



SUBJECT: Corrective Action

PROCEDURE: C-01P

DATE EFFECTIVE: April 8, 1986

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I. PROCEDURE

A. Purpose of Corrective Action

The purpose of corrective action is to:

1. Review job requirements with the employee to help him/her understand areas where job standards are not being met; to guide the employee to be productive and effective; and to emphasize the need to meet these requirements for continued employment.
2. Help the employee through notices, counseling and discipline to correct job performance, work habits, attendance/tardiness or other behavior problems
3. Have on record the description of the problem, the fact that the employee has been advised, what he/she has been advised and/or the plan to correct the problem.
4. Maintain high quality of employee performance.
5. Clarify the consequences if an employee does not meet job standards, or whose conduct adversely affects relationships with patients, public or staff, or who interferes with or disrupts the activities of fellow employees.

B. Implementation Guidelines

In any situation concerning employee corrective action, it is the responsibility of the manager to obtain and document all facts, evaluate information obtained, consult with Human Resources, make a judgment and promptly carry out appropriate corrective action in a consistent and non-discriminatory manner.

In the case of an employed member of the Medical Staff, Human Resources (HR) will, in turn, consult with the Chief Medical Officer (CMO) or the Chief Nursing Officer (CNO), depending on the medical discipline of the member, and HR and the CMO or CNO will jointly make a recommendation of appropriate corrective action. Such corrective action may include both the actions included in this policy and the actions prescribed in the Medical Staff By-Laws, as appropriate.

The following is the general sequence of progressive corrective action; however, **depending on the nature and severity of the conduct and other relevant circumstances, some or all of the following steps may be skipped.**

This policy in no way alters the “at-will” relationship between Children's National and employees who are not covered by a collective bargaining agreement or an individual contract of employment explicitly altering the “at-will” relationship.

Prior to any written corrective action, managers are encouraged to provide verbal counseling or coaching to make an employee aware of problem areas that need improvement. This is an informal step and any documentation should be kept in the employee's department file. Formal corrective actions steps include:

- Step 1 – First Written Notice
- Step 2 – Second Written Notice
- Step 3 – Final Notice
- Step 4 – Termination

In addition to, or in lieu of, any of the steps outlined above, Children's National may also place an employee on suspension. Suspension may be used as a means of removing the employee from an area where, in Children's National opinion, doing so is in the best interest of the employee and/or Children's National; (e.g., so that an investigation may take place or it is needed to meet legal requirements for individual licensure or registration.)

The employee receiving corrective action has the right to appeal any correction action taken, including termination, by using the "Employee Complaint Policy & Procedure". In the case of an employed member of the Medical Staff, the employee also has the right to appeal using the process depicted in the Medical Staff By-Laws.

C. Reasons for Corrective Action

Types of reasons for Corrective Action include:

1. **Performance** is not up to the standards of quality or quantity of work for the job classification;
2. **Attendance** that is poor or sporadic; extended or excessive absences or tardiness
3. **Behavior** exhibited includes:
 - a. Violation of Children's National policies, department rules, regulations or procedures
 - b. Creation of an intimidating or hostile environment or disruption of the orderly operation of any unit or department in Children's National

D. Documentation of Corrective Action

Each corrective action step taken is to be documented in writing on an **Employee Notice of Correction Action form**:

1. The notice should be given as soon as possible, describing the problem or situation giving rise to the notice, any previous action taken, the action being taken by the notice, and the conditions, future steps and time period for corrective improvement (where appropriate). The notice should be written objectively using clear and concise language to avoid interpretation problems.
2. The completed form should be reviewed with and signed by the employee. The employee should be advised that his/her signature indicates that the action being documented has been reviewed and discussed with him/her and does not denote the employee's agreement. If the employee refuses to sign the notice, the manager should indicate such refusal on the form.

3. If the employee does not agree with the documentation, he/she may write comments for the record.

E. Distribution of Employee Notice of Corrective Action

Copies of the Employee Notice of Corrective Action form should be distributed to the employee, manager and to the employee's file in Human Resources.

A record of all notices, suspensions and action taken will be retained in the employee's personnel file. Generally, only incidents of performance, attendance or behavior for the preceding twelve (12) months will be used as a basis for termination. In addition, position changes/transfers and merit pay increases are not authorized until the employee is off written notice. Merit pay given at that point will not be retroactive.

F. Disciplinary Steps

Available Step 1: First

Written Notice

When an employee initially engages in conduct for which corrective action is appropriate, the employee should generally be given a first written notice. The First Written Notice should be documented on an Employee Notice of Corrective Action form and signed, as explained in Section B above.

If the problem is not corrected within a reasonable amount of time, generally no more than 3-4 weeks or some other time set forth in the first written notice, or if the same problem occurs again, the employee should be taken to Step 2, second written notice.

