

Classification: Human Resources	YALE NEW HAVEN HEALTH SYSTEM POLICIES & PROCEDURES		
Title: Employee Conduct and Corrective Action			
Date Approved: January 5, 2017 Approved by: Syste			em Operating Committee
Date Effective: February 1, 2017			Date Reviewed/Revised: November 12, 2018
Distribution: HR policy standardization update to YNHHS managers. Additional communication by respective HR team to managers. MCN Policy Manager			Policy Type (I or II): Type I
Supersedes: Employee Conduct (BH B: 5); Disciplinary Action (BH B:8); Discipline and Hospital Rules of Conduct (GH B10); Employee Conduct and Discipline (HSC II.D.1); Employee Conduct and Discipline (NEMG B:2); Employee Conduct and Discipline (Grimes Center B:8); Employee Conduct and Discipline (YNHH B:8)			

PURPOSE

This policy outlines expected employee conduct to support patient care; ensure the safety of patients, staff, and the facility; and respect the rights of patients, visitors and employees. It also provides guidelines pertaining to the administration of employee corrective action in a fair, impartial and constructive manner. The policy also outlines the process to address employee conduct that threatens the quality or safety of patient care.

APPLICABILITY

This policy shall apply to the Yale New Haven Health System (YNHHS), its parent and subsidiary corporations, including but not limited to its Delivery Network hospitals (Bridgeport Hospital, Greenwich Hospital, and Yale New Haven Hospital), Northeast Medical Group, Yale New Haven Care Continuum (d/b/a Grimes Center), Corporate Professional Business Services (CPBS), each of their respective parent and subsidiary corporations, and each affiliated entity owned by or under common ownership and control with any of the foregoing, with the exception of Lawrence + Memorial Hospital, Westerly Hospital and VNA of Southeastern Connecticut.

This policy is applicable except where it is expressly superseded by collective bargaining unit agreements.

POLICY

It is the policy of the employer to:

A. Encourage the highest standards of employee conduct in order to promote the best possible care of patients, safeguard equipment and property, and ensure that the rights of patients, visitors and employees are respected.

- B. Administer employee corrective action in cases involving misconduct in a fair, impartial and constructive manner. Nothing in the rules shall interfere with or impede employees in the exercise of their rights, including their right to engage in protected concerted activity.
- C. Provide a process by which to address employee conduct that threatens the quality or safety of patient care.

PROCEDURE

A. Guidelines for employee conduct

- 1. The employer's purpose in providing the highest possible quality of patient care requires that these standards of employee conduct be maintained. Standards are established in the Code of Employee Conduct (see Addendum A).
- 2. Department heads may establish additional work rules when operationally necessary, providing such rules are consistent with the policy and approved by the administrative officer in consultation with Human Resources. Any such amended or additional departmental regulations must also be distributed to employees.
- 3. Although the Employee Conduct and Corrective Action Policy is introduced during New Employee Orientation, it is the responsibility of direct supervisors to inform and instruct employees of the Code of Employee Conduct and any departmental rules. It is the employee's responsibility to adhere to the policy and departmental rules.
- 4. Employees are expected to adhere to the mission, vision and values; success factors; high reliability principles; and the YNHHS Standards of Professional Behavior (See Addendum B).
- B. Guidelines for administering employee corrective action
 - 1. Purpose for corrective action

The Code of Employee Conduct outlines the employer's rules governing employee conduct and responsibilities which have been established in the best interests of the employer, its patients, visitors and employees. Accordingly, a violation of the Code constitutes misconduct on the part of the employee, and appropriate corrective action measures, as indicated in the following sections, should be initiated by the supervisor. Such corrective action measures should be administered objectively and constructively with the intent to motivate the employee toward proper conduct in the future.

2. Job performance and employee conduct and corrective action

This policy addresses two major kinds of performance problems which require different responses. These problems represent employees who are unable to perform their job due to a lack of basic ability or incompatibility of their abilities with the job

requirements, as opposed to employees who are capable of performing, but exhibit misconduct or inappropriate behavior.

a. Employees unable to perform their jobs with no apparent element of misconduct

Non-probationary employees who exhibit performance problems which appear to result from a basic inability to perform, with no element of misconduct or malicious behavior, should be counseled on performance deficiencies through separate counseling and/or the performance appraisal/review process as necessary. Should the problem continue, the employee should be encouraged to seek transfer, if eligible, or outside employment in the absence of suitable internal openings.

