

ITEM #6
EXHIBIT A

	Department: Administration			
	Policy No. ADM-LD-700	Effective Date: January 2025	Review Date: January 2027	Page 1 of 6 (with addendum)
Title: Conflict of Interest				

POLICY STATEMENT:

It is the policy of Kern County Hospital Authority (“Hospital Authority”) to provide for a process for the disclosure and management of conflicts of interest which may exist for persons with positions of trust and responsibility in the governance and management of the Hospital Authority, and to assure that state law provisions¹ relating to such conflicts are followed. In order to safeguard independent judgment and action in business decisions, each person entrusted with a key position of responsibility in the Hospital Authority has a duty to disclose actual or potential conflicts of interest, to avoid acting out of any actual or apparent conflict of interest which may arise from personal financial interests in entities which may conflict with the Hospital Authority’s best interests. The purposes of this policy are: (i) to preserve the integrity of the decision-making process of the Hospital Authority, (ii) to prevent intentional or inadvertent participation in the decision-making process by persons having an actual or apparent conflict of interest, (iii) to promote compliance with the process by which conflicts of interest are disclosed and managed in accordance with state laws, and (iv) to prevent violations of state conflict of interest laws.

DEFINITIONS:

- A. “Covered Individual” means those individuals identified in the attached Appendix A.
- B. “Financial interest” means for purposes of this policy a Covered Individual has a “financial interest” in a decision if it is reasonably foreseeable that the decision will have a material financial effect, distinguishable from its effect on the public generally, on the employee or an immediate family member or on: (1) any business entity in which the Covered Individual has a direct or indirect investment worth \$2,000 or more; (2) any real property in which the Covered Individual has a direct or indirect interest worth \$2,000 or more; (3) any source of income, other than gifts and other than loans by a commercial lending institution in the regular course of business on terms available to the public without regard to official status, aggregating \$630² or more in value provided to, received by or promised to the Covered Individual within 12 months prior to the time when the decision is made; (4) any business or entity in which the Covered Individual is a director, officer, partner, trustee, employee, or holds any position of management; and (5) any donor of, or any intermediary or agent for a donor of, a gift or gifts aggregating \$590 or more in value provided to, received by or promised to the Covered Individual within 12 months prior to the time when the decision is made.
- C. “Immediate family member” means the Covered Individual’s spouse; natural or adoptive parent, child or sibling; stepparent, stepchild, stepbrother or stepsister; father-in-law, mother-in-law, brother-in-law or sister-in-law; grandparent or grandchild; or spouse of a grandparent or grandchild.

¹ Government Code section 1090; Government Code section 81000 et seq.

² California Fair Political Practices Commission gift limit effective **January 1, 2025 - December 31, 2026.**

- D. "Indirect investment or interest" means any investment or interest owned by the spouse or dependent child of the Covered Individual, by an agent on behalf of the Covered Individual, or by a business entity or trust in which the Covered Individual, or Covered Individual's agent, spouse, and dependent children own directly, indirectly, or beneficially a 10% interest or greater.

1.0 ACTS CONSTITUTING CONFLICT OF INTEREST

- A. No Covered Individual shall engage in any employment, activity or enterprise that results in any of the following:
1. Using the prestige or influence of a Hospital Authority office or employment for private gain or advantage, or the private gain or advantage of another;
 2. Using Hospital Authority time, facilities, equipment or supplies for the Covered Individual's private gain or advantage, or the private gain or advantage of another;
 3. Using confidential information acquired by virtue of Hospital Authority office or employment for the Covered Individual's private gain or advantage, or the private gain or advantage of another;
 4. Receiving or accepting money or any other consideration from anyone other than the Hospital Authority for the performance of an act which the Covered Individual would be required or expected to render in the regular course or hours of office or employment or as part of duties as a Covered Individual;
 5. Performance of an act in other than the Covered Individual's capacity knowing that such act may later be subject, directly or indirectly, to the control, inspection, review, audit or enforcement by the Covered Individual or by the Hospital Authority;
 6. Make, participate in making or in any way attempt to use the Covered Individual's position to influence a governmental decision (other than a decision affecting an employee's wages, hours, or working conditions) in which the Covered Individual knows or has reason to know that the Covered Individual has a financial interest; or
 7. Non-Hospital Authority employment or self-employment outside of regular working hours which involves such time demands or services of such a character as to impair effectiveness of Hospital Authority employment.
- B. Any violation of the provisions contained in the aforementioned section shall constitute sufficient grounds for disciplinary action up to and including termination of employment.