Step 2: Second Written Notice

If the situation that caused the first written notice continues or becomes more severe, or if there is more than one issue for which corrective action is needed, the appropriate corrective action step is a second written notice.

An Employee Notice of Corrective Action form is to be completed precisely describing the problem and the reason for the second written notice, previous action taken as well as the conditions, future steps, and time period for corrective improvement, and signed as explained in Section B above.

The purpose of the second written notice is to:

1. Bring to the attention of the employee, in writing, that the problem is serious or has not been corrected by the first written notice,
2. Give the employee direct information so that he or she can correct the problem to protect his or her job and better serve Children's National, and
3. Ascertain the employee's commitment to resolving the problem.

The time period for correcting the situation should be reasonable, but usually no more than 3-4 weeks.

If the problem is not corrected, or the same problem occurs again (usually within 12 months of the first written notice), the employee should be taken to Step 3, final notice.

Step 3: Final Notice

If the employee's performance has not improved while on second written notice, if the problem reoccurs, or if the nature or severity of the problem warrants it, the employee is to be placed on Final Notice.

The Employee Notice of Corrective Action form is to be completed and signed as explained in Section B above. It should describe the problem and the reason for the final notice, including a specific time by which the situation will be re-evaluated regarding the need for recommendation for termination. The completed form is to be reviewed with the employee in a personal meeting. At this time, the employee is to be advised of the seriousness of the situation, that the re-evaluation time may be shortened at any time, and what the employee must do to protect his/her job.

In addition to the purposes outlined on page 1 of this policy, the purpose of the final notice is to bring to the attention of the employee that:

1. the problem is extremely serious and/or has not been corrected by prior written notices
2. this is the last opportunity the employee has to protect his/her job

Step 4: Termination

This is the final step of corrective action. Thoughtful consideration and review of supporting documentation must be given before this action is taken.

If the employee's performance, attendance, or behavior has not met Children's National standards, or if the incident or offense is sufficiently severe, termination may be recommended by the employee's department manager (preceded by immediate suspension if necessary).

An Employee Notice of Corrective Action form is to be completed recommending termination with supporting information that states the corrective action taken to date, the current corrective action status of the employee, and sufficient information about the

employee's performance and/or record. The file and any other pertinent information are to be reviewed by Human Resources and the CMO or CNO, in the case of an employed member of the Medical Staff, prior to all employee terminations. Together, Human Resources, the CMO or CNO where indicated, and the manager will make a final decision.

If the recommendation is approved by Human Resources, the manager is to proceed with the termination.

Suspension

An employee may be suspended without notice for a serious first-time violation or a situation wherein the employee, for his/her own best interests and/or the best interests of the institution, needs to be physically removed from the work area. In addition, an employee may be suspended in lieu of, or in addition to, any of the Corrective Action steps. The manager shall complete an Employee Notice of Corrective Action form, as explained in Section B, stating the reason for the suspension with a copy of the form sent to Human Resources, the CMO, in the case of an employed physician, and the employee.

The department manager, in consultation with Human Resources and the CMO or CNO, in the case of an employed member of the Medical Staff, will investigate and document

the situation to determine the facts and render a decision. The decision will be either to reinstate the employee, to recommend termination, or to impose some lesser form of corrective action.

The normal suspension is for 1-3 scheduled workdays with or without pay. Every effort will be made to complete the investigation and recommendations within the normal three (3) day suspension period.

A final decision will be one of the following actions with appropriate written documentation prepared for Human Resources and the CMO or CNO, in the case of an employee member of the Medical Staff, by the manager:

1. Reinstatement of the employee, with or without first or second written notice or final notice:
2. Recommendation of termination;
3. Impose some lesser form of discipline, i.e., first written, second written or final notice.

If the decision is reinstatement with or without a written or final notice, a determination will be made by the manager in consultation with Human Resources as to whether or not the employee will be paid for scheduled hours not worked while on suspension.

G. Policy Violation Types

Guidelines for managers as to where to begin the corrective action process based upon policy violation across four groups described below.

Group A

These policy violations will normally result in corrective action beginning with a first written notice.

1. Stopping work before time specified.
2. Loitering during working hours.
3. Creating or contributing to unsanitary conditions.
4. Posting, altering or removing notices, signs or writing in any form on any bulletin boards on Children's National property without management permission.
5. Failure to comply with the dress code or employee identification policies.
6. Failure to comply with the parking policy.
7. Failure to comply with meal and break time regulations.
8. Interfering with the work of other employees and/or creating conflict with coworkers, manager, patients, families, physicians and/or visitors.
9. Unsatisfactory job performance or otherwise not performing to standards.

