

# **Meeker-McLeod- Sibley Community Health Services**

## **PERSONNEL POLICY**

**Meeker-McLeod-Sibley Community Health Services**  
**PERSONNEL POLICY**

**INTRODUCTION**  
**CODE OF CONDUCT**

**SECTION 1      GENERAL PROVISIONS**

- 1.1            EQUAL OPPORTUNITY EMPLOYER
- 1.2            RECRUITMENT AND SELECTION PROCESS
- 1.3            DATA PRIVACY
- 1.4            POLICY AGAINST OFFENSIVE CONDUCT, HARASSMENT  
AND VIOLENCE
- 1.5            NEPOTISM
- 1.6            OUTSIDE ACTIVITIES
- 1.7            HOURS OF WORK AND ATTENDANCE

**SECTION 2      COMPENSATION/BENEFITS**

- 2.1            SALARY SCHEDULE/PLAN
- 2.2            OVERTIME COMPENSATION
- 2.3            REIMBURSABLE EXPENDITURES
- 2.4            TERMINATION ENTITLEMENTS
- 2.5            INSURANCE BENEFITS

**SECTION 3      EMPLOYEE PERFORMANCE/CONDUCT**

- 3.1            EMPLOYEE PROBATIONARY PERIOD
- 3.2            PERFORMANCE EVALUATIONS
- 3.3            DISCIPLINE
- 3.4            GRIEVANCE PROCEDURE
- 3.5            TERMINATION OF EMPLOYMENT
- 3.6            DRUG AND ALCOHOL-FREE WORKPLACE
- 3.7            FOOD PURCHASING
- 3.8            TOBACCO FREE AND SMOKE FREE ENVIRONMENT
- 3.9            HEALTHY VENDING
- 3.10          LACTATION POLICY

3.11 LATEX ALLERGY/SENSITIVITY

**SECTION 4 LEAVE PROVISIONS**

4.1 HOLIDAYS  
4.2 VACATIONS  
4.3 SICK LEAVE  
4.4 FUNERAL LEAVE  
4.5 MATERNITY/PATERNITY LEAVE OF ABSENCE  
4.6 FAMILY AND MEDICAL LEAVE ACT  
4.7 JURY DUTY  
4.8 PERSONAL LEAVE  
4.9 EDUCATION LEAVE  
4.10 INCLEMENT WEATHER/EMERGENCY CONDITIONS  
4.11 VOLUNTEERISM LEAVE  
4.12 MILITARY LEAVE  
4.13 VOTING LEAVE  
4.14 POLITICAL LEAVE  
4.15 VOLUNTARY LEAVE TRANSFER  
4.16 UNPAID LEAVE

**SECTION 5 TECHNOLOGY/EQUIPMENT**

5.1 ACCEPTABLE USE FOR COMPUTER AND NETWORK  
SYSTEMS  
5.2 CELLULAR TELEPHONE  
5.3 ELECTRICAL EQUIPMENT USAGE AND PURCHASING  
5.4 SOCIAL MEDIA USAGE  
5.5 VEHICLE AND EQUIPMENT USE  
5.6 IDENTIFICATION BADGES

## INTRODUCTION

The **Meeker-McLeod-Sibley Community Health Board** hereby establishes a personnel policy for any employee, agent, officer, commissioner or any other elected official. These policies shall apply to all employees of **Meeker-McLeod-Sibley Community Health Services** unless otherwise superseded by a collective bargaining agreement or Federal or State Statute or Merit System.

It is the purpose of these policies to provide uniform, comprehensive, appropriate and efficient system of personnel administration in **Meeker-McLeod-Sibley Community Health Services**. This system is designed to provide for standards of excellence in employment and the fair treatment of applicants and employees in all aspects of personnel administration.

The **Meeker-McLeod-Sibley Community Health Board** reserves the right to delegate certain functions of personnel administration where appropriate and in the best interest of **Meeker-McLeod-Sibley Community Health Services**.

The **Meeker-McLeod-Sibley Community Health Board** recognizes that this personnel policy manual is not a comprehensive list of work rules for **Meeker-McLeod-Sibley Community Health Services** employees. **Meeker-McLeod-Sibley Community Health Services** reserves the right at its discretion to deviate from these policies, adopt additional policies, amend or repeal these policies as it sees fit, at the sole discretion of the **Meeker-McLeod-Sibley Community Health Board**, without notice to employees.

These policies and procedures are not an employment contract. The policies and procedures contained herein supersedes any and all prior personnel policies, past practices, oral and written representation, or statements regarding the terms and conditions of employment with **Meeker-McLeod-Sibley Community Health Services**.

The **Meeker-McLeod-Sibley Community Health Board** retains the full and unrestricted right to operate and manage all manpower, facilities and equipment; to establish functions and programs; to set and amend budgets; to determine the utilization of technology; to establish and modify the organizational structure; to select,

direct and determine the number of personnel; to establish work schedules, and to perform any managerial function in a manner not otherwise specifically limited by State and/or Federal Law, current bargaining agreements, these regulations and **Meeker-McLeod-Sibley Community Health Board** resolutions.

The Director and Management team may establish rules of procedure for the express administration of personnel matters unique to the Meeker-McLeod-Sibley Community Health Services. Such rules shall be filed with the **Meeker-McLeod-Sibley Community Health Services** Director.

Those employees who are subject to collective bargaining agreements as negotiated in accordance with the Public Employment Labor Relations Act, or as amended, shall be governed by the terms of the collective bargaining agreement in addition to these policies. In the event of a conflict between a collective bargaining agreement and these policies, the collective bargaining agreement shall prevail. Nothing in these policies shall be construed to confer any additional direct or indirect compensation or fringe benefit upon any employee included in a collective bargaining agreement. No employee subject to a collective bargaining agreement shall have the right to file a grievance through these policies.

Employees subject to these policies shall comply with and carry out the provisions of these policies, as well as any additional departmental rules and regulations. Any employee who fails to comply with any of the provisions of these Policies or rules adopted thereunder, shall be subject to disciplinary action, up to and including discharge.

## **CODE OF CONDUCT**

It is the policy of the **Meeker-McLeod-Sibley Community Health Board** to promote the highest standards of honesty, impartiality and conduct. The **Meeker-McLeod-Sibley Community Health Services** Code of Conduct is designed to instruct and guide an official, agent or employee of the conduct expected and required in both their official duties and their general conduct.

No employee shall engage in any act which is in conflict or creates an appearance of impropriety or conflict with the performance of official duties. When an employee believes the potential for a conflict of interest exists, it is the employee's responsibility to avoid the situation. Employees must notify their supervisor if a conflict of interest or perception of a conflict of interest situation exists or may exist. Employees who knowingly fail to avoid or disclose a potential, perceived or actual conflict of interest situation are subject to disciplinary action in addition to any criminal penalty that may be involved.

### ***THE BASIC CODES OF ETHICS***

#### **ETHICAL PRACTICES**

An official, agent or employee of **Meeker-McLeod-Sibley Community Health Services** is expected to observe the highest standards of business and personal ethics. Primarily this involves the practice of honesty and sincerity in dealings with other government officials, the public, fellow employees and those with whom **Meeker-McLeod-Sibley Community Health Services** transacts business. This would also involve the avoidance of any relationship with persons, firms or corporations with whom **Meeker-McLeod-Sibley Community Health Services** transacts business, which may involve the employee in a conflict of interest which could be detrimental to them, **Meeker-McLeod-Sibley Community Health Services**, or fellow employees. This Code of Conduct is general in nature. However, the absence of a **Meeker-McLeod-Sibley Community Health Services** instruction covering a particular situation does not relieve an employee from the responsibility of exercising the highest ethical standards in that situation.

#### **ILLEGAL PRACTICES**

Adopted by MMS CHB October 9, 2014

No official, agent, or employee shall, in discharging their assigned responsibilities and duties, engage in any activity which might involve them or **Meeker-McLeod-Sibley Community Health Services** or its employees in a violation of any federal, state or local law, rule or regulation. It is the direct responsibility of each individual, agent or employee to familiarize themselves with the legal standards and restrictions applicable to their assigned duties and to guide them accordingly. The services of **Meeker-McLeod-Sibley Community Health Services** attorneys are available for advice and consultation in this respect.

Any official, agent, or employee who discovers evidence of theft or misuse of public funds shall report the incident to the **McLeod County** Law Enforcement Agency and the State Auditor.

## **CONFLICTS OF INTEREST**

An employee shall not enter into a business transaction when he/she uses confidential information gained in the course of employment.

An employee shall not provide financial assistance to a client from their own personal resources.

An employee may not accept compensation in any form from a client or vendor for his/her work for the **Meeker-McLeod-Sibley Community Health Services**, i.e. including but not limited to, money, sporting event tickets, gift cards, etc. Compensation does not include items of insignificant value such as pens or items of very nominal value, awards, plaques, or mementos recognizing the employee's contribution in their area or to a charitable organization, honoraria or other expenses in conjunction with a paper presentation or demonstration in the employee's field of expertise or scholarships/financial grants for schooling.

An employee shall not knowingly:

- Use his/her position to secure benefits, privileges, exemptions or advantages for the employee, the employee's family or friends

- Accept other employment, enter into a contractual relationship or public office where it will affect the employee's independence of judgment or require use of the confidential information gained in the employee's duties as an employee for the **Meeker-McLeod-Sibley Community Health**



## **Services.**

Act as an agent or attorney for any matter pending before **Meeker-McLeod-Sibley Community Health Services** or its **boards** or agencies except in the proper discharge of his/her duties or if such action is personal in nature to the employee or the employee's family.

*Example: An employee should not appear before the Planning Commission on behalf of a third party and seek to use his/her position to sway the Commission because of such position. However, an employee may have to utilize the Court system to act as a Personal Representative in a family member's estate or in a dissolution action.*



## **SECTION 1.1 - EQUAL OPPORTUNITY EMPLOYER/ AFFIRMATIVE ACTION**

It is the policy and intent of **Meeker-McLeod-Sibley Community Health Services** to provide equality in employment to all persons. This policy expressly prohibits discrimination because of race, color, creed, religion, national origin, mental or physical disability, sexual orientation, marital status, status with regard to public assistance, sex, age or other protected class status (except where age is a bona fide occupational qualification) in all aspects of its personnel policies, programs, practices, and operations.

**Meeker-McLeod-Sibley Community Health Services** will take affirmative action to ensure that all employment practices are free of discrimination. Such employment practices include, but are not limited to, the following: hiring, upgrading, demotion, transfer, recruitment or recruitment advertising, selection, layoff, disciplinary action, termination, rates of pay or other forms of compensation and selection for training including apprenticeship.

**Meeker-McLeod-Sibley Community Health Services** fully supports incorporation of non-discrimination and Affirmative Action rules and regulations into contracts.

**Meeker-McLeod-Sibley Community Health Services** has appointed the McLeod County Human Resources Director to manage the Equal Employment Opportunity program. The responsibilities will include monitoring all Equal Employment Opportunity activities and evaluating the effectiveness of the Affirmative Action program on an annual basis and as required by federal, state and local agencies. The **Meeker-McLeod-Sibley Community Health Services Administrator** of **Meeker-McLeod-Sibley Community Health Services** will receive and review reports on the program. If any employee or applicant for employment believes he/she has been discriminated against, please contact **Meeker-McLeod-Sibley Community Health Services Administration, 830 11<sup>th</sup> Street East, Suite 110, Glencoe MN 55336.**

## **SECTION 1.2 - RECRUITMENT AND SELECTION PROCESS**

It is the policy of **Meeker-McLeod-Sibley Community Health Services** to recruit and select qualified persons for positions in **Meeker-McLeod-Sibley Community Health Services** service. Employees of the **Meeker-McLeod-Sibley Community Health Services** shall be encouraged to advance their career through promotion or transfer. Recruitment shall be conducted in a manner to ensure open competition, provide equal employment opportunity and to prohibit discrimination.

### **RECRUITMENT PROCESS**

When there is a need to hire staff, including replacement or temporary hires the CHS Director in consultation with the CHS Management Team shall make a request to the **Meeker-McLeod-Sibley Community Health Board**.

After **Meeker-McLeod-Sibley Community Health Board** approval, the Human Resources Director shall work with the CHS Management Team to update and approve the job description, determine the appropriate advertising media and shall post according to collective bargaining agreements, if applicable. Advertising shall be done in a cost-effective manner as approved by the HR Director. Each item of advertising shall include the words "Equal Opportunity/Affirmative Action Employer." Internal and external posting may be done simultaneously. The application deadline will be set at least 5 business days after the last advertisement is run.

All applicants for employment in **Meeker-McLeod-Sibley Community Health Services** shall complete the **McLeod County** On-line Employment Application. Separate applications shall be submitted for each vacancy for which the applicant wants to be considered. Resumes or other documentation be submitted on request.

### **SELECTION PROCESS**

All applications shall be reviewed, rating them on a 100-point scale. This scale, called a Training & Experience Rating Form, allows the CHS Management Team to rank the applicants based on minimum and desired qualifications needed for the essential functions of the job. This scale should be developed before advertising for the position so that objective criteria is in place and shall

be applied without influence

from applications received. If the applicants meet the minimum qualifications, Veteran's Preference points will be awarded per MS 197.447, or as amended.

All interviews are structured to provide the most objective assessment of each applicant's qualifications. The interviews will be conducted by the CHS Management Team and/or designee(s). In addition to a verbal interview, skills testing may also be conducted on each of the applicants.

It shall be the hiring department's responsibility to conduct reference checks on the applicants.

Once the finalist is determined, Human Resources will be contacted and a verbal conditional offer of employment can be made by the CHS. Once the candidate has accepted, contact Human Resources as soon as possible. Human Resources will send out a letter stating the conditional offer of employment, the salary and start date and will include the Background Check Authorization form. Other applicants will be notified regarding that decision. (The **Meeker-McLeod-Sibley Community Health Board**, the **CHS Management Team Services** and Human Resources shall be conferred with in setting a beginning salary rate in the case of promotion, demotion or new hire that is above the minimum of the appropriate grade). Conditions of employment may include, but are not limited to, a background check, criminal records check, drug testing, physical examination and driving record check. Human Resources shall assist the hiring department with these requirements. A criminal background check shall be conducted on all finalists for employment, all volunteers, contracted personnel or those working for **Meeker-McLeod-Sibley Community Health Services** through a temp service.

Once the Background Check results have been received, Human Resources will contact the CHS Management Team to review the information and determine a start date. The CHS Management Team will notify the Payroll/Benefits Coordinator to schedule a primary orientation with the Payroll/Benefits Coordinator so that the new employee can complete employment forms and receive benefit information (if applicable). New employees will also attend a secondary orientation scheduled by Human Resources to receive information about various aspects of employment, including computer and phone basics and OSHA/safety training. Additional training specific to Meeker-McLeod-Sibley Community Health Services program will be conducted by CHS Management team and/or designee(s).

The new employee will serve a probationary period, the length set by applicable personnel policy or union contract.

Adopted by MMS CHB October 9, 2014

## **SECTION 1.3 - DATA PRIVACY**

It is the policy of the **Meeker-McLeod-Sibley Community Health Board** to comply with the requirements of the Minnesota Government Data Practices Act that relate to public access to government data and rights of subjects of data. The **Meeker-McLeod-Sibley Community Health Services** Guidelines and Procedures for the Minnesota Data Practices Act are available upon request.

Data on individuals are classified as either public, private or confidential. Public data must be available to anyone for any reason. Private data is available only to the data subject and anyone authorized by the data subject or by law to see it. Data classified as confidential is not available to the public or the data subject.

Anyone may exercise the right to access public government data by either calling or writing the **Meeker-McLeod-Sibley Community Health Services** Administrator's Office.

Employees may obtain access to their personnel file by contacting their Department Head. Only public and private data need be made available (not confidential).

## **SECTION 1.4 - POLICY AGAINST OFFENSIVE CONDUCT, HARASSMENT AND VIOLENCE**

### **I. GENERAL STATEMENT OF POLICY**

**Meeker-McLeod-Sibley Community Health Services** will maintain an environment that is free from offensive conduct, harassment and violence based on the protected classes of race, color, creed, national origin, gender, religion, disability, age, marital status, familial status or status with regard to public assistance or sexual orientation.

It shall be a violation of this policy for any employee, agent, officer, commissioner or other elected official of **Meeker-McLeod-Sibley Community Health Services** to engage in offensive or harassing verbal or physical conduct of a sexual nature or to inflict, threaten to inflict, or attempt to inflict sexual violence or violence based on race, color, creed, national origin, gender, religion, disability, age, status with regard to public assistance, marital status or sexual orientation towards any **Meeker-McLeod-Sibley Community Health Services** employee, officer, agent, or member of the public seeking public services or accommodations from the **Meeker-McLeod-Sibley Community Health Services**.

**Meeker-McLeod-Sibley Community Health Services** policy also protects employees from offensive conduct, harassment, and violence by vendors, third-parties, and the general public. In such case, the employee subject to the conduct should follow the procedures outlined in this policy.

Violence is a physical act of aggression, assault or force or the threat thereof. Any violence or threat for any reason (except defense of self or other, or, in the case of law enforcement and correctional staff, force as authorized by department policy) is expressly prohibited. This policy sets a zero tolerance for violence in any form and violence for any reason (except as noted above) is prohibited and will not be tolerated in the workplace.



**Meeker-McLeod-Sibley Community Health Services** will act to investigate all complaints, either formal or informal, verbal or written, of offensive, harassing or violent conduct based on the protected classes listed above.

## **II. OFFENSIVE CONDUCT, HARASSMENT AND VIOLENCE DEFINED**

Offensive conduct/harassment for all the protected classes listed previously includes:

- 1) Submission to that conduct or communication is made a term or condition, either explicitly or implicitly, of obtaining or retaining employment, public service or public accommodations;
- 2) Submission to or rejection of that conduct or communication by an individual is used as a factor in decisions affecting that individual's employment, public services or public accommodations or;
- 3) That conduct or communication has the purpose or effect of substantially or unreasonably interfering with an individual's employment or use of public services or public accommodations or creating an intimidating, hostile or offensive employment, public service or public accommodation environment.

The following list will serve to further define some types of offensive conduct or harassment:

### ***A. Sexual/ Gender Based Offensive Conduct or Harassment: Definition.***

Sexual/Gender based offensive conduct/harassment includes unwelcome physical or verbal conduct relating to an individual's gender or directed at an individual because of gender; unwelcome sexual advances, requests for sexual favors, sexually motivated physical conduct or other verbal or physical conduct or communication of a sexual or gender biased nature: Examples of sexual/gender harassment may include but are not limited to:

- i. unwelcome verbal remarks, jokes or innuendoes of a sexual nature or based upon gender;
- ii. unwelcome pressure for sexual activity;

- iii unwelcome, sexually motivated touching or inappropriate patting, pinching, or other physical contact;
- iv. unwelcome sexual behavior or words, including demands for sexual favors, accompanied by implied or overt threats, promises, or preferential treatment with regard to an individual's employment or access to public services or public accommodations;
- v. distribution or display of written materials, pictures or other graphics of a sexual or gender biased nature;

***B. Sexual Violence: Definition:***

Sexual violence is a physical act of aggression or force or the threat thereof which involves the touching of another's intimate parts, or forcing a person to touch any person's intimate parts including the genital area, groin, inner thigh, buttocks or breasts, as well as the clothing covering these areas.