2.0 EXEMPTION FOR CERTAIN PHYSICIAN SERVICES

Those physicians rendering professional services to Kern Medical Center or other Hospital Authority businesses under contract authorizing billing for services to non-indigent patients shall not be deemed to be in violation of the provisions of Section 1.0 of this policy in billing for such services so rendered.

3.0 POST-EMPLOYMENT RESTRICTIONS REGARDING REPRESENTATION, APPEARANCE OR COMMUNICATION

- A. Employees classified as management, mid-management or confidential, shall not, for a period of one year after leaving employment, act as agent or attorney for, or otherwise represent, for compensation, any other person, by making any formal or informal appearance before, or by making any oral or written communication to the Hospital Authority or a present member of the Board of Governors or any officer or employee of the Hospital Authority if the appearance or communication is made for the purpose of influencing administrative action, or influencing any action or proceeding involving the issuance, amendment, awarding, or revocation of a permit, license, grant, or contract, or the sale or purchase of goods or property.

- B. Subsection A shall not apply to any individual who is, at the time of the appearance or communication, a board member, officer, or employee of a local government agency or an employee or representative of any other public agency and is appearing or communicating on behalf of that agency.
- C. The following definitions shall apply for purposes of Sections 3.0 and 4.0 only:
 - 1. "Administrative action" means the proposal, drafting, development, consideration, amendment, enactment, or defeat by the Hospital Authority of any matter, including any rule, regulation, or other action in any regulatory proceeding, whether quasi-legislative or quasi-judicial. Administrative action does not include any action that is solely ministerial.
 - 2. "Legislative action" means the drafting, introduction, modification, enactment, defeat, approval, or veto of any ordinance, amendment, resolution, report, nomination, or other matter by the Board of Governors or by any committee or subcommittee thereof, or by a member of the Board of Governors acting in his or her official capacity.
 - 3. "Person" shall mean an individual, proprietorship, firm, partnership, joint venture, syndicate, business trust, company, corporation, limited liability company, association, committee, and any other organization or group of persons acting in concert.
- D. This Section and Section 4.0 are adopted in accordance with Government Code section 87406.3(c).

4.0 POST-EMPLOYMENT RESTRICTIONS REGARDING AID, ADVICE OR COUNSEL

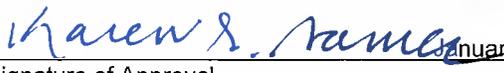
Employees classified as management, mid-management or confidential, shall not, for a period of one year after leaving that office or employment, for compensation, aid, advise, counsel, consult or assist any other person regarding an appearance or communication which the official or employee would be prohibited from making under Section 3.0.

5.0 CONFLICT OF INTEREST CODE

- A. The Political Reform Act requires state and local government agencies, which includes the Hospital Authority to adopt and promulgate conflict of interest codes. (Gov. Code, § 81000 et seq.) The Fair Political Practices Commission has adopted a regulation, which contains the terms of a standard conflict of interest code. (Cal. Code Regs., tit. 2, § 18730.) Incorporation by reference of the terms of the regulation along with the designation of employees and the formulation of disclosure categories set forth in the attached Appendix A constitute the adoption and promulgation of the conflict of interest code of the Hospital Authority. The requirements of this conflict of interest code are in addition to other requirements of the Political Reform Act, such as the general prohibition against conflicts of interest contained in Section 87100, and to other state or local laws pertaining to conflicts of interest.
- B. Designated Covered Individuals identified in the attached Appendix A shall file statements of economic interests with the Hospital Authority, who will make the statements available for public inspection and reproduction. (Gov. Code, § 81008.) Upon receipt of the statements of the Chairman and Members of the Board of Governors of the Hospital Authority, the Hospital Authority shall make and retain a copy and forward the original of these statements to the Board of Supervisors of the County of Kern. Statements for all other designated Covered Individuals shall be retained by the Hospital Authority.

