



Rancho Los Amigos National Rehabilitation Center

DEPARTMENT OF NURSING

ADMINISTRATIVE

POLICY AND PROCEDURE

SUBJECT: NURSING PERSONNEL PERFORMANCE
STANDARDS (Attachment included)

Policy No.: A255
Effective Date: 12/1996
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PURPOSE: To outline the Performance Standards of the Nursing Department and how they are communicated to staff.

POLICY STATEMENT:

1. All employees are responsible for providing competent and safe care to patients according to established policies and procedures.
2. Employees are responsible to review and acknowledge these Standards (see attached).
3. Employees new to the organization will review and sign the Nursing Personnel Performance Standards during their orientation period.
4. Each employee will receive their own copy of the attached Standards. The original signed copy will be placed in the employee Human Resource file. The manager will retain a signed copy in the unit file for future reference.
5. Changes in policies and procedures referenced in this document will be communicated to employees when they occur.

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References:

The Joint Commission Standards – HR.01.02.07, HR.01.07.01, LD.01.03.01, LD.03.03.01

12/96 – Revised
01/99 – Revised
01/02 – Revised
09/04 – Reviewed
05/08 – Reviewed
12/11 – Revised
01/15 – Revised
05/18 – Revised
03/22 – Revised

Attachment – (1)

RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER
NURSING PERSONNEL PERFORMANCE EXPECTATIONS

We welcome you as a new and important member of our nursing team. The mission of the Nursing Department is to provide high quality nursing services and to coordinate comprehensive patient care. The continuum of care includes preventive, acute, maintenance, and restorative care within a rehabilitation nursing framework. Emphasis is placed on improving self-care, maximizing independence, and early community reintegration. Care is provided in a collaborative interdisciplinary manner with concern and respect for the individual and family. Nursing care is provided based on six key values of the department: Respect, Integrity, Altruism, Advocacy, Autonomy and Excellence. Also, we practice patient-centered care by motivating our patients to be actively involved in their care by mutual goal setting and attainment of the set goals. In order to assist you to fulfill our mission and meet the core values of the department, the following expectations are provided.

Attendance and Observance of Working Hours

Each nursing personnel is responsible to report and to be ready to begin work at the regular start time of his/her assigned work shift. The time piece to be used to determine the start and end of the shift will be determined by the manager/supervisor. Nurse Manager/Assistant Nurse Manager/Charge Nurse is responsible to ensure that employees are on the unit and working during the scheduled work shift. Personnel will remain on their scheduled or assigned unit/work location until the end of the shift, unless given authorization to leave by the supervisor or manager. Leaving the unit/work location without authorization may constitute patient abandonment and is subject to disciplinary action. When unable to report to work, such as during illness or due to personal matters, each employee is responsible for notifying the department timely.

It is the employee's responsibility to call the department except in those cases when the employee is incapacitated and unable to call in. In the event an employee cannot call his/her manager/supervisor (such as hospitalization, accident, physically unable, etc.), a report will be accepted from a representative; however, the employee must make personal contact with the manager/supervisor as soon as possible.

The employee is required to state the reason and the expected date he/she will return to work. The supervisor has the responsibility to ask the employee the reason for, and the duration of the unscheduled absence with adherence to HIPAA.

The employee is expected to contact/telephone his/her immediate supervisor or his/her designee on a daily basis while out ill unless an acceptable certification has been provided to the supervisor stating that such absence will continue for an extended period.

Failure to notify management may result in the employee's timecard being coded as unapproved absence without pay (AWOP).

The following County attendance guidelines are strictly enforced. They include initiation of the disciplinary process when:

1. Absenteeism exceeds one day per month for three months or more.
2. Absenteeism is patterned with weekends, holidays, and vacation time off, and/or regular days off (RDO's) or for days requested off, but not granted or denied by the supervisor.
3. Absenteeism that results in zero 100% sick time.
4. Absenteeism that results from no call/no show behavior. *Note:* A failure to report to work for three or more consecutively scheduled days without supervisor notification is an implied resignation.
5. Tardiness which exceeds two (2) occasions in one pay period.