Sexual violence may include, but is not limited to:

1. touching, patting, grabbing or pinching another person's intimate parts, whether that person is of the same sex or the opposite sex;
2. coercing, forcing or attempting to coerce or force the touching of anyone's intimate parts;
3. threatening to force or coerce sexual acts, including the touching of intimate parts or intercourse, on another;
4. Assault upon another because of, or in a manner reasonably related to, gender.

***C. Racial/Color/National Origin Violence: Definition.***

Racial/Color/National Origin violence is a physical act of aggression or assault upon another because of, or in a manner reasonably related to, race, color, or national origin.

***D. Religious or Creed-Based Violence: Definition.***

Religious or creed-based violence is a physical act of aggression or assault upon another because of, or in a manner reasonably related to, religion.

***E. Marital Status Based Offensive Conduct/Harassment and Marital Status Bias: Definition:***

“Marital status” means whether a person is single, married, remarried, divorced, separated or a surviving spouse, and in employment cases includes protection against discrimination on the basis of the identity, situation, actions or beliefs of a spouse or former spouse.

***F. Status With Regard to Public Assistance Based Offensive Conduct/Harassment and Bias: Definition.***

“Status with regard to public assistance” means the condition of being a recipient of federal, state or local assistance.

***G. Sexual Orientation Based Offensive Conduct/Harassment and Bias: Definition***

“Sexual Orientation” means having or being perceived as having an emotional, physical or sexual attachment to another person without regard to the sex of that person or being perceived as having an orientation for such an attachment, or having or being perceived as having a self-image or identity not traditionally associated with one’s biological maleness or femaleness. “Sexual orientation” does not include physical or sexual attachment to children by an adult.

***H. Sexual Orientation Based Violence: Definition.***

Sexual orientation violence is a physical act of aggression or assault upon another because of, or in a manner reasonably related to, that individual’s actual or perceived sexual orientation.

***I. Assault: Definition. Assault is:***

1. an act done with intent to cause fear in another of immediate bodily harm or death;
2. the intentional infliction of or attempt to inflict bodily harm upon another; or
3. the threat to do bodily harm to another with present ability to carry out the threat.

**III: APPLICABILITY**

Offensive conduct, harassment or bias may occur (this list includes but is not limited to):

1. Between a supervisor and an employee;
2. Between co-employees;
3. Between an employee or supervisor and a member of the public seeking to obtain or use public services/ accommodations;
4. Between a commissioner or other elected official and an employee or member of the public receiving or seeking public services/accommodations;
5. Against an employee or supervisor by a vendor;
6. Between an agent of the **Meeker-McLeod-Sibley Community Health Services** and an employee, supervisor, elected official or member of the public.

**IV. REPORTING PROCEDURES**

Any person who believes he or she has been the victim of offensive conduct of a sexual nature, sexual harassment or harassment or bias based on race,

color, creed, national origin, gender, religion, disability, age, marital status,

status with regard to public assistance or sexual orientation by an employee, agent, official, commissioner or other elected official of **Meeker-McLeod-Sibley Community Health Services**, or any person with knowledge or belief of conduct which may constitute such harassment or bias toward an employee, official or member of the public seeking or receiving public services or accommodations, shall report the alleged conduct immediately to an appropriate **Meeker-McLeod-Sibley Community Health Services** official designated below.

**Meeker-McLeod-Sibley Community Health Services** encourages the reporting party or complainant to use the report form available from the **McLeod County** Administrator's office or available from a member of the CHS Management Team, but verbal reports shall be considered complaints as well. Nothing in this policy shall prevent any person from reporting harassment or violence directly to the **Meeker-McLeod-Sibley Community Health Services** Human Rights Officer.

***A. Meeker-McLeod-Sibley Community Health Services Department***

1. The CHS Administrator is the person responsible for receiving verbal or written reports of all types of offensive conduct, harassment and bias described in Section II, at the department level.
2. Any CHS Management Team member, and/or supervisory employee (team leaders), who receives a formal or informal, verbal or written report of harassment, bias or violence as defined in this policy, or who otherwise becomes aware of harassment, bias or violence as defined in this policy, shall inform the CHS Administrator immediately without screening or investigating any report, unless the CHS Administrator is involved in the alleged harassment, bias or violence. In the event that the CHS Administrator is involved, or it is otherwise deemed by the supervisory employee to be inappropriate to report to the CHS Administrator, the report shall be made directly to the McLeod County Human Rights Officer or Alternative Human Rights Officer as described below. Failure of a supervisory employee to forward such a report to the appropriate party shall be grounds for discipline, including immediate discharge of employment.

3. Upon receipt of a report, the CHS Administrator must notify the McLeod County Human Rights Officer immediately, without screening or

investigating the report. The CHS Administrator may request, but may not insist upon, a written complaint by the complainant. A written statement of the facts alleged will be forwarded as soon as practicable by the CHS Administrator to the McLeod County Human Rights Officer. If the report was given verbally, the CHS Administrator shall personally reduce it to written form within 24 hours and forward it to the Human Rights Officer. Failure to forward any harassment or violence report or complaint as provided herein will result in disciplinary action against the department head, including immediate termination from employment.

4. If the complaint involves the CHS Administrator, the complaint shall be made or filed directly with the McLeod County Human Rights Officer by the reporting party or complainant.
  5. The **Meeker-McLeod-Sibley Community Health Board** hereby designates the Meeker-McLeod-Sibley Community Health Services Administrator, **1805 Ford Ave Suite 200, Glencoe, MN 55336, 507-766-3531**, as the Meeker-McLeod-Sibley Community Health Services Human Rights Officer to receive reports of sexual harassment and of offensive conduct, harassment and violence based on race, color, creed, national origin, gender, religion, disability, age, marital status, status with regard to public assistance or sexual orientation.
  6. If the complaint involves the Human Rights Officer, the complaint shall be filed directly with the Alternative Human Rights Officer, who is the McLeod County Human Rights Officer, County Administrator, **McLeod County, 830 11<sup>th</sup> Street East, Suite 112, Glencoe, MN 55336, 320-864-1265**.
  7. The Meeker-McLeod-Sibley Community Health Services shall conspicuously post the name of the Human Rights Officer and Alternative Human Rights Officer, including mailing address and telephone number.
- C. Submission of a good faith complaint or report of offensive or harassing conduct of a sexual nature or offensive conduct, harassment, bias or violence based on race, color, creed, national origin, gender, religion, disability, age, marital status, status with regard to public assistance or



sexual orientation shall not affect the reporter's future employment or access to public services or public accommodations.

- D. The Meeker-McLeod-Sibley Community Health Services will process complaints made under this policy as discreetly as possible, consistent with the Meeker-McLeod-Sibley Community Health Services's legal obligations and the necessity to investigate allegations of discriminatory harassment and violence and take disciplinary action when the conduct has occurred.

## **V. INVESTIGATION**

- A. By authority of the Meeker-McLeod-Sibley Community Health Board, the Human Rights Officer or Alternative Human Rights Officer, upon receipt of a report or complaint of offensive or harassing conduct of a sexual nature or offensive conduct, harassment, bias or violence based on race, color, creed, national origin, gender, religion, disability, age, marital status, status with regard to public assistance or sexual orientation, shall undertake or authorize an investigation. The investigation may be conducted by Meeker-McLeod-Sibley Community Health Services officials or by a third-party designated by the Meeker-McLeod-Sibley Community Health Board.
- B. The investigation may consist of personal interviews with the complainant, the individual(s) against whom the complaint is filed, and others who may have knowledge of the alleged incident(s) or circumstances giving rise to the complaint. The investigation may also consist of any other methods and documents deemed pertinent by the investigator.
- C. In determining whether alleged conduct constitutes a violation of this policy, Meeker-McLeod-Sibley Community Health Services should consider the surrounding circumstances, the nature of the behavior, past incidents or past or continuing patterns of behavior, the relationships between the parties involved and the context in which the alleged incidents occurred. Whether a particular action or incident constitutes a violation of this policy requires a determination based on all the facts and the surrounding circumstances.

- D. In addition, the Meeker-McLeod-Sibley Community Health Board may

take immediate steps, at its discretion, to protect the complainant and other employees or members of the public pending completion of the investigation.

- E.* Meeker-McLeod-Sibley Community Health Services Human Rights Officer shall make a written report to the MMS CHS Attorney. If the complaint involves the Attorney, the report may be filed directly with the Meeker-McLeod-Sibley Community Health Board. The report shall include a determination of whether the allegations have been substantiated as factual and whether they appear to be violations of this policy.

## **VI. Meeker-McLeod-Sibley Community Health Board ACTION**

- A.* The Meeker-McLeod-Sibley Community Health Board will take such action as appropriate based on the results of the investigation. In the event that the investigation establishes that a violation of this policy has occurred, disciplinary action may be taken.
- B.* Consistent with the requirements of the Minnesota Government Data Practices Act, Minnesota Statutes § 13.01 et. seq., the results of the Meeker-McLeod-Sibley Community Health Service's investigation will be made available to the complainant.

## **VII. REPRISAL**

Meeker-McLeod-Sibley Community Health Services will discipline (up to and including termination) or take appropriate action against any employee, officer, commissioner, agent or other elected official, or other person, who retaliates against any person who reports alleged harassment, bias or violence under this policy or any person who testifies, assists or participates in an investigation, or who testifies, assists or participates in a proceeding or hearing relating to such harassment, bias or violence. Retaliation includes, but is not limited to, any form of intimidation, reprisal or harassment.

## **VIII. DISCIPLINE**

Any Meeker-McLeod-Sibley Community Health Services action taken

against an individual pursuant to this policy shall be consistent with the requirements of:

- A.** Applicable Collective Bargaining Agreements;
- B.** Meeker-McLeod-Sibley Community Health Services Policies;
- C.** State and Federal Law.

Meeker-McLeod-Sibley Community Health Board will take such disciplinary action it deems necessary and appropriate, including warning, suspension, immediate discharge or other appropriate action to end discriminatory harassment and violence and prevent its recurrence.

## **IX. DISSEMINATION OF POLICY**

- A. This policy shall be kept at each public health department location of Meeker, McLeod, Sibley counties in areas accessible to employees and members of the public.
- B. This policy shall be distributed to all employees upon its adoption and to all new employees upon hire.

## **MEEKER-MCLEOD-SIBLEY COMMUNITY HEALTH SERVICES OFFENSIVE CONDUCT, HARASSMENT AND VIOLENCE INCIDENT REPORT FORM**

Meeker-McLeod-Sibley Community Health Services maintains a policy to provide a work environment free from offensive conduct, harassment and violence. Offensive conduct, harassment and violence in any manner or form will not be tolerated. Meeker-McLeod-Sibley Community Health Services encourages the reporting of incidents and will actively investigate as well as take appropriate action on all reports.

---

YOUR NAME:

ADDRESS:

TELEPHONE NUMBER:

NAME OF PERSON YOU BELIEVE HARASSED YOU:

LIST OF ANY WITNESSES WHO WERE PRESENT:

LOCATION(S) WHERE INCIDENT(S) OCCURRED:

Describe the incident(s) as completely as possible, including such things as: What force, if any was used; verbal statements (e.g., threats, requests, demands, etc.); what, if any physical contact was involved; what you did to avoid the situation; etc. (use reverse side if necessary)

I hereby certify that the information I have provided in this form or as an attachment to this form is true, correct and complete to the best of my knowledge and belief.

---

Signature

---

Date

## **SECTION 1.5 - NEPOTISM**

General – In order to ensure the lack of bias and/or favoritism or the appearance of same, relatives of Meeker-McLeod-Sibley Community Health Services department heads and employees will not be employed, promoted, or engaged to perform services where it results in a relative serving as a direct report or directly influencing the recruitment, employment, salary, fees or performance review of another relative. Relatives shall be defined as persons related by blood or marriage within the third degree of kindred, computed according to the rules of “civil law” which shall include: spouse, parents, sons, daughters, brothers, sisters, grandparents, in-laws, persons who live with each other and consider themselves or represent to others a relationship situation ally similar to being married. All decisions and determinations with regard to the interpretation and effect of the above shall be made by the Human Resources Director.

Transfers – The regulations stated above supersede any and all language associated with transfers.

Marriage – If two employees within the same department marry during the period of their employment which results in one employees serving as a direct report or directly influencing the recruitment, employment, salary, fees or performance review of the employee’s spouse, or otherwise develop a relationship defined in the first paragraph above which results in one employees serving as a direct report or directly influencing the recruitment, employment, salary, fees or performance review of the employee’s relative, one of the employees shall be transferred to another department if a position is available.

In determining who will be transferred, the preferences of the employees will be granted, subject to bargaining unit contracts, fitness for the position and availability of the position. If no position exists, and the parties do not indicate a preference as to who shall resign, a termination notice shall be served on the person with the least seniority.



## **SECTION 1.6 - OUTSIDE ACTIVITIES**

Employees shall not participate in any employment, private business, or activity during hours scheduled to work for Meeker-McLeod-Sibley Community Health Services, or outside work hours, in a manner that is in conflict with duties assigned by Meeker-McLeod-Sibley Community Health Services.

No Meeker-McLeod-Sibley Community Health Services employee will hold an outside position or interest when it is determined that the outside position or interest is incompatible with the assigned position the employee holds with Meeker-McLeod-Sibley Community Health Services. Where the outside employment or activity is of a similar nature to Meeker-McLeod-Sibley Community Health Services employment, the Department Head will indicate written approval or disapproval to the employee and **Meeker-McLeod-Sibley Community Health Services** Administrator. In instances where the **Meeker-McLeod-Sibley Community Health Services** Administrator finds actual or apparent conflict of interest, the Meeker-McLeod-Sibley Community Health Services Administrator may so determine. Employees shall discontinue any outside activity within seven (7) days upon receiving written notice from the Department Head to that effect.

The employee's failure to disclose to the Department Head that the employee is participating in non- Meeker-McLeod-Sibley Community Health Services employment may be grounds for disciplinary action including suspension or dismissal.

## **SECTION 1.7 – HOURS OF WORK AND ATTENDANCE**

Full-time employees shall be regularly scheduled to work 40 hours per week. A work week shall be a seven day period, measured from Sunday through the following Saturday. The normal work day shall be 8 hours starting at 8:00 a.m. and ending at 4:30 p.m. for the convenience of the public and for the efficiency of operations. With approval from the CHS Management Team, employees may adopt flexible schedules provided that normal Meeker-McLeod-Sibley Community Health Services business hours and a 40 hour work week is maintained. Hours can only be flexed within one work week.

### **ATTENDANCE**

- a. Assignment of scheduled working hours shall be made by the CHS Management Team.
- b. Employees are to be present at work during all regularly scheduled hours, unless arrangements in accordance with leave policies have been made.
- c. Unexcused absence and tardiness shall be reasons for disciplinary action, up to and including termination.

### **LUNCH PERIODS**

- a. Any employee working a shift of at least six continuous hours shall be entitled to a one-half hour lunch period each day.
- b. Lunch periods are not a compensated part of the work shift. An employee shall not be compensated in money or time off for refusing to take a scheduled lunch period.

### **REST PERIODS**

- a. An employee is entitled to a fifteen minute rest period midway during each four-hour period of work.
- b. Rest periods are part of the paid work shift. An employee shall not be compensated in additional money or time off for refusing to take a scheduled rest period.

### **DOCUMENTATION**

- a. CHS employees will use current McLeod County documentation system to

document hours worked..

b. Reporting of expenses will use the current McLeod County process, with approval by the CHS Administrator.

## **SECTION 2.1 - SALARY SCHEDULE/PLAN**

Meeker-McLeod-Sibley Community Health Services has adopted the McLeod County compensation plan. The compensation plan shall be directly related to the job classification system and be designed to provide uniformity and comparable worth as far as it is practical. The compensation plan shall be developed and maintained so that all positions substantially similar are included within the same class, and that the same schedules of compensation may be made to apply with equity under like working conditions to all positions in the same class.

It is the inherent right of the **Meeker-McLeod-Sibley Community Health Board** to redesign jobs, restructure jobs and create new jobs to meet the objectives of Meeker-McLeod-Sibley Community Health Services. From time to time, the **Meeker-McLeod-Sibley Community Health Board** will need to create new positions to better respond to the needs and challenges of Meeker-McLeod-Sibley Community Health Services. It will be the responsibility of CHS Management Team to define and determine essential requirements and duties of the position. Human Resources will work with CHS Management Team to develop the job description. A grade and pay range will be assigned through the job classification system. Final approval of a new position will require **Meeker-McLeod-Sibley Community Health Board** approval. The rating assigned the job description will be verified by Human Resources and may include further review at such time as the job incumbent has sufficient experience to describe the duties and responsibilities of the position after it has developed and is stable.

Annual adjustment to the compensation plan may be established at the discretion of the **Meeker-McLeod-Sibley Community Health Board** or through the collective bargaining process. The effective date of annual pay adjustments may be the beginning date of the first payroll period of each year. Employees whose salary is below the salary range maximum may also be eligible for an increase on the first day of the pay period

closest to the employee's anniversary date in class. To receive such pay adjustment within the pay

range, an employee must have been employed by Meeker-McLeod-Sibley Community Health Services for at least one year and must receive a satisfactory job performance review.

An employee who receives a rating of 1, which means “Needs Improvement” in two or more performance review categories or in the same category in two consecutive performance evaluations will not be eligible for any range movement or general increase. The employee will have no claim to receive that increase in future years even if his/her performance has since improved. Employees can appeal their Performance Evaluation to the Meeker-McLeod-Sibley Community Health Services Administrator. It will be the responsibility of the Department Head to notify payroll of an employee not eligible for the pay increase due to poor performance.

## **SECTION 2.2 - OVERTIME COMPENSATION**

Overtime compensation shall be paid when appropriate.

Non-Exempt Employees - All work hours in excess of 40 hours per week by non-exempt employees shall be eligible for overtime compensation at a rate of one and a half times the normal rate of pay. In lieu of overtime compensation, non-exempt employees may accrue compensatory time at the rate of one and a half times the regular rate of pay. The total available balance of accrued compensatory time shall not exceed 30 hours.

All work which qualifies as overtime shall have prior approval by the CHS Management Team. The use of compensatory time shall be scheduled through the affected CHS Management Team.

For Information Technology Staff when called during non-scheduled hours to respond to an emergency, they will receive overtime compensation rounded to the nearest hour.

Exempt Employees - Exempt employees, as determined by the Federal Fair Labor Standards Act (FLSA), shall be entitled to compensatory time at straight time. The CHS Administrator may approve accrual of compensatory time for emergency or necessary work performed beyond 40 hours per week. The total available balance shall not exceed 30 hours and is not included in severance pay.

For both Exempt and Non-exempt Employees, holidays will be considered time worked when calculating compensatory time or overtime compensation. Hours paid but not worked including the Floating Holiday, Vacation, Sick Leave and Compensatory Time shall not be included in the calculation of 40 hours per week for purposes of computing eligibility for overtime compensation or the accrual of compensatory time.

## **SECTION 2.3 – REIMBURSABLE EXPENDITURES**

Reasonable expenses incurred by employees for Meeker-McLeod-Sibley Community Health Services on Meeker-McLeod-Sibley Community Health Services business shall be reimbursed. All requests for reimbursement must be approved by CHS Administrator. Whenever possible, employees shall seek the most efficient means of transportation, lodging, meals or any other reimbursable expenditures.