C. Government Code Section 87306.5 requires local agencies, which includes the Hospital Authority to submit to their code reviewing body, which, in the case of the Hospital Authority is the Kern County Board of Supervisors, a biennial report identifying changes in its conflict of interest code, or a statement that their code is not in need of amendment. An amendment is required to: (1) include new positions (including consultants) that must be designated; (2) revise the titles of existing positions; (3) deleted titles of positions that have been abolished; (4) deleted positions that manage public investments from the list of designated positions; (5) revise disclosure categories; and (6) other. No amendment is required if the Hospital Authority's code accurately designates all positions that make or participate in the making of governmental decisions; the disclosure categories assigned to those positions accurately require the disclosure of all investments, business positions, interests in real property and sources of income that may foreseeably be affected materially by the decisions made by those designated positions; and the code includes all other provisions required by Government Code Section 87302. Such report shall be submitted no later than October 1 of each even-numbered year. (Gov. Code, § 87306.5(a).) When completed, the report must be mailed to the Clerk of the Board of Supervisors.

KEY WORDS: conflict of interest

OWNERSHIP (Committee/Department/Team)Administration	
ORIGINAL Jun 2020	
REVIEWED, NO REVISIONS Jun 2020	
REVISED Jan. 2025, Aug. 2024, Sept. 2022, Dec. 2019, Oct. 2018, Oct. 2016	
APPROVED BY COMMITTEE Kern County Board of Supervisors	
DISTRIBUTION Administrative Manual	
REQUIRES REVIEW Jan. 2027, Aug. 2026	
 Administrative Signature of Approval	 Signature of Approval
January 2025 Date	January 2025 Date

APPENDIX A

CONFLICT OF INTEREST CODE KERN COUNTY HOSPITAL AUTHORITY DESIGNATED COVERED INDIVIDUALS

Accountant (all)
Associate Director of Medical Education
Authority Board Coordinator
Chairman and Members of the Board of Governors (appointed by Board of Supervisors)
Chairman and Members of the Community Health Center Board of Directors
Chief Ambulatory and Outreach Officer
Chief Executive Officer
Chief Financial Officer
Chief Information Officer
Chief Medical Officer
Chief Nursing Officer
Chief Operating Officer
Chief Transformation Officer (new position)
Clinical Directors (all)
Consultants *
Contracts Compliance Specialist
Credit Card Holders (all)
Decision Support Consultant
Director, Care Coordination
Director, Communications
Director, Human Resources (formerly Director, Employee and Labor Relations)
Director, Outpatient Integration
Director, Patient Access
Director, Patient Accounting
Director, Performance Improvement
Director, Pharmacy Programs and Education
Director, Pharmacy Services
Director, Physician Recruitment
Director, Population Health
Director, Radiology and Imaging Studies (formerly Manager, Radiology)
Director, Security and Emergency Management
Director, Whole Person Care
EVS Director
Executive Director, Community Health Center
Fiscal Support Supervisor (assigned to General Accounting or Accounts Payable)
Fiscal Support Technician (assigned to Materials Management)
Front End Revenue Cycle Manager – EMR
Front End Revenue Cycle Manager – Inpatient and Emergency Department
Front End Revenue Cycle Manager – Patient Financial Counseling and Outpatient Clinics
Front End Revenue Cycle Manager – Pre-registration and Authorization
Hospital Counsel
Hospital Materials Director
Hospital Materials Manager
Hospital Payroll Manager
Managed Care Consultant (contract service)
Manager of Reimbursement
Materials Management Operations Manager
Medical Staff Department Chairs (all)