10. Returning to or remaining on the premises during non-working time except for the purpose of seeking medical care or conducting business.
11. Unauthorized or inappropriate use of Children's National equipment.
12. Receiving excessive personal visitors and/or excessive personal phone calls during working hours and/or in the work area.
13. Providing individuals who are not Children's National personnel unauthorized access to Children's National.
14. Failure to comply with the requirement of the Occupational Health Department program.
15. Smoking in Children's Hospital or on Hospital grounds, or in non-designated smoking areas in off-site Children's National facilities.
16. Reporting to work or returning from a scheduled break smelling of smoke.

Group B

These policy violations will normally result in corrective action beginning with a second written notice.

1. Failure to complete work assignment.
2. Soliciting, receiving loans, tips, or making personal business arrangements with patients, visitors, employees or vendors while on duty.
3. Inappropriate activity that is not job related, and that has the potential to result in injury or unsafe conditions for the employee, patients, visitors, and/or any other person.
4. Soliciting/collecting contributions within Children's National for any purpose without written management approval.
5. Failure to communicate appropriately, resulting in patient, visitor or physician complaint and/or causing potential harm and/or discomfort to patients, visitors, physicians, and employees.
6. Failure to fulfill the responsibilities of the job to an extent that might or does cause injury to a person or damage to or loss of product, machinery, equipment, facilities, or other property.
7. Violation of a safety, fire prevention or health policy or practice or causing a security, health or safety hazard.
8. Conducting personal business during working hours.
9. Working overtime without permission of the manager.
10. Leaving own department and /or unauthorized absence from own work area during working hours without permission of manager, except for use of rest rooms.

11. Failure to immediately report any work related injury to manager.
12. Failure to comply with Children's national and/or regulatory requirements and/or established standards of practice/care.
13. Treating customers or coworkers in a rude, discourteous, inattentive or unprofessional manner.

Group C

These policy violations will normally result in corrective action beginning with a final notice.

1. False, fraudulent, misleading or harmful statement, action or omission involving another employee, patient, or visitor.
2. An arrest, criminal complaint, summons to answer a criminal charge, indictment, criminal information or any other criminal charge of any employee, depending on the particular circumstances and the offense charged, including but not limited to safety or health of patients, visitors, employees and or the security of Children's National premises and property.
3. Failure to follow procedural protections for confidential information.
4. Use of obscene and/or abusive language.
5. Threatening, intimidating, disrupting, coercing, harassing (including sexually harassing) employees, patients, or visitors.
6. Failure to report to work as scheduled on a holiday, on the day before and/or the day after a holiday, or on the day before and/or the day after a vacation.
7. Self-reporting of impairment on the basis of illegal or legal substance abuse.
8. Sleeping during scheduled work hours, with the exception of meal times and breaks times.

Group D

These policy violations will result in immediate termination.

1. Leaving before the end of a shift without notifying the manager or after the manager has instructed the employee not to leave.
2. Insubordination – refusal to complete scheduled work hours and/or assignments.
3. Carrying any weapon on Children's National premises.
4. Physical violence including fighting, grabbing or pushing an employee, patient, or visitor.
5. Conviction of a felony.
6. Unauthorized use of, removal of, theft of, or damage to the property of Children's

National, an employee, patient or visitor.

7. This item is no longer effective and has been removed from The Children's Policy Manual. We will, in the very near future, be issuing a revised policy, which among
8. other matters, will address the issue of the improper accessing and/or releasing information about patients, employees or Hospital business.
9. Failure to comply with departmental and/or Children's National policy, practice and/or procedures, and/or failure to follow professional standards and practice/care resulting in compromise of patient safety and/or injury to any other person.
10. Refusing to cooperate in or submit to questioning, or an inspection or search of the locker, personal belongings or personal vehicle, when requested or conducted by an agent of Children's National.
11. Unauthorized storing in a locker, desk, automobile or other repository on Children's National premises any illegal drug, drug paraphernalia, and any controlled substance whose use is unauthorized.
12. Failure to submit to drug testing in accordance with the drug and alcohol policy.
13. Altering, destroying or falsifying time sheets/cards, patient records, computer data or other official documents; recording time sheets/cards for another employee. Failure of exempt employees to record their vacation or sick leave in e-works.
14. Organized gambling or disorderly or immoral conduct while on Children's National premises.
15. Possession, use, unlawful manufacture, diversion, distribution and/or dispersing or sale of illegal drugs, controlled substances, alcohol, or perception altering substances on Children's National premises.
16. Adjusting, modifying or otherwise disabling Hospital security cameras and/or related security equipment.

II. REVIEW OR REVISION DATES

Original: 04/08/1986
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III. REFERENCE

C-01, Corrective Action Policy