### **MEAL ALLOWANCE**

Meeker-McLeod-Sibley Community Health Services will reimburse employees for the actual cost of meals which are part of a job requirement. Meals within McLeod county are not reimbursable except if included as part of a meeting registration fee. Receipts must accompany any meal reimbursement request of more than \$5.00. Meal reimbursements will not exceed \$35.00 per day.

When overnight travel is involved, meals will be treated as an expense. When no overnight travel is involved, meals will be treated as income. To qualify for these payments, employees shall submit an Employee Expense Report which states the purpose of the expense to the CHS Administrator for approval and then forward it to the Auditor-Treasurer's Office for payment. A receipt from the entity which provided the meal must be attached to the expense report or no reimbursement will be made.

Reimbursement for dinner may be claimed by the individual if they are away from their normal work location in a travel status overnight or required to remain in a travel status until after 7:00 p.m.



Expenses for alcoholic beverages are not reimbursable.

Tips or gratuities are not reimbursable, except if included as part of a conference, seminar fee, tuition fee, or registration fee, and are not separately identified.

Meal expenses incurred must be paid directly by the employee. Each employee must submit their own receipt for reimbursement.

All receipts for reimbursement must be submitted to the Auditor - Treasurer's Office within 60 days of the charge being incurred. The request must include the original receipt, and must include the date and time of the meal, the name of the restaurant and an itemized food listing.

No cash advances for meal expenses shall be issued to an employee.

## **MILEAGE EXPENSE**

The Meeker-McLeod-Sibley Community Health Services will reimburse employees for the use of their private vehicles at a rate set by the **Meeker-McLeod-Sibley Community Health Board**. Accurate records must be kept regarding points of origin and destination.

## **CONFERENCES**

All conferences must be approved by the CHS Administrator prior to registration. Employees will complete a conference request form. Attending a non-approved conference will be at the employee's expense.

## **OUT-OF-STATE TRAVEL**

Any out-of-state travel by Meeker-McLeod-Sibley Community Health Services staff for training or conferences requires prior approval by the **CHS Management Team**.

## **MISCELLANEOUS REIMBURSEMENTS**

All requests for reimbursements for items such as office supplies, etc. must also be accompanied by a receipt and be approved by the CHS Administrator.

## **SECTION 2.4 - TERMINATION ENTITLEMENTS**

Severance payments shall be paid for separations of employment in the following circumstances for non-probationary employees:

- When resigning with proper notice
- When laid off
- When retiring
- When dismissed for reasons other than misconduct
- Death of an employee

### **VACATION**

Accrued vacation, up to the amount of time earned during the previous year, will be paid to regular full-time and part-time employees as provided above.

### **SICK LEAVE**

Employees hired prior to October 21, 1997 will be eligible for a payout of their unused sick leave accrual up to 55% of a maximum of 100 days (800 hours).

For non-union employees hired prior to October 21, 1997, 100% of their vacation and sick leave severance will go into a Health Care Savings Plan (HSCP). (Upon the death of an employee, no funds can be received by the HCSP. All applicable payments will be made to the beneficiary as a payroll check).

### **COMPENSATORY TIME**

Non-exempt employees will have compensatory time paid out as severance for any balance of compensatory hours. The total available balance of compensatory time shall not exceed 30 hours. Exempt employees will not be paid out for a compensatory time balance upon termination.

### **HEALTH AND LIFE INSURANCE**

Meeker-McLeod-Sibley Community Health Services will pay the regular monthly employer contribution for eligible employee coverage if the employment termination date is after the 15<sup>th</sup> of the month. If the termination date is on or before the 15<sup>th</sup> of the month, the contribution amount will be pro-rated for calendar days

prior to the termination date and the employee

must pay a pro-rated amount to keep health insurance in effect for that month. Employees will be allowed to use vacation time until the end of the month of termination to extend their termination date for this purpose. Eligible employees have the option to continue coverage and will be notified by Meeker-McLeod-Sibley Community Health Service's COBRA Administrator. The COBRA coverage will be available to the terminating employee and their dependents (if applicable) for 18 months following their termination date.

## **RECOGNITION**

CHS employees will participate in the McLeod County's Employee Recognition programs.

## **SECTION 2.5 - INSURANCE BENEFITS**

Certain insurance benefits are a part of an employee's compensation package. Insurance benefits will start the first day of the month following 30 days of employment with Meeker-McLeod-Sibley Community Health Services.

### **HEALTH INSURANCE**

Meeker-McLeod-Sibley Community Health Services will choose and provide health insurance for elected officials and regular employees who are scheduled for 30 or more hours per week and will pay a monthly contribution set by the **Meeker-McLeod-Sibley Community Health Board**. Regular employees working less than 30 hours per week, temporary and seasonal employees shall not be eligible for health insurance benefits. For full details on health insurance coverage, contact the McLeod County Human Resource Director

All former Meeker-McLeod-Sibley Community Health Services employees and the employee's dependents may continue to participate indefinitely in the Meeker-McLeod-Sibley Community Health Services sponsored hospital, medical and dental insurance group that the employee participated in immediately before retirement at the employee's own expense, under the conditions outlined in Minnesota Statute 471.61, subd. 2a, as amended.

### **LIFE INSURANCE**

Meeker-McLeod-Sibley Community Health Services will purchase a set amount of life Insurance authorized by the **Meeker-McLeod-Sibley Community Health Board** for all elected officials and regular employees who are scheduled for 30 or more hours per week. Meeker-McLeod-Sibley Community Health Services contribution for life insurance policy shall be in accordance with the Meeker-McLeod-Sibley Community Health Services's insurance policy. Eligible employees may purchase extra personal, spouse, and dependent coverage through the Meeker-McLeod-Sibley Community Health Services at their own expense.

## **SECTION 3.1 - EMPLOYEE PROBATIONARY PERIOD**

Every person appointed, promoted, demoted, or transferred to a regular position, shall be required to successfully complete a probationary period. This probationary period shall begin immediately on the effective date of the said position and shall continue for six calendar months. These probationary periods allow the employee to adjust to their new position and allow the department head or supervisor the opportunity to provide training and evaluate the abilities of the employee.

### **1. Probationary Period for New Employees**

A one year probationary period shall be mandatory for all new employees. A new employee may be dismissed by the Department Head with or without cause during the probationary period. The employee so terminated shall be notified in writing of the decision and shall not have the right to file a grievance or otherwise appeal the decision unless eligible for a Veteran's hearing. If the dismissed employee feels that their Equal Employment Opportunity rights have been violated, the employee may appeal the dismissal to the **Meeker-McLeod-Sibley Community Health Board**.

Unless the employee is dismissed during the probationary period, a probationary employee shall automatically attain regular employment status.

During the probationary period, a new employee shall accrue vacation and sick leave accruals but will not be eligible to use the accrued vacation until being employed for six months.

If employment is terminated for any reason during the probationary period, no vacation, accrued sick leave, or floating holiday shall be due the employee and no severance shall be paid to the employee.



## **SECTION 3.2 - PERFORMANCE EVALUATIONS**

It is the policy of the **Meeker-McLeod-Sibley Community Health Board** that all employees have their performance reviewed by the CHS Management Team and have an opportunity to discuss their performance. During an employee's performance evaluation, it will be the individual's total performance as related to the stated responsibilities of their positions that will be evaluated.

At the time of the CHS employee's pay increases, Meeker-McLeod-Sibley Community Health Services Administration will conduct a review to ensure the Performance Evaluations of direct reports for the previous calendar year have been completed. If the evaluations have not been completed, the increase will be suspended until they are up-to-date.

Performance evaluations shall be conducted at least annually. The following goals should be achieved during an employee's performance evaluation:

1. To determine how well an employee is performing in assigned areas of responsibility as outlined in the job description.
2. To stimulate improved performance and personal development on the part of each employee so as to achieve the highest possible level of excellence in service to the citizens of Meeker-McLeod-Sibley Community Health Services.
3. To determine how the employee views his/her assigned responsibilities.

In addition to the annual performance evaluations, employees will also be evaluated under the following conditions:

1. Prior to the completion of the six month probationary period for new employees and for employees promoted or transferred into a new position.
2. Any time an employee's performance has significantly improved or declined.
3. Any time the CHS Management Team determines it is in the best interest of the employee and/or the Meeker-McLeod-Sibley Community Health Services.

A copy of the completed evaluation shall be sent to Human Resources for inclusion in the employee's personnel folder.

### **Process**



In September of each year, the Meeker-McLeod-Sibley Community Health Services, Human Resource Authority will send out performance evaluations on Meeker-McLeod-Sibley Community Health Services employees. The evaluations will be sent to a designated number of people identified by CHS Management Team. The evaluations will be compiled by Human Resources and shared with CHS Management Team. Individual evaluation meetings will be scheduled between employee's and the CHS Administrator and/or designee(s).

The performance evaluation for the CHS Administrator will happen in a similar manner. The results will be sent to the Meeker-McLeod-Sibley Community Health Board Executive Committee. An individual evaluation meeting will be scheduled between the Meeker-McLeod-Sibley Community Health Board Executive Committee and CHS Administrator.

## **SECTION 3.3 - DISCIPLINE**

Just Cause for Disciplinary Action - Meeker-McLeod-Sibley Community Health Services employees are subject to disciplinary action for failing to fulfill their duties and responsibilities, misconduct and for failure to follow policies, procedures, rules or regulations. It will be the policy of the Meeker-McLeod-Sibley Community Health Services to administer disciplinary penalties without discrimination of any nature. All disciplinary action will be for just cause, and the employee has the right to challenge through the grievance procedure any disciplinary action which the employee believes to be unjust. If disciplinary action is being considered, the Department Head will contact Human Resources. The Department Head will investigate all allegations before disciplinary action is taken.

An adequate reason or "cause" for a disciplinary action will include, but not necessarily be limited to, any of the following conduct:

1. Conduct or performance on the job which:
  - indicates a lack of ability to adequately perform the duties of the position held by the employee;
  - indicates a failure to produce the quality of work the position requires;
  - demonstrates insubordination, which is defined as a refusal to follow appropriate written or oral procedures, instructions, or directions from a supervisor or department head;
  - demonstrates an attempt to cause poor morale or disrespect among Meeker-McLeod-Sibley Community Health Services employees by actions or attitude on the job.
2. Verbal or physical abuse or improper treatment of an inmate, patient, client, member of the public or employee of any Meeker-McLeod-Sibley Community Health Services.
3. Habitual or excessive tardiness in reporting for scheduled working

hours or the failure to report to work without reasonable cause for three consecutive days.

4. Stealing, misappropriation or conversion, willful misuse and/or

negligence of Meeker-McLeod-Sibley Community Health Services property or the property of other employees or clients of any Meeker-McLeod-Sibley Community Health Services.

5. Intentional falsification of any time card, or any other Meeker-McLeod-Sibley Community Health Services record or request for pay, leave or benefits.
6. The violation of any departmental or Meeker-McLeod-Sibley Community Health Services rule or regulation which has been adopted in written form and is known, or reasonably should be known, by the employee involved.
7. Disciplinary action may be taken for reasons or “cause” specifically defined by the Department Head in addition to these regulations.

## **TYPES OF DISCIPLINARY ACTION**

The following are types of disciplinary actions that may or may not be used depending on the severity of the situation and the totality of the circumstances:

1. Oral Reprimand - This is an action taken by a CHS Management Team in which the CHS Administrator tells an employee about the action or behavior the CHS Management Team wishes the employee to change, cease or begin. Oral reprimands shall be documented including the date and content of the discussion and the parties present, and included within the employee’s personnel file.
2. Written Reprimand - This is an action taken by the CHS Management Team in which the CHS Administrator describes the action or behavior which CHS Management Team wishes the employee to change, cease or begin. The written reprimand will describe in detail the behavior to be corrected, and will give direction and orders for the future and will point out the consequences of repeating the actions which brought about the written reprimand. The written reprimand will be signed by the CHS Administrator and presented in person. The employee should sign all copies to acknowledge receipt; if the employee refuses, the presenter will note it on the form. A copy of the written reprimand will be retained by the

department and one copy sent to Human Resources Department for inclusion in the employee's personnel file.

3. Suspension without Pay - This is an action taken by the CHS Management Team which removes an employee from employment and payroll. This action does not require the employee's consent to place the employee on such a leave without pay. The employee does not accrue salary, vacation or sick leave, nor is the employee entitled to use paid time off while on suspension. At the end of the suspension, the employee will be returned to the same department, classification, and salary as when the employee was suspended. If through the appeal process the suspension is found to be without cause, back pay and benefits may be reinstated.

Disciplinary Suspension Procedure: After consultation with Human Resources, the CHS Administrator will notify the employee in writing of the reason(s) for the suspension and the effective date thereof. The notification will also include the employee's notice of any appeal rights available to the employee. Probationary employees do not have the right of appeal.

4. Dismissal - This is an action taken by the CHS Management Team which permanently removes an employee from Meeker-McLeod-Sibley Community Health Services employment. Dismissed employees need not be kept in employment or be paid for any time after the completion of the normal working day they are dismissed unless the employee claims veteran's rights under Minnesota Statute 197.46, or as amended.

Dismissal Procedure: After consultation with Human Resources and prior to making a decision to discharge an employee, the CHS Administrator will notify the employee in writing of the reason(s) for the intent to discharge the employee. The employee will be informed of the opportunity to present the employee's view of the issue(s) to Human Resources. The employee may have representation present at the meeting. The right to such meeting will expire at the end of the employee's next scheduled workday after the notice of intent to discharge is delivered to the employee, unless the CHS Management Team, Human Resources, and the employee agree otherwise. Although the employee will remain in paid status during this period, they may be removed from the worksite pending the meeting.

After consultation with Human Resources, the CHS Administrator will

notify the employee in writing of the reason(s) for the discharge and the effective date thereof. The dismissed employee will be notified of their appeal rights in the notification of dismissal. Probationary employees are not afforded a pre-dismissal meeting nor do they have the right to appeal the dismissal unless the employee claims veteran's rights under Minnesota Statute 197.46, or as amended.

5. Additional Notice and Procedural Requirements for Veterans - In addition to the requirements set forth above, veterans who are demoted or discharged from any position that is not temporary are entitled to these additional rights:
  - a. The employee must be notified, in writing, of the right to request a veteran's hearing within sixty (60) days of the notice of intent to termination.
  - b. During the sixty (60) day period, the employee will receive their regular pay and benefits.
  - c. Failure to request a hearing within the sixty (60) day period shall constitute a waiver by the employee of the right to a hearing and all other legal remedies for reinstatement.

A veteran may elect a veteran's hearing before the **County** Personnel Board of Appeals in accordance with Minnesota Statute 197.46 as amended.

6. The Meeker-McLeod-Sibley Community Health Services Administrator may initiate dismissal of an appointed official whenever it is deemed necessary, with the approval of the **Meeker-McLeod-Sibley Community Health Board**



## SECTION 3.4 - GRIEVANCE PROCEDURE

### DEFINITION

A grievance is a dispute or disagreement raised by an employee or group of employees as to the interpretation or application of the specific terms of a Meeker-McLeod-Sibley Community Health Services policy.

### LIMITATIONS

An employee who commences a grievance proceeding under the provisions of a collective bargaining agreement is precluded from grieving the same issue under this policy. It is not the intention of the **Meeker-McLeod-Sibley Community Health Board** by establishing the grievance procedure herein to thereby grant an aggrieved employee a second opportunity to litigate an issue which has already been litigated in any other administrative or judicial proceeding.

### PROCEDURE

It will be the policy of the Meeker-McLeod-Sibley Community Health Services to adjust all grievances promptly and fairly. In order to facilitate the processing of employee grievances in an orderly and timely manner and to provide the employee access to all levels of management and a fair and impartial hearing, the following procedures are to be used:

Step 1 - An employee having a grievance will present such grievance to the immediate supervisor within ten (10) working days after the event causing the grievance. The employee may be accompanied by a representative of choice. It will be the responsibility of the supervisor to investigate the grievance, discuss the grievance with the employee and give a verbal response to the employee within ten (10) working days from the time the grievance was initially presented. In instances where the organizational structure does not provide a level of supervision between the CHS Administrator and the employee, grievances will be presented directly to the CHS Administrator as set forth in Step 2.

Step 2 - A grievance not resolved in Step 1 may be appealed to

Step 2. The grievance will be set forth in writing, stating the nature of the grievance, the facts on which it is based, the provision(s) of the Meeker-McLeod-Sibley Community Health Services policy allegedly violated, and the

remedy requested. The Step 2 grievance will be presented to the CHS Administrator within ten (10) working days from the time of the supervisor's response. The CHS Administrator will investigate the grievance, discuss it with the employee and give a written response to the employee within ten (10) working days following the meeting with the employee.

Step 3 - A grievance not resolved in Step 2 may be appealed to Step 3. The grievance will be set forth in writing stating the nature of the grievance, the facts on which it is based, the provision(s) of the Meeker-McLeod-Sibley Community Health Services policy allegedly violated and the remedy requested. The Step 3 grievance will be presented to the Meeker-McLeod-Sibley Community Health Board within ten (10) working days from the time of the CHS Administrator's response in writing at Step 2. The Meeker-McLeod-Sibley Community Health or designated representative, will make, or cause to be made, an investigation of the complaint and alleged violation of the regulations. The decision of the Meeker-McLeod-Sibley Community Health Services Board will be final (with the exception of suspensions over thirty (30) days and dismissal) and the Meeker-McLeod-Sibley Community Health Board's response will be placed in writing to the employee within fifteen (15) working days following receipt of the appealed grievance.

## **EMPLOYEE REPRESENTATION**

Employees, and their representative if a Meeker-McLeod-Sibley Community Health Services employee, will be paid by the Meeker-McLeod-Sibley Community Health Services at their regular rate of pay for time reasonably spent preparing and participating in the grievance procedure, provided that the employee has notified and received the approval of the CHS Administrator who has determined that such absence is reasonable and would not be detrimental to the work of the Community Health Services.

## **APPEALS PROCEDURE**

If an employee complaint regarding suspension over thirty (30) days or dismissal is not resolved to the employee's satisfaction in the three steps of the Grievance Procedure, then the appeal procedure outlined below will be

followed:

- Upon written request from the aggrieved employee submitted within 10 days the Step 3 response, McLeod County Human Resources will schedule a hearing before the MMS Executive Committee to be held within ten (10) working days from the day of receipt of such request. The hearing may be continued by the MMS Executive Committee for good cause shown by either party.

## **CONDUCT OF STAFFING COMMITTEE HEARING**

Both parties may call witnesses to testify at the hearing. The witnesses will be sworn in by the chief presiding officer. Testimony will be tape-recorded and transcribed and will be preserved at least until the time for further appeal has expired. The employee as the aggrieved party will present testimony first. The employer may introduce testimony at the close of the employee's case. Both parties may cross-examine witnesses. The MMS Executive Committee on its own motion may investigate the circumstances surrounding a complaint in any department for the purpose of resolving the grievance.

## **DECISION**

The decision of the MMS Executive Committee will be based upon the preponderance of evidence. The MMS Executive Committee will make written findings of fact, decision and order. All records of the proceedings will be kept on file in the office of McLeod County Human Resources. Findings, decision and order and any reports of the MMS Executive Committee will be submitted to the **Meeker-McLeod-Sibley Community Health Board** for consideration and action as deemed appropriate by the **Meeker-McLeod-Sibley Community Health Board**, except that to the extent required with respect to the employees of departments and agencies paid in full or in part by Federal funds, the findings of the MMS Executive Committee will be binding and final in those circumstances necessary to conform to any valid federal or state regulations affecting the department or position.