Medical Staff Division Chiefs (all)
Medical Staff Officers (elected officers only)
Patient Access Services Supervisor
Physician Enterprise Manager
Physician Enterprise Consultant
Revenue Cycle AR Administration Manager
Revenue Cycle AR Inventory Manager
Revenue Cycle Systems Support Manager
Revenue Integrity Manager
Risk Manager (Non-clinical) (formerly Workers' Compensation and Liability Manager)
Senior Paralegal
Senior Director, Facilities
Senior Director, Finance (formerly Director, Finance)
Senior Director, Health Information Services (formerly Health Information Services Director)
Special Projects Manager
Therapy Services Manager
Vice President & General Counsel
Vice President, Human Resources
Vice President, Strategic Development

*Consultants shall be included in the list of designated Covered Individuals and shall disclose pursuant to the broadest disclosure category in the code subject to the following limitation: The Chief Executive Officer may determine in writing that a particular consultant, although a "designated position," is hired to perform a range of duties that is limited in scope and thus is not required to comply fully with the disclosure requirements described in the Kern County Hospital Authority Conflict of Interest Code. Such written determination shall include a description of the consultant's duties and, based upon that description, a statement of the extent of disclosure requirements. The Chief Executive Officer's determination is a public record and shall be retained for public inspection in the same manner and location as the Conflict of Interest Code.

DISCLOSURE CATEGORY

Designated Covered Individuals shall report all sources of income, interests in real property, and investments and business positions in business entities.

ITEM #7
EXHIBIT A

	Department: Human Resources			
	Policy No. HRM-HR-201.00	Effective Date: August 2022	Review Date: August 2025	Page 1 of 6 (with addendum)
Title of Procedure: Hiring Policy				

When making hiring decisions, the underlying philosophy of the Kern County Hospital Authority (KCHA) is to promote from within and our first commitment is to our employees. The KCHA believes that hiring the most qualified individuals is key to our strategic success. To ensure we are providing growth opportunities to our existing employees and recruiting the best candidates, we will follow the hiring procedures outlined in this policy. Our recruiting practices will adhere to federal and state laws that govern employment matters.

External and Internal Recruitment:

Announcements of available positions will be posted internally for three business (3) days before posting externally.

Positions which the KCHA will endeavor to fill through internal recruitment only include, but are not limited to:

- In-house promotions resulting from the expansion of duties and responsibilities of the incumbent and/or restructuring of the position
- Positions filled by transfer or reassignment of an employee due to reorganization, demotion or other special circumstances deemed necessary by the Human Resources (HR) Department

Persons appointed by any of the above methods must meet the minimum qualifications of the position.

At the KCHA's discretion, some positions may be posted for an extended or continuous recruitment period. This may include hard-to-fill positions, positions with high turnover or specialty positions that benefit from on-going recruitment efforts.

Experience: Only relevant experience will be considered when determining if the candidate meets the stated qualifications. Unpaid qualifying experience (volunteer and/or work experience training) may be considered relevant experience dependent upon the nature of the duties performed, duration of the assignment and the level of responsibility. Further, experience gained through internships (paid or unpaid) and interim experience may also be considered qualifying experience.

Disqualification: In some instances, candidates, who meet the minimum qualifications for a position, may be disqualified from consideration. Examples of circumstances which may disqualify a candidate include (this list is not intended to be all inclusive):

- Making a false statement of material and/or omission of facts in his/her employment application
- Engaging in deception or fraud on their application or supporting materials in attaining or attempting to attain employment
- Prior, unsatisfactory employment with Kern Medical Center (KMC)
- Failure to submit the application correctly or within the prescribed time limits

Withdrawal of Conditional Offer: Notification will be provided to an individual whose conditional offer of employment is withdrawn for any reason.

Applications to Remain on File: Applications for employment on posted positions will remain on file in the HR Department for one (1) year. Unsolicited applications or resumes are not required to be accepted or kept on file.

Prohibition Against Discrimination: The KCHA will follow all applicable federal and state laws governing equal opportunity employment. Discrimination against any person because of race, color, creed, religion, age, sex, sexual orientation, gender identity or expression, citizenship, genetic information, pregnancy, marital status, physical disability, national origin or the employee's inclusion in any legally protected class as defined under the California Fair Employment and Housing Act (FEHA) and or all other state and federal laws is prohibited. Discrimination on the basis of age, sex or physical disability is prohibited except where age, sex, or physical requirements constitute a bona fide occupational requirement.