6. Failure to notify the department of unscheduled absences or late/tardy within the specified timeframe.

Employees assigned to direct patient care responsibilities in an inpatient setting must report a) unscheduled absences at least two (2) hours prior to the start of the scheduled work shift, and b) late or tardy at least two (2) hours prior to the start of the scheduled work shift or as soon as practical and with the projected time of arrival. For staff on 8 hour work shifts, notification is at 0500 for the day shift, 1300 for evenings and 2100 for nights; for staff on 12 hour work shifts, 0500 for days and 1700 for nights.

Employees assigned to direct patient care responsibilities in an outpatient setting, surgical services or employees with non-patient care related responsibilities must report absences and tardies at least 30 minutes prior to the start of the scheduled work shift, or as soon as practical for tardies and with the projected time of arrival. In the out-patient setting, shift start times may vary based upon the needs of the service.

KEY POINT: Nursing staff from all areas should report an absence or tardy by calling the Nursing Resource Office (NRO). If no one answers at the Nursing Resource Office, the Administrative Nursing Supervisor is to be paged through the hospital operator.

The timesheet for tardies shall be coded as Absent Without Pay (AWOP) and may be used for disciplinary purposes. Employees are not allowed to make up for tardies by missing lunch or break periods or by working past the scheduled shift.

An employee who fails to notify the department of an absence or tardy within the specified time frame, or provide a Medical Certificate as required, will be considered to be unapproved absence without pay (AWOP) for the period of the unreported absence.

An employee who demonstrates a clear pattern of absenteeism (such as absenteeism in conjunction with regular days off (RDO's), weekends, holidays, or vacation time off) may be placed on medical certification.

KEY POINT: An employee may remain on medical certification until the employee has obtained substantial and sustained improvement.

Management reserves the right to request a valid medical certificate for any period of absence. Acceptable medical certification is an original, signed and dated document from a licensed physician provider on letterhead stationery of the physician or health care facility. The certificate must include:

1. Date the employee was seen by the physician or provider
2. Date illness or injury first prevented the employee from working
3. Length of time employee is expected to be away from work
4. Any limitations or work restrictions expected upon return to work, the nature of the restrictions and the duration
5. Earliest date the employee can return to work with or without restrictions

An employee who is off **three (3) or more** consecutive work days are required to present an original verifiable medical certification of illness or injury upon return to work:

- For absences of three (3) consecutive work days, the medical certification must be provided to the employee's immediate supervisor or designee on the first day the employee returns to work.
- If the absence will be extended for four (4) or more days, the employee must provide medical certification to his/her immediate supervisor by the fifth (5th) work day of the absence whether or not the employee returns to work. If the absence is extended further, the employee must provide updated medical certification to his/her immediate supervisor prior to the expiration of each extension. The employee must have a current medical certification on file with his/her supervisor at all times, or the timecard will be coded as Absent Without Pay (AWOP).

Employees need to contact the Leave Management Unit for information regarding leaves, e.g., FMLA.

Employees who have work restrictions need to contact the Nurse Manager/designee and the DHS-Risk Management Return-to-Work Coordinator.

Employees are expected to document their working hours based on department standards:

- a. Clock in and out using the designated time collection method, and enter their time into mylacounty eHR system.
- b. Record all hours worked and the reason codes where appropriate (e.g. overtime, evening/night shift) based upon the established standards and procedures.
- c. Record all hours absent or tardy and the reason codes (e.g., vacation, personal, sick) based upon the established standards and procedures.

KEY POINT: Employees should clock in no earlier than ten (10) minutes prior to the scheduled shift start time.

Nurse Manager or designee reviews attendance records monthly to evaluate frequency and/or pattern of absences or tardiness.