If these options fail, the employee would be notified by the supervisor and/or department head, after consultation with Human Resources management or designee, of the decision to release rather than involuntarily terminate him/her from employment due to a basic inability to perform the job.

b. Employees who fail to perform their jobs with apparent willful misconduct

The second major category of performance problems involves employees who demonstrate an ability to perform, if not excel, in their job, yet who consistently perform below stated expectations due to misconduct or some other type of inappropriate behavior; i.e., insubordination, failure to follow supervisor's instructions, failure to perform assigned duties, etc. These employees should be counseled on the problem or deficiency through the performance appraisal/review process, and a special appraisal, if necessary, stating the specific problem, strategies to correct it, and outlining specific performance expectations to be achieved during a follow-up monitoring period specified by the department.

If the problem continues with no significant improvement after the agreed period of observation, with no mitigating circumstances, the employee should receive corrective action in line with the same steps outlined in this policy for other categories of misconduct.

3. Investigation of misconduct

- a. A supervisor who becomes aware of suspected employee misconduct should, with the assistance of Human Resources, promptly conduct a thorough investigation of the incident, including asking the employee for an explanation of his/her actions. All non-compliant behavior, even if it is the non-compliant behavior of the reporting employee, must be reported. Additionally, all employees must participate in good faith with investigations.
- b. If the suspected misconduct is a potentially terminable offense, the department head or designated responsible supervisor should notify Human Resources management or designee, as soon as practical. In certain circumstances, due to the nature of the alleged offense or the possibility that the employee may pose a threat to individuals or the organization, the employee may be placed on administrative leave indefinitely pending further investigation of the incident. It should be communicated to the employee that

the leave is for investigatory purposes and is not initially a corrective action. When this action is necessary, the department should take these steps:

- i. When possible and practical, contact Human Resources management or designee to discuss the case or incident and obtain a recommendation prior to deciding whether to place the employee on administrative leave.
- ii. Meet with the employee to discuss the alleged offense and obtain what explanation or information can be provided at the time. If additional time is needed to complete the investigation and appropriate administrative review, the employee may be placed on indefinite administrative leave pending a final decision. The period of administrative leave should not ordinarily exceed seven (7) calendar days. At the completion of the investigation, a decision will be made in consultation with Human Resources management or designee and communicated to the employee. Should no corrective action result from the investigation, the employee should be paid for any time lost and reinstated to the former position.
- iii. The employee should be available for work if the department decides to end the administrative leave and return the employee to duty.

C. Progressive corrective action categories

Generally, employees are counseled prior to receiving formal corrective action in an effort to eliminate possible misunderstandings and to explain what constitutes proper conduct or acceptable job performance. Employees may be coached as much as reasonable before a formal corrective action step.

- 1. Documented verbal corrective action: Following unsuccessful attempt(s) to correct the problem through counseling, the employee should be verbally warned that the repetition and severity of the offense is a violation of departmental and/or the employer's policy, and that further corrective action may follow if the employee continues to commit the offense in question, or does not otherwise correct the problem.
- 2. Written corrective action: Employee receives written notice of corrective action following serious or repeated offenses. The purpose of a written warning is to be certain that the employee is fully aware of the misconduct he/she has committed and what is expected, thereby enabling the employee to avoid a recurrence of the incident. A written warning requires prior approval by the department head or equivalent.
- 3. Final written corrective action: Employee receives written notice of corrective action following serious misconduct or further repeated offenses. Corrective action time off without pay or suspension may also be issued, except in the case of attendance and punctuality. The purpose of a final written corrective action is to be certain that the employee understands the seriousness of the misconduct and that further misconduct will most likely result in discharge. A final written corrective action requires prior approval by the department head and Human Resources management or designee, respectively.

- 4. Discharge: Employee receives Employee Corrective Action Notice and/or written notice of discharge. Discharge requires prior approval by the department head, the responsible administrative officer and Human Resources management or designee.
- D. Determination and communication of appropriate corrective action

Progressive corrective actions do not generally apply to probationary, per diem, or casual employees. Any newly hired probationary status employee may be released at will and without further notice, and such action is not subject to review under the employer's Grievance Procedure. The release of a probationary employee requires prior approval by the department head in consultation with Human Resources management.

