health System. The information reported on Form I-9 will be used to determine the eligibility of the employee to work in the United States via E-Verify.

New employees are required to present the documentation to satisfy the Form I-9 requirements within three business days from the date they begin employment. In most cases this date is the employee's orientation date. If these requirements are not met in this timeframe the employee will be removed from payroll. Human Resources will accept a receipt of proof that the employee has applied for the required documents, however the original document must be produced within ninety days from the date the employee begins employment or the employee will be removed from payroll. In accordance with federal law, new employees will not be permitted to work if they fail to provide the proper documentation within a reasonable timeframe or citizenship cannot be proven via E-Verify.

No employee is authorized to state or imply that HH Health System will obtain visas or United States citizenship for alien employees or alien prospective employees.

#### **LICENSURE AND CERTIFICATION**

The Human Resources Department verifies required licensure when applicants are initially employed, when employees are transferred to positions that require licensure, and at the time of renewal. Verification of the license is maintained in the employees' personnel file in the Human Resources Department. The employee's manager will verify required certifications such as BLS, ACLS, etc. on a continuing basis.

Employees whose positions require licensure, registration, or certification are responsible, at their own expense, for keeping such licensure, registration and certification current and in effect. Employees should renew their professional license, registration or certifications in enough time to allow Human Resources to obtain verification of the renewal at the primary source. Human Resources will make every attempt to verify information prior to the expiration date; however, office closings around the holidays may prevent primary source verification for a particular day (i.e. New Year's Eve). Employees are strongly encouraged to renew their professional license/certification well in advance of the expiration date.

The complete Licensure and Certification Policy is available on the hospital's Intranet.

#### **EMPLOYMENT OF SIGNIFICANT OTHERS**

HH Health System discourages relatives and others in relationships as described below from working together in the same work area on the same shift. In addition, an employment relationship will not be permitted where a subordinate supervisory relationship exists between two relatives or others in relationships as described below.



In the event of marriage between an employee and supervisor, manager, or director in the same department, one must seek transfer to another department or another area in the department so the supervisory relationship does not exist. If a transfer cannot be arranged, the employees should decide who will resign, but in the absence of such agreement, the least senior employee should resign employment with HH Health System.

A relative, for the purposes of this policy, is defined as a spouse, common-law spouse, parent, child, sibling, grandparent, grandchild, aunt, uncle, niece, nephew, cousin, step-relative, or in-law relationship. Also covered by the prohibitions of this policy are any close personal relationships, such as between domestic partners, co-habitant or significant others, and employees who are dating or romantically involved.

In the event that two co-workers become romantically involved, the department manager has the authority to determine if the relationship is disruptive to the department. If the manager determines that is the case, one employee must seek a transfer to another department or another area in the department so that the two employees are no longer working together. If a transfer cannot be arranged, the employees should decide who will resign, but in the absence of such agreement, the least senior employee should resign employment with HH Health System.

## **NEW EMPLOYEE ORIENTATION**

HH Health System provides a comprehensive mandatory orientation for new employees. The orientation program provides employees with an introduction to the organization, its policies and procedures, and other necessary information. All new employees, volunteers, student interns, and other designated individuals should participate in the orientation program.

Employed physicians will attend a physician-specific orientation. Newly employed RNs, LPNs, and Patient Care Assistants outside of the Physician Network will also participate in a clinical orientation.

## **EMPLOYEE SELF-SERVICE/INTRANET**

During new employee orientation, new employees will be given a password to access Employee Self-Service System through HH Health System's intranet site. The Employee Self-Service allows employees to view and print present and past pay check information, change federal tax withholding, change an address, view attendance records, view benefit information, obtain tuition reimbursement and certain benefit forms, and view the Employee Handbook.

## **DEPARTMENT ORIENTATION**

Department orientation provides employees with an introduction to their department and the policies and procedures that are specific to their department. During the first week of employment, employees should be provided with a position description, department-specific policies, and uniform guidelines, if applicable. Any questions or uncertainties employees may have should be discussed with their manager or the Human Resources Department.

## **SIX-MONTH PROVISIONAL PERIOD**

New employees, including rehired and transferred employees, are classified as provisional during the six months after hire or transfer. The provisional period is an introductory time during which employees are expected to adjust to their new job, the work environment, and the organization's policies and procedures.

During the provisional period, the employee's manager will evaluate the new employee to determine whether continued employment is beneficial to both the employee and HH Health System. If the employee meets or exceeds expectations, the employee will be recommended for continued employment. However, if the employee does not meet expectations, employment may be terminated during this period at any time, without progressive action or notice. Employees who are terminated during their six-month provisional period are not permitted to appeal, but they may discuss their termination with the Human Resources Department.

## EMPLOYEE IDENTIFICATION BADGE

Employees must wear a HH Health System issued employee identification badge at all times when at work or while in hospital classes. Badges must be worn in such a manner that their picture and name is easily visible and readable on both sides. Wearing the badge at or below the waist is not permitted.

Employees are not permitted to attach anything to the badge, including stickers, decals, pins, or similar items, unless the items are HH Health System hospital-issued, issued by an academic institution, or approved by Human Resources. Employees are not permitted to wear their badge off campus when not on duty.

Employees who lose their badge will be required to purchase a replacement. There will be no charge for replacing identification badges due to name or department changes or for badges that have become unserviceable through normal usage, damaged from hospital equipment or have become old and worn.

Licensed employees must submit proof of licensure to have their name or title changed, as their name and title on their badge must match the name on their professional license. Employees are permitted one job related license or certification (no degrees) on their badge.

Employees are encouraged to get a new badge picture every 3 years. .

## CLASSIFICATION OF EMPLOYEES

Employees are assigned to one of the following classifications for benefits eligibility:

- Full-time: Regularly scheduled to work and be paid a minimum of thirty-two hours per week (.8 FTE or more).
- Part-time: Regularly scheduled to work and be paid between eight and thirty-one hours per week (.2 to .79 FTE).
- PRN with Diff: Scheduled to work as needed. Employees must work at least four-hundred hours per fiscal year. PRN with Diff employees that do not work four-hundred hours per fiscal year, or who do not meet the unit or department PRN requirements, may be moved to PRN No Diff, removed from payroll, or receive a lesser PRN differential. Employees in this category are responsible for monitoring their hours worked to ensure they maintain eligibility to remain in this employment classification. Unless the employee is paid at a flat rate of pay, PRN with Differential employees will receive a differential.
- PRN No Diff: Scheduled to work as needed, but unable to work four-hundred hours per fiscal year and generally unable to take call. PRN No Diff employees do not receive a PRN differential and are ineligible for merit increases or incentive compensation.

Information regarding benefit eligibility is outlined in the Employee Benefits Section of this handbook.

### **CATEGORIES:**

#### **PRN Category**

PRN positions are not eligible for benefits. This includes tuition reimbursement, dental & vision insurance, life insurance, disability insurance, etc. PRN employees who work an average of 30 hours per week in accordance with the Affordable Care Act may be eligible to enroll themselves and their children in a HH Health System health plan. Human Resources will notify these employees each year if they are eligible.

#### **Plus Premium Category**

Certain positions are eligible for the Plus Premium Category. Plus premium employees must be regularly scheduled to work at least thirty-six hours per week. These employees are not eligible for life, long or short term disability, or an employer contribution to their retirement plan. They are eligible to:

- participate in the health plan at a higher premium;
- participate in the dental and vision plans at the regular employee premium;

- participate in the tuition reimbursement program;
- participate in the flexible spending plan;
- participate in the 401(k) Retirement Plan and the 457(b) deferred compensation plan, but will not receive any employer hospital contributions;
- earn 72 hours of ETO per year: prorated if transferred midyear; and
- receive a merit increase on their base rate of pay. An employee's base rate of pay excludes all forms of premium pay, such as their Plus premium, shift differential, overtime pay, call pay, etc.).

#### **Choice 10 Category**

Certain positions are eligible for the Choice 10 Category. Choice 10 employees must be regularly scheduled to work at least thirty-six hours per week. These employees are not eligible for long or short term disability, or an employer contribution to their retirement plan. They are eligible to:

- participate in the health plan at a higher premium;
- participate in the dental and vision plans at the regular employee premium;
- participate in the tuition reimbursement program;
- participate in the flexible spending plan;
- participate in the 401(k) Retirement Plan and the 457(b) deferred compensation plan, but will not receive any employer hospital contributions;
- earn 80 hours of ETO per year if less than three years of service, 120 hours of ETO if more three years or more service
- receive a merit increase on their base rate of pay. An employee's base rate of pay excludes all forms of premium pay, such as their Plus premium, shift differential, overtime pay, call pay, etc.).

#### **Weekend Category**

Certain positions are eligible for the Weekend Category. Weekend only employees must be regularly scheduled to work least 24 hours per week, and some units may require the employee to have a specific amount of applicable experience. Each Service Line Director will determine what constitutes "weekend only" shifts for their eligible areas of responsibility provided that the schedule includes two of the following days: Friday, Saturday, and Sunday. These employees are eligible to:

- participate in the full benefits package as defined by their authorized hours;
- receive a merit increase on their base rate of pay. An employee's base rate of pay excludes all forms of premium pay, such as their weekend differential, shift differential, overtime pay, call pay, etc.)

All ETO hours taken are paid at the employees' base rate of pay. Employees should check with their manager regarding eligible weekend only schedules specific to their department or unit.

#### **CRNA**

CRNAs or Nurse Anesthetists authorized to work 36 hours or more per week (.9 FTE) are eligible for additional ETO accrual in addition to the regular full-time employee benefit package.

#### **Physician**

Physicians are medical doctors who are employed by HH Health System as full-time, part-time, or PRN employees. They are eligible for specific benefits as noted in their letter of agreement.

#### **Director**

Employees classified as Directors are eligible for the following benefits in addition to the regular full-time employee benefit package.

- Additional ETO accrual
- Additional life insurance

### **Executive Staff**

Positions considered at the executive staff level are Vice Presidents, as well as executive officers such as the Chief Executive Officer, Chief Operating Officer, Chief Information Officer and Chief Nursing Officer.

For details concerning the above listed categories, see your manager or contact the Human Resources Department.

### **Wage and Hour Classification**

In addition to the foregoing categories, employees are designated as either of the following:

- Non-Exempt (hourly)- An employee who is eligible for overtime pay pursuant to the provisions of applicable federal and state wage and hour laws
- Exempt (salaried)- An employee who is exempt from overtime pay pursuant to the provisions of applicable federal and state wage and hour laws

## SECTION II EMPLOYEE RELATIONS AND PRACTICES

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### NO-HARASSMENT POLICY

HH Health System is committed to maintaining a work environment that is free from harassment where employees at all levels are able to devote their full attention and best efforts to the job. Harassment, either intentional or unintentional, has no place in the work environment and in many instances is prohibited by law. Accordingly, it is and shall continue to be the policy of HH Health System that its employees and their work environment shall be free from all forms of inappropriate and/or unlawful harassment and intimidation. It is the policy of Huntsville Hospital to provide equal opportunity for employment and advancement of employees without regard to on age, race, sex, religion, national origin, disability, sexual orientation, gender identity, handicap, military status, genetic information, socioeconomic background, or any other trait protected by federal, state or local law whether the harassment is caused by a fellow employee, supervisor, manager, contractor, physician, student, or other person.

#### Sexual Harassment

It is to be clearly understood that persons of either sex can be responsible and held accountable for sexual harassment. Proper decorum in speech and interpersonal relationships shall be observed at all times. Sexual harassment is unacceptable conduct and will not be tolerated. All employees are responsible for ensuring that the workplace is free from all forms of sexual harassment. HH Health System prohibits:

- Unwelcome sexual advances; requests for sexual favors; and all other verbal or physical conduct of a sexual nature or otherwise offensive nature, especially where submission to such conduct is made either explicitly or implicitly a term or condition of employment; submission to or rejection of this conduct is used as the basis for decisions affecting an individual's employment; or the conduct has the purpose or effect of creating an intimidating, hostile, or offensive working environment.
- Offensive comments, jokes, innuendo, and other sexually oriented statements.
- Uninvited touching or other physical contact.

Examples of sexual harassment in violation of this policy include, but not limited to:

- Threatening adverse employment actions if sexual favors are not granted;
- Promising preferential treatment in return for sexual favors;
- Unwanted and unnecessary physical contact;
- Excessively offensive remarks, including unwelcome comments about appearance, obscene jokes or other inappropriate use of sexually explicit or offensive language;
- The display in the workplace of sexually suggestive objects or pictures which create an intimidating or hostile work environment;
- Unwelcome sexual advances by non-employees when these advances are condoned, either explicitly or implicitly by HH Health System or its managers, supervisors, or agents;
- Touching in a sexually suggestive manner;
- Uninvited touching, such as placing a hand on one's shoulder or stroking one's hair;
- Requests for sexual favors;
- Repeated requests for dates;
- Using one's position to request a sexual favor or a date in place of an employment reward;
- Touching in a sexually suggestive manner
- Violating personal space;
- Sexual assault;
- Lewd or unwelcome jokes, threats, whistling, or slurs;

- Unwanted and offensive letters, pictures, drawings, e-mails, voice mails, texting, or other communications to include showing or forwarding inappropriate pictures or text messages via cell phone or any other form of social media
- Sexual gestures and advances;
- Leering or staring;
- Gossip or questions regarding one's sex life or body;
- Sitting or gesturing sexually
- Obscene language

### **Other Forms of Prohibited Harassment**

In addition to sexual harassment, other forms of unlawful harassment are also strictly prohibited. Thus, the prohibitions, remedies, and procedures described in our policy are applicable to all forms of unlawful harassment that may occur in the workplace. Examples of other forms of harassment covered by our policy include derogatory comments regarding age, race, religion, culture, creed, disability or handicap, ethnicity, gender, gender expression, gender identity, sexual orientation, socioeconomic status, genetic information, and military status which tends to create an intimidating, hostile, or offensive work environment and is deemed inappropriate by HH Health System.

### **Prevention Procedure**

HH Health System will ensure that a copy of this policy and procedure is conspicuously posted throughout the workplace and on a periodic basis; the organization will provide training to supervisors and managers regarding this policy and their responsibilities under it. Each employee is responsible to respect the rights of their coworkers and to assist in the prevention of harassment through the following acts;

- Refraining from participation in, or encouragement of, actions that could be perceived as harassment;
- Reporting acts of harassment in accordance with this policy; and
- Encouraging any employee, who confides that he or she is being harassed, to report these acts in accordance with this policy.

The failure to take action to stop known harassment or report known harassment shall be grounds for discipline and each supervisor and member of management shall be responsible for creating an atmosphere free of discrimination and harassment, sexual or otherwise and for preventing acts of harassment. This responsibility includes:

- Monitoring the work environment on a daily basis for signs that harassment may be occurring;
- Counseling all employees on the types of behavior prohibited and the organization's procedures for reporting and resolving complaints of harassment;
- Stopping any observed acts that may be considered harassment, and taking appropriate steps to intervene, whether or not the involved employees are within the supervisor's line of supervision; and
- Notifying HH Health System's designated Human Resources official or any other member of upper management immediately of any reported or suspected violations of this policy.

If an employee has a question about HH Health System's policy and procedure against discrimination or discriminatory harassment or the procedure to be followed in lodging a complaint, the employee should contact Huntsville Hospital's Vice President of Human Resources, Director of Human Resources or an Employee Relations Specialist in the Human Resources Department.

### **Complaint Procedure**

HH Health System cannot resolve matters that are not brought to its attention. Therefore, everyone is responsible for and will be held accountable for accomplishing our goal of harassment-free workplace. Any employee who experiences job related harassment based on sex, race, or other impermissible factors should promptly report his or her concerns to HH Health System's designated Human Resources official. Furthermore, any employee, contractor, supervisor, or manager who becomes aware of any possible unlawful harassment must

also report the incident to the Huntsville Hospital's Vice President of Human Resources, Director of Human Resources, or an Employee Relations Specialist in the Human Resources Department. The Human Resources Department will ensure that the hospital conducts a prompt investigation with due regard for the privacy and confidentiality of all parties involved consistent with completing a thorough and complete investigation. If, after conducting an investigation, the organization determines that an employee is guilty of harassing another employee in violation of this policy, appropriate disciplinary action will be taken against the offending employee, up to and including termination of employment.

#### **No Retaliation**

This no-harassment policy seeks to encourage employees to express themselves freely and responsibly using established procedures. Any act of interference, retaliation, or coercion by a HH Health System employee against another employee which interferes with or discourages such free expression is itself a violation of this policy. HH Health System will not tolerate any retaliation against an employee for making a good faith harassment complaint or for cooperating in a harassment investigation. If you believe that HH Health System has not met its obligations under this policy, you should contact the Vice President of Human Resources, Director of Human Resources or an Employee Relations Specialist in the Human Resources Department.

**Violations:** Any violation of policy that is determined to be a deliberate act with malicious intent, a knowing violation or repetitive in nature is subject to disciplinary action up to and including discharge.

### **WORKPLACE VIOLENCE and WEAPONS POLICY**

HH Health System is committed to providing a safe and secure workplace and an environment free from physical violence, threats and intimidation by persons in our facilities and on our premises. This applies to all employees, contractors, physicians, vendors, patients, family members and/or visitors. Violence by anyone directed against health care workers or others in the workplace compromises a culture of safety.

Employees are expected to report to work to perform their jobs in a nonviolent manner. HH believes that physical violence, threats, bullying, and intimidation are all forms of serious misconduct that undermines the integrity of the employment relationship.

Conduct and behaviors of physical violence, threats, bullying, or intimidation by an employee may result in disciplinary action up to and including discharge. In addition, conduct and behaviors of physical violence, threats or intimidation by non-HH employees may result in criminal and legal action, including but not limited to trespass from HH Health System premises. Furthermore, HH does not allow nor condone employment-based retaliation against anyone who, in good faith, brings a complaint of workplace violence or who speaks as a witness in the investigation of a complaint of workplace violence.

#### **Employee Responsibilities**

Employees should conduct themselves in such a way to reduce the possibility of any conflicts or acts that may create a violent, abusive or unsafe workplace. Employees should notify management of workplace violence incidents, which have occurred both on and off-site if there is the potential of impacting the work environment. Employees should remove themselves from any situation that may result in workplace violence and notify Security immediately. This means that if confronted with a potential situation involving workplace violence, an employee should try to retreat from the situation and report to Security and management.

The complete HH Health System Workplace Violence policy can be located on HH Health System's Intranet.

#### **Weapons on HH System Property**

HH Health System takes measures to secure its buildings and facilities by requiring employees to use key cards and employing security guards. Patients and visitors are often accompanied by hospital personnel and typically are required to register their presence. Therefore, while on HH Health System's premises, no person may knowingly possess or carry a firearm inside any building or facility.

The complete Weapons on HH System Property Policy can be located on HH Health System's Intranet.

## **Violations**

Violations of these policies that are determined to be a deliberate act with malicious intent, a knowing violation or repetitive in nature is subject to disciplinary action up to and including discharge.

## **DRUGFREE WORKPLACE POLICY**

HH Health System is committed to protecting the safety, health, and well-being of all employees, patients, and other individuals in the workplace. We recognize that alcohol abuse and drug use may have a negative impact on our standards of performance. Therefore, HH Health System has established a drug-free workplace program that balances our respect for individuals with the need to maintain an alcohol and drug-free work environment. We further recognize that alcohol abuse and drug use may occur, and we encourage our employees to voluntarily seek help for their problem. Any individual who conducts business for HH Health System or is conducting business on the organization's property is covered by our drug-free workplace policy. This policy includes, but is not limited to all employees, contractors, volunteers, and interns and applies during all working hours, on call hours, and all time on organization property.

## **Prohibited Behavior**

It is a violation of our drug-free workplace policy to use, possess, trade, or sell, alcohol, illegal drugs, or intoxicants.

## **Guidelines**

Prescription and over-the-counter drugs are permitted when taken in standard dosage and/or according to a physician's prescription. Any employee taking prescribed or over-the-counter medications will be responsible for consulting the prescribing physician and/or pharmacist to ascertain whether the medication may interfere with safe performance of his/her job. If the use of a medication could compromise the safety of the employee, fellow employees or the public, it is the employee's responsibility to follow appropriate Human Resources policies regarding ETO, FML, etc. to avoid unsafe workplace practices.

The illegal or unauthorized use of prescription drugs is prohibited. It is a violation of our drug-free workplace policy to intentionally misuse and/or abuse prescription medications. Employees are not allowed to work while they are impaired and each situation is reviewed by Human Resources and the employee's manager to decide whether to conduct a drug screen for cause.

## **Drug Testing**

To ensure the accuracy and fairness of our testing program, all testing will be conducted according to Substance Abuse and Mental Health Services Administration (SAMHSA) guidelines where applicable. Each employee, as a condition of employment, will be required to participate in pre-employment and for cause testing upon request of their manager or Human Resources. Additionally, employees who seek treatment for a work related accident that involves equipment, a vehicle, or requires direct medical treatment will require a post-accident drug test. Any employee who tests positive will be immediately removed from duty.