The following progressive actions may occur if the attendance and/or the observance of working hours expectations are not met:

- a. Informal Verbal Counseling – Verbal counseling with anecdotal note to Manager's file.
- b. Written Confirmation of Counseling – occurs after informal verbal counseling has not achieved desired results.
- c. Warning – occurs when there has been failure to demonstrate immediate and sustained improvement after Written Confirmation has been given.
- d. Warnings and other disciplinary actions will be placed in the employee's official personnel file and will include a requirement of medical certification for approval of benefit time.
- e. Failure to improve attendance, following a Warning, will be subject to further disciplinary action up to and including discharge from County service.

(See DHS Policy: 751 - Attendance)

Breaks and Meals

All breaks and meal periods are assigned and recorded on the assignment sheet by the RN in charge. Each employee is responsible to report out and in for breaks and meals to assure adequate coverage is maintained for safe patient care and that employees have an opportunity to relax and/or eat during their shift. Meals and break periods are monitored by the designated supervisor. Employees on 8-hour shifts have two (2) 15 minute breaks and one (1) 30-minute meal period; employees on 12-hour shifts have three (3) 15 minute breaks and one (1) 30 minute meal period. As staffing requirement or unit workload allow, only one of the 15-minute breaks may be combined with meal time to make a 45 minute meal period. If breaks are taken on the nursing unit, they are not to be taken in a patient room. For employee safety, breaks should not be taken in cars or in isolated areas of the facility far away from the patient unit. Each unit will designate appropriate areas within or near the nursing unit that are safe.

Employees are expected to return on time from rest/breaks and meal periods and to contact the supervisor immediately if late/delayed. They are expected to remain on grounds during the rest or breaks to provide immediate response to unexpected situations. Unjustified absences from the workstation or unit exceeding 15 minutes may result in AWOP.

Days off & Unit Work Schedules

All employees assigned to inpatient care units will rotate days and weekends off based on the needs of the service.

Nursing staff assigned to in-patient units are expected to comply with the nursing department Self-Scheduling Guidelines. Unit work schedules are posted 2 weeks before the first day of each work cycle; however, schedules could be changed with written notice including the reason to the employee at-least 10 working days or fourteen calendar days prior to the date the change is to be effective.

Time cards

Time cards are to be left in the space allocated for them and should not be taken home. Employees are to document the time they arrive and leave the unit for each work shift by complying with the authorized time collection process, e.g., use of timeclock. Each employee is responsible for signing and completing his/her own

paper timecard and electronic timesheet by the posted due date. Signing of official county documents or clocking-in or clocking-out for another employee is considered falsification. Both parties will be held equally responsible and will be subject to disciplinary action up to and including discharge. (See: Human Resources Timekeeping Policy/Procedure).

Dress Code / Identification

All employees must wear the approved identification badge and follow the department's dress code standards as outlined in policy A330 - Dress and Appearance Standards, Department of Nursing, Policy and Procedures. Please note: this policy applies to participation in any activity held on campus including educational, council, and competency assessment events.

Patient / Work Assignment

All assignments are made based on current policy, patient needs, and staff skills and abilities. (See Policy: A420 - Patient Care Assignments and A301 - Staffing Policy, Department of Nursing Policy and Procedure)

Floating

Despite all best efforts to plan and organize staffing well in advance, employees may be called upon at one time or another to float. Floating is shared by all unit staff. A specific type of caregiver may be required to float based on patient needs. The caregiver is required to review the Cross Training manual on arrival to the unit if not reviewed within the last six months. Refusal to float as instructed will be viewed as patient abandonment and insubordination. Employees floating into a unit will be assigned a resource person to provide a brief orientation, to answer questions, and to be of assistance when needed. (See Policy: A310 - Floating of Nursing Staff, Department of Nursing Policy and Procedure).

Patient / Work Assignment Abandonment

Any caregiver or nursing employee will be subject to immediate disciplinary action, including termination when patients, or work assignment is abandoned. This may include, but is not limited to any of the following circumstances:

1. Appearance of or sleeping while on the job on any shift. It is expected that employees be alert and responsive to potential patient care emergencies even when on assigned break.
2. Refusing a patient care assignment
3. Leaving the work setting/assignment within the assigned work period without appropriate knowledge and approval of a supervisor.