Examinations: The HR Department may use employment examinations to test a variety of job-related skills and validate the qualifications of a candidate and determine the ability of the candidate to perform the duties of the job. If an examination is required, candidates will be notified of the examination process, dates and times.

Recruitment Announcements: Recruitment announcements will contain the following information:

- The position title, salary range and whether regular or temporary
- Full or part-time status
- The time period during which applications must be received
- The scope of job duties, including the essential and non-essential functions of the job
- Any physical or medical requirements included and any special qualifications, education, training, or experience required of candidates

Qualified Candidates: An eligible pool, consisting of those candidates, who meet the qualifications of the position being filled, will be established. Placement in the eligible pool does not guarantee that an individual will be interviewed or chosen for a position.

The HR Department will determine the procedure used to establish each eligible pool. This may include a review of the candidate's experience, education, required licensure or certification, written examination(s), oral interview(s), reference checks and/or any other procedure deemed appropriate, as outlined in the recruitment announcement.

Selection: The HR Department will screen candidates placed in the eligible pool. The screening process may consist of an oral interview, practical examination/test process or both. Candidates will be screened to determine the best qualified candidates for advancement to the interview process. The HR Department and/or the Department Supervisor will interview screened candidates from the eligible pool and make hiring recommendations.

All internal candidates, who pass the screening process, will be granted an interview. Among eligible candidates for an internal recruitment, past performance, as well as seniority, will be among the factors considered in the selection process.

The HR Department will complete reference checks on the candidate(s) selected for the position. Candidates, who are unwilling to provide reference checks, will be disqualified and removed from the eligible pool. Candidates may also be disqualified and removed from the eligible pool, if a reference check is unacceptable.

Conditions of Employment: Prior to a final offer of employment, all candidates must agree to and meet the conditions of employment specified for a particular position, including but not limited to: pre-employment physical examination and health screening, which includes drug and alcohol screening; back ground investigation; employment skills test/exam; and/or primary source verification of a valid and clear license or certification. Failure of such pre-employment screenings, tests, examinations or other required screening may cause the KCHA to disqualify a candidate for employment.

Promotional Opportunities: In general, promotional opportunities will be competitive and will be open to qualified KCHA employees, who wish to apply. The KCHA will endeavor to provide promotional opportunities to internal candidates, whenever feasible. Past performance, as well as seniority, will be considered in the selection process among internal candidates. The KCHA may choose to appoint an existing, qualified employee to a promotional recruitment. The selected employee, however, may decline the appointment without suffering any adverse consequence. In these cases, appointment of KCHA employee will be restricted to employees, who have served at least six (6) months preceding the appointment in a regular or temporary KCHA position and who meet the minimum requirements for the position. Employees who have received a less than "standard" rating

on a performance evaluation within twelve (12) months of a promotional recruitment will not be eligible for the promotion.

Probation: Following each new appointment, the employee is expected to serve either a (6) six or (12) twelve-month probation period, depending on the position. Positions subject to a 12-month probation are shown on the attached Addendum A. Positions not included on this list are subject to a 6-month probation. A new employee in a probation status may be separated at any time without rights of the appeal or hearing. The HR Department has the sole discretion to continue the probationary period of an employee for up to an additional six (6) months in lieu of termination. Extensions of the probation period will be granted after careful consideration of all circumstances.

The probation period will start with the first day worked and will be extended by one (1) day for each day a probationer is absent on an approved leave of absence or must perform work in a light duty capacity.

Employees, who fail a promotional probationary period, will demote to their former position, if that position is available. If the employee's former position is no longer available, the KCHA will attempt to find another vacant, funded position for which the employee is qualified. If no other position is available, the employee will be subject to termination.

Transfers: When a vacant position is posted for recruitment, qualified employees in the same classification may apply for a transfer to the vacant position. Employees serving a probationary period are not eligible for transfer without express approval of the HR Department. Whether a request for transfer will be granted and/or who is selected for transfer (if more than one employee requests the transfer) is within the sole discretion of the HR Department and the Department Manager. The KCHA may assign employees to vacant positions based on business needs.