## **Suspected Drug Diversion**

If a staff member suspects that a controlled substance has been diverted or is missing from its appropriate use, or observes impairment, it is their responsibility to report it to their immediate supervisor, Human Resources, or the Compliance Alert Line at 1-800-442-0959. If a controlled substance is missing and cannot be accounted for, an employee may be asked to submit to drug testing.

Controlled substances include narcotics and other medications at risk for diversion. Examples of drug diversion include but are not limited to: pocketing medication, improperly disposing of medication, removing or taking medication, or falsifying the dispensing of a controlled substance



### **Consequences**

One of the goals of our drug-free workplace program is to encourage employees to voluntarily seek help with alcohol and/or drug problems. If, however, an individual violates the policy, the consequences are serious. In the case of applicants, if he or she violates the drug-free workplace policy, the offer of employment can be withdrawn. The applicant may reapply for employment after one year, and if rehired, the applicant must successfully pass a pre-employment drug test.

Employees are not permitted to report to work while impaired due to on or off-duty use of alcohol or other drugs. If employees violate the policy, they may be given the opportunity to obtain treatment for alcohol and/or drug problems. If they successfully complete the recommended treatment and are fully able to perform the functions of their position, they may be allowed to return to employment. In such cases, the employee must sign and abide by the terms set forth in a Return-to Work Agreement as a condition of continued employment. Professional employees with licensure restrictions will be considered on a case-by-case basis. Nothing in this policy prohibits the employee from being disciplined or discharged for other violations and/or performance problems.

### **Searches**

Entering the organizational property constitutes consent to searches and inspections. If an individual is suspected of violating the drug-free workplace policy, he or she may be asked to submit to a search or inspection at any time. Searches can be conducted of pockets and clothing, lockers, wallets, purses, briefcases, lunchboxes, desks, work stations, vehicles, and equipment.

### **Assistance**

HH Health System recognizes that alcohol abuse, drug abuse, and addiction are treatable illnesses. We also realize that early intervention and support improve the success of rehabilitation. To support our employees, our drug-free workplace policy:

- Encourages employees to seek help if they are concerned that they may have a drug and/or alcohol problem.
- Offers all employees assistance with alcohol and drug problems through the Employee Assistance Program (EAP).
- Allows the use of accrued ETO and/or FML while seeking treatment for alcohol and other drug problems.

### **Notification of Convictions**

Any employee who is convicted of a criminal drug violation must notify their manager and Human Resources in writing within five calendar days of the conviction. HH Health System will take appropriate action within 30 days of notification. Federal contracting agencies will be notified when appropriate.

### **Confidentiality**

All information received by the organization through the drug-free workplace program is confidential communication. Access to this information is limited to those who have a legitimate need to know in compliance with relevant laws and management policies.

## **EMPLOYEE DRESS, UNIFORM AND APPEARANCE POLICY**

All staff identifying themselves as employed by Huntsville Hospital System, whether they are clocked in or attending on-campus classes will adhere to this policy while on or off facility premises. This includes students, allied health professionals, physicians, and contractors.

Those individuals representing Huntsville Hospital System have a responsibility to not only provide quality health care to our customers, but to look the part as well. You are expected to demonstrate professionalism and good judgment at all times concerning make up, clothing, personal hygiene, and appearance. Clothing must fit, be clean and pressed, be appropriate for your size, and not drag the floor. Clothing and jewelry which may pose a

safety hazard or which could interfere with or detract from the delivery of high quality patient care or other business functions of the hospital will not be permitted. We require that you observe the following specific standards regarding personal appearance and neatness while performing your duties:

**Identification badges** must be worn by employees at all times when at work or in a class or meeting on campus. The badge picture and name on the badge must be visible, readable, clean, and show no damage. Employees cannot wear the badge at or below the waist or attach anything to the badge, including stickers, decals, pins, or similar items, unless the items are HH Health System hospital-issued, issued by an academic institution, or approved by Human Resources. Employees should not wear their badge off campus when not on duty. Employees are encouraged to have a new badge picture taken and a new badge made every three years.

**Masks/face coverings-** Regardless of your vaccination status, mask and face coverings must be worn in all clinical settings and indoor public spaces, including all administrative areas, lounges, offices, elevators, break rooms, and anytime you are in a public area of the hospital or clinical area of the hospital. Masks should be worn as soon as you enter the building. Staff working in clinical areas should wear a surgical mask or the equivalent for general use. The CDC provides information regarding levels of protection and which masks are designed and tested to ensure protection. Staff working in non-clinical areas and off campus buildings (the Plaza, the Cochran Center, Physician Offices, etc.) must maintain social distance and wear a mask or face covering unless in a private room or private office. Mask and face coverings must be neat, clean and inoffensive. Mask and face coverings with slogans, words, or pictures are not permitted. Acceptable masks and face coverings include solid colors or patterns; HH logo or HH theme; hospital issued; and team sports or school logos. Cartoon or child themed masks or face coverings may be worn in pediatric areas only. Employees cleared to return to work by Employee Health after a positive COVID-19 test must wear a procedural mask at all times and eat and break alone for up to ten days.

The mask policy may be revised by HH Health System from time to time as an effort to implement mitigation procedures. Please refer to the latest Mask policy on pulse for additional details.

**Personal hygiene** is very important. Showering and the use of antiperspirant or deodorants are required. Strong perfume, aftershave, and scented lotions are not permitted. All fragrances are discouraged.

**Smoking/Tobacco Products:** Employees who use tobacco products must eliminate smoke odor from clothing, skin, and breath while at work. If you have a smoke/cigarette smell on your person or clothes while at work, you may be sent home to change your uniform or clothes and eliminate the smell before returning to work.

**Hair** is to be clean and contained in such a manner that it does not come in contact with patient or visitors or interfere with patient care. Natural or neutral hair is encouraged. Mainstream hairstyles such as fades are approved. Hair colors such as blue, green, or purple are not permitted. Unconventional hairstyles that would not be reasonably accepted as cultural norms or be offensive to the customers are not permitted. When providing patient care hair should not restrict vision.

**Hats and sun visors** are not permitted unless they are issued by HH Health System, face forward, and are in good condition.

**Contact lenses** or tinted lenses must not be distracting.

**Mustaches, beards, and goatees** are permitted but must be neatly trimmed, clean, and not present a bushy or uncombed appearance. Mustaches must not extend over the lip.

**Fingernails** are to be kept clean and cannot exceed  $\frac{1}{4}$  inch from the tip of the finger. Nail polish, if allowed in the department or unit, must not be chipped or cracked. HH Health System reserves the right to identify any nail product of any kind as inappropriate for use. Extreme color, nail art, and nail bubbling are not permitted. Artificial nails (i.e. acrylic/gel overlays, acrylic/gel nails, wraps, tips, shellac polish, powder gel, jam berry, stones, silk, fiberglass, extensions, UV gel sculpted or cured, crackles and any nail or polish that requires "curing" under a

light and/or if the polish/nail product cannot be removed within 30 seconds with acetone (30 seconds per finger), and nail strengthener or hardener that is not removable by acetone) are not permitted if the employee has direct contact with patients to include direct physical contact with patients during exams, procedures, treatments, nursing care, and registration of patients. It is also not permitted if the employee has no direct patient contact but cleans the patient's environment, prepares or handles equipment, handles supplies or linens for patient use, prepares or handles medications or blood products for patient use, transports patients, is employed by Food & Nutrition Services in any capacity, or is physically based in a clinical environment such as a Health Unit Assistant on a nursing unit or clinical department. Evaluation of potential patient contact should take into consideration what sort of contact is usual as well as what contact is possible in the performance of the job.

**Earrings** must not be larger than 1 inch in diameter or length for clinical employees and 2 inches in diameter or length for non-clinical employees.

**Visible piercing** (other than earrings) is not permitted. This includes tongue piercing and forking, eyebrow piercing, noticeable spacers/large holes in the ear lobe, (no gages), noticeable nose piercing, and any other piercing deemed as distracting. One very small piercing is acceptable on the outside area of the nose as long as it is not offensive. Septum piercings are strictly prohibited.

**Pins** are permitted if they are HH Health System issued, issued by academic institutions, or approved by Human Resources. Employees may wear up to two pins on their lapel or through the slot at the top of their badge.

**Tattoos** - Employees who have a visible tattoo that could reasonably be considered degrading, offensive, or demeaning to patients, family members, co-workers, or management must have the tattoo covered at all times while on health system property. Tattoos on the neck and face are not permitted. Employees will be required to cover a tattoo if a patient complains about it while they are being cared for. Department Directors have the authority to ask employees to cover tattoos if they feel the tattoo is extreme or distracting. In addition, extreme body altering and branding must not be visible.

**Shirts** must be well-maintained, un-faded, and have no inappropriate, political, or offensive wording or pictures. Shirts must not be revealing, have plunging necklines, or ride up to expose back or midriff when arms are extended. It is not permissible to wear T-shirts (long or short sleeve) as a primary outerwear garment or to have undergarment T-shirt tails exposed. Sweatshirts with hospital/department logo are permitted. Wellness Center, Sports Center and Physical Therapy department employees may wear department logo t-shirts. Undergarments must be concealed and worn at all times.

**Sleeves** - Clinical personnel must wear attire with sleeves. Non-clinical personnel may wear sleeveless attire as long as it is in good taste and undergarments are covered. Lingerie straps, spaghetti straps, indented armholes, cut-off sleeves, and racer back tops are not permitted.

**Pants** must fit appropriately, look professional, and extend to mid-calf. Stirrup pants, bike shorts, sweat pants, and skorts are not permitted. Spandex and parachute material is not permitted with the exception of the Wellness Center, Sports Center and Physical Therapy department, who may wear department issued wind suits. Denim material in colors other than blue is acceptable for pants, but it must not be excessively faded or "acid-washed." Scrub jogger style pants must be loose fitting, at least ankle length, and socks/hosiery are required.

**Leggings, hosiery, or tights** are permitted if worn under a dress, skirt, or top (worn as a dress) where the length is no shorter than 3 inches above the top of the knee. If wearing a high-low top, both front and back of top cannot be shorter than 3 inches above the top of the knee.

**Shorts** - Wellness Center, Sports Center, Outpatient Physical Therapy, Plant Operations grounds crew, hospital couriers and valets, and employees who work on the loading docks are approved to wear shorts, but they should be no shorter than three inches above the top of the knee.

**Shoes** must be worn at all times and should be clean and in good condition. They should match or complement the uniform or outfit. Employees conducting business in an area that treats, touches, or interacts with patients should wear close-toed shoes, to include shoes without holes on the top or side of the shoe (e.g. croc shoes). Open-toed shoes are acceptable in non-clinical areas. Employees going to the Employee Pharmacy or Employee Health for personal reasons may wear shoes appropriate for their work area. Five finger shoes, flip-flops, or slide sandals are not permitted in any area. A flip flop is defined as a sandal made of any material with a strap between the toes that has no back. A slide sandal has a strap(s) that does not exceed beyond the ball of the foot, with an open toe, and no back or ankle strap (no flip flop noise). If your department has safety restrictions you must follow those guidelines.

**Shoe covers** and booties cannot be worn outside of your department or unit, to include the cafeteria.

**Exceptions**

Requests for an exception to this policy for medical, religious, or cultural beliefs, or questions regarding accommodations, should be directed to the Human Resources Department. Requests will be considered and reviewed on a case-by-case basis. Questions and clarifications should be directed to the Human Resources Department. Department managers are permitted to adopt a stricter policy for their individual departments if they deem necessary. All department addendums should be approved by Human Resources. Throughout the course of the year, the organization may choose to allow certain attire outside this policy on certain days for special events.

**Uniforms Guidelines**

Huntsville Hospital System has a distinct and detailed requirement for scrubs and uniforms. Madison Hospital has a separate and distinct scrub and uniform policy. Employees who change into required scrubs once on campus may wear clothing outside this policy to and from work but must not wear a badge or represent themselves as employees while not dressed professionally for work.

**HUNTSVILLE HOSPITAL SYSTEM UNIFORM GUIDELINES**

<b>Licensed Nurses</b> All Departments: ED, Wound Care, Outpatient Medical, CHF, Cardiac Rehab, Pain Clinic, Infection Control,	<b>Navy or White Scrubs</b> Outerwear- <i>Navy</i> or White Scrub Jacket or White Lab Coat All <i>Navy</i> or All White
<b>Patient Care Assistants &amp; Technicians</b> All Technicians in ancillary departments including HC & PN Positions include: Transporters / ED Tech / Pharmacy Tech Telemetry Tech / EEG Tech / EKG Tech / Therapy Tech Hearing Screener / Birth Certificate Clerk / Medical Assistant Medical Records Tech / CV Tech	<b>Pewter Scrubs (dark grey)</b> Outerwear- <i>Pewter</i> Scrub Jacket
<b>Health Unit Assistants</b>	If working as an HUA: <b><i>Pewter Grey</i></b> (dark grey) Scrubs or Business Attire with <i>Pewter Grey</i> Scrub jacket If working as a Technician: <i>Pewter Grey</i> Scrubs Outerwear- <i>Pewter</i> Scrub jacket
<b>Laboratory</b>	<b>Black Scrubs</b> Outerwear- <i>Black</i> Scrub jacket
<b>All disciplines in Procedural Areas:</b> Departments include: Surgical Services, Cath Lab, &	<b>Ceil Blue Scrubs</b> Outerwear- <i>Ceil Blue</i> Scrub jacket or White Lab Coat
<b>Case Managers, Documentation Specialist &amp; Lactation Consultants</b>	<b>Navy Scrubs</b> or Business Attire with White Lab Coat Outerwear- <i>Navy</i> Scrub jacket or White Lab Coat

<b>Clinical Professionals whose job requires license or credential:</b> Positions include: Pharmacist / Pharmacy Intern / Respiratory Therapist / Physical, Occupational and Speech Therapist Licensed Physical Therapy Assistant / Imaging Technologist Cat Scan Technologist / Ultrasound Technologist / Nuclear Medicine Technologist / MRI Technologist / Social Worker Child Life Specialist / Exercise Physiologist /Clinical Dietitian	<b>Caribbean Blue Scrubs</b> or Business Attire (with Department approval) with White Lab Coat Outerwear- <i>Caribbean Blue</i> Scrub Jacket or White Lab Coat
<b>Advanced Nurse Practitioner, Physician Assistant &amp; CRNA</b>	<b>Light Grey Scrub</b> or Business Attire with White Lab Coat Outerwear- <i>Light Grey</i> Scrub jacket or White Lab Coat
<b>Registration Services</b>	<b>Hunter Green</b> scrub top with HH Registration logo and black dress or Scrub pants. Outerwear-HH approved <i>black</i> jacket with logo
<b>Physician Network &amp; The Heart Center</b> Positions-Physician Office Rep / Scheduler	<b>Teal Scrubs</b> , Teal Sweatshirt w/logo Outerwear- <i>Black</i> jacket w/logo
<b>Couriers</b>	<b>Burgundy Polo</b> with HH logo. <i>Khaki</i> pants or <i>Khaki</i> colored Denim
<b>Plant Operations Department</b>	<b>Dark Green Polo</b> with HH logo. <i>Khaki</i> pant or <i>khaki</i> colored Denim
<b>Environmental Services Department (HHS provided)</b>	<b>Grape Scrubs</b> or <i>Navy Blue</i> Polo and <i>Khaki</i> pant or <i>Khaki</i> colored denim Outerwear-Grape Scrub jacket
<b>Food Services Department (HHS provided)</b>	<b>All positions wear Black pants:</b> Cashier & Grab n Go-Yellow button-up, Hosp. Assistants & Call Center – <i>Burgundy</i> button-up shirt Catering- <i>Black</i> button-up, Servers & Cooks- <i>Black</i> or <i>White</i> T-Shirt with <i>Black</i> Chef Coat
<b>Security Department</b>	Utility Staff- <i>Navy Blue</i> button-up (can wear blue utility pant) Security Officers- <i>Khaki</i> Shirt with <i>Navy</i> Pants Dispatchers, techs, drivers- <i>Navy</i> Polo and <i>Khaki</i> Pants Valet- <i>Maroon</i> Polo with <i>Black</i> Pants (can wear shorts)
<b>Trauma Team</b> As designated by Trauma Surgeons	<b>Red Scrubs</b> Outerwear-Red Scrub jacket or White Lab Coat
<b>Physicians</b>	<b>Dark Green Scrubs</b> -Exclusive designation for Physicians Only
<b>Ancillary/Non Clinical Areas</b> Human Resources, Corporate University, Accounting, Patient Accounting, Marketing, Information Technology, Women’s Center, Best Start	<b>Business Attire</b>
<b>Leadership</b>	<b>Business Attire or Clinical Professional Scrub Color</b> with closed toe shoes while in department
<b>Materials Management (HHS provided)</b>	<b>Wine Scrubs</b>

### Uniform Clarifications for Huntsville Hospital:

#### Scrubs

- Scrubs may have colored trim.
- Scrubs with prints are ONLY allowed in PICU, Pediatrics, Pediatric ED, St. Jude, Kids Care, and Physician Network’s Pediatric practices-these must be kid-friendly and coordinate with solid pants based on department scrub color.
- Not permitted for wear by employees in Non-clinical areas unless specifically approved in this Policy.
- Scrubs may be embroidered with Dept. name, Physician Practice name or HH or Heart Center logo.
- As long as you wear the correct color, you may purchase your scrubs wherever you like. You do not have to use Uniform Center, Parkway Scrubs, or the Foundation uniform sale.
- A color grid is posted on Pulse. However, you do not have to use this grid as long as the color is correct.
- Scrub jogger style pants must be loose fitting, at least ankle length, and socks/hosiery are required.

**Hospital approved black and navy jackets and vests**

- Hospital approved black jackets and vests with department or practice name/Logo and/or employee name and position title can be worn with scrubs. Hospital approved navy jackets with department or practice name/Logo and/or employee name and position title can ONLY be worn by licensed nurses who are required to wear navy scrubs. These can be purchased at the Uniform Center, Parkway Scrubs, and the Foundation Uniform sale.
- Employee name and position title is not required.

**Undergarments for scrubs**

- Long-sleeve undershirts are permitted underneath the scrub tops in solid coordinating colors. Burnouts are acceptable.
- Undergarment shirts must be tucked into pants or skirts and not extend below scrub top if scrub is worn outside of pants or skirt.

**Sweatshirts**

- Crew neck sweatshirts are permitted in place of scrub top, but they must match designated scrub color and must have the department or practice name/Logo and/or employee name and position title embroidered on them.
- Zippers or hoods are not permitted.
- Employee name and position title is not required.

**Scrub Hats**

- Cannot have any logo on them, including sport teams.

## Madison Hospital has a separate and distinct Dress & Uniform Policy

### MADISON HOSPITAL UNIFORM GUIDELINES

<b>Clinical Professional, Nursing</b>	<b>Olive with Black Insets, solid White or solid black Scrub Tops Olive Scrub Pants</b> , Undershirts must be grey, white, or black Outerwear-Lab coats may be white, olive or black. Jackets must Be hospital approved black jackets.
<b>Clinical Professional, Case Management-attire is the same as Clinical professional nursing</b>	Prof. attire acceptable on Wed and Fri. (All case mgrs. Must be in Prof. attire on these 2 days or all must be clinical prof. attire.
<b>Clinical Professional, Pharmacists, Respiratory and Physical Therapists, Imaging Technologists, Medical Technologists</b>	<b>Pewter (dark grey)</b> scrub tops and black or pewter scrub pants. Outerwear-Pewter or black. Jackets must be hospital approved Black jacket.
<b>Clinical Support:</b> Health Unit Assistants, Patient Care Assistants, OR, Lab, Imaging, ER and Pharmacy Technicians	<b>Khaki or Black</b> scrub pant and scrub top. Undergarments must Be white or black. Outerwear Lab Coats may be khaki or black. Jackets must be hospital approved black jackets. Outerwear-Khaki or Black trim), Khaki scrub jacket
<b>Information Technology</b>	<b>Black</b> ¾ or long sleeve button down or polo shirt with Madison Madison Hospital logo. <b>Khaki pants</b> . Undershirts white or back.
<b>Environmental Services</b>	<b>Brown</b> scrub top. Brown ¾ or long sleeve shirt or polo shirt with Madison Hospital logo. <b>Black pants</b> . Undershirts must be white, Black or brown. Outerwear-hospital approved black jacket.
<b>Plant Operations</b>	<b>Khaki and Blue uniforms</b> provided by contract with Cintas. Undershirts must be white or khaki.
<b>Greeter</b>	<b>White shirt</b> with navy blazer, red vest, and khaki pants.
<b>Food &amp; Nutrition</b>	<b>Chef/Cooks-White or black chef coat and black pants.</b> <b>Support Staff-Taupe shirt</b> , long or short sleeved, button down, Polo style, or scrub top and <b>black apron</b> with Madison Hospital Logo. <b>Black pants.</b> <b>Coordinators-Blue shirt</b> , long or short sleeved, button down, Polo style and <b>black pants.</b> <b>Manager-Burgundy shirt</b> with long or short sleeves. Undergarments must be white.
<b>Registration</b>	Hunter Green Scrub Top w/Logo. Black dress pants or black Scrub pants. Must be ankle length. Undershirts must be solid Black or match scrub top. Outerwear –approved Black Jacket
<b>Vein Center</b>	<b>Teal Scrub top</b> with <b>black scrub pants</b> . Black lab jacket. Outerwear-Hospital approved black jacket.
<b>Clinical Professional, Advanced Practice CRNP and CRNA</b>	<b>Light Grey</b> or black scrub top with <b>light grey scrub pants</b> . Outerwear lab coats may be light grey, white, or black. Undershirts must be white, grey, or black. Jackets must be hospital approved black jackets.
<b>Additional Madison Hospital guidelines:</b>  1. No badge lanyards 2. No open toed shoes in any area 3. Tattoos of any kind must be covered at all times 4. No Capri or cropped pants 5. No denim material of any color 6. No false lashes with extreme length/thickness and/or embellishments (i.e. unnatural colored tips, jewels, etc.)	The entire Madison Hospital Dress & Appearance policy is located on Pulse and in the Orientation Resource Book.