- Because the circumstances surrounding misconduct may vary widely from case to case, each individual case must be assessed upon its own facts and circumstances in determining what, if any, appropriate corrective action is needed and may result in situations where progressive corrective action is not taken and suspension or termination is the first step.
 - a. The effect of the misconduct on patient care and/or the employer's operations.
 - b. The corrective action given to other employees for similar offenses.
 - c. Past practices at the employer or in the department.
 - d. The employee's intent in committing the violation. (Willful, malicious act vs. poor judgment)
 - e. The employee's overall performance record.
 - f. The employee's length of service with the employer.
- 2. When an offense has occurred, the department head will review the investigation and make a recommendation to the responsible executive or leader for appropriate corrective action. This decision will be made in consultation with the appropriate Human Resources or Employee Relations representative to ensure consistency with departmental and/or the employer's policy and procedure. The corrective action document is presented to the employee by the manager or designee.
- 3. Should an employee disagree with the corrective action issued, the department head or supervisor must advise the employee of his/her right to submit a written response to the notice, which will become part of the employee's record, or to protest the corrective action under the Grievance Procedure Policy.
 - Note: Employees covered by the collective bargaining Agreement may protest the action taken under the grievance procedure set forth in the Agreement.
- 4. The original document is maintained by Human Resources department. The employee will receive a copy of the document. The department will also retain a copy.

5. A corrective action is active for one year after the date of issue. Written corrective action issued more than 12 (twelve) months prior to the current infraction may be used to document a pattern of behavior that does not meet requirements. If a current infraction is consistent with a documented pattern of behavior, even if the corrective action is more than 12 months old, corrective action, suspension or discharge may occur.

REFERENCES

YNHHS Standards of Professional Behavior

RELATED POLICIES

Grievance Procedure Probationary Period

Addendum A

YNHHS Employee Conduct and Corrective Action Policy

CODE OF EMPLOYEE CONDUCT

The employee code of conduct is composed of rules of employee conduct that are intended to define the employer's work rules and expectations for conduct and behavior.

It is the responsibility of department heads, managers and supervisors to fully explain these rules to employees and to discuss their specific application within their department. The employee is responsible for observing the policy. Appropriate disciplinary measures will be taken in cases where there has been a violation of the Code.

This list of rules of employee conduct is by no means a definitive or exhaustive one, and does not preclude any employee from being required to comply with additional rules or standards as promulgated by his/her department and/or the employer where appropriate.

There may be other offenses which would be viewed as a serious violation by the employee's department and/or employer and which may result in discharge of the employee. In all cases involving serious violations, final determination of the appropriate disciplinary measures will be made by the responsible administrative officer who will take into account the recommendation of the department head and the advice of Human Resources.

- 1. Employees are expected to adhere to the standards as defined in the mission, vision and values, success factors and high reliability principles in their contact with patients and visitors and in their working relationships with their supervisor and co-workers.
- 2. Employees must not access or disclose patient information for non-treatment, payment or operations purposes or commit any other act in violation of the Sanctions policy (IS:S-44)
- 3. Unauthorized access to confidential information including dissemination of computer security access codes and/or unauthorized use is prohibited.
- 4. Inaccurate or false information must not be entered on records, including patient records, time records, employment applications or other personnel forms.
- 5. Employees must not engage in gross immoral, fraudulent or indecent conduct on work premises.
- 6. Employees must not willfully and substantively falsify business documents (including but not limited to employment applications, time records, benefits enrollment documents.)

- 7. Employees must not engage in willful misconduct or gross negligence which is detrimental to patient care or human safety. Employees must abide by the Standards of Appearance Policy in that they must wear their ID badge while on duty as a means of identification to patients, visitors and other personnel. They must be in proper uniform, where mandated, and be groomed appropriate to their work environment.
- 8. Employees must adhere to the YNHHS Workplace Aggression and Violence Prevention Policy. Employees may not engage in abusive, provocative, profane, hurtful, rude or disrespectful language or actions, and must refrain from creating or being party to any form of physical violence.
- 9. Employees must not harass, bully, cyber-bully, fight, threaten physical harm, create a disturbance, or engage in other acts constituting gross disorderly conduct.
- 10. Employees should not engage in horseplay, scuffling, running, throwing objects, or unprofessional behavior on work premises
- 11. Employees must refrain from exhibiting poor customer relations in dealing with patients, the public or other employees.
- 12. Sexual harassment--which includes unwelcome advances, requests for sexual favors, offensive verbal or physical conduct of a sexual nature (e.g. unsolicited remarks, gestures or physical contact; name calling, sexually suggestive comments, conduct or profanity)--is strictly prohibited.
- 13. Employees must not solicit gratuities, gifts or personal favors from patients or visitors. Offers of gratuities or personal gifts should be graciously declined.
- 14. Employees must not report to work or be on work premises under the influence or odor of intoxicating liquor, illegal substances, prescription drugs or other substances that may impede judgment or motor skills or otherwise make an employee unfit for duty.
- 15. Employees may not be in possession of illegal substances and/or non-prescribed controlled substances or intoxicating liquor on work premises. Use of intoxicating liquor on work premises is limited to official Organization functions with permission of the responsible administrative officer.
- 16. Packages, handbags, purses, tote bags, brief cases, shopping bags, backpacks or other containers being brought into or taken from the workplace must be opened for inspection upon request by supervisors or Security or designated personnel.
- 17. Regular and punctual attendance must be maintained. Departmental instructions for reporting absences and lateness must be followed.