## **TIME LIMITS**

If the grievance is not presented within the time periods set forth above, it will be considered waived. If a grievance is not appealed to the next step within the specified time limit, it will be considered settled on the basis of the last response. If the proper authority does not respond to a grievance or appeal thereof within the specified time limits, the employee will treat the grievance as denied and may immediately appeal the grievance to the next step. The time limit in each step may be extended by mutual agreement of the employee and authority involved in the step.

## **MMS Executive DECISION**

Decisions of the MMS Executive Committee shall be final.

## **REPRISALS PROHIBITED**

No employee will be disciplined for seeking redress through a grievance or as a result of testimony given in accordance with the provisions of these regulations.

## SECTION 3.5 - TERMINATION OF EMPLOYMENT

### TYPES OF TERMINATION

#### 1. Resignation with Proper Notice

An employee who wishes to resign in good standing shall submit a signed notice of voluntary resignation to the MMS CHS Administrator, not less than two weeks prior to the effective date of resignation. The MMS CHS Administrator may grant a shorter notice if circumstances warrant it. CHS Administrators and Supervisors shall be required to submit a four-week notice of resignation. The CHS Administrator shall provide a written response to the employee, accepting the resignation with the effective date given.

#### 2. Retirement

Retiring employees shall provide written notice of retirement to the CHS Administrator not less than four weeks prior to the effective date of retirement.

#### 3. Probationary Dismissal

An employee may be dismissed prior to completing the probationary period for new employees if, in the opinion of the MMS Management Team or designated supervisor, the employee does not demonstrate the necessary abilities, skills and/or interest to perform the required duties of the position.

#### 4. Reduction in Workforce

A decision to reduce the workforce shall be based on a **Meeker-McLeod-Sibley Community Health Board** decision after consultation with the MMS Management Team. A Notice of Reduction in Workforce will be issued 10 days in advance of the effective date of layoff.

#### 5. Dismissal

See Section 3.3 – Discipline for detailed information regarding dismissal.

To the extent permitted by law, payment for vacation and/or other severance may be withheld if the employee is in any way indebted to the Meeker-McLeod-Sibley Community Health Services or in possession of Meeker-McLeod-Sibley Community Health Services equipment or property.

## **SECTION 3.6 - DRUG AND ALCOHOL-FREE WORKPLACE**

Meeker-McLeod-Sibley Community Health Services recognizes its responsibility to maintain a drug and alcohol-free workplace. The purpose of this policy is to set forth Meeker-McLeod-Sibley Community Health Services policy regarding alcohol and other drug use, including unlawful drug use or abuse in the workplace, and testing procedures.

### **PROHIBITIONS**

- A. No employee shall report to work under the influence of alcohol, marijuana, controlled substances, or other drugs which affect his/her alertness, coordination, reaction, response, judgment, decision-making or safety.
- B. No employee shall operate, use or drive any work related equipment, machinery or vehicle while under the influence of alcohol, marijuana, controlled substances, or other mood-altering drugs. Such employee is under an affirmative duty to immediately notify his/her supervisor that he/she is not in appropriate mental or physical condition to operate, use or drive work-related equipment.
- C. During work hours, while on Meeker-McLeod-Sibley Community Health Services premises or wherever the Meeker-McLeod-Sibley Community Health Services work is being performed, no employee shall use, manufacture, sell, possess or transfer any illegal drug, including marijuana, alcoholic beverages, or any prescription drug (except as medically prescribed and directed). Additionally, employees shall not participate in these activities during rest breaks or during overtime work. The following are exceptions:
  - Possession of alcohol, only, in his/her personal vehicle, but shall not use, sell, or consume alcohol while on Meeker-McLeod-Sibley Community Health Services premises.
  - Possession of alcohol while being transported in a Meeker-McLeod-Sibley Community Health Services vehicle in compliance with applicable statutory requirements.





- D. Engaging in off-duty sale, purchase, transfer, use, or possession of illegal drugs or controlled substances may have a negative effect on an employee's ability to perform work for Meeker-McLeod-Sibley Community Health Services. In such circumstances, the employee is subject to discipline.
- E. When an employee is taking medically authorized drugs or other substances which may alter job performance, the employee is under an affirmative duty to notify the appropriate supervisor of the potential that his/her ability to perform his/her regular duties may be impaired. Prescription and over-the-counter drugs are not prohibited when taken in standard dosage and/or according to a physician's prescription. Any employee taking prescribed or over-the-counter medications will be responsible for consulting the prescribing physician and/or pharmacist to ascertain whether the medication may interfere with safe performance of his/her job. If the use of a medication could compromise the safety of the employee, fellow employees or the public, it is the employee's responsibility to use appropriate personnel procedures (e.g., call in sick, use leave, request change of duty, notify supervisor) to avoid unsafe workplace practices. The illegal or unauthorized use of prescription drugs is prohibited. It is a violation of our drug-free workplace policy to intentionally misuse and/or abuse if job performance deterioration and/or other accidents occur.
- F. MMS Management Team or their designees, shall notify Meeker-McLeod-Sibley Community Health Services Administration when they have reasonable suspicion to believe that an employee may have illegal drugs in his/her possession at work or on Meeker-McLeod-Sibley Community Health Services premises.

## **SEARCHES**

Entering the organization's property constitutes consent to searches and inspections. If an individual is suspected of violating the drug and alcohol-free workplace policy, he or she may be asked to submit to a search or inspection at any time. Searches can be conducted of pockets and clothing, lockers, wallets, purses, briefcases and lunchboxes, desks and work stations and vehicles and equipment.

## **CONSEQUENCES**

Adopted by MMS CHB October 9, 2014

One of the goals of our drug and alcohol-free workplace program is to

encourage employees to voluntarily seek help with alcohol and/or drug problems. If, however, an individual violates the policy, the consequences are serious.

In the case of applicants, if he or she violates the drug-free workplace policy, the offer of employment can be withdrawn. The applicant may not reapply.

If an employee violates the policy, he or she will be subject to progressive disciplinary action and may be offered an opportunity to participate in rehabilitation. In these circumstances, an employee who fails to successfully complete rehabilitation and/or repeatedly violates the policy will be terminated from employment. Nothing in this policy prohibits the employee from being disciplined or discharged for other violations and/or performance problems.

## **RETURN-TO-WORK AGREEMENTS**

Following a violation of the drug-free workplace policy, an employee may be offered an opportunity to participate in rehabilitation. In such cases, the employee must sign and abide by the terms set forth in a Return-to-Work Agreement as a condition of continued employment.

## **ASSISTANCE**

Meeker-McLeod-Sibley Community Health Services recognizes that alcohol and drug abuse and addiction are treatable illnesses. We also realize that early intervention and support improve the success of rehabilitation. To support our employees, our drug and alcohol- free workplace policy:

- Encourages employees to seek help if they are concerned that they or their family members may have a drug and/or alcohol problem.
- Encourages employees to utilize the services of qualified professionals in the community to assess the seriousness of suspected drug or alcohol problems and identify appropriate sources of help.
- Offers all employees and their family members assistance with alcohol and drug problems through the Employee Assistance Program (EAP).
- Treatment for alcoholism and/or other drug use disorders may be covered by the employee benefit plan. However, the ultimate financial responsibility for recommended treatment belongs to the employee.

## **CONFIDENTIALITY / DATA DISCLOSURE**

All information received by the organization through the drug and alcohol-free workplace program is private or confidential communication. Access to this information is limited to those who have a legitimate need to know in compliance with relevant laws, collective bargaining agreements and management policies.

## **SHARED RESPONSIBILITY**

No employee shall report to work or be on call while their ability to perform job duties is impaired due to on- or off-duty use of alcohol or other drugs.

In addition, employees are encouraged to:

- Be concerned about working in a safe environment.
- Support fellow workers in seeking help.
- Use the Employee Assistance Program.
- Report dangerous behavior to their supervisor.

It is the supervisor/Management Team of Meeker-McLeod-Sibley Community Health Services's responsibility to:

- Inform employees of the drug and alcohol-free workplace policy.
- Observe employee performance.
- Investigate reports of dangerous practices.
- Document negative changes and problems in performance.
- Counsel employees as to expected performance improvement.
- Refer employees to the Employee Assistance Program, as appropriate.
- Clearly state consequences of policy violations.

## **NOTIFICATION**

As a condition of employment, employees will abide by the terms and conditions of this drug and alcohol-free policy and will notify their department head of any criminal drug statute conviction for which a violation occurs in the workplace no later than five calendar days after such conviction. The organization will take appropriate action after notification. Federal contracting agencies will be notified when appropriate (typically within ten days).

## **DRUG/ALCOHOL TESTING**

MMS Community Health Services will follow and abide by McLeod County's

policies and established testing procedures. Any alcohol and/or other drug testing undertaken by the department shall be in accordance with Minnesota Statutes 181.950-957, or as amended, the

Minnesota Drug and Alcohol Testing in the Workplace Act. Individual departmental drug and alcohol testing policies must be in written form and must be reviewed by the Meeker-McLeod-Sibley Community Health Services Administrator prior to implementation.

**A. CIRCUMSTANCES UNDER WHICH TESTING MAY OCCUR:**

Any employee or job applicant of the Meeker-McLeod-Sibley Community Health Services may be tested under the following circumstance:

1. Job Applicant – A job applicant may be requested or required to undergo drug and alcohol testing after a job offer has been conditionally made and before commencing employment in the position.
2. Treatment Program Testing – The Meeker-McLeod-Sibley Community Health Services may test any employee referred by the Meeker-McLeod-Sibley Community Health Services for chemical dependency treatment or evaluation at any time and without prior notice during the period of treatment or evaluation and for up to two (2) years following completion of any prescribed chemical dependency treatment or evaluation program in accordance with Minnesota Statutes 181.951, Subd. 6, or as amended.
3. Reasonable Suspicion Testing – No employee will be tested for drugs or alcohol under this policy without the person's consent. If, however, Meeker-McLeod-Sibley Community Health Services asks an employee to undergo a drug and alcohol test and the employee refuses, the employee may be subject to disciplinary action.

Meeker-McLeod-Sibley Community Health Services may request or require an employee to undergo drug or alcohol testing if the employer has a reasonable suspicion that the employee:

- a. Is under the influence of drugs or alcohol;
- b. Has violated the employer's written work rules prohibiting the use, possession, sale, or transfer or drugs or alcohol while the employee is working or

while the employee is on the employer's premises or operating the employer's vehicle, machinery, or equipment;

- c. Has sustained or caused another person to sustain a work related personal injury; or
- d. Has caused a work related accident or was operating or helping to operate machinery, equipment, or vehicle involved in a work related accident.



## **B. CRITERIA FOR SELECTING TESTING LABORATORIES**

The company has contracted with a laboratory statutorily authorized to perform the drug and/or alcohol testing in accordance with Minnesota law.

## **C. REFUSAL TO UNDERGO TESTING**

1. Job Applicants - Job applicants may refuse to undergo drug testing. However, if a job applicant refuses to undergo drug or alcohol testing requested or required by the employer, no such test shall be given, and the job applicant shall be deemed to have withdrawn the application for consideration for employment.
2. Employees – Employees may refuse to undergo drug testing. However, if an employee refuses to undergo drug and alcohol testing carried out in conjunction with this policy the employee may be subject to discipline including, but not limited to, discharge.

## **D. TAMPERING WITH THE BLOOD OR URINE SAMPLE**

If an employee tampers with his or her own urine or blood sample, or in any way deliberately causes a sample to be invalid, the employee may be subject to discipline including, but not limited to, discharge. In the case of this occurring with an applicant for employment, the offer for employment will be withdrawn.

## **E. FIRST FAILURE TO PASS DRUG AND ALCOHOL TESTING**

Without evidence of any other misconduct, any employee who for the first time has a positive test result on a confirmatory test, will not be subject to discharge unless:

1. Meeker-McLeod-Sibley Community Health Services has given the employee an opportunity to participate in, at the employee's own expense or pursuant to coverage under an employee benefit plan, either a drug

- or alcohol counseling or rehabilitation program, whichever is more appropriate, as determined by Meeker-McLeod-Sibley Community Health Services after consultation with a certified chemical use counselor or physician trained in the diagnosis and treatment of chemical dependency; and
2. The employee has either refused to participate in such a program or has failed to successfully complete the program within a reasonable time as evidenced by withdrawal or a positive test result on a confirmatory test after completion of the program.

**F. FAILURE TO PASS DRUG AND ALCOHOL TESTING  
GENERALLY:**

1. Initial Screening Test (Employee) – Meeker-McLeod-Sibley Community Health Services will not discharge, discipline, discriminate against or require rehabilitation of an employee solely on the basis of a positive initial Screening Test that has not been verified by a Confirmatory Test. However, Meeker-McLeod-Sibley Community Health Services may temporarily suspend a tested Employee whose test results are positive or transfer the Employee to another position at the same rate of pay pending the outcome of a Confirmatory Test (and, if requested, a Confirmatory Retest) if Meeker-McLeod-Sibley Community Health Services believed it is necessary to protect the health or safety of the employee, co-workers or the public. An employee who is suspended without pay will be reinstated with back pay if the outcome of the Confirmatory Retest is not positive. Requests for such a Retest must be made in writing within five (5) days of the employee's receipt of notice of the test results. An employee who receives a positive test result on a Confirmatory Test and does not request in writing a Confirmatory Retest within five (5) working days after notice of positive confirmatory test results, may be subject to discipline including, but not limited to, discharge subject to the provisions of this policy.
2. Initial Screening Test (Job Applicant) – Meeker-McLeod-

Sibley Community Health Services will not withdraw a conditional offer of employment on the basis of a positive test result on a job applicant's Initial Screening Test. An Initial Screening Test must be verified

by a Confirmatory Test (and a Confirmatory Retest, if requested) before a conditional offer of employment can be withdrawn. A job applicant who receives a positive test result of a Confirmatory Test, fails or refuses a Confirmatory Retest, or does not request in writing a Confirmatory Retest within five (5) days after notice of a positive test result of a Confirmatory Test, may be refused employment and will be notified of the reasons for such refusal.

3. Confirmatory Test – Discipline for a Confirmatory Test verifying a positive test result on an Initial Screening Test may include discharge of an employee; provided, however, that prior to discharge, the employee is given the opportunity to explain a positive test result and request and pay for a Confirmatory Retest on the original sample. If the Confirmatory Retest is not positive, no action will be taken against the employee. If the Confirmatory Retest is positive, and if it is the first positive retest result for the employee, the employee will not be terminated if the employee elects to participate, at the employee's own expense, in a drug or alcohol treatment or rehabilitation program, whichever is appropriate. An employee who either refuses to participate in the treatment or rehabilitation program or who fails to successfully complete the treatment or rehabilitation program (as evidenced by withdrawal of the program before its completion or by a positive test result on a Confirmatory Test during or after completion of the program), may be subsequently discharged.

## **G. RIGHTS OF EMPLOYEE OR JOB APPLICANT**

1. An employee or job applicant who receives a positive test result on a Confirmatory Test has the right to receive a copy of the test results report and, within three (3) working days of notice of the original positive Confirmatory Test result, to submit information to Meeker-McLeod-Sibley Community Health Services in addition to any information already submitted to explain that result, or within five (5)

working days to notify Meeker-McLeod-Sibley  
Community Health Services in writing of the employee's  
intention to obtain a

Confirmatory Retest of the original sample at the employee's or job applicant's own expense.

2. If the Confirmatory Retest is conducted in accordance with rules established by the Commissioner of the Minnesota Department of Health by a qualified laboratory, and if it is not positive, Meeker-McLeod-Sibley Community Health Services shall reimburse the employee or job applicant for the actual cost of the Confirmatory Retest and no adverse personnel action shall be taken against the employee or job applicant based on the original Confirmatory Test.

## **H. GENERAL TESTING PROCEDURES**

All testing will be performed by a licensed laboratory that certifies its compliance with the requirements of the Minnesota Statutes 181.96 et. seq. When Meeker-McLeod-Sibley Community Health Services decides to test for drug or alcohol use the following procedures will apply:

1. Initial Screening Test
  - a. Acknowledgement. Before the Initial Screening Test, the employee or job applicant shall be informed of Meeker-McLeod-Sibley Community Health Service's testing policy and given a form on which the employee or job applicant can acknowledge being so informed. The form shall allow the employee or job applicant to indicate any medication (prescription, signed for, or over-the-counter) that the individual is currently taking or has recently taken and other information relevant to the reliability of or explanation for a positive test result. Medical information disclosed on the form shall not be used as the basis for any adverse personnel action.
  - b. If the Initial Screening Test produces a negative result, written notice of such result will be given to the individual who took the test within three (3) working days after the Meeker-McLeod-Sibley Community Health Services receives the test result report. The employee or applicant will also

be notified that they have the right to request and receive a copy of the test report. If the test result is a negative dilute, the individual shall be required to

take another test immediately.

- c. The testing laboratory will perform a Confirmatory Test on all Samples that produce a positive test result on the Initial Screening Test.

2. Confirmatory Test. If the Initial Screening Test produces a positive test result, a second test (known as the Confirmatory Test) will be conducted by the laboratory. If the Confirmatory Test is not positive, the Meeker-McLeod-Sibley Community Health Services will send written notice of this fact to the employee or job applicant within three (3) working days after receiving the result.

If the Confirmatory Test produces a positive test result, Meeker-McLeod-Sibley Community Health Services will take the following steps:

- a. Meeker-McLeod-Sibley Community Health Services will send written notice of the positive test results to the employee or job applicant within three (3) working days after receiving it.
  - b. The employee or job applicant will be informed of the right to receive a copy of the test result.
  - c. The employee or job applicant will be told of the right to explain the positive result.
  - d. The employee or job applicant will be informed of the right to request a Confirmatory Test of the original sample at the employee's or job applicant's expense. The employee or job applicant has five (5) working days in which to notify Meeker-McLeod-Sibley Community Health Services of this request in writing.
3. Confirmatory Retest. After an employee or job applicant chooses to request a Confirmatory Retest, the employee or job applicant has five (5) working days within which to notify Meeker-McLeod-Sibley Community Health Services of this request in writing. Within three (3) days of the receipt of such request, Meeker-McLeod-



Sibley Community Health Services will notify the original testing laboratory that it is to conduct a Confirmatory Retest or transfer the sample to another certified laboratory for retesting. If the Confirmatory Retest does not confirm the original positive test result, no adverse personnel action will be taken by Meeker-McLeod-Sibley Community Health Services. If the Confirmatory Retest is positive, Meeker-McLeod-Sibley Community Health Services may

withdraw its conditional offer of employment to a job applicant or terminate an employee if such employee chooses not to participate in a chemical dependency treatment or evaluation program.

## **I. DATA PRIVACY**

Test result reports and other information acquired in the drug and alcohol testing process are private data on individuals as defined in Minnesota Statutes, Chapter 13, and may not be disclosed to another employer or to a third party individual, governmental agency, or private organization without the written consent of the employee or applicant tested, unless otherwise permitted by law or required by court order. (See Minnesota Statutes 181.954, Subd. 3.)