## ATTENDANCE POLICY

HH Health System recognizes the need for an attendance policy that balances the care and safety needs of patients and co-workers with employees' personal needs. Although it is necessary to provide a system that will provide employees with flexibility to balance work and home demands while maintaining appropriate staffing, a pattern of absences reflects a lack of dependability. When that occurs, corrective action, including counseling and/or discipline, may be necessary. Other opportunities for improvement include a change in shift schedules, the reduction in the number of authorized work days, the need for a leave of absence, or other such measures. Operational and scheduling needs of particular departments may require additional attendance and punctuality standards. Employees newly hired or transferring to a department should be told their department's specific attendance and punctuality policy during department orientation.

Employees who are scheduled to work and call-out with an unscheduled absence on a day or days that coincide with a previous request for time off that was denied may be subject to disciplinary action up to and including immediate discharge of employment when clear deceit is verified. This includes employees who call-out and it is discovered that the employee is working another job, went on vacation, etc.

### Unscheduled Absences

An unscheduled absence occurs when an employee is not available for the assigned work schedule without prior approval regardless of the reason. It includes time away from work for a complete or partial (1/2) shift. Absences may be considered scheduled if an employee gives their manager a 24 hour advance notice and the manager approves the absence. If the manager does not approve the absence, the employee may receive an unscheduled absence. If the department allows shift trading, the manager may define an absence as scheduled if the employee finds an acceptable replacement for the shift. To be acceptable, the replacement must be fully qualified and must not be entitled to overtime compensation for any part of the replacement period.

Prearranged or approved time off and accommodations, as well as time off under Family or Medical Leave, Eight Week Medical Leave, or Worker's Compensation Leave, are not considered unscheduled absences. If an employee is out due to Worker's Compensation points or absences should not be assigned. The organization's leave administrator may require documentation from the employee when appropriate.

### Exceptions due to Flu/Highly Contagious Illness

Employees presenting to Employee Health with fever, body aches, and flu-like symptoms will be symptoms be tested for influenza. If the test is positive for influenza the employee will receive treatment at the discretion of the Employee Health physician and will be sent home for up to 5 days, depending on the duration of the symptoms prior to testing. These guidelines would also apply if the employee is diagnosed with clinical flu by the Employee Health physician in the absence of a positive flu swab and to other illnesses considered to be highly contagious, including but not limited to Conjunctivitis (pink-eye) and C-Difficile Toxin. The employee may receive up to one unscheduled absence for influenza or highly contagious illness as outlined above, provided that the employee is not placed on Family Medical Leave or Eight Week Medical Leave.

**Exception (1)** -Employees that receive the flu vaccine and are diagnosed with flu, will not receive an unscheduled absence point. However, if the employee did not receive the flu vaccine and is diagnosed with flu by Employee Health, they are subject to one absence point for the occurrence.

**Exception (2)** - Employees who present to Employee Health and are sent home for a "highly contagious" illness will receive one point for the occurrence with the exception of COVID-19 where an absence will **not** be assigned. All Staff will self-monitor for symptoms prior to clocking into work and contact Employee Health if experiencing symptoms. Employee Health will coordinate COVID-19 or flu testing if needed. The hospital will provide symptom check signs beside timeclocks and easily accessible areas, such as bulletin boards and break rooms as a reminder to Staff. If an employee tests positive for COVID 19, the employee will check in with Employee Health for clearance when the employee is able to return to work. Employee Health will notify the employee's supervisor when an employee is put off of work. For each incidence of contagious illness diagnosed by the Employee Health



Physicians, a copy of the work excuse is given to the Employee Health Leave Coordinator to make sure points are removed if the employee was given points. EH must abide by the same guidelines as HIPPA, so they cannot release information to managers that discloses their illness diagnosis. If employees are diagnosed by their personal physician, they need to bring a statement to the Employee Health Leave Coordinator for point's removal.

### **Badging In and Out**

Non-exempt or hourly employees must badge-in at the beginning of their shift and badge-out at the end of their shift. They must also badge-out if they leave the campus for lunch or approved appointments, i.e. doctor's appointments. Exempt or salaried employees badge in once at the beginning of a shift. Employees must badge-in and out on their department's assigned badge reader. Employees are not permitted to badge-in or badge-out for one another or to use one another's badge to scan devices.

### **Holidays**

A major holiday is defined as Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, Christmas Eve, Christmas Day, and New Year's Day. Employees will be given 2 points for an unscheduled absence for each of the following:

- A) 6:45 a.m. the day before a major holiday
- B) Day of the major holiday
- C) Until 7:00 p.m. the day after a major holiday

If an employee has an unscheduled absence for all 3 days a total of 6 points will be given.

### **Progressive Counseling and/or Discipline for Excessive Absenteeism**

Excessive absenteeism for a full-time employee is defined as the employee having twelve unscheduled absences or shifts in a rolling twelve-month period. Excessive absenteeism for a part-time or PRN employee is defined as the employee having nine unscheduled absences or shifts in a rolling twelve-month period. A pattern of absence demonstrates a predictable routine of absence, such as the employee is consistently absent on the day after payday, a particular work day, or the day before or after a holiday. The employee's frequency of unscheduled absences such as call-ins or early departures may also be analyzed. Managers who recognize a pattern of absence with an employee can counsel and/or coach the employee prior to their reaching the number of unscheduled absences listed below. Employees who are scheduled to work and call in with an unscheduled absences on a day or days that coincide with a previous request for time off that was denied may be subject to disciplinary action up to and including immediate discharge of employment when clear deceit is verified.

Department managers are responsible for notifying employees when they become at risk for discharge for excessive absenteeism based on the number of absences listed below:

<p><b>Unscheduled Absences - Full-Time Employees</b></p> <p><b>9 shifts in a rolling 26-pay period cycle = final warning</b> <b>12 shifts in a rolling 26-pay period cycle = discharge</b> <i>(Includes part-time and prn employees who consistently work a full-time schedule)</i></p> <p><b>Unscheduled Absences - Part-Time and PRN Employees</b> <b>6 shifts in a rolling 26-pay period cycle = final warning</b> <b>9 shifts in a rolling 26-pay period cycle = discharge</b></p> <p><b>An unscheduled absence on a major holiday will count as 2 shifts.</b></p>
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Employees transferring from full-time to part-time or PRN status will retain their current unscheduled absences. If as a result, an employee is at or beyond the final warning stage, the employee may receive a final

warning at the time of the next unscheduled absence. If the employee accrues one more additional unscheduled absence or nine missed shifts, they are subject to discharge.

**\*New employees within their initial (6)-six-month provisional period who obtain (3)-three unscheduled absences during the first (90) ninety days of employment may be discharged.**

#### **Leave Support Line**

In addition to personally contacting their manager or department designee, employees must also contact the Leave Support Line at 265-0000 for each unscheduled day they are absent. Employees are not required to call the Leave Support Line to report a late arrival.

#### **Punctuality/Tardiness**

Employees are considered tardy when they fail to report to their assigned work site at the scheduled time. Employees who expect to be late must personally notify the manager or designee according to departmental procedures. Failure to badge in is not considered a tardy as long as the manager knows when the employee arrived to work. However, if there is a pattern of failing to badge in, the Department Manager may assign this instance as a tardy and/or begin performance counseling.

Each Department and/or Service Line Director will define the punctuality standards for their area and are responsible for communicating the standards to their employees. If the Director does not have an Attendance Addendum that defines tardies, the 5/6 minute rule will be used. For example, if an employee is supposed to be at work at 8:00am and arrives at 8:05am, they will not get an unscheduled tardy, but if they arrive at 8:06, they will get an unscheduled tardy.

#### **Progressive Counseling and/or Discipline for Excessive Absenteeism**

Excessive absenteeism for a full-time employee is defined as the employee having twelve unscheduled absences or shifts in a rolling twelve-month period. Excessive absenteeism for a part-time or PRN employee is defined as the employee having nine unscheduled absences or shifts in a rolling twelve-month period. A pattern of absence demonstrates a predictable routine of absence, such as the employee is consistently absent on the day after payday, a particular work day, or the day before or after a holiday. The employee's frequency of unscheduled absences such as call-ins or early departures may also be analyzed. Managers who recognize a pattern of absence with an employee can counsel and/or coach the employee prior to their reaching the number of unscheduled absences listed below. Employees who are scheduled to work and call in with an unscheduled absence on a day or days that coincide with a previous request for time off that was denied may be subject to disciplinary action up to and including immediate discharge of employment when clear deceit is verified.

Department managers are responsible for notifying employees when they become at risk for discharge for excessive absenteeism based on the number of absences listed below:

<p><b>Unscheduled Tardies - All Employees</b></p> <p>9 tardies in a rolling 26-pay period cycle = final warning 12 tardies in a rolling 26-pay period cycle = discharge</p> <p><b>*New employees within their initial (6)-six-month provisional period who obtain (4)-four unscheduled tardies during the first (90) ninety days of employment may be discharged.</b></p>
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#### **Exceptions for Employees enrolled in HH Student Training Programs**

The absence and tardy standards for the first (90)-ninety days of employment are different for employees who are enrolled through Huntsville Hospital System's learning programs; such as the Perioperative RN, Scrub Attendant, Pharmacy Student, and Patient Care Aide, etc. The (6)-six month provisional period and the (90)-ninety day attendance standards will begin after successfully completing the program once you are offered a position.

See the student handbook attendance policy for your program's attendance requirements while you are enrolled in the program

## **WORK SCHEDULES**

HH Health System operates on a freely rotating work system. We are open to serve our patients seven days a week, twenty-four hours a day. Thus, it is often necessary for employees to work schedules that include nights, weekends, and holidays. Work schedules should be available two weeks in advance. All employees must understand that they are expected to work the hours and days that they are scheduled. Employees may be given an opportunity, within their department guidelines, to swap a shift with a competent and qualified co-worker. However, employees will be required to work the assigned shift when an appropriate replacement cannot be located. Both employees' managers must approve any shift trade. Ordinarily, shift trading will not be allowed when the trade results in extra overtime. Check with your manager to see if your department allows shift trading.

HH Health System reserves the right to change an employee's work schedule, including shifts, days, and job duties. During periods of high activity or emergency situations, employees may be required to work extra shifts or to stay past normal quitting time. During periods of low activity, employees may be required to work in another area, take budget hours (i.e., not report to work), or leave work early. Nothing in this policy should be construed as a guarantee of any specific number of hours of work.

Each department maintains separate work schedules that are designed to meet its operational requirements. For this reason, work schedules may differ between departments.

## **E-MAIL AND INTERNET ACCESS GUIDELINES**

HH Health System is committed to providing an environment that encourages the use of computers and electronic information as essential tools for supporting the hospital's business. It is the responsibility of each employee to ensure that this technology is used for proper business purposes only and in a manner that does not compromise the confidentiality of health care proprietary or other sensitive information.

Internet access shall only be provided to employees who have a clear business need for such access and who have received approval. All employees accessing materials on the Internet shall comply with all laws applicable to copyrights, patents, and trademarks. Participation in discussion groups, chat rooms, blogs, and other public Internet forums is restricted to organization related business and employees who have been authorized by management to do so. All uses of the Internet through the HH Health System firewall are logged and reviewed to ensure compliance with HH Health System Internet policies and procedures.

Internet access, including e-mail capability, is for the express use of the registered and approved user. It should not be shared or made accessible to others. Employees may not leave a terminal unattended while an Internet session remains active. All information released via the Internet from HH Health System must follow the same process as is in place for other information in paper or fax form.

Employees will only use authorized hardware and software. Employees are not permitted to install or use any personally-owned hardware, software, shareware, or public domain software on a HH Health System-owned system without approval from the Information Technology Department. The HH Health System network will not be used for commercial or financial gain or illegal activities.

Each workstation or laptop is the property of HH Health System and is provided for official and authorized use only. This equipment, along with any other equipment connected to the organization's network, is subject to security monitoring. Employees should have no expectation of privacy when using HH Health System equipment.

In addition to the foregoing, all employees using computers at HH Health System must comply with Administration Internet Policy 864, which is located on the HH Health System Intranet.

## **EMPLOYEE BULLETIN BOARDS AND EMPLOYEE SWAP SHOP**

All written and typed communication posted on HH Health System bulletin boards, Swap Shop, or similar posting sites must be appropriate and professional.

## ANNUAL MANDATORY REQUIREMENTS

As a condition of continuing employment, employees are required to successfully complete annually required educational and stay current for all certifications that are required in their job description. Each employee must take the classes required by the Joint Commission (TJC) and the Alabama Health Department within the calendar year. The deadline for these annually required classes is November 1st of the calendar year, or earlier if required by their department policy.

Every employee who interacts with patients is required to have a TB skin tuberculin test done annually, if such testing is not contraindicated. If such testing of an employee is contraindicated, the employee may be given a chest X-ray or other appropriate test. Testing is available through Employee Health.

TJC also requires that employees who interact with patients be competent in cardiopulmonary resuscitation (CPR). New employees who are required to have a current Basic Life Support/Cardiopulmonary Resuscitation (BLS/CPR) certification must submit their original card to Corporate University for verification and recording; or successfully complete AHA BLS certification within 90 days of hire. If advanced certifications are required for the job, new employees must successfully be complete certification within one year of hire or transfer to the role; or earlier if required by their department policy. Managers are responsible for ensuring employees are current with their American Heart BLS and other Advance Life Support certification if applicable to their role. If an employee exceeds the certification deadlines, they will not be scheduled to work. Departments may require employees receiving certifications outside of Huntsville Hospital to attend a class if there is a question of competency. To be recognized, subsequent training must be obtained from HH Health System's Corporate University or an accredited training center. If obtained outside of Corporate University, the card must be submitted to Corporate University so that accurate records will be maintained. Employees should contact their manager regarding required classes for their department.

Employees who do not take the required classes will be placed on unpaid leave of absence and may be subject to disciplinary action up to and including discharge if the violation of policy is determined to be a knowing violation or repetitive in nature. Employees who do not meet the annual mandatory requirements may be removed from payroll. The complete Annual Mandatory Requirements Policy can be located on HH Health System's Intranet.

## PARKING

All employees are assigned a specific parking location based on seniority, shift, and work location. In order to provide parking for our customers and patients, it is essential that employees park in their assigned areas. Employees who travel between facilities located around the main campus must utilize the organization's transportation system. Parking in unauthorized areas is not permitted. An employee vehicle found parked in an unauthorized area is subject to a wheel lock, and the employee may have their vehicle towed at their expense. A \$50 fine must be paid to remove a wheel lock on the first violation. Repeated offenses may result in a \$250 fine and may include disciplinary action up to and to include termination if the violation is determined to be a knowing violation or repetitive in nature.

Employees who wish to appeal their parking assignments, wheel locks, parking tickets, or who have questions may do so by letter to their Department Manager. Parking guidelines can be found on HH Health System's Intranet or you can contact the Safety and Security office at 256-265-8012.

## EMPLOYEE MEAL AND REST PERIODS

### Meal Periods

Each non-exempt employee is permitted to take one unpaid 30 minute meal break during each 6 hour to 12 hour shift. However, in certain specialized areas or situations when it would be impractical for employees to leave the area, meals may be eaten in designated areas of the department. Notwithstanding, meal breaks should be uninterrupted time away from the job and should not be taken at the workstation. Non-exempt employees

who leave the organization's campus for meal periods must badge out before they leave and badge in when they return. All employees should ensure there is appropriate coverage, and they must obtain approval from their manager prior to leaving for the meal period.

During a meal period, employees are not permitted to visit other departments or in any way interfere with the personnel or operations in other departments. Meal periods are to be taken in designated areas like break rooms or the cafeteria. Eating meals in clinical work areas, non-employee lounges, or conference rooms without a manager's approval is prohibited. Meals and beverages may not be taken into areas where blood and body fluids, medications, clinical equipment, or hazardous substances exist.

Employees who are unable to take a meal break or do not receive at least twenty minutes of uninterrupted time should contact their time and attendance editor or their manager so that the meal deduction will not be taken from their worked hours. It is the expectation of HH Health System that managers adjust schedules and workload whenever possible to allow employees to take a daily meal break

### **Rest Periods**

Each non-exempt employee is permitted to take one paid 15 minute rest period during each 6 hour shift. Employees who are scheduled to work 12 hour shifts are permitted to take two paid 15 minute rest periods. Rest periods are not guaranteed and are permitted as long as the operational requirements of the department are met.

While on a rest period, employees are not permitted to leave the facility or to visit other departments or in any way interfere with the personnel or operations in other departments. Rest periods are to be taken in designated areas like break rooms, the cafeteria, or the employee locker room. Rest periods in work areas such as exam rooms or conference areas are strictly prohibited. Rest periods may not be added together for one 30 minute rest period, or accumulated for later use.

## **BREAK TIME FOR NURSING MOTHERS**

Huntsville Hospital System supports the health and well-being of employees and their infant children by providing nursing mothers with private, safe, and accessible locations to express milk for their infants. Employees and supervisors should work cooperatively to create an environment that supports the working mother's decision to breastfeed and prohibit discrimination and harassment of those who exercise their rights.

The Patient Protection and Affordable Care Act (an amendment to the Fair Labor Standards Act-FLSA) require that managers provide reasonable break time for an employee to express breast milk for up to 1 year after the birth of a child. A room or location should be provided for the employee to use, other than a bathroom that is shielded from view and free from intrusion by coworkers and the public.

Employers are not required under the FLSA to compensate nursing mothers for breaks taken for the purpose of expressing milk. However, HH System employees will be able to use their 15 minute break(s) and unpaid 30 minute lunch time to express milk. Any additional breaks needed for the expression of milk should be granted, but may not be paid.

## **RESIGNATION POLICY**

Employees who wish to resign their employment must complete a Resignation Personnel Action Request (PAR) and submit the form to their manager. Resigning employees must follow the resignation notice requirement for their position. In order to resign in good standing, be eligible for rehire, and be paid their Earned Time off (ETO), employees must submit (verbal or written) and physically work the **full** required notice listed below. Days missed during the required notice period may be added on at the discretion of the employee's manager. ETO cannot be used to fulfill the notice requirement unless approved by the Unit Director/Manager. All organization property, like markers, keys, beepers, back supports, and badges should be turned in to the employee's manager on their last day of employment. Employees who do not return all organization property are subject to being charged for the property and deemed ineligible for rehire. Employees who have been employed less than 180 days are not eligible to have their ETO paid out upon resignation.

Effective July 6, 2021 the resignation notice requirement has changed:

- **Three week notice** for employees in non-exempt or hourly positions that do not require licensure, registration, certification, or advanced education.
- **Four week notice** for employees in exempt or salaried positions and positions that require licensure, registration, certification, or registry-eligible status.
- **Five week notice** for Unit/Department Directors and senior level department managers.
- **Twelve week notice** for advanced practice providers (Nurse Practitioners, CRNAs, and Physician Assistants).

HH Health System reserves the right to accept an employee's verbal or written resignation on the day submitted. The employee may work the full notice period provided their performance is satisfactory; however, the Department/Unit Manager has the right to reduce the employment notice period. If the employee is working out their notice and they become disgruntled and disruptive, they may be discharged immediately if the Unit/Department Manager and Human Resources deem necessary. If an employee is absent any days during the notice period, the supervisor has the right to add these days onto the notice period.

An employee who gives, but decides to withdraw a resignation and remain with the organization may be discharged or retained. This decision is solely at the discretion of the manager.