- 18. Working time must be accurately recorded and employees may not record the working time of other employees. This includes daily "swiping" in and out in appropriate card reader or other time-recording device.
- 19. Employees must obtain permission from their supervisor or designee for unscheduled time away from the work area during working hours.
- 20. Refusal to perform assigned duties, walking off the job without permission for an unlawful or non-safety related reason, or engaging in an unlawful work stoppage.
- 21. Written, oral and posted instructions from authorized personnel must be followed.
- 22. Personal cell phone is limited to activities that support patient care or business needs. Personal electronic device use must be incidental and not interfere with an employee's performance or productivity. For safety purposes, ear buds and other listening equipment for personal devices may not be used during work time.
- 23. Personal mail and packages must be addressed to employee residences rather than the workplace.
- 24. Employees must observe safe work practices and published safety rules.
- 25. Equipment and materials must be operated and maintained in a safe and proper manner. Failure to use safety devices, deliberate destruction or misuse of property or equipment, including safety or alarm devices, is prohibited.
- 26. Areas designated for use by patients and visitors such as public lounges, lobbies, waiting areas, and family rooms should not be used for employee breaks or meal periods.
- 27. Sleeping on the job, except while on an on-call status, is prohibited.
- 28. Theft, misappropriation, or the removal from the organization's premises (without supervisory approval) of property belonging to patients, visitors, contractors, other employees or the employer is strictly forbidden. This includes the removal of property that has been discarded or sample products.
- 29. Lost property found on work premises must be delivered to Security where a lost and found service is provided.
- 30. Employees are expected to perform their duties in a manner that fulfills their job requirements. Poor work performance will not be tolerated.
- 31. Unauthorized firearms or weapons of any kind may not be brought onto work premises.
- 32. Gambling, including the sale of lottery or raffle tickets, is prohibited on work premises.

- 33. Employees may not sell, or otherwise solicit payment for any form of merchandise or services on work property for their own account.
- 34. Employees should use only authorized building entrances and exits.
- 35. Employees must know and observe established emergency procedures.
- 36. Employees should not have other employees or guests visit them in work areas.
- 37. Employees who are not on duty may not be on work premises with the exception of parking lots or outside non-working areas, except to receive medical care, to visit a patient, or for valid work-related reasons.
- 38. Employees must not commit any criminal act on work premises, or against employees, patients or visitors.
- 39. Employees must comply with the System's Tobacco-Free Environment policy
- 40. Employees must accurately represent the employer, YNHHS, themselves and their positions to patients, visitors and the general public, and must not use another employee's identification badge or name pin.
- 41. Employees must not substantively misrepresent the organization, YNHHS, or self to a patient, visitor or the general public.
- 42. Any other acknowledged serious violation of departmental and/or employer policies or procedures, or any serious incident of misconduct or behavior which, after review of the circumstances, warrants termination from employment.

Yale NewHaven **Health**

Addendum B

Standards of Professional Behavior

Yale New Haven Health

Patient-Centered Care – Put patients and families first

- Keep patients safe and use high reliability practices
- Deliver the highest quality of coordinated care and service
- Make patients and families part of the team
- Ensure a guiet, clean environment

Respect – Value all people

- Protect others' privacy and dignity
- Introduce yourself and your role
- Be curious, ask questions and listen without interruption
- Support, recognize and appreciate others

Compassion – Be empathetic

- Smile, make eye contact and offer a warm greeting
- Offer thoughtful gestures of courtesy, comfort and kindness
- Identify and respond to feelings, concerns and requests
- Communicate with courtesy and respect

Integrity - Do the right thing

- Be on time and prepared
- Promote diversity and be inclusive
- Work as a team and speak well of others
- Value different ideas, perspectives and feedback

Accountability - Be responsible and take action

- Own your work and follow through on commitments
- Explain what you are doing and why
- Present a professional image
- Acknowledge when wrong, apologize and take action