## **J. OTHER MISCONDUCT**

Nothing in this Policy limits the right of the Meeker-McLeod-Sibley Community Health Services to discipline or discharge an employee on grounds other than a positive test result in a Confirmatory Test. For example, possession but not consumption of a controlled substance, the sale of a controlled substance on Meeker-McLeod-Sibley Community Health Services premises, or conviction under any criminal drug statute for a violation occurring in the workplace, may by themselves, be grounds for discipline or discharge. Any Meeker-McLeod-Sibley Community Health Services employee may be subject to discipline up to and including termination for violation of this Policy or any rules adopted by the Meeker-McLeod-Sibley Community Health Services with respect to the manufacture, use, sale, or transfer of drugs and alcohol.

MEEKER-MCLEOD-SIBLEY COMMUNITY HEALTH SERVICES DRUG  
TEST/BREATH ALCOHOL SCREENING ACKNOWLEDGEMENT AND  
CONSENT FORM

Meeker-McLeod-Sibley Community Health Services requires that any employee or job applicant complete this form before undergoing a test for drug or alcohol use.

I, \_\_\_\_\_ voluntarily authorize the collection (of my blood and/or urine) in such a manner as this authorized testing laboratory deems appropriate for drug or alcohol testing purposes. In addition, I authorize the Meeker-McLeod-Sibley Community Health Services to receive the results of the test from the designated laboratory analyzing the sample(s).

I have been given and have seen a copy of the Drug and Alcohol Policy of the Meeker-McLeod-Sibley Community Health Services and consent to be tested. I understand that the results of this testing may affect my employment status with the Meeker-McLeod-Sibley Community Health Services.

I understand that in order to ensure accuracy in this screening, if I test positive for drug use, I have the right to indicate any and all of the prescription drugs or over-the-counter medications I have taken within the last sixty (60) days, as well as any other information relevant to the reliability of, or explanation for, a positive test result. I, therefore voluntarily provide that I am currently taking, or have taken within the last sixty-(60) days, the following drugs/medications: (write, "NONE" if applicable).

\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_

MEEKER-MCLEOD-SIBLEY COMMUNITY HEALTH SERVICES DRUG  
SCREENING REFUSAL

I refuse to submit to a drug or alcohol test.

I have been given and have seen a copy of the Drug and Alcohol Policy of Meeker-McLeod-Sibley Community Health Services and understand that a refusal to submit to testing may disqualify me from consideration for employment or, if an employee, subject me to discipline including, but not limited to, discharge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_

## **SECTION 3.7 - FOOD PURCHASING**

Meeker-McLeod-Sibley Community Health Services recognizes that in some situations expending Meeker-McLeod-Sibley Community Health Services resources from the General fund, grant money or other funds to purchase food for employees, clients and the public is warranted.

It is expected that all employees will use discretion in determining whether or not it is appropriate to purchase food and view the decision from a taxpayer's perspective. Questions may be directed to Meeker-McLeod-Sibley Community Health Services Administration.

## **SECTION 3.8 – TOBACCO FREE AND SMOKE FREE ENVIRONMENT**

### **SCOPE**

This policy applies to all Meeker-McLeod-Sibley Community Health Services employees, clients, visitors, vendors and contractors. Meeker-McLeod-Sibley Community Health Services uses McLeod County offices as the primary office space for staff, when office space is necessary. MMS CHS will follow McLeod County's tobacco free and smoke free environment policy. Any updates or changes to McLeod County's policy will also be in effect for Meeker-McLeod-Sibley Community Health Services. Following is McLeod County's policy.

### **PURPOSE**

The goal of a tobacco free worksite is to improve the health of employees, clients and visitors. Reducing tobacco use may increase productivity in the workplace, decreases absenteeism and lowers medical and health expenditures along with other costs associated with tobacco use.

### **POLICY STATEMENT**

McLeod County complies with all applicable federal, state and local regulations regarding smoking or chew tobacco use in the workplace. We strive to provide a work environment that promotes the productivity and the well-being of our employees. This policy also serves as a model policy for other worksites in McLeod County.

### **PROCEDURE/GUIDELINES**

McLeod County recognizes that smoking and tobacco use in the workplace can adversely affect employees; therefore both are prohibited indoors and outdoors including the grounds of all county buildings making them tobacco-free or within any vehicle/equipment operated by McLeod County. Smoking and tobacco use may include but is not limited to cigarettes, cigars, pipes, e-cigarettes and chewing tobacco.

Smoking and tobacco use are permitted only in a private enclosed vehicle parked in the parking lot. Smoking and tobacco use is not permitted in enclosed garages, under the building overhangs, or in a convertible, motorcycle or other open vehicle parked in a McLeod County parking area.

McLeod **County** Parks, Trails and the McLeod **County** Fairgrounds will be excluded from this policy other than the Extension/Parks office building and the HATS building. The Extension/Parks office building and office will be tobacco-free during non-fair time; persons must be 50 feet away from any entrances of the building. The HATS building will comply with the current Hutchinson ordinance which is 15 feet away from any entrance to a building as this is not a **county** building.

It is the responsibility of every employee of McLeod County to support and comply fully with the tobacco-free policy. Vendors, contractors, clients, visitors and temporary employees are expected to comply with the tobacco-free policy and are expected to exercise common courtesy and to respect the needs and sensitivities McLeod County and others by refraining from using tobacco on the premises.

## **EMPLOYEES**

Employees will be informed of this policy through various communication sources, including but not limited to, new employee orientation, annual staff update, employee policy, department meetings, employee newsletters, verbal communication, etc.

- A. Tobacco use is prohibited while employees are in vehicles/equipment operated and owned by McLeod County
- B. Employees are strongly encouraged not to loiter in front of adjacent, non-county buildings or other private properties. They are encouraged not to use sidewalks, streets and neighboring property as tobacco use areas. Employees must not litter on neighboring properties or McLeod County property.
- C. Smokers and tobacco users have an obligation not to abuse break time and work rules.
- D. Failure of an employee to comply with this policy will result in progressive discipline up to and including termination following current disciplinary procedures.

The addictive nature of tobacco is fully recognized by McLeod County and support to all employees will be offered to assist in ceasing the employee's usage of tobacco. McLeod County encourages all employees who use tobacco to utilize the resources available through the county health insurance plan as well as the Public Health Department for cessation services and information. Tobacco cessation services are also available from <https://www.quitplan.com/>



## **VISITORS**

- A. Visitors will be informed of this policy through various communication sources including but not limited to, posted signs on campus, printed literature, McLeod County personnel, public notices, etc.
- B. In the event that a visitor is seen using tobacco on McLeod County property, a verbal request will be made by McLeod County staff that the visitor should not use tobacco on County grounds. The request will be made in a polite and non-threatening manner. There will be business cards available for McLeod County Employees to distribute that explains the policy and refers to cessation resources. After the verbal warning is given by the McLeod County employee, if the visitor becomes threatening, then employees should follow the De-escalation techniques referenced in the Safety Guidelines for Field Personnel.

## **CONTRACTED PERSONNEL/VENDORS**

- A. Contracted Personnel and/or Vendors will be informed of this policy through various communication sources, including but not limited to, contract agreements, county policy, and communication from county contacts, etc.
- B. Failure of a contracted person or vendor to follow this policy will be referred to appropriate McLeod County personnel / administration.

## **SIGNAGE REQUIREMENTS**

Signage will be used to state the policy and will be clearly posted on the property, at all entrances and other prominent places.

## **COMPLIANCE**

Enforcement of this policy is shared among all McLeod County employees. All employees are authorized and encouraged to communicate this policy with courtesy, respect and diplomacy. If the individual is an employee and refuses to comply with the policy, the employee's supervisor should be notified. Employees who violate the policy will be subject to disciplinary procedures. Failure of an employee to comply with this policy will result in progressive discipline up to and including termination.

Littering of tobacco related products on the grounds or parking lots is prohibited. All ashtrays or other collection receptacles for tobacco trash will be removed from the property.

## **SECTION 3.9 – HEALTHY VENDING**

### **I. Purpose**

Meeker-McLeod-Sibley (MMS) Community Health Services (CHS) recognizes that the ability of an organization to achieve its objectives is dependent upon the well-being of its employees. A healthy workforce is a more efficient and productive, experiences less absenteeism, fewer accidents, and has lower health care demands. Healthy eating and physical activity can reduce their risk for heart disease, diabetes and some cancers. Employers are in a unique position to promote and encourage their employees to be healthy and safe.

MMS CHS is committed to promoting the health and well-being of our employees, CHS Team Members, and the public that we serve. By creating access to healthy, nutritious foods and opportunities to engage in physical activity during the work day, MMS CHS supports our employees and CHS Team Members in making healthier choices while they are at work. Through contact with the community, we are able to expose the public to healthy choices. As the Board of Health, it is our responsibility to set a good example when it comes to providing opportunities for healthy living.

### **II. Healthy Eating**

MMS CHS is committed to providing healthy foods and beverage choices whenever food and/or beverages are provided at meetings, celebrations, CHS-sponsored events, or other opportunities. Food and beverage choices are encouraged to be within the nutritional standards and guidelines identified in this policy. (See Appendix for more detailed information).

#### **a. Meetings and Catering**

- i. When food or beverages are provided, only healthy items should be served. If a less healthy food or beverage will be provided, a healthy food or beverage alternative must also be served.
- ii. When CHS meetings or events are catered by an outside vendor, the vendor must follow the healthy foods guidelines.
- iii. Staff is encouraged to not offer or provide food during mid-morning or mid-afternoon meetings, presentations, and seminars.
- iv. These guidelines apply to internal meetings and events within the CHS, as well as meetings and events with external partners that the CHS is hosting or sponsoring.

### **III. Physical Activity**

MMS CHS is committed to providing an environment that encourages employees and CHS Team Members to be physically active while conducting business throughout the work day, especially for employees who often sit for more than 60 minutes at a time.

#### **a. Sit for 60, Move for 3**

Employees that have been sitting for more than 60 minutes are encouraged to get up and move for 3 minutes and perform tasks such as filing or photocopying.

#### **b. Breaks**

Employees will be encouraged to use their breaks and/or lunch periods for physical activity.

#### **c. Meetings Lasting More than 60 Minutes.**

Physical activities, such as stretch breaks or standing and walking meetings, will be incorporated when appropriate.

#### **d. Workstations**

To the extent possible, workstations that allow for employees to stand or be active while doing their work will be supported whenever possible.

### **IV. Implementation and Support**

MMS CHS leadership (Commissioners, CHS Administrator, CHS Management Team Members and CHS Team Leaders) will be role models and support the implementation of this policy. CHS employees and team members with additional ideas, resources, or concerns are encouraged to contact the CHS Administrator.

### **General Guidelines for Healthy Foods**

#### **1. Healthy Food Choices:**

- Beverages: Water, 100% fruit juice, 100% vegetable juice, skim/1% milk, coffee and tea.
- Breakfast: Fruit, low-fat yogurt, whole grains breads/cereals, oatmeal, small or mini muffins, granola bars, eggs, and lean breakfast meats.
- Lunch or dinner: Lean protein selections, fruit, always serve a generous portion of vegetables alongside all entrees, fresh salads with dark leafy greens and low-fat dressing on the side, fruit salads and desserts, avoid fried foods.
- Breaks: Fruits, raw vegetables, low-fat dips, baked whole grain chips, popcorn and whole grain crackers, pretzels, salsa, frozen yogurt, sorbet.

Adopted by MMS CHB October 9, 2014

## **2. Additional Considerations:**

- **Availability** - Provide a fruit and/or vegetable with each meal and at least one fruit or vegetable at each break.
- **Appeal** - Ensure the fruit and vegetable display areas are appealing and at least equal in size to the display areas for other foods.
- **Location** - When buffets are present, ensure fruit and vegetable options are easy to identify and locate.

## **Healthy Meeting Options**

### **Breakfast Meetings**

- Fruit and/or 100 percent fruit juices
- Whole grain cereal and low-fat dairy or soy milk
- Low-fat yogurt
- Bagels and reduced-fat cream cheese
- English muffins

### **Lunch Meetings**

- Baked chicken with vegetables and brown rice
- Pasta with vegetables
- Box lunches: sandwiches with fruit
- Veggie pizza
- Vegetable soups
- Green salads
- Bean and veggie burritos
- Lean meats

### **Afternoon or Mid-morning Meetings**

- Fruit: apples, oranges, grapes, raisins, 100 percent juice
- Sliced vegetables with low-fat dip
- Low-fat milk or yogurt
- Pretzels
- Nuts, trail mixes
- Baked tortilla chips with salsa
- Reduced-fat crackers, graham crackers, animal crackers
- Air-popped popcorn

### **Beverages**

- Ice water
- Coffee and flavored coffees – regular and decaffeinated
- Skim or one percent milk
- 100 percent fruit or vegetable juices – avoid large-size bottles
- Tea-regular and herbal teas – hot or cold

- Coffee/tea creamers of skim milk, one percent milk or fat-free
- Bottled spring or sparkling water – regular or flavored with no sugar

For additional suggestions, please refer to the document: University of Minnesota School of Public Health: *Guidelines for offering healthy foods at meetings, seminars and catered events.*

<http://www.sph.umn.edu/news/nutritionalguidelines>

## SECTION 3.10 – LACTATION SUPPORT

In recognition of the well documented health advantages of breastfeeding for infants and mothers, Meeker-McLeod-Sibley Community Health Services provides a supportive environment to enable breastfeeding employees to express their milk during work hours. Meeker-McLeod-Sibley primarily uses McLeod County office space for employees when necessary. MMS CHS will follow McLeod County's Lactation Support policy. Following is McLeod County's Lactation policy.

McLeod County subscribes to the following worksite support policy. This policy shall be communicated to all current employees and included in new employee orientation training. It is expected that all employees will assist in providing a positive atmosphere of support for breastfeeding employees.

### EMPLOYER RESPONSIBILITIES

Breastfeeding employees who choose to continue providing their milk for their infants after returning to work shall receive:

- **Milk Expression Breaks**

Breastfeeding employees are allowed to breastfeed or express milk during work hours using their normal breaks and meal times. For time that may be needed beyond the usual break times, employees may use personal leave or may make up the time as negotiated with their supervisors.

*Refer to Lactation Support in the Workplace Work Plan and Agreement on the McLeod County's Intranet under Wellness.*

- **A Place to Express Milk**

A private room (not a toilet stall or restroom) shall be available for employees to express milk. The room will be private, clean, have an electrical outlet, and may be located near a sink. If employees prefer, they may express milk in their own private offices, or in other comfortable locations agreed upon in consultation with the employee's supervisor. Expressed milk will be stored as detailed in the Accommodations for Employee Lactation Support document.

*Refer to Accommodations for Employee Lactation Support on the **McLeod County** Intranet under Wellness. Privacy Please door hanger may be obtained through the **McLeod County** Public Health Department.*

- Staff Support

Supervisors are responsible for alerting pregnant and breastfeeding employees about the McLeod County's worksite lactation support program and for negotiating practices that will help facilitate each employee's infant feeding goals.

*Provide **McLeod County** Lactation Support Policy to pregnant and breastfeeding employees.*

**Contact McLeod County Breastfeeding Coordinator with questions/to serve as resource 320-864-3185.**

***Refer to Business Case for Breastfeeding for Business Managers on the McLeod County Intranet under Wellness.***

## **EMPLOYEE RESPONSIBILITIES**

- **Communication with Supervisors**

Employees who wish to express milk during the work period shall keep supervisors informed of their needs so that appropriate accommodations can be made to satisfy the need of both the employee and the employer.

***Refer to Business Case for Breastfeeding for Employees on the **McLeod County** Intranet under Wellness.***

- **Maintenance of Milk Expression Areas**

Breastfeeding employees are responsible for keeping milk expression areas clean for themselves and for the next user. This responsibility extends to both designated milk expression areas, as well as other areas where expressing milk will occur.

- **Milk Storage**

Employees should label all milk expressed with their name and date collected so it is not inadvertently confused with another employee's milk. Each employee is responsible for proper storage of her milk using Meeker-McLeod-Sibley Community Health Services refrigerators. Any non-conforming products stored in the refrigerator may be disposed of. Employees storing milk in the refrigerator assume all responsibility for the safety of the milk and the risk of harm for any reason, including improper storage, refrigeration and tampering.

***Refer to Breastmilk Storage Guidelines for the Full term, Healthy Infant on the McLeod County Intranet under Wellness.***

- **Use of Break Times to Express Milk**

When more than one breastfeeding employee needs to use the designated lactation room/accommodations, employees can use a sign in log provided to the room to negotiate milk expression times that are most convenient to meet their needs.



**An Accommodations Sign-In Log is available on the McLeod County Intranet under Wellness.**

## **EQUIPMENT**

The Health and Human Service and Solid Waste employees have access to a Medela Lactina Select multi-user breast pump on behalf of the Minnesota State WIC program. This pump is available in the following priority order:

1. WIC employees
2. WIC clients
3. HHS and SW employees

If interested in using the pump please contact the Public Health Breastfeeding Coordinator at 320-864-3185 prior to first use for planning purposes and information about purchasing necessary personal pump kit (approximately \$15.00).

## **EDUCATION**

Prenatal information about breastfeeding classes and information about postpartum home visiting is available for all mothers and fathers.

***A breastfeeding resource list, childbirth/breastfeeding class list for Glencoe Regional Health Services and Hutchinson Health Care, and Mom and Baby Public Health brochure are available on the McLeod County Intranet Under Wellness.***

## **SECTION 3.11 LATEX ALLERGY/SENSITIVITY**

It is the policy of Meeker-McLeod-Sibley Community Health Services to provide an environment that minimizes exposure to natural rubber latex for the public as well as employees; an environment that provides for safe treatment of the latex allergic/sensitive people. Meeker-McLeod-Sibley Community Health Services uses McLeod County offices as the primary office space for staff, when office space is necessary. MMS CHS will follow McLeod County's tobacco free and smoke free environment policy. Any updates or changes to McLeod County's policy will also be in effect for Meeker-McLeod-Sibley Community Health Services. Following is McLeod County's policy.

### **RATIONALE**

Latex Allergy is a sensitized immune response to latex protein antigens found in natural rubber products. Clinical findings may depend on the sensitivity of the person, the route of exposure, and the quantity of the antigen in the product. Latex antigen may be transmitted by air (opening latex glove package) or contact with rubber devices. A person may have sensitivity to latex that manifests itself as contact dermatitis; but when latex comes in contact with mucous membranes, the same individual may have an anaphylactic reaction.

Preventative measures/latex precautions (i.e., removal of latex products from a person's environment and substitution of latex-safe products) are keys to safe care.

### **DEFINITIONS**

**Airborne Latex Particles:** latex particles which are shed from latex containing products and can be inhaled as an allergen. Latex products which are placed over a molded form as part of the manufacturing process are those likely to shed particles which become airborne. These products are generally very stretchy and include gloves, balloons, and condoms. The powder used in powdered latex gloves, becomes a vehicle for latex particles and as such, results in greater airborne latex hazard than latex gloves which are powder free.

**Latex:** a natural rubber product derived from the milky sap of the rubber tree.

**Non Airborne Latex Containing Items:** Products containing latex that are not thin and stretchy, but are firmer in consistency. These items generally do not pose a

risk of shedding airborne particles and would include items such as catheters, drainage tubing, and cords. These items should not touch mucous membranes or the skin of persons who are sensitive or allergic to latex.