Employees are considered to have voluntarily resigned if they meet one of the following criteria:

- Fail to return at the end of a leave of absence;
- Take gainful employment while on a leave of absence;
- Fail to report to work for three scheduled days without notifying the manager; or
- Refuse to accept an offer of the same or comparable position (or other reasonable accommodation as required by law) when released to return to work after a temporary disability, injury, or medical or family leave.

Employees who wish to schedule an exit interview in person may contact the Human Resources Department for an appointment or they may complete the exit survey online. The website is <https://www.surveymonkey.com/r/HHSEmployeeExit>.

Employees who wish to transfer to another department or affiliate should refer to the guidelines in the Promotions, Demotions, and Lateral Transfer Policy.

## VERIFICATION OF EMPLOYMENT

The Human Resources Department will disclose an employee's employment information to third parties only with the written authorization of the employee unless required to do so for legal reasons or unless records are needed in conjunction with unemployment claims, subpoenas, garnishments, and tax levies. Employment information includes, but is not limited to:

- Job title;
- Salary information;
- Dates of employment; and
- Hours authorized to work.

## ELIGIBILITY FOR REHIRE

Eligibility for rehire is at the sole discretion of HH Health System. Request for reconsideration or a change in rehire status may be submitted in writing to the Human Resources Department.

## **PERSONNEL RECORDS**

Complete and confidential employment records are maintained on all employees and are the property of HH Health System. Active employees may review their personnel file by making an appointment with the Human Resources Department. Employees may make notes from their file but will not be allowed to photocopy any hospital documents. All copies should be made before the document is received in the Human Resources Department.

## **EMPLOYEE PERSONAL STATUS CHANGES**

Employees have the responsibility of informing their manager and the Human Resources Department of any change to their personal status, for example, name, address, telephone number, marital status, or number of dependents. Changes may be made through HH Health System Intranet via Employee Self Service or in the Human Resources Department. The organization is not responsible for lost benefits due to an employee's failure to report changes. In many cases, changes must be reported within thirty days to ensure benefit eligibility status.

Licensed employees are responsible for informing their licensing board or agency of a name change or correction and must continue to sign documents using the name on their professional license until the board corrects it. The Human Resources Department will not change a licensed employee's name until the updated license has been received.

## **EMPLOYEE VISITORS/PERSONAL MAIL**

Friends and family members of employees should be told not to visit employees during work hours. Friends and family member who work in other departments may meet for meals or on approved rest periods but should not visit in each other's department during work hours. If employees would like to visit patients, they must do so during non-working hours unless the visit is related to patient care.

In addition, employees should discourage non-employees from sending personal mail to the hospital.

## **PERSONAL TELEPHONE CALLS**

Telephones should be answered promptly, within three rings if possible. Employees should state their work area and name. An example is, "Human Resources, Nancy." It is important to speak clearly and in a friendly, professional manner.

HH Health System telephones must be available for necessary or emergency communications. The Human Resources Department and the switchboard will not forward personal telephone calls to employees unless the call is an emergency and the caller identifies the department where the individual works.

## **CELLULAR PHONES, I-WATCH, AND PERSONAL ELECTRONIC DEVICES POLICY**

Excessive personal calls/texting during the work day interferes with employee productivity, is distracting to others, and may interfere with the clinical monitoring equipment used for patients. Employees are advised to limit personal calls/texting while on duty to authorized rest or meal periods.

Cell Phones and other personal/work devices such as headphones, iPods, IPADs, MP3 players, I Watches, etc. may not be used for personal use in the presence of patient or any public areas to include hallways and public elevators. Acceptable areas of use include the cafeteria, break rooms, parking garages/lots, and private offices with department approval. Flexibility is to be provided in circumstances demanding immediate attention with manager approval.

A department specific and/or manager approved business cell phone/communication device such as a PDA or Bluetooth is acceptable. Bluetooth is only to be used within approved proximity of the employee's work station. HH Health System issued devices may be used for emergency personal messages with prior approval.



Medical/surgical departments and ICUs typically contain many critical medical devices that may be susceptible to electromagnetic interference from wireless devices. Medical Staff, Allied Health Staff, and hospital personnel may use cell phones or personal electronic devices ONLY if at least 1 meter (39 inches) from patient equipment.

Employees whose job responsibilities include regular or occasional driving of HH Health System vehicles or personal vehicles for job related travel are expected to refrain from using their cellular phones/I-watches, to include texting and email communication, while driving. Regardless of the circumstances, including slow or stopped traffic, employees are strongly encouraged to pull off the side of the road and safely stop the vehicle before placing or accepting a call. If acceptance of a call is unavoidable, and pulling over is not an option, employees are expected to keep the call short, use hand free options if available, and keep their eyes on the road. Special care should be taken where there is traffic, inclement weather, or the employee is driving in an unfamiliar area. Under no circumstances should an employee place themselves at risk to fulfill business needs. Employees who are charged with traffic violations resulting from the use of their phone while driving are solely responsible for all liabilities that result from such actions.

#### **Camera Phones**

HH Health System strictly prohibits the use of cell phone cameras/texting/recording/etc. when such use might potentially breach employee, patient, or customer confidentiality or privacy. Employees should adhere to all applicable electronic device policies for safe and appropriate use within the hospital and hospital's departments. The complete Cellular Phone and Personal Electronic Device Policy can be located on HH Health System's Intranet.

### **TAPE-RECORDING POLICY**

It is a violation of HH Health System policy to record conversations on work time with a tape recorder or other recording device (including a cell phone or any electronic device) unless prior written approval is received from an employee's department manager or hospital leadership. The purpose of this policy is to eliminate a chilling effect on the expression of views when one person is concerned that his or her conversation with another is being secretly recorded. This concern can inhibit spontaneous and honest dialogue, especially when sensitive or confidential matters are being discussed. Furthermore, as healthcare providers, we are charged with keeping our patients' information confidential. Knowing violations of this policy may result in disciplinary action, up to and including discharge.

### **SMOKING AND TOBACCO PRODUCTS POLICY**

HH Health System is committed to providing a safe and healthy workplace and promoting the health and well-being of its employees, patients and visitors. Tobacco use is the single largest cause of preventable, premature death in the U.S. It is also acknowledged to be a fire hazard and a detriment to productivity. For safety and health reasons, HH Health System will maintain a non-smoking work environment and will give preferential hiring consideration to non-tobacco users.

Employees who were hired prior to the implementation of this policy and who are smokers or tobacco users are encouraged to quit smoking and/or the use of tobacco products. No adverse action will be taken against employees for being smokers or tobacco users or for becoming smokers or tobacco users after hire.

All employees are prohibited from smoking or using any tobacco products (including tobacco-less electronic cigarettes and/or vaping) anywhere within and on the grounds of any hospital owned campuses and facilities to include the Plaza Resource Center, Medical Mall, Heart Center, Inc., Corporate University, parking decks, hospital owned physician practices, hospital owned outlying buildings, and all business's and public and private parking lots located near the hospital campus. The use of any tobacco products is also prohibited in any hospital owned or leased vehicles, any vehicles on campus, any vehicles in hospital owned parking decks, or otherwise while on the job. HH Health System employees must eliminate smoke odor on clothing, hands, or breath while on duty. Furthermore, electronic cigarettes are not permitted on HHS property in any form, even while not being used, such as in a purse or locker.



Enforcement of this policy is the shared responsibility of all HH Health System personnel. Employees that observe other employees using tobacco products should promptly report incidents to their manager, security, or to the information desk.

#### **Tobacco Cessation Opportunities**

Education and/or medical treatment can be effective supports for individuals who have decided to stop using tobacco products. HH Health System's internal wellness program, Health Works, offers employees three different cessation opportunities. To learn more contact a Health Works representative at 256.265.6288.

### **CONTINUANCE OF CARE AND STAFF RIGHTS & THE HEALTH CARE RIGHTS OF CONSCIENCE ACT**

HH Health System is committed to providing all patients the same high quality and level of care or services regardless of the diagnosis of the patient. HH Health System also recognizes and respects its employees' cultural values, ethics, and religious beliefs and the impact these may have on patient care.

In the event employees object to providing care, specifically abortions, cloning, stem cell research and sterilization, based on cultural values, ethics, or religious beliefs, they may make a request in writing to their manager, at least 24 hours prior to such refusal. However, in the event of a life-threatening situation, employees will be required to participate in any procedure if no other capable health care provider is available.

### **UNAUTHORIZED MEDICAL ADVICE**

Patient care is the responsibility of the patient's assigned caregiver and, ultimately, the patient's physician. An employee who is not authorized to do so must never offer a diagnosis or medical advice to a patient.

### **EMPLOYEE LOCKERS**

Certain departments have lockers that are available for employee use. HH Health System reserves the right to open and search lockers using reasonable discretion. Employees who use such lockers are considered to have given consent to such a search. Employees will be informed of the intent and will be requested to open the locker in the presence of a security officer or an authorized member of management.

### **BORROWING**

Employees are not permitted to lend money to patients. Discussing a patient's financial needs, discussing your own personal financial issues in front of a patient, or borrowing from a patient or their family is subject to disciplinary action, up to and to include termination.

### **ACCEPTANCE OF TIPS AND GRATUITIES**

Employees have the responsibility of serving all patients equally. With this in mind, employees may not directly accept tips or gifts during the episode of care. Small gifts of insignificant value, like flowers to a nursing unit, are allowed.

### **LOST AND FOUND**

Every effort will be made to locate and return lost or misplaced items to their owners; however, HH Health System is not responsible for the loss of personal property or valuables. Employees should protect their personal property and valuables by keeping them secured at all times. You are encouraged to use security lockers for the storage of valuables. If there are no lockers available, you may consult your manager as to the safest place

available for storing valuables. Employees who find something of value on HH Health System campus should give the item to their manager who will forward it to the Safety and Security Department or call ext. 4LOST.

#### **INTERVIEWS WITH THE NEWS MEDIA**

HH Health System is represented to the news media by a designated spokesperson in the Marketing and Public Relations Department. Employees who have newsworthy information or suggestions for press coverage should report the information to the Public Relations Department. Employees who are approached by the press regarding hospital-related issues should refer all questions to the Public Relations Department and should never identify themselves to the news media as a representative of HH Health System either by direct statement or by implication.

#### **NO SOLICITATION OR DISTRIBUTION**

In the interest of maintaining a proper healthcare and business environment, employees may not distribute literature or printed material of any kind, sell merchandise, solicit financial contributions, or solicit for any other cause during working time unless approval is given by an officer of HH Health System. This includes solicitation and distribution to patients, employees, vendors, contractors, physicians, and our customers by employees who are on working time. This policy also prohibits solicitations by e-mail.

#### **PERSONAL PACKAGE INSPECTION**

HH Health System's safety and security officers are authorized to inspect packages or bags carried to or from the organization's premises. Employees may be asked to submit hand-carried parcels for inspection and their entry on the organization's property is consent to such inspection. This in no way implies that an employee is in possession of HH Health System supplies or equipment. The inspection is merely a security measure. Employees are expected to cooperate with security inspections. Employees who are given permission to remove company property from the premises must first obtain written approval from their manager.

#### **POLITICAL CAMPAIGNING AND SOLICITATIONS**

Employees may support political candidates and issues of their choice, but demonstrations of support on HH Health System premises are not permitted. As an institution, HH Health System has no affiliation with any political candidate or issue and, if employees make statements to the press during their off-duty hours and when they are not on hospital premises, they should not identify themselves as representatives of the hospital either by direct statement or by implication to the news media.

#### **SERVICE AND PRODUCT ENDORSEMENTS**

Employees must never suggest or recommend to a patient a particular physician, ambulance service, convalescent home, or any other service or product relating directly or indirectly to health care.

#### **INCLEMENT WEATHER**

Given the nature of our business, it is required that essential employees report for duty when scheduled. Essential personnel are individuals who perform jobs required to maintain services and operations during any severe weather or emergency condition that ensure the safety and health of patients, staff and visitors.

When possible, if adequate staff is available, some staff may be excused and non-essential departments closed. Each manager will determine staffing needs required for their unit or department.

If Administration calls an inclement weather code and provided room is available, employees may bring children up to age ten to the day care center for a fee of \$25.00 per day. The complete Inclement Weather policy can be located on HH Health System's Intranet.

Employees who deliberately do not report to work during inclement weather will generally receive a written warning but may be subject to discipline up to and to include discharge depending on the severity of the offense.

## SECTION III COMPENSATION GUIDELINES

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HH Health System has established an ongoing wage and salary program with each job classification having a grade and wage range. The minimum rate is the lowest salary in any wage range and the maximum rate is the highest salary in any wage range.

### TIME AND ATTENDANCE POLICY

HH Health System maintains a formal time and attendance system for recording employee work time. Hours worked includes all the time the employee is performing their principal duties, whether directed to do so or merely permitted to do so. "Volunteer" or "off-the-clock" work must be counted and paid.

The HH System Employee ID badge serves as the time card. Employees must badge-in and badge-out on the assigned badge reader for their department or unit. Some employees may be approved to badge-in or badge-out on the computer at their work station or via mobile application. Employees are not permitted to badge-in or badge-out for one another or to use one another's badge to scan devices.

#### Non-Exempt or Hourly Employees

Unless the employee has been provided with an approved alternative, hourly employees are expected to badge-in when they arrive for work and badge-out when they complete their work shift at their assigned time clock. If an hourly employee leaves the hospital campus for lunch, dinner, or any personal reason, they must badge-out. This includes walking to offsite restaurants. Hourly employees do not have to badge-out to go to Employee Health for hospital required immunizations or testing. Employees may be required to badge-out for personal medical visits. Hourly employees must badge-out if they go to the Emergency Department for a personal medical reason. Hourly employees do not have to badge-out to go to OHG (located at Medical Mall) for a work related injury.

Employees should review their work activity on the organization's time keeping application (i.e. Kronos) with their department's time editor on a frequent basis to ensure that their work time is properly recorded. If an error is discovered, it should be promptly reported to the time editor.

#### Overtime – Non-Exempt Employees

Overtime pay for non-exempt employees is required by federal law under the Fair Labor Standards Act. Overtime pay is calculated at the rate of one time the employee's regular base rate plus half the employee's average hourly rate of pay which includes shift differential or other forms of premium pay. Overtime is paid when the hours worked in the work week (Sunday-Saturday) exceed forty. Hours for paid absences are not counted in determining overtime. It is not permissible to average work hours over multiple pay periods in order to avoid overtime, nor is it permissible to move hours from one week to another to incur or avoid overtime. A manager must approve work assignments that involve work in excess of 40 hours in a work week. All employees are expected to work overtime upon request to ensure the delivery of optimal patient care and to ensure that vital operations of the hospital are maintained.

#### Volunteering – Non-Exempt Employees

Non-exempt employees may not volunteer to perform work for HH Health System without compensation unless a number of conditions are met. Specifically, the manager should evaluate if the number of hours in which they need a volunteer worker is less than full-time, whether the volunteer work displaces regular employees, whether the services are offered freely without pressure or coercion, and whether the services are typically associated with volunteer work. In addition, volunteer activities should be outside the employees' normal hours and should be of a different capacity than their usual job duties.

#### Off-The-Clock Work – Non-Exempt Employees

Non-exempt employees are strictly prohibited from working "off the clock," whether on or off HH Health System's premises. No one has the authority to allow or ask, directly or indirectly, any non-exempt or hourly

employee to perform any work for HH Health System “off the clock.” In all cases, all time worked by non-exempt staff MUST be recorded and will be compensated.

Any employee who is asked to work "off the clock," or any employee, contractor, supervisor, or manager who becomes aware of any possible “offer the clock work,” should promptly report their concerns to the HH Health System’s Vice President of Human Resources, Director of Human Resources, or Employee Relations Specialist in the Human Resources Department. There will be no retaliation against any employee for reporting any “off the clock” work or any request for “off the clock” work.

### **Exempt or Salaried Employees**

Exempt employees should badge-in once per day at the beginning of the workday. Depending on the employee’s schedule, the time and attendance system will record 8, 10, or 12 hours of work from the moment they badge-in. If the employee works an occasional twelve hour shift, the editor should adjust the record to reflect the appropriate hours.

Exempt employees who are eligible to be paid straight time for hours worked over 40 in the work week may be asked to badge-in at the beginning of their shift and out at the end of their shift.

### **Partial Work Days – Exempt Employees**

If an exempt employee works at least ½ of their shift, they may be paid for the full shift. If an exempt employee works less than ½ of their shift, time editors should code ½ the shift as ETO and the rest as regular work hours. For example, if an exempt employee working an eight-hour shift works two hours and goes home sick, they may be paid four regular hours and four hours of ETO. If the employee has exhausted their ETO or Sick bank, the ETO hours recorded for the partial day absence will go into arrears.

Exempt employees on intermittent family medical leave will be paid only for hours worked. The employee may use ETO hours if available. If no ETO hours are available, the employee will be unpaid for the remainder of their shift.

### **Full Day Absences - Exempt Employees**

ETO hours taken for one or more full days for personal reasons, sickness, or disability will be unpaid if the employee has used all hours in their ETO or Sick bank. This applies only to full days and not to partial days. Exempt employees will be paid for full day absences taken to meet designated ETO targets, if any targets are established. If the employee has exhausted their ETO, the ETO hours recorded for the full day absence taken to meet an ETO target will go into arrears up to a maximum of 60 hours.

### **Exempt Plus Straight Time Employees**

Exempt employees in certain highly skilled, hard to fill clinical positions may be eligible to be paid their base hourly rate or straight time for hours worked over forty in the work week. At a minimum they will be paid the equivalent of their regular authorized hours each week provided they have enough ETO or Sick hours in their bank if they are absent from work for a full day. These employees may be asked to badge in at the beginning of their shift and out at the end of their shift so that their appropriate work hours are recorded for payment.

### **Office Closings**

Exempt employees in departments that close for holidays or other reasons must use any available ETO, however, any ETO recorded will go into arrears if the employee has exhausted the hours in their ETO bank. Non-exempt employees must also use any available ETO hours during any department closing, however, they may be eligible to take the time off without pay if their department closes and they were not given a 24 hour notice before being notified NOT to report to work as might be the case during inclement weather.

### **Arrears**

Exempt employees’ ETO balance may go into arrears up to 60 hours for hours paid to meet designated ETO targets or office closings. Employees who have a negative ETO balance greater than 40 hours for 3 or more pay periods will not be allowed to take additional elective full day absences until they have a positive ETO bank.

Non-exempt employees may not have ETO balances in arrears.

## Training

Attending lectures, meetings, training programs and other similar activities does not have to be considered work hours when:

- Attendance is voluntary,
- Attendance is outside of normal work hours,
- The event is not directly-job related, and
- The employee performs no productive work during this period.

Training may be considered as directly related to an employee's job if it is designed to make the employee handle their job more effectively, or to add new skills.

If you believe that an improper deduction has been made to your salary or you have not been paid correctly, you should immediately report this information to the Human Resources Department.

Reports of improper deductions or incorrect pay will be promptly investigated. If it is determined that an improper deduction has occurred, or you have not been paid correctly, you will be promptly reimbursed.

## PAYROLL PROCEDURES

HH Health System has 26 pay periods per year, each ending on Saturday at midnight. Employees are paid every other Friday on a bi-weekly basis. HH Health System pays through direct deposit service, which provides employees with the convenience of having their payroll checks deposited into the financial institution and account of their choice. Paper checks are mailed to the employee's home address until direct deposit paperwork is received by the payroll department.

Employees can direct their bi-weekly payroll deposit to a maximum of three bank accounts. Changes to these accounts can be made on a quarterly basis. These accounts may also be changed for a qualifying life event. It is the employees' responsibility to provide the correct and required information to Human Resources to ensure the accuracy of their direct deposit. Direct deposit change request forms will be verified by the appropriate HR/Payroll representative.

## PAYROLL DEDUCTIONS

HH Health System is required by federal and state regulations to make the following deductions from employees' paychecks:

- **FICA/Medicare** - This is the Social Security and Medicare tax deducted from each paycheck. This amount is forwarded to the Social Security Administration.
- **Federal Withholding Tax** - This is the federal income tax deducted from each paycheck. The amount is based on the employee's earnings and the number of dependents that the employee claims on the federal form W-4, Employee's Withholding Allowance Certificate.
- **Alabama State Withholding Tax** - This is the state income tax deducted from each paycheck. The amount withheld is based on the employee's earnings and the number of exemptions that the employee claims on the Alabama Employee's Withholding Exemption Certificate.

These deductions are summarized for you on your earnings statement. You can change your federal and state withholding at any time through HH Health System's Intranet via employee self-service.t.

## PROMOTIONS, DEMOTIONS, AND LATERAL TRANSFERS

HH Health System maintains a position-posting system. Most open positions are advertised on HH Health System's Intranet and the Internet. Employees may be considered for a transfer to other positions provided they

meet the job requirements, have satisfactorily completed 1 year of service in their current position, and have not received a final warning or multiple disciplinary actions in the last 12 months. An employee who accepts a transfer may have an increase or decrease in salary effective with the transfer to the new position and will enter into a new 6 month provisional period.

