



POLICY AND PROCEDURE

DIVISION: ADMINISTRATION	NUMBER: 04-046
SUBJECT: SOLICITATION BY DHS WORKFORCE MEMBERS	
SECTION: HUMAN RESOURCES	PAGE: 1 OF: 2
REVIEWED BY: HR ADMINISTRATOR AND PROCEDURE & POLICY COMMITTEE	EFFECTIVE DATE: 01/23/06
TO BE PERFORMED BY: ALL WORKFORCE MEMBERS	REVIEWED DATE: 04/16/07 REVISED DATE: 05/31/17

PURPOSE

To govern solicitation in DHS buildings and on DHS property by its workforce members.

POLICY

Solicitation by a DHS Workforce Member in any building or on any property owned by DHS is permitted only upon prior approval of the following:

- Type of solicitation activity (organization to benefit from proceeds, items to be sold, etc.)
- Time and date(s) of the activity (during breaks, lunch hours, etc.); and,
- Designated area for the activity (adjacent to work area, lunchroom, etc.).

This policy does not apply to workforce members who, as part of their work assignment, are required to distribute literature and/or process enrollment documents for County administered employee group insurance programs or County sponsored fundraising events.

No workforce member shall solicit in any DHS building or on DHS property without prior approval from the local Chief Executive Officer, Area Health Officer, or his/her designee.

PROCEDURE

Workforce members shall obtain approval by submitting a "Request for Approval to Solicit on County Property" form (Attachment 1) to their managers/ supervisors at least three working days prior to beginning any solicitation activity.

No workforce member shall solicit for a private vendor or operator the patronage of any county patients or clients, nor refer any county patients or clients for treatment or service other than required by the workforce member's regularly assigned duties.

Members of the public are not allowed to solicit in County buildings or on any County property.

The annual Performance Evaluation shall have attached a documented review of this policy between the manager/supervisor and the workforce member.

DEFINITIONS

Workforce or Workforce Member

Workforce Member is defined as employees, volunteers, trainees, affiliates, students, and any other persons who perform work under the control of DHS, whether or not they are paid by the County.

AUTHORITY

Memo, Janssen, David E., "Space Use Permit Fee Waiver – Charitable Giving," 6/27/03
Los Angeles County Code, Title 13, Chapters 13.15 and 13.16

REFERENCE

DHS Policy No. 146, Fundraising Events

Hospital Administration Policy No. 232, Solicitation on County Property

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.

COUNTY OF LOS ANGELES – DEPARTMENT OF HEALTH SERVICES

REQUEST FOR APPROVAL TO SOLICIT ON COUNTY PROPERTY

NAME:	EMPLOYEE NO.:
TYPE OF SOLICITATION: (Organization to benefit from proceeds, items to be sold, etc.)	
DATE(S) AND TIME(S) OF SOLICITATION: _____	
LOCATION OF SOLICITATION: _____	
APPROVED BY: _____ DATE: _____ (Signature of Supervisor/Manager)	

DHS Policy 742 Att 1

ATTACHMENT: Application for Permit-Facility Use



County of Los Angeles
Chief Administrative Office
Real Estate Division
Permits & Concessions Management Section
222 S Hill St, 4th Floor
Los Angeles, CA 90012

DAVID E. JANSSEN
Chief Administrative Officer

**APPLICATION FOR PERMIT
FACILITY USE**

1. WHO is requesting the Permit		
Organization		
Person requesting Permit (Title)		
Address		City
	State	Zip
Telephone Number		Fax Number
E-Mail Address		

2. WHAT is the nature of the event or the purpose for the Permit, how many attendees expected?	
3. WHERE is the County property you intend to use (<u>exact</u> location and address)?	
4. WHEN do you wish to use the property for the above event or purpose (date(s) and hours)?	
5. AUTHORIZATION who approved this event (County Department-contact person-telephone number)?	
PLEASE WRITE SEPARATE CHECKS FOR THE DEPOSIT AND THE FEE	
6 FEE AMOUNT \$	DEPOSIT AMOUNT \$
7. INSURANCE an "additional insured" endorsement is required	

NOTE: Any person or group using County property is required to pay a fee, provide insurance and execute the permit agreement. The Permittee agrees to pay any additional charges i.e., cleaning if not left clean.
A DEPOSIT MAY BE REQUIRED

1. Minimum \$1,000,000 insurance is required (permits can cover more than one day IF insurance covers same period)
2. The name of the organization requesting the permit above must be the same as appears on the insurance
3. You may be able to obtain Special Events insurance – call 800-420-0555 or on the web at www.2sparta.com
4. The Permit must not be altered in any way, if there are errors, alert this office – DO NOT CHANGE THE PERMIT
5. Audio and/or other equipment is not arranged by this office
6. This application does not constitute a reservation or a permit to use County property

Fax application to: Jan Banks, Real Property Agent jbanks@cao.co.la.ca.us
Telephone: 213-974-4153 – Fax: 213-830-0927

APPLICANT'S SIGNATURE _____ DATE _____