## **RESPONSIBILITY**

Each department head is ultimately responsible/accountable for the enforcement of this policy within his/her office. The department head may assign responsibility for this enforcement to specific managers/supervisors within each office. All McLeod County employees are responsible for compliance with this policy. Deviation from this policy may be approved by a department head.

Each department head/supervisor is responsible for assuring that new employees are educated regarding this Latex Allergy/Sensitivity policy.

## **PROCEDURE**

Balloons: Due to the high latex allergen content found in latex balloons and the increased risk this poses to latex allergic/sensitive individuals, **LATEX BALLOONS WILL NOT BE PERMITTED ANYWHERE IN McLeod County BUILDINGS AT ANY TIME.** The foil (Mylar) balloons are acceptable and pose no risk to latex allergic/sensitive individuals. Signage will be displayed at entrances to county facilities, alerting those entering, that latex balloons cannot come into the building. Staff at entry areas who observe latex balloons, will stop the person and direct them to take the balloons outside of the building. The Fairground buildings will be exempt from this policy during the month of August when the McLeod County Fair Board and the Ag Association has control of the Fairgrounds for the county fair.

Exam Gloves: Due to the high latex allergen content of most routine latex exam gloves, and the high incidence of airborne particles from these gloves posing risk for latex allergic/sensitive individuals. **ALL EXAM GLOVES AND GLOVES USED FOR ACTIVITIES THAT ARE NOT LIKELY TO INVOLVE CONTACT WITH INFECTIOUS MATERIALS WILL BE NON-LATEX.** When latex gloves must be used they must be **LOW ALLERGEN/POWDER FREE.**

## SECTION 4.1 – HOLIDAYS

The following days are official holidays for Meeker-McLeod-Sibley Community Health Services full-time and regular part-time employees including probationary employees. Holidays are pro-rated for regular part-time employees.

New Year's Day .....	January 1st
Martin Luther King Holiday .....	3rd Monday in January
President's Day .....	3rd Monday in February
Memorial Day .....	Last Monday in May
Independence Day .....	July 4th
Labor Day .....	1st Monday in September
Veteran's Day .....	November 11th
Thanksgiving Day .....	4th Thursday in November
Day after Thanksgiving .....	4 <sup>th</sup> Friday in November (in lieu of Columbus Day)
Christmas Day .....	December 25
Floating Holiday .....	(One eight hour day of the present calendar year to be taken by the last day of the last full payroll period of the calendar year on a date determined by the employee with approval).

When New Year's Day, January 1st; or Independence Day, July 4th; or Veteran's Day, November 11th; or Christmas Day, December 25th; falls on Sunday, the following day shall be a holiday and when the aforementioned holidays fall on a Saturday, the preceding day shall be a holiday.

Designated holidays that occur within a full-time employee's approved and compensated leave of absence or vacation shall not be charged to the employee's sick days or vacation time, but shall be recorded as a holiday.

Regular full-time and part-time employees including probationary employees are eligible for holiday pay. Part-time employees shall receive holiday pay on a pro-rata basis. Part-time employees must be employed a minimum of 50 percent of the normal work week or 20 hours per week to be eligible for pro-rata holidays. Holidays will be paid in the pay period in which they occur. Emergency, temporary and seasonal employees are not eligible for holiday pay.

Employees must be in a paid status for at least one (1) day before and after a holiday in order to receive Holiday Pay. Therefore, a holiday cannot be the first or last day of employment. Employees will not receive holiday pay for holidays occurring while on an unpaid leave of absence.

### **Floating Holiday**

In order to be eligible for the floating holiday, an employee must be employed on or before July 1 of the year in question. The floating holiday cannot be carried over from one calendar year to the next and will not be paid out as part of severance. Part-time employees will also receive one pro-rated Floating Holiday.

## SECTION 4.2 – VACATION

Vacation benefits shall be granted to regular full and part-time employees only. Regular part-time employees shall accrue vacation time on a pro-rated accrual based on hours worked. Emergency employees, temporary and seasonal employees shall not receive vacation benefits.

No employee shall be permitted to cash in vacation hours while also being compensated for regular hours worked. When an employee is not working because of illness or injury and has exhausted all sick leave, the employee may, at the discretion of the CHS Management Team, be permitted to use the employee's vacation benefit in lieu of sick leave.

Vacation credits for full and part-time employees shall be earned according to the following schedule and shall be calculated from the employee's date of hire:

<u>Length of Employment</u>	<u>Hours Per Year</u>	<u>Days Per Year</u>
Start - 5 Years	96	12
More than 5 Years - 10 Years	120	15
More than 10 Years - 15 Years	144	18
More than 15 Years	176	22

The employee's hire date will be used in computing the vacation accrual earned.

The maximum number of accumulated vacation hours for a regular full-time employee shall not exceed 240 hours at the end of any payroll period or 192 hours as of the last day of the last full payroll period of the year.

No vacation may be taken while an employee is on probation. Employees, after having satisfactorily completed probation, are eligible to take accumulated earned vacation anytime thereafter.

Vacations will be scheduled so as not to unduly disrupt the normal operation of the department, while taking into account the employee's preferences for vacation periods. CHS Management Team shall have the discretion to deny



vacation leave at any given time based upon the needs of the department.

If a regular full-time or part-time employee becomes ill or injured while on vacation, the employee's vacation shall be changed to sick leave for the period of the illness or injury, upon presenting a doctor's statement to the CHS Management Team which certifies the employee's inability to work due to illness or injury. Notice shall be given to the CHS Administrator as soon as possible when the illness or injury occurs.

Use of vacation leave shall be in no less than quarter hour increments (i.e. 15 minutes equal .25 hours, etc).

An employee must have a positive vacation leave balance in order to take vacation time off. Vacation time off cannot be used in the pay period in which it is accrued.

Accumulated vacation leave may only be transferred from one employee to another pursuant to the Vacation Leave Donation Policy.

## **SECTION 4.3 – SICK LEAVE**

Paid sick leave shall be provided to regular full-time and part-time employees working over 14 hours per week on a pro-rated basis. When necessary a CHS Management Team may authorize the use of sick leave for personal illness, injury, or pregnancy and medical, dental, and optical appointments for the employee or family member listed below that cannot be scheduled outside of work hours.

In accordance with Minn. Stat. § 181.9413 9, as amended, an employee may use paid sick leave benefits for absences due to illness or injury to the employee's child, including adult child, spouse, sibling, parent, grandparent, stepparent, mother-in-law, father-in-law, or grandchild for reasonable periods of time as the employee's attendance may be necessary, on the same terms upon which the employee is able to use sick leave benefits for the employee's own illness or injury up to 160 hours in any 12-month period. An employee may use sick leave for themselves or relative (as listed above) to provide assistance because of sexual assault, domestic abuse or stalking.

The CHS Management Team may require written and signed certification from a health care provider that the absence and use of sick leave was appropriate and necessary.

Employees shall inform the CHS Administrator of the need to request sick leave by 8:15 a.m. Full-time employees, including probationary employees, shall accrue sick leave at a rate of 3.7 hours per payroll period. Sick leave may accumulate to a maximum of 120 days or 960 hours.

For employees hired prior to October 21, 1997 and who have reached a maximum of 960 hours as of the last day of the last full payroll period of the year will be paid the following January for hours in excess of 960 at the pay rate as of the last full payroll period of the year. Employees hired on or after October 21, 1997, will not be eligible to cash in sick leave as provided above in this paragraph.

Use and recording of sick leave accruals shall be in no less than quarter hour increments (i.e. 15 minutes equal .25 hours, etc).

An employee must have an available sick leave accrual balance in order to take sick leave. Sick leave cannot be used during the payroll period in which it is accrued.

## **SECTION 4.4 – FUNERAL LEAVE**

Funeral Leave up to a maximum of three (3) days per occurrence may be authorized by the CHS Management Team in case of a death in the immediate family; that is, spouse, children, step-children, brothers, sisters, parents, grandparents and grandchildren of either the employee or spouse. Each request will be considered individually by the CHS Management Team and circumstances such as travel time involved, responsibility of the employee for funeral arrangements, or administration of the estate, will be considered. Part-time employees, emergency employees, temporary and seasonal employees will not be paid for funeral leave.

In order to receive funeral leave, the employee must designate the relationship of the deceased on their timesheet.

## **SECTION 4.5 – MATERNITY/PATERNITY LEAVE OF ABSENCE**

A Maternity/Paternity Leave of Absence may be granted of up to six (6) months to employees to care for the birth or adoption of their child with probationary or permanent status when requested with at least a 30 day notice if the leave is foreseeable. This is an unpaid leave unless the employee is eligible to use vacation, comp time, sick leave or other paid time available. The Maternity/Paternity Leave of Absence provided in this policy shall run concurrent with a related leave of absence provided by the Family and Medical Leave Act.

In special instances, when unable to find a replacement for key staff personnel, and the mission of the department would be adversely affected by a 6-month leave, a maternity/paternity leave of a minimum of 12 weeks shall be granted in accordance with the Family and Medical Leave Act.

The CHS Administrator shall require prior notice to determine the commencement date and duration of maternity/paternity leaves, and shall review each request on its individual merits, taking into consideration individual duties, efficiency, health and welfare of the employee or child, or other relevant criteria.

Following childbirth or upon receiving the child when adopting and upon signifying his/her intent to return with at least two weeks' notice and within the six month leave of absence period, an employee shall be reinstated to their original job or to a position of like status and pay. Vacation and sick leave benefits will not accrue during unpaid maternity/paternity leaves.

Health and life insurance will be continued during a leave of absence of 12 workweeks or less pursuant to the Family and Medical Leave Act with the employee being responsible for the same percentage of the premium as prior to the personal leave. Health and life insurance will be continued at the employee's expense during an unpaid leave of absence of more than 12 workweeks.

When temporary help is needed due to an employee's leave of absence, the CHS Administrator shall make their request to the Meeker-McLeod-Sibley Community

Health Board.

## **SECTION 4.6 – FAMILY AND MEDICAL LEAVE ACT**

### **PURPOSE**

The Family and Medical Leave Act (FMLA) is intended to balance the demands of the workplace with the needs of families, to promote the stability and economic security of families, and to promote national interests in preserving family integrity. It allows “eligible” employees to take job-protected leave for up to a total of 12 workweeks in a defined 12 month period because of certain qualifying circumstances. In some cases, the leave may be taken all at once, on an intermittent basis or the employee may work a part-time or reduced schedule.

### **ELIGIBLE EMPLOYEES**

Eligible employees are those who have:

1. Been employed by Meeker-McLeod-Sibley Community Health Services for at least 12 months prior to the commencement of the leave; (the 12 months of employment required to qualify for leave need not be consecutive) and
2. Worked a minimum of 1250 hours within the previous 12-month period.

An employee who is not eligible for FMLA coverage at the time he or she commences leave may become eligible if he or she meets the eligibility requirements while on leave.

### **QUALIFYING EVENTS COVERED BY THE FMLA**

FMLA will be granted to eligible employees for any of the following reasons:

1. To care for their child (birth, adoption or foster care placement); or
2. To care for their spouse, child (the child must be under 18 years of age, or 18 years of age or older and “incapable of self-care” because of a mental or physical disability as defined by the Americans with Disability Act) or parent who has a “serious health condition”; or
3. For a “serious health condition” that makes an employee unable to perform the essential functions of their job; or

4. For an exigency caused by the call to active duty of a member of the Armed

Forces; or

5. To care for a spouse, child, parent or next of kin who is a service member and is injured or becomes seriously ill while on active duty.

## **SERIOUS HEALTH CONDITION**

A serious health condition is defined by the FMLA as an illness, injury, impairment or physical or mental condition that requires “inpatient care” or “continuous treatment” by a health care provider.

## **LENGTH OF LEAVE**

The length of the FMLA is not to exceed 12 work weeks in a 12 month period. The entitlement to FMLA for the birth or placement of a child expires 12 months after the birth or placement of the child.

## **LEAVE YEAR**

The 12 month leave year will be measured forward from the first day the employee is absent from work on FMLA.

## **NOTICE**

If the leave is foreseeable, the employee must give the Meeker-McLeod-Sibley Community Health Services at least 30 days advance notice. If the need for leave is unforeseeable, the employee should give as much notice as is practicable.

## **MEDICAL CERTIFICATION**

The employee must provide a complete medical certification if the leave is for the serious health condition of a child, spouse, parent or the employee within 15 calendar days. A ”Certification of Health Care Provider for Employee’s Serious Health Condition” or “Certification of Health Care Provider for Family Member’s Serious Health Condition” forms can be obtained from M c L e o d C o u n t y Human Resources. It is to be completed by the attending physician or practitioner.

The Meeker-McLeod-Sibley Community Health Services may require a second or  
Adopted by MMS CHB October 9, 2014



third medical opinion at the Meeker-McLeod-Sibley Community Health Services 's expense.

## **BOTH SPOUSES EMPLOYED BY THE MEEKER-MCLEOD-SIBLEY COMMUNITY HEALTH SERVICES**

When both spouses are employees of the Meeker-McLeod-Sibley Community Health Services, each spouse may take up to 12 weeks of FMLA per leave year. The leaves may run simultaneously.

## **CONTINUATION OF INSURANCE AND PAYMENT OF PREMIUMS**

An employee on FMLA may choose to continue existing health care benefits and life insurance. These benefits will be maintained under the same conditions and at the same level of Meeker-McLeod-Sibley Community Health Services contribution as would have been provided as if the employee had continued in employment continuously for the duration of such leave. If there are changes to the Meeker-McLeod-Sibley Community Health Services 's contribution levels and/or premium rates while the employee is on leave, those changes will take place as if the employee was still on the job. If the employee chooses to continue benefits, the employee will be required to continue payment of the employee's portion of the health care and/or other insurance coverage.

The employee may choose not to retain health care or other insurance coverage during FMLA. When the employee returns from leave, the insurance coverage will be reinstated on the same terms as prior to taking leave without any qualifying period, physical examination, exclusion of pre-existing conditions, or other requirement.

## **PREMIUM REIMBURSEMENT**

The employee will be required to reimburse the Meeker-McLeod-Sibley Community Health Services for any premiums paid during the leave if the employee does not return to work unless the employee cannot return to work due to the continuation, recurrence, or onset of a serious health condition of the child, spouse, parent or employee or due to other circumstances beyond the control of the employee.

## **EFFECT ON BENEFIT ACCRUAL**

The employee will not accrue benefits such as vacation or sick leave while on unpaid FMLA.

## **JOB RESTORATION**

Employees will be reinstated to the same position or an equivalent position upon

return from leave with equivalent pay, benefits and working conditions. An employee returning to work with a disability is also subject to provisions of the Americans with Disabilities Act.

## **USE OF PAID OR UNPAID TIME**

The 12 weeks of FMLA will be unpaid unless the employee uses vacation, comp time or sick leave. Use of paid time must be in accordance with applicable personnel policies and union contracts. The employee must use paid sick leave for circumstances that qualify for the use of sick leave and reduce their sick leave bank to 80 hours before going on unpaid leave. (This does not apply to employees receiving Short-term Disability payments). Both paid and unpaid time count as part of the 12 weeks of FMLA.

## **INTERMITTENT LEAVE**

Leave may be taken intermittently or on a reduced schedule if medically necessary. If not medically necessary, **Meeker-McLeod-Sibley Community Health Board** approval is required. The Meeker-McLeod-Sibley Community Health Services may require the employee to temporarily transfer to an alternative position of like status and pay if the new position better accommodates recurring periods of leave while the employee is on intermittent leave. If leave is taken intermittently, it will not affect the status of an exempt employee under the Fair Labor Standards Act. The employee has a statutory obligation to make a reasonable effort to schedule treatment as not to disrupt the employer's operations. All requests for intermittent leave will be evaluated on a case-by-case basis.

## **RETURN TO WORK**

The employee will be required to submit a fitness for duty report prior to returning to work if the FMLA was for the employee's own serious health condition.

## **LEAVE PERTAINING TO MILITARY RELATED EVENTS**

### **A. Injured Service Member Leave**

An employee is entitled to up to twenty-six (26) weeks of leave in a single twelve month period to care for covered service member with a serious injury or illness. Employees who are eligible must be a spouse, parent, child or "next of kin".

## B. Qualifying Exigency Leave

This leave entitles an employee to take up to twelve (12) weeks of leave due to a “qualifying exigency” arising because an employee’s spouse, child, or parent has been called up to covered active duty; it does not apply to family members of the military who are in the regular armed services.

## **GENERAL SUMMARY**

This policy is intended to be a general summary of the FMLA law. Each situation will be evaluated on a case-by-case basis in accordance with the FMLA. Please contact the McLeod County Human Resources Director for specific details.

## **SECTION 4.7 - JURY DUTY**

Jury Duty is considered a civic obligation. When served with a notice of jury duty, the employee shall furnish their supervisor with a copy of the notice. Employees called for jury duty shall receive their regular compensation and other benefits. Any compensation other than for expenses shall be remitted to the Meeker-McLeod-Sibley Community Health Services Auditor - Treasurer within ten (10) days following receipt by the employee. Employees shall return to their regular duties if released from jury duty during their scheduled hours of work.

Application of this policy to those employees who are not full-time will be determined on an individual basis.

## **SECTION 4.8 - PERSONAL LEAVE**

For justifiable reasons, the CHS Management Team may, with the concurrence of the **Meeker-McLeod-Sibley Community Health Board**, approve the absence of an employee without pay for up to 30 calendar days. Any absence of more than 30 days and less than one year must be approved in advance by the **Meeker-McLeod-Sibley Community Health Board**. Where appropriate, the Meeker-McLeod-Sibley Community Health Board will grant an official leave of absence in order to preserve the employee's status as a public employee and benefit rights under applicable retirement programs. The employee shall not accrue vacation, sick leave or other paid benefits during a personal leave.

Health and life insurance will be continued during a personal leave of absence of 30 days or less with the employee being responsible for the same percentage of the premium costs as prior to the personal leave. Health and life insurance may be continued at the employee's expense during a personal leave of absence of more than 30 days.



## **SECTION 4.9 - EDUCATION LEAVE**

Education leave without pay may be granted, at the sole discretion of the **Meeker-McLeod-Sibley Community Health Board**, for a period not to exceed two years, to any employee enrolled in a graduate school for classes determined to be directly related to the performance of the employee's current position. Any employee granted an educational leave may also, at the option of the **Meeker-McLeod-Sibley Community Health Board**, receive service credit for purposes of benefit earning eligibility (i.e. vacation accrual rate; seniority) and may be granted salary increases upon return to work at the time such increases would have been received if he/she had continued in regular employment with the Department.

## **SECTION 4.10 - INCLEMENT WEATHER/EMERGENCY CONDITIONS**

MMS CHS will follow McLeod County's Inclement Weather/Emergency Conditions policy. Any updates or changes to McLeod County's policy will also be in effect for Meeker-McLeod-Sibley Community Health Services. Following is McLeod County's policy.

The **McLeod County Board of Commissioners** authorizes the County Administrator, or designee, upon recommendation of the County Sheriff and/or County Engineer, to declare that emergency conditions exist. An emergency condition includes severe weather or other condition(s) that threaten the health and/or safety of the employees and citizens at any or all county locations. In the event of declared emergency conditions, the Department Head or designee, may dismiss the employees early. An employee may use accrued vacation leave, comp time or unpaid leave for absences due to dismissal upon a declared emergency.