With manager approval, employees may be permitted to transfer to another department within the one year waiting period. Transfer to PRN status is at the sole discretion of the manager. Employees who receive specialized training valued in excess of \$2000 may be required to remain in their position for a minimum of one year following the training class or classes. Employees who receive specialized training and are under a contract to remain in their position for a period of time in order to have the value of their training forgiven may not be eligible for transfer to another department or affiliate.

The majority of transfers fall in one of the following categories:

- **Promotion** - Employee transfers into a position in a higher salary grade, which is usually accompanied by an increase in salary.
- **Demotion** - Employee voluntarily accepts a position or is involuntarily demoted to a lower salary grade, which is usually accompanied by a decrease in salary.
- **Lateral** - Employee transfers to a position in the same salary grade, which normally involves no change in salary.

Unless the hiring manager has worked out a release date, Human Resources will choose the release date by selecting the first pay period following thirty days from the date the employee accepts the job offer. Advance practice employees (CRNAs, NPs, and PAs) will be released the first pay period following 90 days from the date the job offer is accepted. Advance practice employees may not be allowed to transfer to a PRN position prior to the first pay period following 90 days unless the manager approves a transfer date prior to this date.

The complete Promotion, Demotion, and Lateral Transfer Policy can be located on HH Health System's Intranet.

## ANNUAL PERFORMANCE-BASED EVALUATION AND MERIT INCREASE

Merit increases for employees are generally determined based on the financial performance of the organization and individual performance. Eligibility for a merit increase is determined each fiscal year.

- **Performance-based Evaluation** - A performance appraisal is a formal written evaluation that will be given to employees by their manager. Performance should be discussed during the performance appraisal, including standards of behavior, job duties, training needs, and job prerequisites.
- **Merit Increase** - Merit increases, if granted, are generally effective after the start of the new fiscal year. Grandfathered Plus or Weekend employees, and PRN employees (unless they work at least four hundred hours in the evaluation cycle) are not eligible for merit increases but may be eligible for other forms of compensation to be determined annually. The eligibility criteria for merit raises are determined each fiscal year. In general, employees are not eligible for a merit increase if they are at the maximum of their salary grade, have received one disciplinary final warning or two written performance improvement counseling's during the evaluation cycle, or performed poorly during the evaluation cycle. The complete Merit Increase Policy is located on HH Health System's Intranet.
- **Incentive Compensation** - Incentive compensation is designed to reward certain employees or employee classifications that do not qualify for a merit increase, such as employees who have reached the maximum

of their grade or are paid at a flat rate. An incentive compensation increase is given in the form of a one-time check computed as a percentage of the employee's annual base pay. To be eligible to receive an incentive compensation check, employees must be employed on the day the check is distributed.

Incentive checks and merit increases are calculated on the employee's base hourly rate excluding shift differential, PRN differential, weekend differential, float differential, and supplemental differential. The decision to pay a merit or incentive compensation increase is not automatic or pre-determined and is at the discretion of the hospital. The complete Annual Performance Based Evaluation Policy can be located on HH Health System's Intranet.

## **SPECIAL MERITS**

Special merits are designed to reward employees who are consistently exceptional performers. Special merits may be requested by the department manager at any time during the year. Only one special merit may be authorized during any twelve month period. Employees are not eligible for a special merit increase if they have received a performance improvement counseling or final warning in the last twelve-month period.

Special merits are figured on the employee's base hourly rate excluding shift differential, weekend differential, PRN differential, float differential, and supplemental differential. The decision to pay a special merit is not automatic or pre-determined and is at the discretion of HH Health System. To be eligible to receive a special merit increase in the form of a lump sum check, employees must be employed on the day the check is distributed. The complete Special Merit Policy is located on HH Health System's Intranet.

## **SHIFT DIFFERENTIAL PAY**

Generally, non-exempt/hourly employees qualify for shift differential. Salaried employees who are regularly scheduled to work the evening or night shift or both may qualify for shift differential. The amount of shift differential varies depending on the employee's position, title, and shifts worked. Shift differential is paid when the majority of the hours worked in a day fall after 3:00 p.m. The complete Shift Differential Policy is located on HH Health System's Intranet.

## **ON CALL AND CALL BACK PAY**

As a condition of employment, certain employees are required to be on call in case of emergencies or to be available for work if needed. Non-exempt or hourly employees who are required to remain available to return to the hospital for duty within thirty minutes of being called may be eligible for on-call pay. The majority of employees who are placed in an on-call status may be paid at a rate of \$2.00 per hour for each hour while waiting to be engaged to work. Clinical areas that require their employees to work a substantial amount of on-call and call back hours may be eligible for a different on-call pay rate.

Eligible employee may receive call-back pay. It is paid to eligible employees who are called back into work for non-scheduled time and is paid at 1.5 times the employee's base hourly rate plus shift differential pay for each hour worked. The minimum call-back time for being called back into work is two hours for all employees who are called back to the hospital after being relieved of duty for the day and having left the facility premises. On-call pay is not paid while the employee is actively at work or for the two hours of minimum call-back hours.

When an employee is on-call but is unable to physically leave the hospital at the time call begins, all worked hours from the time the employee was placed on call will be coded as call back extended. Employees receive 1.5 times their base hourly rate for call back extended hours but do not receive the minimum of two hours of pay unless they leave the hospital and return. Clocking out and then immediately back in does not reflect call back and a minimum of two hours and is considered falsification of time records. Eligibility for call pay is to be determined by each individual Department Director.

Each department with on-call employees must establish the regular hours of operation for the department and the number of employees that will be placed in an on-call status.



The time editor for the department should code all employees as on-call, call-back, or call-back extended as appropriate in the time and attendance system.

#### **Definitions**

- On-call Pay: Compensation to employees who are available to return to work within thirty minutes of being called.
- Call-back Pay: Compensation to employees for returning to work when called in while serving on an on-call basis.
- Call-back Extended Pay: Compensation for remaining at work when on-call.

### **HOLIDAY PREMIUM PAY**

All employees who are required to work in departments that are open on an eligible holiday are eligible for holiday premium pay. Physician, administrative, and executive positions are not eligible for holiday premium pay.

Holiday premium pay is \$4.00 per hour worked on the holidays listed below. Except where noted, the holiday premium pay is paid for twenty-four hours beginning 6:45am the day of the holiday.

- Memorial Day
- Fourth of July
- Labor Day
- Thanksgiving Day
- Christmas Eve and Christmas Day: 3:00 p.m. Christmas Eve until 6:45 a.m. the day after Christmas
- New Year's Eve and New Year's Day: 6:45 p.m. New Year's Eve until 6:45 p.m. New Year's Day

The time and attendance system will automatically calculate holiday pay for any employee (excluding physicians and executives) who has clock activity during the holidays designated above. Time and attendance editors are responsible for removing any holiday pay that is calculated for an ineligible employee by moving the HOL pay code to the HOLN (no holiday pay) code. The ineligible employee will be paid for all worked hours but will not receive the additional \$4.00 per hour holiday pay.

### **GARNISHMENTS**

HH Health System may be required by law to garnish or levy an employee's wages. If the Human Resources Department receives a garnishment or levy request, the employee will be notified by mail.

### **JURY DUTY, SUBPOENAS, and Poll Workers**

Full and part-time employees will be paid their regular base rate of pay, plus shift differential (for shift employees) for scheduled work hours missed while on jury duty. 12 hour shifts are reimbursed with 12 hours of jury duty pay. PRN and temporary staff are not eligible for reimbursement for jury duty. All employees may keep the check issued by the court.

Employees should notify their manager as soon as they are summoned for jury duty. Employees should maintain communication with their manager to keep the department informed of the duration of their absence from work. Upon completion of jury duty, the court will give the employee a Certificate of Jury Duty. This certificate must be presented to the employee's manager immediately upon return to work.

If employees are subpoenaed to testify as witnesses in a matter not involving the hospital, they will be granted time off from work without pay, but may use accrued ETO.

Employees will be paid up to 4 hours of Administrative Leave when serving as a poll worker in an upcoming election.

## SECTION IV COMMUNICATIONS AND PROBLEM SOLVING

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### COMMUNICATIONS

HH Health System believes that our employees' interests are best served by direct communication with management rather than through an outside organization. Accordingly, we believe that you should be able to express your problems, suggestions, and comments to us without any third-party interference and do not believe that labor unions are necessary or desirable at HH Health System. We also believe that any third-party that would threaten, interfere with, or disrupt in any way our ability to render complete and continuous care would be detrimental to our patients.

HH Health System's management strives to keep its employees informed of the hospital's activities and encourages them to voice their opinions and concerns. Department meetings, bulletin boards, newsletters, e-mail, and HH Health System's Intranet are used to inform employees of items of general interest as well as specific items pertaining to their jobs.

HH Health System will treat its employees equitably in all respects and it is HH Health System's intention to continue improving wages and working conditions for employees whenever possible, and to provide for all employees security and future welfare consistent with the organization's ability and the trends within the health care industry.

### SUGGESTIONS

Employees are encouraged to make suggestions if they discover new or improved ways of performing their work or if they have an idea for improvements in the hospital. All employees are encouraged to make suggestions freely to their manager or any member of the executive staff. Employees can also make suggestions to the Employee Suggestion Committee via a link on the Pulse page on the intranet.

### PROBLEM-SOLVING PROCEDURE

Satisfactory working relationships largely depend upon a mutual understanding of HH Health System goals and objectives. In order to resolve problems at the earliest stage possible, HH Health System encourages employees to discuss work-related concerns freely with management. The following four-step problem solving procedure has been implemented to allow employees, on an individual basis, to bring their work-related complaints and problems to the attention of management. In instances of discipline, employees have sixty days from the date they received disciplinary action to appeal such action. Employees must first seek resolution from their supervisor; if this cannot be obtained they may proceed to Step 1 of the Problem Solving Procedure.

#### **Step 1- Department Manager and/or Director**

Employees may discuss the problem or complaint with their department manager or director. Most problems are resolved at this level.

#### **Step 2- Service Line Administrator and Operational Vice President**

Employees may discuss the problem or complaint with their Service Line Administrator and Operational Vice President. Depending on the complexity of the situation at hand it may involve one or more conversations.

This is the final step of the problem-solving process for employees appealing a performance improvement coaching/counseling, a performance Improvement written counseling or an annual performance evaluation score.

If the complaint is regarding a Performance Improvement final warning or a discharge in employment, and the employee feels it has not been resolved at this level, the employee may proceed to Step 3.

**Step 3- Human Resources**

Employees appealing to Human Resources must complete a Request for Human Resources Intervention form, which is located in the Human Resources Department and on HH Health System’s Intranet. An Employee Relations Specialist will schedule a meeting with the employee and investigate the problem or complaint. If the problem remains unresolved, employees may be asked to discuss the problem or complaint with the Director of Human Resources or the Vice President of Human Resources.

This is the final step of the problem-solving process for employees appealing a Performance Improvement final warning. If the complaint involves a discharge of employment and the employee disagrees with the resolution, they may proceed to Step 4.

**Step 4- Chief Operations Officer or Chief Executive Officer**

Employees wishing to appeal to Step 4 of the Problem Solving Procedure must meet with the Chief Operations Officer or the Chief Executive Officer. This is the final step in the problem-solving procedure.

**Problem Solving Procedure: Heart Center Inc. and Madison Hospital**

**Heart Center, Inc.**

- Step 1 – Manager
- Step 2 – HCI Dir. Operations
- Step 3 – HCI President
- Step 4 – Human Resources

**Madison Hospital**

- Step 1 – Manager/Director
- Step 2 - Human Resources
- Step 3 - Madison President

**Unlawful Harassment**

Employees are encouraged not to skip any step in the problem-solving procedure unless the complaint involves unlawful harassment. In these cases, the employee should immediately report the complaint to an Employee Relations Specialist, Director of Human Resources, or Vice President of Human Resources where it will be immediately addressed.

**Provisional Period**

Other than unlawful harassment, employees within the first six months of employment are considered to be in their provisional period and not eligible to utilize the Problem Solving Procedure. During the first six months of employment the new employee and management are encouraged to informally resolve any issue or complaint.

## SECTION V RULES OF CONDUCT

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Huntsville Hospital Health System has established a Fair and Just Culture approach of workplace accountability. It provides guidance in how we address adverse events and behaviors, and how employees, managers, and physicians work together to maximize their effectiveness of accomplishing the organization's mission, vision, and values. Our approach is complementary to our "Journey to Zero". This journey is about providing a high level of care that eliminates harm, and meets the needs of everyone that walks through the door in a safe, caring, and kind way.

Safety is first and we encourage employees to stop and think in order to make safe choices. Employees are educated to utilize Universal Relationship Tools which are good factors in promoting team work and increasing communication. Employees are encouraged to practice utilizing Universal Reliability Tools to improve human performance, both as an individual and as part of the team. These communication tools help us support each other, keep our attention on task, focus on best practice, and effectively communicate.

At Huntsville Hospital Health System, we strive to respond fairly to our employee's mistakes and performance issues. In order to be fair and just, we have to consider individual accountability as well as system issues that have inadvertently set our employees up for failure. When errors do occur, we encourage open communication about the error to support a non-punitive work environment. However, it is not a blame-free environment. A deliberate act where an employee makes an intentional violation and disregards patient and co-worker safety is not tolerated. Employees are encouraged to report all safety events, including near miss events. By doing this we can learn about the contributing factors and implement risk reduction strategies to strengthen our systems, prevent future events, and provide a safer environment.

We strive to create a safe work environment to take advantage of the tools that advance quality and safety by understanding that our employees will make honest mistakes that will result in an occasional error. We want to focus our energy on designing policies and procedures that block predictable mistakes. An honest mistake requires a different management response than a knowing violation. Based on the circumstances an honest mistake may require coaching on individual error prevention techniques, management actions to improve team knowledge and practice, or system or work process changes. A knowing violation, however, may fairly require disciplinary action up to and including termination of employment. In order to learn from adverse events, single events will be investigated. An individual's behavior and reasoning for taking action will be taken into consideration.

In addition to a single event, repetitive events or errors will be investigated. An employee who has committed a series of errors may be subject to disciplinary action or removal from their current position when previous education and coaching was not effective. Employees are expected to report to work fit for duty. Additionally, continuous final warnings due to attendance or other infractions indicate a pattern of misbehavior or lack of commitment to the organization that is unacceptable. Multiple disciplinary actions for any reason may not occur during your tenure and may result in discharge of employment.

We have adopted a Performance Management Decision Guide (PMDG) to respond and treat employees fairly when performance does not meet expectations. Managers must differentiate between honest mistakes and knowing violations of performance expectations. When practical and reasonable, coaching and disciplinary action shall be progressive to ensure an employee understands expectations and has an opportunity to make behavior changes. However, certain Knowing Violations or Deliberate Acts where an employee took an unjustifiable risk may result in immediate discipline or termination of employment.

### **Pay Rules during an Investigation or After Performance Counseling**

Employees may be placed on administrative leave while an incident is being investigated. Employees given a final warning may be sent home without pay after receiving the final warning. Non-exempt or hourly employees may be sent home for the remainder of their shift without pay. Exempt or salaried employees may be sent home for the remainder of their shift but will be paid for the entire shift. Employees are permitted to return on their next normally scheduled work day, but must return with a completed Return to Work Plan. The purpose of the Plan is for the employee to describe the corrective action they will take to consistently meet the manager's performance or behavior expectations. Normally, an employee who has received a final warning for any

reason including attendance, poor performance, or a policy violation may be ineligible for a merit increase or incentive compensation for that year. Employees who have been terminated for disciplinary reasons are not eligible to be paid their ETO and may not be eligible for immediate rehire.

Final warnings and discharge of employment must have prior approval from the Human Resources Department. An employee may be discharged from the organization if any instance of improper conduct or poor performance, whether listed in this section or not, warrants discharge in light of all attending circumstances, including the employee's overall record of performance.

Neither this handbook nor Huntsville Hospital's Policy and Procedures represent an employment contract, in whole or in part, for any duration, between Huntsville Hospital Health System and its employees. This means that you and Huntsville Hospital have an employment-at-will relationship. In such a relationship, you may end your employment with the hospital at any time and for any reason, and Huntsville Hospital Health System may do likewise.

### **Rules of Conduct Standards**

Employees have a responsibility to follow the departmental and organizational wide policies and procedures as well as the rules of conduct. This section includes a list of the rules of conduct and policies employees are required to follow. It is not possible to list every conceivable rule or to anticipate every circumstance under which a rule may be broken. It is anticipated that incidents of misconduct not listed will occur. Additionally, these Rules of Conduct may be periodically updated, modified, and supplemented with or without notice or publication to employees. Violations of conduct /policies may result disciplinary action such as coaching, written counseling or final warning when the employee's behavior is determined to be a deliberate act with malicious intent, a knowing violation or is repetitive in nature.

- Adhere to the Standards of Behavior.
- Communicate and behave in a professional manner.
- Wear the Employee Identification Badge while at work in a visible and readable manner.
- Dress appropriately for work and in accordance with the Employee Dress, Uniform and Appearance Policy.
- Come to work on time and as scheduled and to call in as directed by department policy when unable to report to work.
- Return from meal or rest periods on time.
- Abide by the Cellular Phone and Camera Phone policy and to limit use whenever possible to meal and rest periods.
- Report and remain at your workstation during work hours and to leave only with supervisor authorization.
- Park in assigned parking area.
- Follow the departmental on-call policy, and to respond to a call or page within the department's scheduled timeframe.
- Present to work mentally and physically fit for duty.
- Abide by the Smoking and Tobacco Products policy.
- Adhere to the Social Networking Policy and procedure.
- Maintain mandatory requirements (Tuberculin Skin Test, required classes, population specific competencies, etc.) by the designated timeframe stated in the Annual Mandatory Requirements Policy.
- Renew professional licensure in a timely and verifiable manner in accordance with the Licensure and Certification Policy (i.e. primary source verification must be obtained prior to the expiration date).
- Be honest and truthful in documentation and verbal communication to include the application of employment, time reports, and facility and work related documents, and patient reporting before and during employment.
- Take action to report unlawful harassment or stop known unlawful harassment.
- Notify your supervisor of intent to resign per the Resignation Policy and to work out the appropriate notice.

- Abide by federal, state and local laws. Employees who are convicted of a crime, the nature of which would adversely affect their job performance or relationship with the hospital, fellow employees, or patients may be discharged from employment.
- Keep all computer passwords confidential.
- Treat protected information as confidential and to ensure patients' and co-workers' right to privacy and modesty by maintaining a secure and trusting environment. Examples include following proper procedure when transmitting protected health or confidential information; securing and properly disposing of patient/employee medical information and data; and accessing patient or employee data (ex. Cerner, McKesson, etc.) On a business "need to know" basis.
- Report an act of fraud or illegal action.
- Report a medication error per procedure within forty-eight hours.
- Follow your supervisor's instructions.
- Follow the No Solicitation or Distribution policy.
- Follow the Acceptance of Tips and Gratuities policy.
- Use and maintain facility property and equipment appropriately.
- Adhere to quality, safety and regulatory compliance standards.
- Be available to work when needed in times of emergency, disaster, or similar situations.
- Avoid causing harm to one's self by failing to utilize safety and infection control procedures such as refusing to show proof of required vaccinations.
- Submit to a drug screen or alcohol test when asked.
- Follow the Patient Identification procedure and use two patient identifiers.
- Follow the site marking and time out protocol.
- Cooperate with a hospital investigation, such as a search.

### **Deliberate/Knowing Violations**

Below are some examples of deliberate acts. Employees who commit intentional actions such as those described below may be subject to disciplinary action up to and to include the immediate discharge of employment.

- Theft of property from the facility, employee or patient.
- Theft of time.
- An act of unlawful harassment where in the hospital's judgment warrants discharge.
- Physical assault on a fellow employee or any other person on facility property.
- Threatening, intimidating, or coercing a fellow employee or patient on facility property to include threatening a co-worker or supervisor with bodily harm or using language that would lead a co-worker or supervisor to believe harm was intended.
- Possession on firearms, explosives, or any item which may be considered a weapon on facility property.
- Deliberate sleeping on the job constituting willful abandonment of duty.
- Using patient information for the purpose of identity theft.
- Destroying or altering patient or employee data without authorization.
- Releasing patient or hospital related confidential information with the intent to harm an individual or the hospital.
- Obtaining by means of deception, and using another person's password, such as to look at patient data.
- Unauthorized copying or printing of facility records like patient medical charts or patient data.
- Reckless acts which may result in neglect or abuse of a patient to include job abandonment, refusal to work in another unit or department.
- Failure to report an act of fraud or illegal action.
- Falsification of patient and hospital records.
- Unprofessional communication or conduct where the Standards of Behavior has been consistently violated.

