



Martin Luther King, Jr.
OUTPATIENT CENTER

POLICY AND PROCEDURE

DIVISION: ADMINISTRATION	NUMBER: 04-006
SUBJECT: WORKFORCE MEMBER CONTACT INFORMATION	
SECTION: HUMAN RESOURCES	PAGE: 1 OF: 2
REVIEWED BY: HR ADMINISTRATOR AND POLICY & PROCEDURE COMMITTEE	EFFECTIVE DATE: 12/08/83
TO BE PERFORMED BY: ALL WORKFORCE MEMBERS	REVIEWED DATE: REVISED DATE: 01/2016

PURPOSE

To ensure Martin Luther King, Jr., Outpatient Center workforce members are aware of the requirement to maintain current contact information on file with DHS Human Resources.

POLICY

The DHS Human Resources has a business reason to require current and accurate contact information regarding each workforce member assigned to Martin Luther King, Jr., Outpatient Center and all DHS facilities. Each workforce member is required to provide the following information; this is not an all-inclusive list:

- Residential address *and* mailing address, if different.
- Residential telephone number and voice mail or other reliable telephone number for messages to be left relative to employment matters, *if* different from residential telephone number.
- Name of individual(s) to be contacted in the event of an emergency regarding the workforce member, and specific relationship of the individual(s) to the workforce member.
- Residential and mailing address and telephone number of the individual designated as the workforce member's emergency contact(s).

PROCEDURE

Each Martin Luther King, Jr., Outpatient Center workforce member is further required to provide immediate notice to the DHS Human Resources regarding *any* change(s) to the required contact information. Such notice to DHS Human Resources is required notwithstanding any notice of information provided by the workforce member to his/her assigned department/service area manager, as the local and official records are independent from each other.

The DHS Human Resources shall treat all workforce member contact information and changes thereto as privileged and confidential.

All workforce members shall ensure that the following documents have the most current contact information.

- Warrant Recipient Designation form – Obtained from the Payroll Office and on-site Human Resources. *Designates beneficiary of final payment of salary/benefits if the workforce member dies while in County employment.*
- Emergency Contact form (Attachment 1) – Obtained from the DHS on-site Human Resources *Designates the workforce member's choice of persons to be contacted in the event of serious injury or illness and for important matters where contact is necessary.*

CROSS REFERENCE

DHS Policy 761, Employee Information

NOTED AND APPROVED:

Cynthia M. Oliver, Chief Executive Officer

Date

Ellen Rothman, M.D., Chief Medical Director

Date

Lessie Barber, RN, Nursing Director

Date

Signature(s) on File.