This policy is developed with the assumption that a complete closing of all county facilities during normal business hours shall not occur. However, the County Administrator and McLeod County Board Chair retain the authority to deviate from this policy if deemed necessary.

## **SECTION 4.11 - VOLUNTEERISM LEAVE**

MMS CHS will follow McLeod County's Volunteerism Leave policy. Any updates or changes to McLeod County's policy will also be in effect for Meeker-McLeod-Sibley Community Health Services. Following is McLeod County's policy.

Volunteer service to the local fire department is allowed during working hours upon prior notification to the Department Head of such service. The employee is allowed to respond to an emergency fire call while on duty and will be paid by the Meeker-McLeod-Sibley Community Health Services the employee's regular rate of pay for the normal work hours of the day with no loss in pay. No overtime will be authorized or accrued as a result of volunteer service. The employee is expected to return to work when the emergency is over unless approved leave time is granted. Any other types of volunteer work must be done outside of regular working hours or as approved leave time.

## **SECTION 4.12 - MILITARY LEAVE**

MMS CHS will follow McLeod County's Military Leave policy. Any updates or changes to McLeod County's policy will also be in effect for Meeker-McLeod-Sibley Community Health Services. Following is McLeod County's policy.

McLeod County shall provide military leaves in accordance with state and federal law.

In accordance with Minnesota Statute 192.26, as amended, an individual who is a member of the National Guard, military reserve or any other reserve component of the military or naval force of the United States or a State shall be granted a leave of absence without loss of pay, seniority status, efficiency rating, vacation, sick leave, or other benefits not to exceed fifteen (15) days in any calendar year for such activity.

Under the Uniformed Services Employment and Reemployment Rights Act (USERRA), McLeod County will grant an unpaid military leave of absence to any employee who requests such leave in order to perform service in the uniformed services. It is the policy of McLeod County to comply with USERRA and all other state, federal, and local laws.

## **SECTION 4.13 - VOTING LEAVE**

MMS CHS will follow McLeod County's Voting Leave policy. Any updates or changes to McLeod County's policy will also be in effect for Meeker-McLeod-Sibley Community Health Services. Following is McLeod County's policy.

Employees who are eligible to vote in an election may be absent from work for a reasonable amount of time to vote during the morning of the day of the election.

McLeod County will not impose a penalty or deduction from wages because of such absence in accordance with Minnesota Statute 204C.04, as amended. McLeod County will not directly or indirectly refuse, abridge, or interfere with this right or any other election right of an employee. Election means a regularly scheduled state primary or general election, a local election, an election to fill a vacancy in the office of United States Representative, or a presidential primary unless it is conducted by mail.

Employees are required to notify their immediate supervisor prior to a voting leave of absence

## SECTION 4.14 - POLITICAL LEAVE

MMS CHS will follow McLeod County's Political Leave policy. Any updates or changes to McLeod County's policy will also be in effect for Meeker-McLeod-Sibley Community Health Services. Following is McLeod County's policy.

If the **Meeker-McLeod-Sibley Community Health Services** determines that there is a conflict of interest between a Meeker-McLeod-Sibley Community Health Services employee's job duties and candidacy for elected County offices, **Meeker-McLeod-Sibley Community Health Services** may require that the employee take an unpaid leave of absence during the period of the candidacy. A leave of absence must be taken from the date of filing until the conflict no longer exists. The following are examples including, but not limited to, types of conflicts of interest:

1. If an employee runs against the employee's Department Head; and/or
2. If a Department Head runs against a County Board member.

Accumulated vacation and comp time hours may be used during the period of time an employee is a candidate for office.

If vacation and/or comp time is used, health and life insurance will be continued during the leave of absence with the employee being responsible for the same percentage of the premium cost as prior to the political leave.

If an unpaid leave is taken, health and life insurance may be continued with the employee being responsible for the full premium cost.

## **SECTION 4.15 - VOLUNTARY VACATION LEAVE TRANSFER**

MMS CHS will follow McLeod County's Voluntary Vacation Leave Transfer policy. Any updates or changes to McLeod County's policy will also be in effect for Meeker-McLeod-Sibley Community Health Services. Following is McLeod County's policy.

The purpose of a voluntary vacation leave policy is to allow employees to transfer unused accrued vacation to another employee who has exhausted all their paid leave benefits including sick, vacation and compensatory time due to a medical emergency including a serious accident or illness of self or of an immediate family member limited to spouse, child, or parent.

A potential leave recipient must complete and submit a request form with written approval of the department head. A leave recipient may not be participating in any other disability program (i.e., Long Term Disability, Short Term Disability, PERA, Social Security, Worker's Compensation, etc.).

The Department Head may require a physician's explanation of the medical emergency, including a brief description of the nature, severity and anticipated duration of the medical emergency; and if it is a recurring one, the approximate frequency of the medical emergency affecting the potential leave recipient.

If abuse is suspected, the Department Head may rescind the leave, at any time, by written notification to the employee.

Upon the donor's written, dated and signed request, payroll staff will deduct from the donor's balance the hours of vacation leave designated and credit those hours to the record of the receiver when the recipient has exhausted their own vacation, sick leave and compensatory time balance. All transfers will remain anonymous. Once a donor's request is submitted, it is irrevocable.

While employees are the recipient of vacation donations, vacation and sick leave shall accrue as though they were in regular pay status.

Leave must be donated in full hour increments. In any one calendar year, a leave donor may donate no more than a total of one-half of the amount of annual vacation leave he/she would be entitled to accrue during the year in which the donation is made.

A leave recipient may use vacation leave transferred to his/her vacation leave account only for the purpose of the medical emergency for which the leave was approved.

If a participating recipient resigns or is terminated while in the leave transfer



program, they are no longer defined as a **Meeker-McLeod-Sibley Community Health Services** employee and therefore no longer eligible to receive donations.

When the medical emergency affecting a leave recipient terminates, no further requests for transfer of vacation leave to the leave recipient may be granted for that medical emergency, and any unused transferred vacation leave remaining to the credit of the leave recipient shall be restored to the leave donors on a pro-rated basis.

An employee may not directly or indirectly intimidate, threaten, or coerce any other employee for the purpose of interfering with any right such employee may have with respect to donating, receiving or using vacation leave under this plan.

## **SECTION 4.16 UNPAID LEAVE**

### **PURPOSE**

The intent of the **Meeker-McLeod-Sibley Community Health Services** Unpaid Leave Policy is to allow employees with a low vacation/comp time balance or probationary employees to take time off. Use of this program will not impact future staffing request decisions.

### **PROCEDURE**

Full-time and part-time employees may participate in unpaid leave under the following conditions and would be afforded the following special benefits:

- Employees are eligible if they have vacation and compensatory time accrual balances of less than a combined total of 40 hours or if they are a new employee currently on probation and not eligible to use their vacation accrual and they have prior department head approval (see below).
- **Meeker-McLeod-Sibley Community Health Services** will continue its regular contribution to health and life insurance premiums. The employee remains responsible for their benefit contributions to all insurances using unpaid leave.
- Vacation and sick leave accruals will be pro-rated for actual paid hours while using unpaid leave.
- Employees on unpaid leave will receive holiday benefits for legal holidays that fall within their unpaid leave.
- Service credit for purposes of benefit earning eligibility (i.e. vacation accrual rate, seniority) will continue as normal while using the program.

### **SUPERVISOR RESPONSIBILITY**

- CHS Management Team may grant unpaid leave requests where they determine that such leave is compatible with their staffing requirements. Unpaid leave is not available when additional help or other staff coverage is necessary. Employees must request this leave at least 24 hours in advance.

Intermittent leave is encouraged to reduce the burden placed on the other staff in a department. The maximum amount of unpaid leave taken at one time would

be 3 (three) consecutive days. Unpaid leave may not be used in conjunction with Family Medical Leave Act (FMLA). CHS Management Team retains discretion to place priority on requests for vacation leave from one employee above requests for unpaid leave from another employee.

Unpaid leave may be approved by the CHS Management Team for use in one hour increments up to a total of 40 hours in a calendar year.

## **SECTION 5.1 - ACCEPTABLE USE FOR COMPUTER AND NETWORK SYSTEMS**

### **POLICY STATEMENT**

MMS CHS will follow McLeod County's Acceptable Use for Computer and Network Systems policy. Any updates or changes to McLeod County's policy will also be in effect for Meeker-McLeod-Sibley Community Health Services. Following is McLeod County's policy.

Employees who are users of the McLeod County computer systems and shall follow procedures to ensure compliance with data security, data privacy, and software licensing and to ensure efficient and effective operations. This policy is designed to provide guidance regarding the acceptable use of McLeod County computers, network systems, including internet and email use.

### **McLeod County OVERSIGHT**

- a. McLeod County is the sole and exclusive owner of the computer systems and data.
- b. McLeod County -owned equipment cannot be used by anyone other than Meeker-McLeod-Sibley Community Health Services employees and for any purpose other than Meeker-McLeod-Sibley Community Health Services business unless otherwise stipulated by the Information Technology Department.
- c. McLeod County reserve the right to:
  1. Use any means available to access, inspect, review, and monitor its systems and data.
  2. Override any passwords and access codes.
- d. Users must be aware of and comply with data privacy laws. Users will be monitored and do not have an expectation of privacy when using McLeod County computer systems.
- e. Users will be subject to discipline procedures for violations of this Policy.

## **USER ID'S AND PASSWORDS**

- a. All users are required to be uniquely identified when accessing McLeod County computer or network systems. The Information Technology Department will create and maintain user accounts, and control group membership for gaining access to the McLeod County, systems and computers.
- b. User Account Logon Names shall not be shared or used by others.

- c. Passwords will expire in a time period specified by the Information Technology Department. The supervisor shall be notified if it is believed that a User ID or password is being used by another person.
- d. Inactive User Accounts shall be reported to Information Technology or as discovered, to be immediately disabled/removed from the system without notice.

## **USE OF COMPUTERS, NETWORK DEVICES AND TELECOMMUNICATION EQUIPMENT**

- a. Computer users shall ensure that workstations are secured when unattended by performing the lock computer process or logging off.
- b. Computer users shall shut down their workstation at the end of each workday unless directed to do otherwise by Information Technology Department.
- c. Computer users shall, on an ongoing basis, delete or remove their inactive data files. Unless authorized, users are prohibited from deleting or removing files created by others.
- d. Computers and non-portable networked devices (i.e. printers, copy machines, etc.) shall not be moved without approval from the supervisor or department head and Information Technology Department.
- e. Employees will be granted remote access to the McLeod County network if their job responsibility requires them to perform duties off-site, provided that the department purchases the required equipment.
- f. Use of the Internet during working hours shall be related to work responsibilities and the internet shall not be used for casual or private "surfing" unrelated to work responsibilities. Usage shall be limited to web sites that are work related.
- g. Prohibited websites and email content shall include, but are not limited to, adult entertainment, sexually explicit material, websites or emails promoting violence or terrorism, gambling, illegal use of a controlled substance(s) and intolerance of other people/ races/religions or other protected class status.
- h. Use of computer equipment and telecommunication equipment for personal use must be kept to a minimum. Furthermore, such usage shall occur only during the employee's personal non-work time and must not interfere with Meeker-McLeod-Sibley Community Health Services business.

- i. No outside equipment shall be connected to the McLeod County's computers or network systems without the permission of Information Technology Department.

## **SOFTWARE**

- a. Employees shall not install software on McLeod County's computer systems.  
Installation of software on McLeod County computer or network systems is the responsibility of Information Technology Department.
- b. The Information Technology Department will not load personally owed software on McLeod County devices.
- c. No third party files or computer programs (data or programs not acquired through the McLeod County's formal purchasing process) shall be transferred to a McLeod County computer from outside the McLeod County without first being scanned for computer viruses.
- d. Software outside that of the standard approved software requires written consent from the McLeod County Information Technology Director prior to being installed.
- e. The Information Technology Department will notify the CHS Administrator before removing unauthorized software and/or software that is out of license compliance.
- f. Employees shall comply with all requirements of software licensing agreements.
- g. The Information Technology Department shall be notified when a virus is detected.
- h. The Information Technology Department shall be responsible for the ongoing distribution of up-to-date virus scanners on McLeod County computers and network systems.
- i. All software system disks and installation instructions shall be retained and secured by the Information Technology Department.
- j. The Information Technology Department shall maintain a record of all licenses purchased for applications residing on file servers and central processors. The Information Technology Department shall ensure license compliance.
- k. Each department shall be responsible for enforcing software licensing agreements that are unique to their department.



## **EMAIL**

- a. Users may not send any confidential information via email without proper encryption. An encryption solution is provided by the Information Technology Department.
- b. If a document is designated as confidential, the confidential status may not be changed via email.
- c. Use of non-McLeod county email accounts (email addresses other than @co.mcleod.mn.us) to conduct official Meeker-McLeod-Sibley Community Health Services business is prohibited unless approved by the Information Technology Department. If approved, use of these accounts is subject to McLeod County policies.
- d. Manual or auto-forwarding McLeod County email to personal email accounts is prohibited.
- e. No user may send an email over the size limit set by the Information Technology Department.
- f. All email that is required to be maintained must be moved to some other form of storage (i.e. saved to an available network drive, electronic document management system, etc.).
- g. No user may send a restricted email attachment.
- h. Each user's email box size will be limited to a reasonable amount of space as determined by the Information Technology Department. Email box sizes will be set and reviewed as needed.
- i. Restrictions will be imposed on the use of local archives by Information Systems.
- j. Access to email will be provided in the following ways:
  - a. Client software installed on McLeod County computer systems connected to the Meeker-McLeod-Sibley Community Health Services network.
  - b. Secure web access client (for access when not on the McLeod County network).
  - c. Smartphone or tablet devices synchronizing permitted as defined in the portable devices section of this document as well as sign off with the form in Appendix B.

## **EMAIL RETENTION**

Adopted by MMS CHB October 9, 2014

- a. Email is a communication tool. It is temporary storage location for sending and receiving information.

- b. All messages in *trash* will be deleted if they are in the trash longer than 90 days.
- c. All messages in *sent mail* will be transferred to trash if they are older than 90 days.
- d. All messages in *junk* will be deleted if they are in the junk longer than 30 days.
- e. Email servers are not backed up on any fixed schedule; any backups are for technical purposes only and are not for individual data recovery.
- f. Data protection is not provided for any form of local archives.

## **EMAIL SECURITY**

The following types of security will be implemented to protect the email system.

- a. Multi-tier virus filtering – messages detected to have a virus will be deleted. No notification will be sent to the sender or the recipient(s).
- b. Spam filtering – messages will be scored and processed based on their score; messages may be deleted, placed in end-user quarantine, or delivered with a subject line rewrite. Blacklist and white list requests will be considered on a case by case basis.
- c. Multi-tier attachment filtering – restricted attachment types will be deleted and the message returned to the sender.
- d. Users that have been granted access to McLeod County email system are required to authenticate to the system with their unique credentials.

## **PORTABLE DEVICES**

- a. Portable devices include, but are not limited to, laptops, netbooks, smartphones and tablets issued or owned by the McLeod County or reimbursed for by the Meeker-McLeod-Sibley Community Health Services. Employee use of such devices is subject to Meeker-McLeod-Sibley Community Health Services personnel policies.
- b. The employee, while performing Meeker-McLeod-Sibley Community Health Services work off-site on a McLeod County owned portable device and at the direction of their department head/supervisor, shall be considered working for the Meeker-McLeod-Sibley Community Health Services and must therefore be in compliance with Meeker-McLeod-Sibley Community Health Services personnel policies.

- c. The employee shall take reasonable care to safeguard the portable device from extreme heat, extreme cold, damage, or theft and shall also ensure compliance with data privacy laws by taking reasonable steps to secure the data on the portable device.

- d. Meeker-McLeod-Sibley Community Health Services may, at any time, deny an employee use of a portable device or may block access from the device to any or all services including the McLeod County's network.
- e. If a portable device is lost, stolen or damaged, the user must immediately notify the CHS Administrator who then must notify the Information Technology Department.

### **MEEKER-MCLEOD-SIBLEY COMMUNITY HEALTH SERVICES BUSINESS PERFORMED ON NON- MEEKER-MCLEOD-SIBLEY COMMUNITY HEALTH SERVICES-OWNED DEVICES**

- a. McLeod County-owned data files and/or licensed software shall not be transferred to non- McLeod County owned devices by Meeker-McLeod-Sibley Community Health Services employees without the approval of the CHS Administrator and the Information Technology Department.
- b. The employee shall ensure compliance with data privacy laws by taking reasonable measures to secure the data on the devices.
- c. McLeod County -owned data and/or licensed software shall be purged from the device upon task completion.
- d. Non- McLeod County owned laptop or desktop computers are not approved for synchronizing with McLeod County systems.
- e. Non- Meeker-McLeod-Sibley Community Health Services owned tablets, cellular phones, and smartphones must meet the requirements of and be compatible with the McLeod County approved and supported synchronizing software. Non- Meeker-McLeod-Sibley Community Health Services owned tablets, cellular phones, and smartphones will not be allowed to be used as a modem for internet access (tether) to a McLeod County computer system.
- f. Users of compatible tablets, and smartphones that wish to synchronize with McLeod County systems must complete **Appendix B, Use Synchronization Agreement.***

### **ACQUISITION AND MAINTENANCE OF TECHNOLOGY ITEMS**

- a. All technology purchases must be approved by the Information Technology Department prior to execution of the purchase and shall be configured, installed, and maintained by the Information Technology Department.
- b. All technology items that interface with the McLeod County's computer or

network systems, including but not limited to, network devices, desktop computers, laptop computers, printers, plotters, copy machines, software, smartphones, and tablets, shall be purchased by the Meeker-McLeod-Sibley Community Health Services through McLeod County Information Technology Department or a collaborating government agency and shall be used for the purposes of conducting Meeker-McLeod-Sibley Community Health Services business.

This does not include keyboards and mice that are certified Microsoft compatible.

- c. The Information Technology Department will not support and maintain Meeker-McLeod-Sibley Community Health Services employee's personal devices or internet connections from personal homes.
- d. Exceptions may be granted by completing Appendix C, *Risk Acceptance Signoff*.

## ***Appendix A: Acceptable Use Agreement for Computer and Network Systems***

### **MEEKER-MCLEOD-SIBLEY COMMUNITY HEALTH SERVICES**

**To:** All Meeker-McLeod-Sibley Community Health Services  
Employees

**From:** Meeker-McLeod-Sibley Community Health Board of  
Commissioners

**Subject:** Employee Agreement for Usage of Computer and Network  
Systems

Prior to being afforded the privilege of using any McLeod County computer system and/or accessing any computer system data, all Meeker-McLeod-Sibley Community Health Services employees are required to review and agree to comply with the Acceptable Use for Computer and Network Systems section in the Meeker-McLeod-Sibley Community Health Services Personnel Policy.

I have read and agree to follow the ***Acceptable Use for Computer and Network Systems*** section of the Meeker-McLeod-Sibley Community Health Services Personnel Policy. I acknowledge that my use of the McLeod County's computer systems and my access of computer systems data will be monitored and I do not have an expectation of privacy when using McLeod County's computer systems and I may be subject to discipline for violations of the ***Acceptable Use for Computer and Network Systems*** policy.