- Failure to consistently demonstrate the ability to perform the essential functions of the employee's job description and be considered fully effective in their position with or without accommodation

While these situations are considered to be deliberate, each incident in the above categories should be investigated for possible system improvement and to support a fair and just culture.

## SECTION VI EMPLOYEE HEALTH OFFICE

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### EMPLOYEE HEALTH OFFICE

The Employee Health Office is available for the health needs of employees while at work and provides a variety of services unique to the health care worker. Services include the following:

- Coordinating pre-employment health information and data;
- TB screening and management;
- Immunization programs;
- Blood and body fluid exposure risk assessment and management;
- Physician services on-site for acute care of minor injuries and illnesses;
- Family and Medical Leave (FML) coordination;
- Tracking contagious illnesses among employees;
- Latex sensitization assessment;
- Assistance with worker's compensation issues;
- Screening eye examinations for laser users;
- N95 Respirator fit testing; and
- Hazardous Drug Medical Surveillance.

All new employees are required to complete a medical history form entitled Physical History Screening at the time of the post-offer pre-employment laboratory screening. The Employee Health Office coordinates all the information and maintains confidential employee health records.

All new employees are screened for tuberculosis (TB) using the two-step method of skin testing. Most hospital employees receive annual TB skin testing. The Employee Health Office will manage any employee who develops a positive TB skin test at no cost to the employee. The organization has a protocol for employees who are exposed to patients with active TB.

As health care workers, employees may be exposed to infectious diseases that are vaccine-preventable. In an effort to reduce the spread of these diseases among employees, patients, and the community at large, these vaccines are available to all employees through the Employee Health Office. This office is responsible for maintaining records of all employees' immunizations. Unless otherwise noted, the following immunizations are available through the Employee Health Office at no charge:

- **Hepatitis B vaccine**  
This vaccine is voluntary but highly recommended for all employees who are or may be involved with the handling of blood or body fluids. It is a series of three injections, and it is recommended that the employee return to confirm the presence of antibodies, which confirms immunity to Hepatitis B.
- **Measles, mumps, and rubella (MMR)**  
Immunity to rubeola (measles), rubella, varicella, and mumps is required of all employees. New employees are screened for immunity to these infections. Any employee determined to be non-immune to these infections will be given the appropriate vaccine unless medically contraindicated.
- **Influenza**  
This vaccine is offered annually to all employees.
- **Tetanus with a cellular pertussis vaccine (Tdap)**  
This vaccine is offered to employees as indicated through the course of their employment.
- **Meningococcal**  
This vaccine is for microbiology personnel only.



In the event of an exposure to blood or body fluid, the employee reports to the Employee Health Office for assessment of the risk to blood-borne pathogens and the implementation of post-exposure prophylaxis if indicated. After hours, the employee should call 4HELP for assistance.

A physician is available for acute care of minor illnesses and injuries for employees on a walk-in basis. The physician does not replace the employee's private physician for primary care.

If an employee has an unplanned absence from work for any reason, the employee should call the Leave Support Line at 256-265-0000.

HH Health System recognizes the increasing risk of latex allergy among health care workers. If employees suspect that they have developed sensitivity to latex, they should notify the Employee Health Office for confirmation and assistance.

## SECTION VII LEAVES OF ABSENCE

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HH Health System provides four types of leaves: (1) Eight-(8) Week Employee Medical; (2) Family and Medical; (3) Personal; and (4) Military. Employee requests for leave must reflect the period requested and, to the extent possible, the date of return. The following are general rules pertaining to leaves:

- Employees must apply for Family Medical Leave (FML), Eight-(8) Week Employee Medical Leave, Personal Leave, and Military Leave with the organizations leave administrator, FML Source. Personal Leave approval is at the discretion of the employee's manager; it is not guaranteed. The leave administrator will contact the requesting employees' manager for approval.
- Employees absent four-(4) or more days due to illness or injury, including workers' compensation injuries, must apply for a leave with the leave administrator. Employees have forty eight – (48) hours after their return to work to apply for a leave. Employees have fifteen-(15) days to complete and return the medical certification form that will be provided to them by the leave administrator.
- Employees must give at least 30 days advance notice of the need to take the leave of absence when the need for such leave is foreseeable. In all other circumstances, employees must give notice as soon as possible. Notice of leave may be oral or written and must be given to the manager and the leave administrator. Failure to provide notice or sufficient information so that it can be determined that the absence qualifies for leave under this policy may result in a delay or forfeiture of the employee's rights under this policy. This means the absence may then be counted against the employee's overall attendance record. Employees should contact their manager well in advance of their expected return to work so that work schedules can be prepared. Employees are required to contact the manager a minimum of two working days before their anticipated return to work.
- Managers will assign an occurrence or tardy for each absence, leave early, or late arrival in accordance with their department's attendance policy prior to receiving approval from the leave administrator. The Employee Health Office will remove all occurrences once approval is received.
- Hours taken toward FML, 8 Week Medical Leave, or leave extension are paid first from the Voluntary Sick Plan if available and then from the employee's ETO bank.
- A leave may adversely impact an employee's enrollment in the flexible-spending plan. Employees should contact the Human Resources Department prior to the start of a leave to inquire about their flexible-spending plan.
- Arrangements must be made with the Human Resources Department for payment of the employee portion of benefit premiums. If premiums are not received by the due date, coverage may be terminated.
- Employees on leave are prohibited from entering into employment with another employer.
- Work related absences will run concurrent with family medical leave.
- Employees who do not return from a leave or fail to complete the appropriate paperwork may be denied leave and/or removed from the payroll.
- Eligibility for FML Leave is determined by using the rolling-backward methodology.
- Seniority will be uninterrupted while an employee is on an approved leave of absence.
- Employees will not accrue ETO while on leave of absence.
- Contact information for the leave administrator is available by calling the Employee Health Office, the Human Resources Department or visiting the Employee Health website on HH Health System's Intranet.

### EIGHT-WEEK EMPLOYEE MEDICAL LEAVE

Employees are eligible to apply for an eight-(8) Week Employee Medical Leave **after** ninety-(90) days of employment. All HH employees are eligible for eight-(8) Week Medical Leave, including PRN employee. HH Health System provides eight weeks of unpaid leave during a twelve-(12) month period for the following:

- Serious medical condition of the employee; and
- Pregnancy of the employee

Eight Week-(8) Medical Leaves may not be used for intermittent leave, illness of a family member, or after Family Medical Leave has been exhausted. Employees are not permitted to apply to extend an eight-(8) Week Medical Leave. *Employees who return from an eight-(8) Week Medical Leave are not guaranteed their same position, salary, shift, or department. Every effort will be made to place these employees in the same or comparable position; however, placement will be at the discretion of the manager and will depend upon the operational requirements of the department.*

## **FAMILY MEDICAL LEAVE (FML)**

In compliance with the federal Family and Medical Leave Act of 1993, employees who have been employed by HH Health System at least twelve months, have worked at least 1250 hours (including time worked as PRN) during the preceding twelve months at HH Health System, and have satisfied the leave requirements are provided up to twelve weeks of leave, except for service member family leave, during a twelve month period for one or more of the following:

- Employee's serious medical condition, including pregnancy;
- Birth of an employee's child or the care for an employee's child within twelve months of the date of birth of the child;
- Care for an employee's spouse, child, or parent who has a serious medical condition;
- Adoption or foster care of a child within twelve months of the date of placement of the employee's child; and/or
- a qualifying exigency, as described below.

Eligible employees with a spouse, son, daughter, or parent on covered active duty (or who has been notified of an impending call or order to active duty) in the Armed Forces may use their twelve week leave entitlement to address certain qualifying exigencies. Covered active duty includes deployment to a foreign country. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

An eligible employee may take up to 26 weeks of unpaid leave during any single twelve month period to care for the employee's spouse, son, daughter, parent, or next of kin who is a covered military service member and incurred a serious injury or illness in the line of military duty, or who experienced the aggravation of an existing or pre-existing condition in the line of active duty. A covered service member is a current member of the Armed Forces, including a member of the National Guard or Reserves. A serious injury or illness is one that may render the service member medically unfit to perform his or her duties for which the service member is undergoing medical treatment, recuperation, or therapy; or is in outpatient status; or is on the temporary disability retired list.

Covered service members also include veterans who began treatment, recuperation, or therapy for a serious injury or illness within five years after leaving the service. The serious injury or illness may have manifested before or after the individual became a veteran.

### **Intermittent Leave or Reduced Work Schedule**

FML permits eligible employees to take leave intermittently or on a reduced schedule under certain conditions. Eligible conditions include the care of an employee's child, adoption, or foster care of an employee's child, or if an employee or an employee's family member has a serious health condition and it is medically necessary to take intermittent leave. All rules and criteria for FML apply to intermittent leave. Intermittent leave may not exceed twelve-(12) weeks in a rolling twelve-(12) month period. Intermittent leave may be used a few hours or a few days at a time.

When intermittent leave is needed to care for an employee's immediate family member or the employee's own illness and is for planned medical treatment, the employee must make every reasonable effort to schedule foreseeable intermittent leave based on planned medical treatments so as not to unduly disrupt the

hospital's operations. HH Health System requires notice for intermittent leave for planned medical treatment, like a doctor's visit, a minimum of five-(5) working days in advance.

HH Health System may assign employees temporarily to alternative positions or shifts with equivalent pay and benefits that better accommodate such recurring periods of intermittent leave.

Employees on intermittent leave are required to report any time used to the hospital's leave administrator within forty eight-(48) hours.

### **Leave Extension**

Employees who are unable to return from their own serious medical condition at the end of the twelve-week FML period may request an extension. All requests for extension should be made to the leave administrator prior to the exhaustion of FML leave. Extensions may be granted for up to twelve additional weeks. Employees on extension of FML are not guaranteed their same or comparable position, salary, shift, or department upon their return to work after leave.

Employees are required to use any Voluntary Sick or accrued ETO hours during extensions of FML leave. Employees may keep their medical, dental, vision and life insurance at the applicable rate during extension of FML if they make arrangements to pay premiums for such insurance. Employees able to return from this type of leave but whose previous position has been filled should contact the Human Resources Department and should apply for any open position for which they are qualified once obtaining a return to work form from their physician. Employees who do not find another position within the end of the leave extension will be removed from payroll.

### **Procedure for Applying for Family Medical or Eight-Week Employee Medical Leave**

1. Employee calls the leave administrator. If the leave administrator was not called prior to missing work due to an unexpected illness or injury, employee must call within forty eight-(48) hours of returning to work.
2. The leave administrator will send the employee a medical certification form which should be taken immediately to the employee's physician. Employees have fifteen-(15) days to send the completed form to the leave administrator.
3. The leave administrator will send an e-mail to the employee's manager notifying them if they approved or denied the leave.
4. Employees must submit to the Employee Health Office a physician's release allowing them to return to work two days prior to the employee's first day back at work. Any work restrictions must be specified in detail on the release note. The leave administrator will e-mail the employee's manager of the employee's release to work.

## **MILITARY LEAVE**

All employees are eligible for military leave after they begin working at HH Health System. Documentation showing enlistment should be provided to the leave administrator. Leaves of absence will be granted to employees who are absent from work because of service in the U.S. uniformed services in accordance with the Uniformed Services Employment and Reemployment Rights Act (USERRA).

Advance notice of military service should be provided to the manager and the leave administrator unless military necessity prevents such notice or it is otherwise impossible or unreasonable. The leave administrator and Human Resources should be provided with a copy of the military voucher and travel orders prior to each departure. Scheduled employees (except PRN employees) will be eligible for a total of 168 hours of military leave with pay per calendar year for missed work days due to military obligations. Employees must notify their manager in writing if after 168 hours of eligible military leave have been exhausted, they choose to use ETO hours. Managers must notify Human Resources of any employee who has military obligations.

Employees who are called up to active duty will have their benefits continued as follows:

- For the first three months of active duty, all benefits will remain in place. If employees have used all paid time (both military leave and ETO hours), they are responsible for the payment of any employee portion of their premiums for all benefits;

- On the fourth month, all benefits, including ETO accrual, life insurance, and short and long-term disability insurance, will cease; however, employees can continue health, dental and vision insurance at the regular employee-paid premium. Employees must notify Human Resources of the benefit continuation and continue to pay the monthly premiums in a timely manner to avoid cancellations of these plans.
- If the employee does not want to keep benefits while on Military Leave, they must come to Human Resources to stop their benefits.

Employees on military leave for 30 days or less are required to return to work for the first full regularly scheduled shift on the first full calendar day following the period of service plus an eight hour period allowing for transportation from the place of service to the employee's residence. If it is impossible or unreasonable through no fault of the employee to return to work within this eight hour period, then the employee should return to work as soon as possible. Employees on military leave for more than thirty-(30) days but less than 181 days may be required to submit an application for reemployment not later than fourteen days after the completion of the period of service or, if submitting such application within such period is impossible or unreasonable through no fault of the employee, the next first full calendar day when submission of such application becomes possible. Employees on military leave for more than 180 days may be required to submit an application for reemployment not later than ninety days after completion of the period of service.

Barring the application of certain exceptions set out in USERRA, an employee returning from military service will be reemployed in the following manner. Employees returning from a period of military service of ninety days or less will be placed in the position they would have obtained had they remained continuously employed or, if the employee is not qualified to perform that position after reasonable efforts are made to re-qualify, the job the employee held before beginning his/her military service. Employees returning from a period of military service of more than ninety-(90) days will be placed in the position of like seniority, status, and pay. If the employee is not qualified for these positions after reasonable efforts to re-qualify, the employee will be placed in the job the employee held before beginning his/her military service or a position of like seniority, status, and pay. If the returning employee has a disability incurred in or aggravated during military service and cannot perform the position he/she would have attained had he/she remained continuously employed, then he/she will be placed in any other position that is of equivalent seniority, status, and pay and which the employee is qualified to perform or would become qualified to perform with reasonable efforts; if no other position qualifies, the employee will be placed in a position that is the nearest approximation in seniority, status, and pay consistent with the circumstances of such employee's case.

Employees returning from military service will be treated as though they were continuously employed for purposes of determining benefits based on length of service. Employees who do not pay for continued benefits after 6 months of active military duty must notify the Human Resources Department in writing and must re-enroll in any benefit program to which they are eligible upon return from active duty.

If an employee does not return from military leave after five-(5) years and none of the provisions expanding the five-(5) year limitations period set out in USERRA apply, then he/she will be removed from the payroll. If the cumulative length of the employee's absence for military service and of all previous absences for military service while employed at HH Health System exceeds five years and none of the provisions expanding the 5 year limitations period set out in USERRA apply, then that employee will be removed from payroll.

#### **Active Duty Because of Any Qualifying Exigency**

Eligible employees who need leave because of any qualifying exigency arising out of the fact that their spouse, son, daughter, or parent is on active duty, or has been notified that they will be called or ordered to active duty in the Armed Forces in support of a contingency operation may take FML under this policy. Leave may be taken all at once or intermittently.

#### **Service Member Family Leave**

Eligible employees who need leave to care for a covered service member who is their spouse, son, daughter, parent or next of kin and who is undergoing medical treatment, recuperation, or therapy, is otherwise in outpatient status or is otherwise on the temporary disability retired list, for a serious injury or illness incurred in the line of duty on active duty, may take up to 26 weeks of leave during a single 12 month period. The leave may be taken all at once or, when medically necessary, intermittently.

### **Procedure for Applying for Military Leave**

1. Employee calls the leave administrator.
2. Employees requesting leave because of any qualifying exigency must notify the leave administrator and provide any certification that they or their family member is issued regarding their active duty or call to active duty in the Armed Forces.

## **PERSONAL LEAVE**

Personal leaves may only be granted to employees who have exhausted all available ETO hours. Personal leaves are leaves of absence designed to:

- Further employee training or education if it is determined to be of value to the organization;
- Give the employee time away from work to resolve personal situations; and
- Include time off not covered by other types of leaves.

Personal leaves are limited to eight-(8) weeks. The employee must have completed one year of service to qualify. Employees who desire a personal leave must apply through the leave administrator who will then notify the employee's manager for approval. The manager should approve a personal leave only if adequate coverage for that employee's absence can be arranged. Employees who return from this type of leave are not guaranteed their same position, salary, shift, or department. Every effort will be made to place these employees in the same or comparable position; however, placement will be at the discretion of the manager and will depend upon the operational requirements of the department.

### **Procedure for Applying for a Personal Leave**

1. Employee calls the leave administrator.
2. The leave administrator will contact the employee's manager for leave approval.
3. The leave administrator will notify the employee of approval or denial of request.

## SECTION VIII OCCUPATIONAL HEALTH AND SAFETY

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Most accidents are preventable through proper use and maintenance of equipment and facilities, alertness on the job, and good housekeeping practices. Employees must report any hazardous condition to their manager as soon as it is discovered. Dangerous practices such as running, wrestling, horseplay, and other acts likely to cause injury are prohibited. In addition, employees should not handle any equipment which they are not authorized to handle or with which they are not familiar.

### EMPLOYEE ACCIDENT AND ILLNESS REPORTS

The purpose of the Employee Accident Report is to provide a standardized means of reporting employee illness or injury that may be deemed compensable under worker's compensation. This report is used to monitor, evaluate, and improve the quality, safety, and health of employees of HH Health System. An occurrence is defined as any event that happens to an employee in which the occurrence was in the scope of employment, place of employment, and has a causal relationship to employment. This includes all injuries or accidents where there is a potential for injury, exposure to hazardous substances, or exposure to infectious diseases. Blood and Body Fluid Exposures without injury should be reported to the Employee Health Office.

Employees must report any work related accident or injury immediately to Comp One by calling 256-532-2777. Delays in reporting may jeopardize the right to compensation benefits. If employees are involved in an occurrence, they should report to a manager as soon as possible. The employee and supervisor will complete the Employee Accident Report, located on the hospital intranet's site, and scan it to Comp One at [accidentreport@compone.org](mailto:accidentreport@compone.org). **All work related accidents/incidents reported that involves equipment, a vehicle, or requires direct medical treatment will require a post-accident drug screen.**

For minor injuries occurring on the job that require minor first aid and do not need the care of a physician, employees should report to their supervisor, complete the accident report and go to the Employee Health Office. For more extensive injuries or injuries, the employee must call Comp One so that the injury can be assessed and referred to the appropriate treatment center.

### SAFETY MANUAL

HH Health System has a comprehensive safety manual that can be located on HH Health System's Intranet.

#### Emergency Codes 2019

In case of an emergency, the operator will announce emergency codes over HH Health System's overhead paging system. The emergency codes are:

#### PROBLEM/EMERGENCY

Medical Emergency  
Fire, Smoke, or the smell of something burning is observed  
An infant is missing and/or the infant protection alarm has been activated  
Missing Patient or Visitor  
Need for Security Personnel (hostage, combative, or civil disturbance)  
Bomb Threat  
Potential emergency situation exist. Emergency Operations plan on standby  
Activation of Disaster Plan  
Active Shooter and/or Person with a weapon  
Severe Weather (watches, warnings, and inclement weather)  
Facility Evacuation  
IT Alert-Downtime  
Earthquake-Significant shaking of the building and grounds

#### SYSTEM CODES

Code Blue  
Code Red  
Code Pink  
Code Amber  
Code Gray  
Code Black  
Code Green Alert  
Code Green  
Plain Language  
Plain Language  
Plain Language  
Plain Language  
Plain Language

\*Med Alert Trauma-used only for medical situations involving uncontrolled bleeding of non-patient and staff.  
Procedure: Initiate Med Alert Trauma Code by calling 4-5555. If known, advise Security if patient is suspected to have uncontrolled bleeding and if a wheelchair or stretcher is needed.

## **EMERGENCY PREPAREDNESS PLAN**

HH Health System has a comprehensive emergency preparedness plan that can be located on HH Health System's Intranet. Individual departments have their own emergency preparedness plans. For information on your department's plan, please see your manager.

## **FIRE SAFETY**

Everyone at HH Health System is responsible for fire safety. Fire extinguishers are located near stairwells and exits. No matter how minor it may appear at first, stay calm and use common sense. Other people may depend on your actions.

If you encounter a fire, use the RACE response plan:

- R** - Rescue
- A** - Alert
- C** - Contain
- E** - Evacuate/extinguish

To operate a fire extinguisher, use the PASS procedure:

- P**- Pull pin
- A**- Aim
- S**- Squeeze handle
- S**- Sweep base

## **HAZARDOUS DRUG MEDICAL SURVEILLANCE PROGRAM**

Huntsville Hospital follows OSHA, NIOSH, and USP mandates and recommendations that all employees who regularly handle materials that have been deemed hazardous are screened at employment and annually for any health changes that could result from exposure to these drugs. Adverse health effects from hazardous drug exposure may include harm to internal organs, damage to the reproductive system, genetic damage, birth defects, and cancer.