The employee is to contact the immediate supervisor/designee when any concerns or issues regarding a work assignment exist.

Workforce Behavioral Expectations

Employees are expected to conduct themselves in a courteous, cooperative, and professional manner. Disruptive, inappropriate or unprofessional conduct towards another employee, the public, or patients are not tolerated and should be reported. These may include behaviors that interfere with teamwork or safe patient care; intimidating or suppressing input from others; overt, such as disrespectful language, verbal or physical outburst, or passive and less obvious, such as failing to engage in necessary work communications, assist others, and not performing assigned tasks. (See DHS Policy 747.300 Workforce Behavioral Expectations)

Threat Management "Zero Tolerance"

All employees are entitled to a safe work environment. Workplace acts of violence or threats in any form directed towards another employee, the public or patients are not tolerated. Examples of such behaviors include but not limited to: verbal or written threats, bullying, threats against any property of an employee, off-duty harassment such as phone calls or stalking, carrying a weapon on county property or while on duty, domestic violence/conflicts, and suspicious activity. (See DHS Policy 792, Threat Management "Zero Tolerance" Policy)

Drug/Substance Abuse while on duty/or under the influence of non-prescribed substances

Employees at work who are under the influence of a drug, alcohol, and/or other substances that are not prescribed by a personal physician will be subject to immediate disciplinary action and removal from a patient/unit assignment. Licensed or certified personnel will be reported to their state licensing / certifying agency. As available, an opportunity to voluntarily enter a diversion/treatment program will be offered. Disciplinary action may occur up to and including termination.

Unauthorized Visitors

Friends and family members of employees are not authorized to be within the work area during an employee's regular work hours. Visitors of employees who are on assigned meal /break periods are restricted to visiting hours during the day and evening shifts. Family emergencies will be given special consideration.

Probationary Period

Most new, full-time employees are on a probationary status for six months. At the end of the probationary period the employee is considered permanent and has all the rights and privileges of a permanent employee.

Performance Evaluations

During the first six months of employment all new employees (full-time and temporary) will be assigned a clinical coach and evaluated on an ongoing basis by their immediate supervisor to determine the status of their performance. This time also allows the new employee an opportunity to evaluate their own needs and to discuss these issues with the Nurse Manager or designee. The employee will receive a formal written evaluation at six months and as needed. After successful completion of the initial six months, the employee is evaluated yearly unless there is significant disciplinary action required. (See Policy: A 397 - Performance Evaluation, Nursing Policy and Procedures).

Lockers

Lockers may be available for use in your assigned area during the work shift only. If you use a locker during the shift, you are to empty and clean the locker at the end of the shift. The availability of lockers will be based on first come first serve basis only.

Telephones

County phone service is limited to Medical Center business. Personal phone calls and the conduct of personal business should be on the employee's own time (off duty, breaks). Use of personal cell phones or Bluetooth devices are limited to break periods only and is not permitted in patient care areas. Special consideration will be made for personal/family emergencies. (See DHS Policy No 861.3- Telephone Usage)

Food/Property

County policy states that employees must not eat or pilfer patient's food nor take any County property (e.g. linen, Central Service supplies, stationery, etc.) from the premises. The statement that you signed in Human Resources has been placed in your personnel file.

Smoking

This Medical Center is designated as a non-smoking County facility. It is the responsibility of all employees to support the Medical Center's smoke/tobacco-free environment policy RLANRC Administrative Policy & Procedure A120, Rancho No Smoking Policy.

Reporting Personal Changes (change of name, address, phone)

Confidential personal information is maintained on everyone who works in the Nursing Department. It is important for the department to know immediately if an employee has a change in name, address, phone number and emergency contact information. As soon as any of these changes occur, the employee is responsible for updating his/her own information in the Enterprise HR system.