---

Date

---

Employee Signature

---

Print Name



ORIGINAL: Completed Agreement kept with employee's Department Head

cc: Employee

***Appendix B: User Synchronization Agreement for synchronizing a non- Meeker-McLeod-Sibley Community Health Services owned device with the McLeod County's network.***

I agree to the following regulations as a requirement to synchronize my non-McLeod County owned device with the McLeod network:

- a. I understand that if I have a non- McLeod County owned device, it is my responsibility to select a model that meets the requirements of and is compatible with the McLeod County's approved and supported synchronization software. However, there is no guarantee that by meeting these requirements that the synchronization software will work with a non- McLeod County owned device.
- b. I have read and agree to follow the Meeker-McLeod-Sibley Community Health Services Cellular Telephone Policy and the Acceptable Use of Computer and Network Systems sections of the Meeker-McLeod-Sibley Community Health Services Personnel Policy.
- c. I understand that if I have a non- McLeod County's owned device that McLeod's support responsibilities end with the initial configuration settings of my device and that Meeker-McLeod-Sibley Community Health Services is not responsible for upgrades that cause my non-Meeker-McLeod-Sibley Community Health Services owned device to no longer synchronize with a McLeod County network.
- d. I understand that if the device is lost, stolen, or if the status changes (i.e. new phone, etc), I must immediately notify the CHS Administrator who then must immediately notify the Information Technology Department.
- e. I understand that if the device is lost, stolen, or if I leave Meeker-McLeod-Sibley Community Health Services employment, that it must be erased remotely either by myself (the user, using web interface) or the Information Technology Department (administrative interface).
- f. I understand that by signing this agreement, I will be required by the synchronization software to use a password or PIN to gain access to my device and that if the password is forgotten the device may be reset to factory defaults and it is the responsibility of the end user to recover lost

data.

- g. I understand that I am not eligible for compensation of any kind due to checking and answering my email on my device during non-work hours unless my job responsibility requires me to do so..
- h. Failure to comply with this agreement may result in cancellation of synchronization privileges with a McLeod County network.

---

Employee Signature

---

Date

---

Department Head Signature

---

Date

---

Information Technology Director

---

Date

ORIGINAL: Completed Agreement kept with employee's Department Head

cc: Employee  
Information Technology Director

**Appendix C: Risk Acceptance signoff for exception(s) to the Acceptable Use for Computer and Network Systems Policy.**

I acknowledge that I am asking for and receiving an exception to the ***Acceptable Use for Computer and Network Systems policy*** for a person(s) in my department and will fully accept the risk and responsibility associated for any issues or data exposure created by the exception:

- a. I understand that if I have asked for a person(s) in my department to have an account with elevated privileges to work with Vendors to upgrade and troubleshoot applications solely in my department, there is a risk of causing issues with the computer(s) and system(s).
- b. I understand that if I have asked for a person(s) in my department to have an account with elevated privileges to reset passwords and unlock network accounts there is a risk of causing issues with the accounts.
- c. I understand that if I have asked for a person(s) in my department to have an account with elevated privileges to add or delete people from access groups solely for my department there is a risk of users gaining access to confidential information.
- d. I understand that if I have asked for an exception to the password expiration time on an account there is a higher risk of unwanted users gaining access to critical data.
- e. I have read and agree to follow the ***Acceptable Use for Computer and Network Systems*** section of the Meeker-McLeod-Sibley Community Health Services Personnel Policy with the exception stipulated below.
- f. Failure to comply with this agreement will result in cancellation of any and all exceptions to the ***Acceptable Use for Computer and Network Systems policy***

---

Exception Requested

---

Department Head Signature

Adopted by MMS CHB October 9, 2014

---

Date

---

Information Technology Director

---

Date

ORIGINAL: Completed Agreement kept with Department Head

cc: Employee  
Information Technology Director

## **SECTION 5.2 – CELLULAR TELEPHONE**

### **PURPOSE**

To define the cell phone usage by employees to encourage the enhancement of communications while ensuring efficient, safe and high-quality customer service to the citizens of Meeker-McLeod-Sibley Community Health Services. MMS CHS will follow McLeod County's Cellular Telephone policy. Any updates or changes to McLeod County's policy will also be in effect for Meeker-McLeod-Sibley Community Health Services. Following is McLeod County's policy.

### **PROCEDURE**

The County Administrator and the Central Services Coordinator are authorized to enter into a contract with the County Board approved cell phone company for any new and existing service. The County Sheriff and Chief Deputy will contract and manage the cell phones for Law Enforcement. McLeod County contracts for cell phone service shall require monthly itemized statements of call usage.

The CHS Management Team and MMS Community Health Board will determine which position(s) require a cell phone and whether the needs are best served through the allocation of a county-purchased cell phone or through a cell phone allowance based on a monthly tiered plan based on the following:

- a. Employee travels frequently on business to remote areas.
- b. Employee frequently enters homes without telephone service.
- c. Employee frequently needs to maintain communication with Department while off-site.
- d. Employee is concerned for personal safety while conducting business off-site.

### **MCLEOD COUNTY OWNED CELL PHONE**

If it is determined that a McLeod County owned cell phone best serves their need, Central Services will determine the appropriate service to best fit the work related needs of the Meeker-McLeod-Sibley Community Health Services including, but not limited to, coverage area and cost. Changes to existing service or purchase of new cell phones will be done by the Central Services Coordinator. The cell phone is the

property of the McLeod County and shall be surrendered upon request.

MMS CHS Employees using McLeod County owned cell phones should limit the phone to business use. If the employee must use the cell phone for personal calls these calls should be



for emergency purposes only. Non-emergency personal use of McLeod County owned cell phone may lead to disciplinary action and revocation of the cell phone. The employee must reimburse the Meeker-McLeod-Sibley Community Health Services for any personal calls. The CHS Administrator will be responsible for monitoring reimbursement of personal calls. Upon receipt of the monthly itemized statement, the employee shall copy and highlight personal minutes, total the personal charges and submit reimbursement to the Meeker-McLeod-Sibley Community Health Services via the Auditor-Treasurer Office.

A texting plan will only be allowed on the McLeod County owned cell phones when authorized by the Meeker-McLeod-Sibley Community Health Services Administrator and Central Services Coordinator.

If a McLeod County owned cell phone or related equipment is damaged due to employee negligence the employee is responsible for the full cost of replacement of the phone or related equipment.

If a McLeod County owned cell phone or related equipment is lost or stolen, the employee must immediately notify the CHS Administrator who then must immediately notify the Central Services Coordinator. The employee is responsible for the full cost of replacement of the phone or related equipment due to employee negligence.

If Central Services determines that the cell phone needs to be replaced, the old cell phone and related equipment must be returned.

McLeod County issued cell phones and related equipment must be returned to the McLeod County upon separation of employment. If the cell phone and related equipment is not returned to McLeod County, the cost of the phone and related equipment will be deducted from the employee's final paycheck.

Any misuse of the cell phone will subject the employee to discipline procedures as contained in the Meeker-McLeod-Sibley Community Health Services Personnel Policy or applicable labor agreements.

Misuse consists of:

- a. Failure to reimburse the Meeker-McLeod-Sibley Community Health Services for all emergency personal calls made with Meeker-McLeod-

Sibley Community Health Services cell phones.

- b. Making calls of a threatening, harassing or inappropriate nature.
- c. Making non-emergency personal calls.

## **EMPLOYEE OWNED CELL PHONES**

Employees that have been designated to receive a cell phone allowance will receive a monthly allowance based on the following tier plan:

Tier 1	\$10.00/month	Average of 60 - 100 minutes work related use per month in a 6 month period
Tier 2	\$20.00/month	Average of over 100 minutes work related use per month in a 6 month period
Tier 3	\$50.00/month	Smartphone with data access

Employees receiving the allowance are responsible for:

1. Smartphone devices permitted as defined by the Acceptable Use for Computer and Network Systems section of the Meeker-McLeod-Sibley Community Health Services Personnel Policy.
2. Providing proof of purchase/lease of cell service and work related usage at intervals to be determined by the Department Head.
3. Replacement or repair of the phone will normally be the responsibility of the employee. However, if the cell phone is lost or damaged as a direct result of the work environment, the Department Head with the Meeker-McLeod-Sibley Community Health Services Administrator's approval may approve reimbursement to the employee.
4. Employees will make sure the cellular service is reliable in Meeker-McLeod-Sibley Community Health Services.

The cell phone allowance is intended to cover most of the costs of the employee's cell phone expenses related to work duties. Initial purchase of the cell phone, accessory equipment, and activation fees will be the responsibility of the employee. The employee will pay any costs exceeding the amount of the cell phone allowance to the cell phone service provider. No allowance will be paid when an employee is in an unpaid leave status or non- work status.

The cell phone allowance will be paid through the McLeod County's payroll system as taxable income. The allowance will be divided and paid with the 1<sup>st</sup> and 2<sup>nd</sup> payroll periods of the month for the previous month's service.

## **DATA PRACTICES**

All personal cell phone statements are considered private data. Billings associated with a McLeod County-purchased/leased cell phone are considered public data.

## **SUPERVISOR RESPONSIBILITY**

Department Heads and/or Supervisors shall monitor the cell phone needs and usage for their staff and make appropriate decisions and authorizations based on this policy and what is in the best interest of the Meeker-McLeod-Sibley Community Health Services. The Meeker-McLeod-Sibley Community Health Services Administrator is responsible for making decisions when it involves exceptions, discrepancies or interpretations of this policy.

## **CELL PHONE USAGE IN VEHICLES**

When driving a McLeod County vehicle, employees shall be aware that driving is their primary responsibility and cell phone usage is prohibited. Employees are required to pull off the road safely and be parked in a safe location before making or answering a call. The Sheriff's Office may promulgate supplemental policies which will supersede the application of this section to licensed law enforcement employees.

## **PERSONAL CELL PHONE USAGE IN THE WORK PLACE**

While at work employees are expected to exercise the same discretion in using personal cell phones as is expected for the use of Meeker-McLeod-Sibley Community Health Services issued cell phones. Excessive personal calls during the work day, regardless of the phone used, can interfere with employee productivity and be distracting to others. Employees are to make personal calls before and after work and during break and lunch periods. Employees are required to keep phones on silent or vibrate mode while in Meeker-McLeod-Sibley Community Health Services buildings.

CELL PHONE ALLOWANCE AUTHORIZATION  
(Use for Employee owned cell phone)

EMPLOYEE NAME: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

Authorization relating to cell phone allowance to this employee as indicated below:

- ☐ Activate allowance payment @ \$10.00 per month (average of 60-100 minutes of work related usage per month)
- ☐ Activate allowance payment @ \$20.00 per month (average of over 100 minutes of work related usage per month)
- ☐ Activate allowance payment @ \$50.00 per month for smartphone usage
- ☐ Deactivate allowance payment. Deactivation date \_\_\_\_\_

Service Provider's Name: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

*Allowance is intended to provide payment toward the cost of monthly service and associated taxes.*

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Administration

\_\_\_\_\_  
Date

Return this completed form to the Auditor-Treasurer Office. A copy will be kept in your personnel file in the Auditor-Treasurer Office.

Please allow time for processing to coincide with payroll periods.

\_\_\_\_\_  
Payroll/Benefit Coordinator

\_\_\_\_\_  
Date

MEEKER-MCLEOD-SIBLEY COMMUNITY  
HEALTH SERVICES CELL PHONE  
ALLOWANCE AGREEMENT

I agree to the following regulations regarding the payment of a cell phone allowance to me:

1. I understand that I will be authorized a cell phone allowance to be used toward the costs of cell phone service to be used for Meeker-McLeod-Sibley Community Health Service sbusiness purposes.
2. I understand that this allowance will be paid to me through payroll as taxable income.
3. I understand that I will be required to provide reliable cell phone service for all work related needs.
4. I agree to provide documentation to my department head as required to initiate and to continue my entitlement to the cell phone allowance.
5. I agree to monitor my work related usage and notify my Department Head if a tier change is necessary based on a 6 month average.
6. I understand my entitlement to the cell phone allowance ceases if I am in an unpaid leave status.
7. I understand my entitlement to the cell phone allowance ceases if I am in a non-working status (Ex: FMLA, work comp)
8. I understand the cell phone allowance will cease immediately upon my termination of employment, whether for retirement, voluntary or involuntary reasons. Should I terminate employment mid-month, I understand the allowance will be pro-rated.
9. I understand that any current or future obligation with the cell phone service provider is exclusively my responsibility without any liability to Meeker-McLeod-Sibley Community Health Services.

10. I have read and will follow the Meeker-McLeod-Sibley Community Health Services Cell Phone Usage Policy. Failure to comply with this agreement

may result in cancellation of my entitlement to receipt of the cell phone allowance.

---

Employee Name (Print)

---

Employee Signature

---

Date



## **SECTION 5.3 - ELECTRICAL EQUIPMENT USAGE AND PURCHASING**

MMS CHS will follow McLeod County's Electrical Equipment Usage and Purchasing policy. Any updates or changes to McLeod County's policy will also be in effect for Meeker-McLeod-Sibley Community Health Services. Following is McLeod County's policy.

All departments in McLeod County shall confer with Central Purchasing before purchasing or contracting for the acquisition of all electronics, electrical supplies and equipment. Employees are directed not to bring this type of equipment from home to the workplace. Central Purchasing, in conjunction with the Safety Committee, will ensure that all items purchased meet the guidelines of Minnesota Counties Intergovernmental Trust (MCIT) and the specifications necessary for approval of Occupational Safety and Health Act (OSHA), National Sanitation Foundation (NSF), Underwriter's Laboratories (UL), American Gas Association (AGA), and other nationally recognized laboratories.

Space heaters will not be kept at individual work stations. They will be kept in storage and will only be brought out and used in case of emergency.

Radios and other small appliances, such as pencil sharpeners, that do not contain a motor or heating element are exempt from this policy.

In following the guidelines set up by the fire marshal and MCIT, holiday lights may be used for a maximum of 90 days around the holiday season in common areas only. Holiday lights may be attached to artificial trees but are not allowed on natural trees.

## **SECTION 5.4 - SOCIAL MEDIA USAGE**

Social media technologies will be used as a tool to complement, communicate or deliver messages and information resources to media and constituencies.

The Meeker-McLeod-Sibley Community Health Service's presence on social media sites or services is considered an extension of the Meeker-McLeod-Sibley Community Health Service's information networks and is governed by the Acceptable Use for Computer and Network Systems Policy.

Violation of this policy may lead to disciplinary action up to and including termination from employment.

### **APPROPRIATE USE**

Meeker-McLeod-Sibley Community Health Services employees who are designated will be responsible for posting on the department's social media accounts are expected to ensure appropriate communication forums, including the types of messages created and the tone and content. Employee use of all social media technologies must be able to withstand public scrutiny without embarrassment to the recipient, the department, or Meeker-McLeod-Sibley Community Health Services. These employees are expected to adhere to the highest ethical standards when conducting Meeker-McLeod-Sibley Community Health Services business. They must use excellent judgment in making decisions about their department's day-to-day postings and what is shared with the public as it relates to the department's specific goals. Employees that fail to conduct themselves in an appropriate manner shall be subject to the disciplinary procedures outlined in the Personnel Policy or applicable union contracts.

Violation of these standards may result in the removal of department pages from the social media outlets. Meeker-McLeod-Sibley Community Health Services Administration will monitor content on each of the social media sites to ensure adherence to policy and retains the authority to remove information.

## **OFFICIAL RECORDS AND RECORDS RETENTION**

Each department must be aware of the official records it maintains and the retention of those records according to an approved records retention schedule. Social media communications and posts might not consist of official records required to be maintained according to a record retention schedule. However, if a department determines that any communication or posts are official records, those records should be maintained in an appropriate format according to the relevant records retention schedule.

## **USE OF PERSONAL ACCOUNTS**

The creation, access or use of personal social networking technology or account with a Meeker-McLeod-Sibley Community Health Services resource is allowed only during an employee's non-work time and must not interfere with Meeker-McLeod-Sibley Community Health Services business.

The Meeker-McLeod-Sibley Community Health Services may monitor information created or accessed on Meeker-McLeod-Sibley Community Health Services resources including but not limited to computers, cell phones, pagers, smartphones, etc., and employees should have no expectation of privacy regarding such information.

In online social media, the lines between public and private, personal and professional may become blurred. Online social media content should be consistent with the Meeker-McLeod-Sibley Community Health Service's professional standards.

The Meeker-McLeod-Sibley Community Health Services expects employees to use discretion while using their personal social media accounts, including but not limited to, by not posting or disclosing any data considered private or confidential or information that is disruptive to the workplace

## **SECTION 5.6 - IDENTIFICATION BADGES**

MMS CHS will follow McLeod County's Identification Badges policy. Any updates or changes to McLeod County's policy will also be in effect for Meeker-McLeod-Sibley Community Health Services. Following is McLeod County's policy with slight edits for the MMS CHS.

All Meeker-McLeod-Sibley Community Health Services employees shall wear the official McLeod County Employee Identification Badge at all times while providing Meeker-McLeod-Sibley Community Health Services, unless the CHS Administrator states that there is a valid reason for not being identified as an employee or should not wear the identification badge for safety reasons.

The Employee Identification Badge will include the following information:

### **FRONT OF BADGE**

Employee's Picture  
Employee's First Name  
Employee's Last Name (Optional)  
Employee's Department

### **BACK OF BADGE**

Date Issued  
Phone Number

Employees who wear uniforms are not required to wear an Employee Identification Badge, but must carry one in their possession during working hours.

When determined by a Department Head that a name tag is more appropriate than the Meeker-McLeod-Sibley Community Health Services Identification Badge, employees are permitted to wear a name tag. When a name tag is used, employees are still required to have the Meeker-McLeod-Sibley Community Health Services picture identification badge with them at all times while providing Meeker-McLeod-Sibley Community Health Services.

The Meeker-McLeod-Sibley Community Health Services Administrator, a Department Head, or their designee, shall require that other individuals, including temporary employees, volunteers, jurors, contractors, permanent vendors or others providing services, wear an Employee Identification Badge while on McLeod County premises. These identification badges may include those provided by their employer or affiliated organization, but must include a photo or be accompanied by another form of photo identification. If the above individual does not have an identification badge, a McLeod County temporary badge will be

issued until their service with Meeker-McLeod-Sibley Community Health Services is complete.

Upon completion of service with Meeker-McLeod-Sibley Community Health Services, it is the responsibility of the Department Head or designee to insure that Employee Identification or temporary badges are turned in to the designated office for deactivation.

## **GUIDELINES:**

- Photo identification badges shall be issued at no cost to employees and others required to wear and display identification. A fee of \$8.00 shall be collected from employee to replace any lost badge.
- A temporary badge shall be issued to those individuals requiring a badge. These badges do not include a photo.
- McLeod County shall maintain privacy of the photo database except as otherwise required by law.
- Department Heads shall obtain a completed photo identification data form from the employee or temporary person and have them bring this form and another form of photo identification to the designated department for issuance of a McLeod County badge.
- The identification badge shall be attached by an approved method (lanyard, clip, or pin) and shall be worn on the front of the body so name and photo are clearly visible and unobstructed.
- The employee shall immediately report a lost or damaged identification badge to the appropriate department.
- The employee shall possess only one badge.
- The employee shall turn in an obsolete badge to the McLeod Auditor–Treasurer, or other appropriate department, and obtain a replacement badge at no cost when there is a change in status such as name or department.
- The employee shall never allow another employee or person to use your badge.