Employees who work in areas involving oncology services have been determined to have an increased risk of exposure to hazardous materials, such as drugs or waste, and will be involved in the surveillance program. These employees will need to complete a Hazardous Drug Health History and complete lab work upon hire and annually. In addition, employees outside of oncology services will also be monitored in the event the employee is exposed to hazardous medications on a regular basis and needs to be included in the program.

Employees are expected to follow hospital wide and departmental rules and regulations designed to provide protection from hazardous materials. Departments may have personal practice policies pertaining to appropriate use of personal protective equipment, administration, transporting, wasting, handling patient waste, and spill management. Specific training will be provided by your department before handling hazardous materials. Follow all recommendations.

Report any exposures to your supervisor and to Comp One using the Employee Accident Report. Take advantage of annual screenings that are provided by the Employee Health Office at no charge.

Please refer to the Hazardous Drug Medical Surveillance Policy, located on the hospital's Intranet for additional information.



## SECTION IX EMPLOYEE BENEFITS

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HH Health System is proud of its employee benefits program and continually strives to improve on every aspect of the program. The benefits package is designed to provide comprehensive current and long-term security for our employees and their families. We also believe that a benefits program should give our employees the flexibility to choose coverage that fits their individual needs.

The following information is provided to give employees an overview of HH Health System's benefits package, however, the information contained in this handbook is intended only as a general summary of the benefits program. Employees should refer back to individual benefits summary plan documents for detailed information. These documents are available in the Human Resources Department and on Employee Self Service located on HH Health System's Intranet.

Because changes of benefits are inevitable, we reserve the right to revise or change our benefits program prior to accrual at our discretion without notice. Should you have any questions concerning your eligibility or entitlements, please contact the Human Resources Department.

### EARNED TIME OFF

ETO is accrued each pay period and is based on FTE, length of service and hours worked up to a maximum of 80 equivalent hours in a pay period. Full-time and part-time employees accrue ETO. PRN and temporary employees do not accrue ETO. Plus and Choice 10 employees accrue ETO based on their letter of agreement and Physicians accrue based on their employment agreement. Employees will not accrue ETO while on a leave of absence or when not working unless they receive Budget Hours. See Time Off Without Pay

Employees will begin accruing ETO the pay period after their sixtieth day of employment. The maximum balance allowed in an employee's PY (prior year ETO bank) or CY (Current year ETO bank) as of December 31 each year is a combined total of 1040 hours. Balances over the maximum allowed will be paid to the employee in January of each year.

ETO is paid at the employee's current base rate of pay, excluding shift differential and is not included in overtime calculations. This excludes employees under the Plus, Choice 10, and Weekend float categories. The cash value of an employee's ETO balance increases and decreases based upon the increase or decrease of an employee's base rate of pay, such as the receipt of a merit raise.

ETO is not considered to be accrued and eligible until actually posted to the employee's ETO bank. Time off will initially be deducted from the PY Bank. If there is an insufficient balance in that bank, the time off will then be deducted from the employee's CY Bank. Should an employee not be paid for all hours worked during a pay period, ETO accrual for those missed hours will be deposited in the employee's ETO bank for use as soon as administratively possible.

#### Example

*An employee with 2 – 35 months of service; authorized to work forty-(40) hours a week. Employees in this category who work the full forty-(40) hours per week will earn an accrual of 3.56 for that week (.089 X 40 hours worked in a week). If that same employee who is authorized to work forty-(40) hours a week, instead works thirty two-(32) hours, the accrual will be 2.84 for the week (.089 X 32 hours worked in a week).*

### ETO Accrual Rates per Hours Worked

Months Worked	Pay Periods Worked	Authorized to Work 36 Hrs per Week or More	Authorized to Work 35 Hrs per Week or Less
2-35	4 – 77	0.089	0.063
36-59	78 – 129	0.116	0.081
60-71	130 – 155	0.120	0.085
72-83	156 – 181	0.123	0.089
84-95	182 – 207	0.127	0.093
96-107	208 – 233	0.131	0.097
108-179	234 – 389	0.135	0.100
180-239	390 – 519	0.139	0.110
240-up	520	0.144	0.120

### Time Off Without Pay / Low Census

Time off without pay is not granted to employees who have ETO available for use. However, it may be granted at the department’s discretion to employees with no available ETO when workload allows. Employees who are asked to take time off from work during periods of low activity may use either ETO or take time off without pay. Time editors should code employees who do not wish to be paid with Budget Hours (BH) to allow the accrual of ETO. With department approval, employees who make up a missed workday within the same week may also take ETO for that non-worked day. For example, an employee takes eight equivalent hours of ETO on Tuesday and works an additional shift on Saturday; the employee with department approval may be paid for forty hours of worked time and eight equivalent hours of ETO.

### ETO Arrears

An exempt employee’s ETO balance may go into arrears up to 60 equivalent hours. Non-exempt employees may not have an ETO balance in arrears. For more information on when ETO may go into arrears, see the Time and Attendance Policy under Section III: Compensation Guidelines.

### Cashing Out ETO

To assist during an unforeseen hardship or emergency, employees may request to withdraw cash from their accrued ETO banks. Employees who have been employed at least six-(6) months or more are eligible to cash out portions of their PY, CY and Voluntary Sick Banks two-(2) times each calendar year after March 1. The first opportunity may be chosen by the employee at any time and the second will be held in November through the first week of December of each calendar year.

A maximum of 120 equivalent ETO hours may be cashed in at 100% of the value from the CY bank during any calendar year. An unlimited number of PY bank hours are eligible to be cashed at 75% of the value. Cash out requests must be made during the two-(2) cash out periods allowed each calendar year. The ETO Cash- In Request form can be found through Custom Applications on the Pulse page.

Twenty-(20) equivalent hours must remain in one or a combination of both banks as well as the accrual must be posted and visible in the PY and/or CY Banks in order to be eligible for cash out. Employees can view their available cash out amount in their CY Bank in Custom Applications under Employee Accruals.

Weekend employees who cash out a portion of their balance from this bank will be paid at their base rate of pay (i.e. non-weekend rate of pay). Although PY Bank balances are considered “frozen” when an employee transfers to PLUS or PRN status, they are eligible to be cashed in at 75% of the base rate of pay (no differential). Physicians are not eligible to cash out ETO.

### Change in Status/Separation of Employment/Transfer to PRN/PLUS

Employees who leave employment with the hospital will be paid all accrued ETO at 100% of its value, unless they were employed less than six-(6) months, terminated for disciplinary reasons, or did not give and work

out the required notice for their position. Physicians are not eligible to have their ETO Banks paid out upon termination. Use of an employee's ETO balance is not considered as fulfilling the work requirement for the job unless approved in advance by the director/manager. ETO will not accrue in the pay period in which the employee terminates employment.

Employees transferring to PLUS or PRN status will have their CY Bank balance paid out at 100% of its value with the first pay check following the transfer, provided they have completed six-(6) months of employment. The balance will be paid at the employee's base rate of pay, excluding the PLUS or PRN differential. Accrual in the PY bank will remain but is considered "frozen" and cannot be used for time off unless the employee returns to regular full/part-time status. PY bank accruals may be cashed out at 75% of the employee's base rate of pay (no differential) during the two-(2) cash out periods or paid at 100% of employee's base rate of pay if the employee resigns and meets the eligibility criteria described above.

### **Donation of ETO Equivalent Hours**

Eligible employees can donate between four-(4) and sixteen-(16) equivalent hours of ETO to another employee per person per year. Employees may donate an unlimited portion of their balance to the following family members who work at HH Health System: mother, father, wife, husband, brother, sister, grandparent, grandchild, child, and those over whom one has legal guardianship. Physicians, PLUS, Choice 10 employees, employees within their initial six month provisional period, and employees who have resigned employment may not donate any of their ETO balance. Physicians, Choice 10, and Plus employees may not receive donations. Weekend employees can donate at their base rate of pay (i.e. non weekend rate of pay). Donations to an employee's direct supervisor must be approved in advance by Human Resources.

Donated equivalent hours must come from the employee's ETO or Voluntary sick bank. All applicable taxes will be applied when the ETO donation is paid out. Recipients of donated ETO will receive the dollar value of the donated ETO posted into their ETO bank. *For example, an employee whose hourly rate is \$15.00 an hour donates ten equivalent hours of ETO to another employee whose hourly rate is \$10.00 an hour. The dollar value of the ETO being donated is \$150.00. The Payroll Department will add fifteen-(15) equivalent hours of ETO to the recipient's ETO bank.*

Employees wishing to donate ETO to another employee can complete the ETO Donation form located on HH Health System's Intranet via the Pulse page or in the Human Resources Department. Under no circumstances should employees solicit donations or swap ETO by donating to each other. Employees who do so will be subject to disciplinary action and termination of ETO cash-out privileges.

Donations are processed as soon as administratively possible and are not guaranteed to be available for use on any specific paycheck.

## **VOLUNTARY SICK PLAN**

Employees hired prior to July 2010 may have hours in the Voluntary Sick plan. These hours are available for use when the employee calls in sick or is on a leave of absence. Hours are paid at the employee's current base rate less shift differential and do not contribute to overtime calculations.

No additional hours may be placed in the Voluntary Sick plan. Voluntary Sick hours will be deducted from the plan until the bank has a zero balance. Upon separation of employment or transfer to PRN status, Voluntary Sick Plan hours are paid in full. Employees are guaranteed the payment of these hours regardless of the terms of the separation of employment.

## **GROUP HEALTH, DENTAL, AND VISION INSURANCE**

HH Health System offers eligible employees a comprehensive benefit package that includes two health plan choices, one dental and one vision plan. These plans are individual insurance plans so employees may participate in one without participating in the other.

Your health plan options consist of Preferred Provider Organization (PPO) health plan or a High Deductible Health plan (HDHP). A PPO plan is a health care organization composed of physicians, hospitals or other providers

that provides health care services at a reduced fee. PPO plans have a traditional health plan design with fixed copays and higher employee premiums.

A HDHP has higher deductibles and lower employee premiums than the traditional plan design. After deductibles are met, you pay a 10% coinsurance if you receive medical care or treatment at a HH Health System facility and a 20% coinsurance when you visit an in-network physician. Employees enrolled in either health plan are eligible to participate in a HH Health System Wellness center free of charge.

Full and part-time employees who are authorized to work at least twenty four hours per week (.6 FTE) are eligible to participate in the group health, dental, and vision insurance plans. Employees categorized as less than .6 FTE but who have worked an average of 30 hours or more per week in accordance with guidelines outlined in the Affordable Care Act (ACA) are eligible to enroll themselves and their eligible children in the HH Health System High Deductible health plan. These ACA eligible employees are not eligible to participate in any other HH Health System benefit plans except the retirement plans. Human Resources will notify ACA employees each year of their eligibility. Should you have questions regarding your eligibility, please contact the Human Resources Department.

Health, dental, and vision insurance coverage begins on the first day of the month after the employee has enrolled in those plans. Coverage ceases at the end of the month in which an employee cancels coverage, terminates employment, or is no longer eligible. Ineligibility occurs when eligible employees no longer work an average of 30 hours per week during a twelve month period in accordance with the Affordable Care Act. Such employees may be eligible to continue coverage through COBRA at different monthly premiums.

The employee portion of the health, dental, and vision plan premiums is paid before federal, state, and FICA taxes are calculated and withheld, which lowers the employee's income subject to tax and increases the take home pay. However, the same laws that permit employees to reduce taxes also impose consequences for changes in insurance coverage during the course of a plan year. There are only two occasions when you can change your benefit coverage; 1) during open or annual enrollment or 2) within thirty days of a qualifying event.

A qualifying event is a change in a person's life that creates the need to add, drop, increase or change coverage. Examples of qualifying events include: marriage or divorce, the birth or adoption of a child, the death of a covered member of the employee's family, a change in employment of the spouse that affects coverage or coverage of the employee's eligible dependents, a change in the employment status, such as changing from full-time to PRN status or a significant change in the spouse's health, dental, or vision coverage.

Employees who want to change or discontinue coverage for other reasons during a plan year must wait until the next annual enrollment period. Employees can obtain more detailed information on the health, dental, and vision plans in the Human Resources Department or on Employee Self Service located on HH Health System's Intranet. Benefit change forms can be obtained in Human Resources or printed from the Pulse page.

## **Health Savings Account (HSA)**

Employees who enroll in the High Deductible Health Plan (HDHP) also have the opportunity to elect a Health Savings Account (HSA), administered by Fidelity Investments. An HSA is an individually managed account that allows employees to contribute pre-tax money through payroll deduction to pay for qualified healthcare expenses. An HSA has three major tax savings: the money contributed into the account is tax deductible, it grows tax free, and certain withdrawals are tax free if they are for qualified medical expenses.

### **Eligibility**

In order to participate in the HSA, employees must meet the following eligibility requirements:

- Must be enrolled in HH Health System's HDHP
- Cannot be enrolled in any other non-HSA qualified health insurance, such as a PPO plan
- Cannot be enrolled in Medicare, Medicaid, or Tricare
- Cannot be claimed as a dependent on another person's tax return
- Cannot be enrolled or eligible to use a medical flexible spending account.

If you do not meet the eligibility requirements for an HSA, you can still choose to enroll in the HDHP which typically has a lower employee premium.

### **Contributions**

Although employee contributions are not required, employees may contribute their own money, up to the annual limits in effect each calendar year, to their HSA. Employees who are age 55 or older at the end of the year may also make catch-up contributions. Contribution elections can be changed at any time during the year by logging into Employee Self Service.

HH Health System will contribute up to \$500 annually for single coverage in the HDHP and \$1,000 annually for HDHP coverage that includes other family members. Employer contributions will be funded on a quarterly basis. Employees are not eligible for an employer contribution if they are a HDHP participant through COBRA, a retiree, or are ineligible to contribute to an HSA plan.

Employees who do not contribute must still open their HSA account through Fidelity's website in order to receive HH Health System's quarterly contributions.

### **Using Your Funds**

Employees will work directly with Fidelity Investments to manage their account and access their funds. Once an HSA account is activated, Fidelity will mail out the HSA debit card.

### **Important Notes**

An HSA is an individual account, and not an employer account, it is the employee's responsibility to determine if they are eligible to make contributions to an HSA, and to ensure that they do not exceed the annual limits set by the IRS. If contributions exceed the limits, the employee could be liable for tax penalties. All aspects of managing and maintaining the HSA, including any fees associated with the account, are the responsibility of the employee.

## **RETIREE HEALTH INSURANCE**

Huntsville Hospital offers employees a retiree health plan through the High Deductible Health Plan (HDHP) option. Eligible employees that qualify for the plan are those that are 55 years of age with 25 years of service or 59 years of age with 15 years of service AND authorized to work twenty-four hours or more per week during the last five year period. Employee cannot be classified as PRN during the last five year period. Retiree insurance will terminate when the employee becomes eligible for other coverage, receives Medicare, or fails to pay the required premium.

## **EMPLOYEE BADGE PURCHASE**

The Employee Badge Purchase Program allows eligible employees to use their employee ID badge to purchase items at HH Health System through payroll deduction. Employees may enroll in the Employee Badge Purchase Program and terminate their participation at any time. All badge purchases must be paid in full at the end of each pay period. Employees will not be allowed to charge items until all unpaid balances are paid in full. Employees will be provided with a receipt of charges and must keep up with their available balances. Employees may view their account balances or stop charging privileges through the HH Health System Intranet using their time and attendance password. They may also call the Human Resources Department or the Help Desk on nights and weekends at 256-265-7777 to stop charging privileges.

Employees who submit resignations of employment will have their charging privileges stopped at the time of submission of resignation.

Lost badges may be used to charge items until a new badge is issued. Any charge made during the time between the loss of a badge and the time a new badge is issued is the responsibility of the employee. If a lost badge is located after it has been deactivated, a new badge must be made to reactivate charging abilities. A new Badge Purchase Authorization form must be completed to activate purchasing privileges on the new badge.

## FLEXIBLE SPENDING ACCOUNT

There are two types of elective flexible spending accounts available for employees of HH Health System: the Medical/Dental Spending Account Plan and the Dependent Care Plan. Reimbursement from one plan is not permitted for expenses that are incurred in another plan.

Employees who participate in the Flexible Spending Program fund their own accounts, but the organization will pay administrative costs of that plan. Authorized employee contributions to a flexible spending account will be deducted from each paycheck before calculation and deduction of federal, state and FICA taxes so that taxes are not paid on these contributions.

Employees who are authorized to work at least twenty four hours per week (.6 FTE) and have completed thirty days of employment are eligible to participate in these plans. Employees must enroll for a flex plan calendar year within thirty days of hire or thirty days from a change in status or change in family status. Changes in status include transfer from PRN to part-time or full-time status, transfer from part-time to full-time status, a change in a spouse's employment that affects your coverage or the coverage of your eligible dependents, taking an unpaid leave of absence, marriage, divorce, death in the family, and the birth or adoption of a child. Employees are required to participate for the entire calendar year and cannot stop deductions without a change in status.

The benefit period for the plan is January 1 through December 31. Expenses incurred during the year may be filed no later than March 31 of the following year. The maximum contribution to the Medical/Dental Spending Account and the Dependent Care plans for any one year is subject to IRS limits in effect for that year.

The expenses that may be reimbursed through the Medical/Dental Spending Account Plan are any medical and dental expenses not covered by insurance. Examples are:

- Co-payments;
- Physical exams;
- Health insurance deductibles;
- Hearing care not covered by insurance;
- Dental services not covered by insurance;
- Medicine and drugs taken at the direction of a physician;
- Orthodontia (braces) not covered by insurance that is medically necessary and not cosmetic. This will require a letter from your orthodontist upon enrollment; and
- Vision care not covered by insurance. Covered items include contact lenses and prescription glasses.

Covered dependents under the Dependent Care Plan, are children under age thirteen and claimed as a child on your income tax return and physically or mentally incapacitated adults. Under that plan, child care must be required to allow you and your spouse to work outside the home. Covered expenses include charges made by a licensed day care center, a baby-sitter in or outside your home, a housekeeper who also provides dependent care, a relative providing dependent care who is not also your dependent, or an elder care-giver. Expenses not covered include food; clothing; education; transportation to the caregiver; medical, dental, and vision expenses; and expenses for which the federal dependent care tax credit is taken.

Flexible spending claims are reimbursed based on dates of service and not on dates services are paid. The FSA plan for unreimbursed medical expenses allows for the rollover of a limited amount of unspent funds from one calendar year to the next. Amounts remaining in a participant's account above the allowed rollover after March 31 of the year following the benefit year are forfeited and applied to the administrative costs of the plan as required by federal law. Contributions in the annually designated amount or less will be carried over to the following plan year.

For information on how to submit claims for reimbursement contact the Human Resources Department or the plan administrator.

## 401(k) RETIREMENT PLAN

Employees may gain financial security through the organization's retirement plans. You are eligible for one of three retirement plans based on your hire date and employer:

- If you were hired on or after January 1, 2013, you are eligible to participate in **the HH Health System 401(k) Retirement Plan (22303)**; or
- If you were hired prior to January 1, 2013, you are eligible to participate in **the Health Care Authority 401(k) Retirement Plan (57816)**; or
- If you are a HH Heart Center, LLC employee (excluding physicians), you are eligible to participate in **the HH Heart Center LLC 401(k) Retirement Plan (86763)**.

Each retirement plan has similar investment options and plan services as outlined below. For more details on vesting and employer contributions, refer to the section regarding your specific retirement plan in this Employee Handbook or you may view the retirement plan document by contacting Human Resources.

### Eligibility

All employees may participate in their retirement plan on the first of the month following their hire date. Employees classified as PRN and Plus may participate in the retirement plan but are not eligible to receive employer contributions.

### Auto Enrollment

A deduction of 3% will be made from your payroll check unless a "HH Health system 401(k) Retirement Plan Automatic Enrollment Opt- Out Form" is completed and given to Human Resources within thirty days of hire. You can change the amount you want to contribute by contacting our plan record keeper at any time. The maximum an employee may contribute to the plan is 100% of gross pay not to exceed the dollar limit in effect for the year per IRS regulations. All voluntary contributions are exempt from federal and state income taxes and are deducted from each paycheck. The interest earned in the plan is tax-deferred. Federal and state income taxes are payable upon withdrawal from the plan.

### Investment Options

Employees may choose from several investment options ranging from capital preservation to aggressive growth. Employees may direct the investment of their voluntary deductions and the organization's basic and matching contributions to the investment option of their choice. If newly participating employees do not make a selection, the contributions will be directed to a specific lifecycle fund based on their expected retirement date according to the provisions of the retirement plan. All assets in the retirement plan are valued at the close of every business day. Further information regarding investments is available by contacting the plan record keeper by phone or internet.

### Roth 401(k)

HH Health System offers a Roth account as an option under each 401(k) Retirement plan. The designated Roth account maintains a separate accounting of contributions, gains, and losses. The following are general guidelines regarding the Roth plan:

- Employee contributions are made with after tax dollars; hospital matching contributions are made with pre- tax dollars
- No income limitation to participate unlike a Roth IRA
- Combined employee elective contributions are limited to the dollar limit in effect for the year per the IRS rules
- Withdrawals of contributions and earnings are not taxed provided they are a qualified distribution.



A qualified distribution is generally a distribution made after being in the plan for a five year period and is either made on or after the date the employee attains age 59½, made on or after the employee's death, or attributable to the employee being disabled.

### **Loans**

All full-time and part-time employees may borrow the lesser of 50% of their vested account balance or \$50,000 from their 401(k) plan for any reason. PRN employees are not eligible. Loan repayments, including interest, are automatically deducted from the employee's paycheck through after-tax payroll deduction. The minimum loan amount is \$1,000. The employee may only have one outstanding loan at a time. The maximum length of time to pay off a loan is five years. The minimum duration of a loan is one year. The loan of an employee who transfers to PRN status can be sustained provided the employee continues to pay their full loan payment each pay period. The employee who has the loan who separates employment has ninety days to pay off the loan or it will default. Payment in arrears beyond ninety days will cause the loan to default and all applicable taxes and penalties will be assessed. Employees should contact the plan record keeper for payment arrangements.

### **Hardship Withdrawal**

Under extreme hardship circumstances, employees may withdraw money from the vested contributions (includes basic, match, and voluntary contributions and earnings on contributions) in their 401(k) plan. Circumstances include, but are not limited to, the purchase of a primary dwelling, preventing eviction or foreclosure from the participant's home, payment of one year of college tuition for the employee, spouse, or dependent, etc.). Employees can call Fidelity Investments for a full list of hardship withdrawals allowed by federal law.

### **Separation of Employment**

Upon separation of employment or retirement, employees may request the vested portion of their 401(k) accounts in a lump sum or installment payments. A penalty for early withdrawal is payable to the federal government if the account is paid out before the participant is age 59½ or before normal retirement is met. If employees choose to have their benefit paid directly to them, federal income taxes will be deducted per the IRS guidelines. Payment of state taxes is the responsibility of the employee. The only way to avoid the withholding tax is to elect to have the benefit payment rolled over or deposited directly into an IRA or another employer's plan that accepts rollovers. Employees who have an account balance less than \$1,000 will be required to withdraw the money from their 401(k) retirement plan.

### **Plan Services**

Employees will have access to their investment and account information through a twenty four hour automated voice-response system and through Fidelity's website. Retirement Services Specialists are available Monday through Friday to provide employees with information and answer questions concerning account and fund options. Account balance statements are available to all participants on demand through Fidelity's website.

<b>HH HEALTH SYSTEM (Plan Number 22303) and HH HEART CENTER, LLC (Plan Number 86763) 401(k) RETIREMENT PLAN</b>
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If you were hired on or after January 1, 2013, you are eligible to participate in the HH Health System 401(k) Retirement Plan. If you were hired on or after October 1, 2016 and are a HH Heart Center, LLC employee, you are eligible to participate in the HH Heart Center, LLC 401(k) Retirement Plan. Plan provisions and employer contributions in both plans are the same.

Full-time and part-time employees who are employed for twelve months and have one thousand hours of paid time are eligible to receive employer matching contributions equal to 50% of the first 5% of their voluntary 401(k) and/or Roth contributions (subject to the IRS annual salary limit) on a quarterly basis.



### **Vesting**

A vested year is any calendar year the employee is paid for at least one thousand hours. The employee must have four years of vested service to be 40% vested and five years of vested service to be 100% vested in the employer contributions to the plan. Employees are always 100% vested in the voluntary contributions they make to the plan.

## **HEALTH CARE AUTHORITY (Plan Number 57816) and HH HEART CENTER, LLC (Plan Number 86763) 401(k) RETIREMENT PLAN**

If you were hired by Huntsville Hospital prior to January 1, 2013, you are eligible to participate in the Health Care Authority 401(k) Retirement Plan. If you were hired prior to October 1, 2016 and are a HH Heart Center, LLC employee, you are eligible to participate in the HH Heart Center, LLC 401(k) Retirement Plan. With the exception of vesting credit, plan provisions and employer contributions in both plans are the same.

Full-time and part-time employees who are employed for twelve months and have one thousand hours of paid time are eligible to receive employer matching contributions equal to 100% of the first 5% of their voluntary 401(k) and/or Roth contributions (subject to the IRS annual salary limits) each paycheck.

### **Vesting**

A vested year is any calendar year the employee is paid for at least one thousand hours. Employees in the Health Care Authority retirement plan must have four years of vested service to be 40% vested and five years of vested service to be 100% vested in the employer contributions to the plan. HH Heart Center, LLC employees hired prior to October 1, 2016 are 100% vested in the employer contributions to their retirement plan.

Employees are always 100% vested in the voluntary contributions they make to the plan.

## **457(b) DEFERRED COMPENSATION PLAN**

The 457(b) Deferred Compensation Plan is offered as a supplemental retirement savings plan and offers a wide range of investment options. All employees are eligible to participate and fund the plan completely with their own contributions. The organization does not contribute to participants' accounts. The maximum an employee may contribute to the plan is 100% of gross pay not to exceed the dollar limit in effect for the year per IRS regulations.

All voluntary contributions an employee makes to the plan are made by payroll deduction and are exempt from federal and state income taxes. Changes in the deduction can be made at any time. The interest earned on the accounts is tax-deferred. Federal and state income taxes are payable upon withdrawal from the plan. Withdrawal of the account balance is permitted upon separation of employment, retirement, or extreme hardship. There are no penalties for early withdrawal.

## **GROUP LIFE INSURANCE**

HH Health System provides, at no cost to the employee, a Basic Life and Accidental Death and Dismemberment (AD&D) benefit to all full-time employees authorized to work a minimum of thirty-two hours per week. Part-time, Plus, PRN, and temporary staff are not eligible. This program offers a death benefit of one times your annual salary or a minimum of \$20,000. Employees may purchase an additional one, two or three times annual salary coverage. These coverage amounts are doubled if the employee has an accidental death. Employees may also purchase additional life insurance for their spouse and eligible dependents. In order to be eligible to purchase Spouse Life, an employee must purchase at least an additional one times their annual salary in coverage for themselves. Employees may not cover a disabled spouse or a spouse or child that is employed at HH Health System if they are eligible for this plan. In addition, employees may not cover the same dependents. Coverage amounts reduce when active employees or their spouse reach age 65 and reduce again when they reach age 70. Contact Human Resources for more information regarding coverage reductions.

Basic and optional coverage begins on the first of the month after the employee is hired or becomes eligible for the plan provided the employee applied for the optional coverage within thirty days of hire or change in status. Employees who wish to purchase optional coverage on themselves, their spouse, or their dependents after thirty days of hire or change in status may do so only during annual enrollment. A completed medical questionnaire will be required and coverage is subject to approval from the insurance carrier.

Coverage ceases at the end of the month in which an employee cancels coverage, terminates employment, or is no longer eligible. Optional coverage can be cancelled at any time. Employees wishing to convert their coverage to an individual life insurance policy should contact Human Resources for more information.

A group insurance certificate booklet is available in the Human Resources Department.

## **SHORT-TERM AND LONG-TERM DISABILITY**

HH Health System's Short-Term Disability (STD) and Long-Term Disability (LTD) insurance programs are designed to provide participants with income protection in the event of a short-term or long-term illness or injury. The organization provides, at no cost to the employee, a short and long term disability benefit to all employees authorized to work a minimum of twenty four hours per week. Executive, Physicians, PRN, Plus, and temporary employees are not eligible.

The STD plan offers a hospital paid benefit after fourteen days of disability and will pay up to eleven weeks as long as the employee continues to be disabled. Disability due to an uncomplicated pregnancy is paid up to four weeks. The LTD plan also offers a hospital paid benefit that is a percentage of the employee's base monthly salary up to a specified maximum. LTD benefits begin after ninety days of disability, and will be paid as long as the employee continues to be disabled or until the employee is eligible for Medicare.

Employees may also purchase additional STD coverage. Premiums are determined by the employee's age and annual salary. In addition, employee may purchase additional LTD coverage up to a specified maximum. Basic and optional coverage begins on the first of the month after the employee is hired or becomes eligible for the plan provided the employee applied for the optional coverage within thirty days of hire or change in status. Employees who wish to purchase optional coverage after thirty days of hire or change in status may do so only during annual enrollment. A completed medical questionnaire will be required and coverage is subject to approval from the insurance carrier.

Coverage ceases at the end of the month in which an employee cancels coverage, terminates employment, or is no longer eligible. Optional coverage can be cancelled at any time.

In the event of total disability, only the hospital-paid basic coverage will be subject to taxes. Employee-paid benefits are not taxed. For more detailed benefit information, a group insurance certificate booklet is available in the Human Resources Department,

## **EDUCATION REIMBURSEMENT**

HH Health System's Education Reimbursement Program is designed to provide financial assistance to employees who wish to obtain formal education while employed with the organization. The revised policy was effective January 1, 2022.

To be eligible for reimbursement for a degree or certification program, employees should meet the following criteria:

- Authorized as an FTE of .6 or higher in the HR system. PRN employees are not eligible;
- Employed for 90 days prior to the beginning of the school term or certification. Employees who are already in school at the time of their initial 90 days of employment will not be eligible for assistance with those classes;
- For degrees, employees should attend a school, university, college, or junior college that is accredited by an educational association of schools/colleges. Human Resources should approve any exceptions in advance;

- For certifications, employees must be earning the certification for the first time, and the certification must be needed for the job they are currently performing;
- An active employee at the time reimbursement is issued;
- No final warnings in the twelve-(12) months prior to the beginning of the school term or certification, and none received during the school term; and
- RNs pursuing a Nurse Practitioner degree must have a minimum of two-(2) year's seniority as a RN in HH Health System prior to the beginning of the school term.

Employees must apply for consideration prior to the start of the school term or certification.

All degrees pursued under this program should be hospital related. Degrees not eligible for reimbursement include doctorates in Biology, Theology, Liberal Arts, Education, and Pre Med (this list is not meant to be all inclusive of degrees not covered). In some cases Human Resources may approve assistance for self-study courses, certifications, and second degrees such as a second associates, bachelors or master's degree. Second degrees and certifications should be directly job related as defined by the employee's Manager and Human Resources. Employees requesting education reimbursement should seek approval prior to enrolling in these programs. Reimbursement for educational expenses will be as follow pending available funds:

- 100% reimbursement per calendar year up to a maximum of \$1000 toward the employees' out-of-pocket expenses for self-study or preparation courses, self-study books, and certification exam fees in their area of employment. Continuing education to maintain the certification is not covered.
- 100% reimbursement per calendar year up to a maximum of \$2500 for the employees' out-of-pocket expenses for tuition, lab, and other fees associated with taking courses leading to a high school diploma, associate's degree, bachelor's degree or master's degree.

Employees seeking reimbursement should complete, sign, and submit the appropriate Education Reimbursement application to Human Resources. Once the application is reviewed, the employee will be notified by email regarding approval. If approved, the email will provide instructions for reimbursement. To receive reimbursement, documentation must be submitted to Human Resources within sixty-(60) days of the successful completion of the school term or certification and the employee must be actively employed when the reimbursement is made. HH Health System will direct deposit its portion of education reimbursement to the employee after deducting any financial aid such as Pell grants, scholarships, etc.

Employees seeking reimbursement in clinical areas should note that approval of education reimbursement does not mean the employee is approved to perform clinical hours at HH Health System. The employee's school must have a contract on file prior to the start of the student/employees' preceptorship.

#### **Expenses Not Covered**

- HH Health System encourages job-related participation in external and internal seminars and workshops; however, such training is not covered by the Education Reimbursement Program. This includes expenses for management seminars, professional meetings, and external seminars.
- Course work for hobbies of a recreational nature such as music instruction, dance, crafts, auto mechanics, etc.
- Books. However, self-study books that aid the employee in obtaining a certification directly related to their current employment may be covered.
- Continuing education.

#### **EMPLOYEE ASSISTANCE PROGRAM**

The Employee Assistance Program (EAP) provides short-term confidential counseling and referral services to HH Health System employees who are experiencing personal or emotional difficulties that may be affecting their

job performance. These problems may include emotional difficulties such as depression or anxiety, marital or family issues, legal or financial worries, or problems with alcohol and drug abuse. The program is voluntary and free to employees.

## **EMPLOYEE RECOGNITION**

HH Health System is proud to recognize our dedicated and caring employees through several recognition programs such as employee of the month and year, employee appreciation day, service awards for consecutive years of service, and various other recognition initiatives through the Power of Excellence.

Employees are encouraged to visit the Power of Excellence webpage located on HH Health System's Intranet for more information on upcoming recognition events and how to nominate employees for recognition awards.

## **CAFETERIA**

Employees receive a discount on food purchases made while on duty. The employee ID badge must be worn to receive the discount. Employees may use cash, debit or credit card, or participate in the Employee Badge Purchase Program.

## **EMPLOYEE PHARMACY**

Employees and their legal dependents may purchase prescriptions and a select group of over the counter drugs from the employee pharmacy located at Huntsville Hospital Main and the Medical Mall.

Employees may use cash, debit or credit cards, or participate in the Employee Badge Purchase Program. Personal checks are not accepted.

## **CHILD DEVELOPMENT CENTER**

HH Health System operates a licensed Child Development Center, which provides day care for healthy children from two months to four years of age. Employees are eligible to receive services if space is available. Please call the Child Development Center for more information.

If Administration calls an inclement weather code and provided room is available, employees may bring children up to age ten to the day care center for a small fee.

## **NOTARY PUBLIC**

HH Health System offers employees free notary public services in the Human Resources Department

## **DAILY PAY**

Daily Pay is an optional benefit that allows employees access a percentage of earned wages prior to payday. All employees regardless of status are eligible to opt into the Daily Pay benefit except with employees with a base annual salary of greater than \$200,000 and physicians.

New Employees are given the opportunity to opt into the program during their pre-employment process and are eligible after their first pay day. All eligible employees may elect to opt into the program at any time even if they have not participated in the past.

## SECTION X STANDARDS OF BEHAVIOR

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A set of behavioral standards has been developed for all employees to follow. These standards are the infrastructure for building a service culture at HH Health System and they establish specific behaviors that employees are expected to practice daily at work. These standards encompass the mission, vision, and values by which we function, and they include The Employee Promise.

### OUR MISSION

To provide quality care that improves the health of those we serve.

### OUR VISION

To be one of the best health systems in America and consistently strive to provide clinical and service excellence.

### OUR VALUES

- **Safety:** Eliminate or minimize potential harm to our patients, visitors, physicians, and employees.
- **Integrity:** Be consistent, honest, and fair in everything we do.
- **Compassion:** Be aware of the needs of others.
- **Excellence:** Exceed the standards in service, clinical, and financial performance.
- **Innovation:** Promote creativity to enhance patient care and hospital performance through a team environment.
- **Accountability:** Take responsibility and ownership for our actions and their outcomes
- **Equality:** The guarantee of fair treatment, access, opportunity, and advancement for all races, nationalities, religions, gender or age

### THE EMPLOYEE PROMISE

*As an employee, I am committed to doing my part to fulfill the mission, vision, and values of HH Health System. I will provide my patients, guests, coworkers, physicians, and customers with the highest quality of service and ensure their needs are met with the utmost courtesy and respect. This commitment must be reflected in my behavior.*

### STANDARDS OF BEHAVIOR

Demonstrations of the following standards of behavior reinforce good service behaviors, set clear and concise expectations, and encourage each other to make the needs of our patients and their families the primary focus of our care and service.

#### **Safety - An awareness of safety is primary in all that we do**

Employees should utilize the *Universal Safety Behaviors* and *Reliability Tools* in their actions to improve their daily performance and the performance of their co-workers. This includes:

- Supporting others by cross-checking our work to reduce errors.
- Speaking up if you have a safety concern, and reporting that concern to leadership when a safety issue is not resolved.
- Keeping your attention focused on critical tasks by taking time to Stop, Think, Act, and Review (STAR) your work.

- Having a questioning attitude with your co-workers and team to ensure quality.
- Knowing and complying with policy, procedures, and checklists.
- Ensuring effective team communication by repeating/reading back critical information, when appropriate using phonetic and numeric clarification for critical information, making sure to ask clarifying questions when critical information is unclear, and following the steps outlined in my area for effectively handing off, and sharing the situational information.
- Keeping equipment in good order, and using it appropriately.
  1. Report safety hazards and/or correct them if possible.
  2. Maintain a clean and clutter-free workspace.
  3. Notify the proper unit or department if I notice equipment that is not in the appropriate areas
  4. Maintain a hallway clearance of eight (8) feet.
- Practice good hand-washing techniques and comply with universal precautions
- Use protective clothing and equipment when appropriate.
- Follow guidelines for security medications
- Be prepared for emergencies and know the correct and prompt actions to take.

#### **Attitude - My attitude reflects my desire to serve**

- Acknowledge visitors, patients, co-workers, and physicians immediately when they approach your desk or work area, anticipating their needs and offering assistance before it is required requested.
- Smile and greet others using the 10/5 Rule; acknowledging others when they are 10 feet away, and greeting others when they are 5 feet away.
- Treat everyone as if they are the most important person in the hospital.
- Show genuine interest in other people by being a good listener, and listening with empathy and intent to understand.
- Apologize for any problems or inconveniences and utilize service recovery when needed.

#### **Appearance – My appearance demonstrates my professionalism**

The appearance of our employees and campus reflect the image of HH Health System. It is important for each employee to dress professionally, tastefully and in accordance with the Dress, Uniform, and Appearance policy which is published in this Handbook. Additionally, employees should:

- Wear the identification badge so that it is unobstructed and above the waist.
- Take pride in our hospital and strive to maintain a clean and safe environment.
- Ensure litter or spills are cleaned up. Know that it is everyone's responsibility to keep our campus clean.

#### **Communication – My communication is accurate and sensitive**

- Answer calls within three rings and by identifying your department and yourself. Get permission before putting a caller on hold or transferring a caller to the operator.
- Return calls promptly.
- Keep personal calls to a minimum.
- Ask for and use preferred names.
- Offer directions to individuals in need.
- Listen with empathy and intent to understand.
- Provide opportunities for patients and others to ask questions
- Communicate the positive intent of our actions with patients, customers, and others.
- Provide opportunities for others to ask questions.
- Speak in a quiet voice in patient-care area hallways.

#### **Commitment – My commitment to my co-workers is vital to our care**

- Treat every co-worker and physician as a professional, recognizing their expertise.
- **Be Safe, Be Caring, and Be Kind** in everything we do. Commit to utilizing the *Universal Relationship Tools* and *Reliability Tools* in all of our actions.

- Avoid and discourage gossip.
- Support and set a good example for new employees and students.

**Privacy – My concern for privacy is in the best interest of my patient**

- Ensure information about all patients is strictly confidential.
- Follow Health Insurance Portability and Accountability Act (HIPAA) guidelines at all times.

**Ownership – My sense of ownership makes me accountable**

- Adhere to hospital and departmental policies regarding attendance. A pattern of absences or tardiness reflects a lack of dependability.
- If unable to meet a request, find someone who can.

## SECTION X TENNESSEE LLC HANDBOOK ADDENDUM

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This Addendum to the HH Health System Employee Handbook is applicable only to employees of HH Health System – Tennessee LLC (HH TN). This Addendum supersedes the HH Health System Employee Handbook in situations of conflicting policy.

- **Taxes:** Employees of HH TN who do not reside in Alabama will not have Alabama State Income Taxes deducted from their paycheck by HH Health System. It is the responsibility of the employee to pay all required Federal and State Taxes. Employees who move to Alabama during the course of their employment with HH TN should contact their manager and Human Resources with their new address so that state tax forms can be completed.
- **Meal Periods:** HH Health System – Tennessee LLC employees will be provided with a 30-minute rest or meal period if they are scheduled to work 6 or more hours consecutively, “except in workplace environments that by their nature of business provide for ample opportunity to rest or take an appropriate break.” HH TN will not schedule such breaks during the first hour of scheduled work activity. T.C.A. § 50-2-103(h).
- **Break Time for Nursing Mothers:** HH TN will provide break time to nursing mothers to express breast milk, making reasonable efforts to provide a room or other location in close proximity to the work area, other than a toilet, where the employee can express breast milk in private. T.C.A. § 50-1-305.
- **Jury Duty:** HH TN will continue paying employees who are called for jury duty their regular wages or salary for all time actually spent serving and traveling to and from jury duty. Employees will be excused from work when called for jury duty on the day or days when they are performing jury duty, except that on days when an employee’s period of jury duty does not exceed 3 hours, the employee may be required to report to work for the remainder of the work day. T.C.A. § 22-4-106.
- **Voting:** HH TN employees may be absent from work to vote on election days for a reasonable period of time not to exceed three hours. The employee’s manager may specify the hours when an employee may be absent to vote. T.C.A. § 2-1-106.