Loyalty Oath: All KCHA officers (elected or appointed) and employees have a duty of loyalty and a duty of care in fulfilling their public trust in government service (Article 20 of the California Constitution). A signed Loyalty Oath is required of all new KCHA officers and employees, and is required before any business can be conducted or any payroll warrant can be issued. The Loyalty Oath must be completed immediately upon appointment or employment of a new officer or employee. The signed Loyalty Oath will be revoked upon termination of service or employment.

OWNERSHIP (Committee/Department/Team)	
ORIGINAL	
REVIEWED, NO REVISIONS	
REVISED	
APPROVED BY COMMITTEE	
DISTRIBUTION.....	
REQUIRES REVIEW	
Administrative Signature of Approval	Date
Signature of Approval	Date

Addendum A

ADDENDUM A TO HRM-HR-201.00 HIRING POLICY - LIST OF JOBS WITH 12-MONTH PROBATION			
CURRENT CLASSIFICATION TITLE	Bargaining Unit		
ACCOUNTANT III	5		
ANESTHESIA TECHNICIAN I	3		
ANESTHESIA TECHNICIAN II	3		
CARDIOPULMONARY SERVICES CLINICAL COORDIN	2		
CARDIOVASCULAR-INTERVENTIONAL TECHNOLOGIST	3		
CLINICAL DOCUMENTATION IMPROVEMENT SPECIA	2		
CLINICAL HEALTHCARE INTERPRETER	3		
CLINICAL LABORATORY ASSISTANT I	3		
CLINICAL LABORATORY ASSISTANT II	3		
CLINICAL LABORATORY SCIENTIST I	2		
CLINICAL LABORATORY SCIENTIST II	2		
CLINICAL NURSE SPECIALIST	2		
CLINICAL PHARMACIST	2		
CLINICAL SUPERVISOR	1		
COMPUTED TOMOGRAPHY TECHNOLOGIST II	3		
CONTRACT ADMINISTRATOR	5		
ELECTRODIAGNOSTIC TECHNICIAN	3		
FISCAL SUPPORT SUPERVISOR	1		
HEALTH INFORMATION SERVICES CODER I	4		
HEALTH INFORMATION SERVICES CODER II	4		
HEALTH INFORMATION SERVICES CODER III	4		
HEALTH INFORMATION SERVICES SPECIALIST I	4		
HEALTH INFORMATION SERVICES SPECIALIST II	4		
HEALTH INFORMATION SERVICES SPECIALIST II	4		
HEALTH INFORMATION SERVICES SUPERVISOR	1		
HEALTHCARE APPLICATION ANALYST I	5		
HEALTHCARE APPLICATION ANALYST II	5		
HISTOLOGIC TECHNICIAN	3		
HOSPITAL BUSINESS OFFICE SUPERVISOR	1		
HOSPITAL PICTURE ARCHIVING & COMMUNICATIO	3		
HOSPITAL RESIDENCY COORDINATOR	3		
HOSPITAL STAFF NURSE - PRE-LICENSED	2		
HOSPITAL STAFF NURSE I	2		
HOSPITAL STAFF NURSE I-C1	2		
HOSPITAL STAFF NURSE II	2		

ADDENDUM A TO HRM-HR-201.00 HIRING POLICY - LIST OF JOBS WITH 12-MONTH PROBATION			
CURRENT CLASSIFICATION TITLE	Bargaining Unit		
HOSPITAL STAFF NURSE II-C1	2		
HOSPITAL STAFF NURSE II-C2	2		
INFECTION CONTROL COORDINATOR	2		
MEDICAL SOCIAL WORKER I	2		
MEDICAL SOCIAL WORKER II	2		
MEDICAL SUPPORT SUPERVISOR	1		
MRI TECHNOLOGIST	3		
NETWORK SYSTEMS ADMINISTRATOR	5		
NUCLEAR MEDICINE TECHNOLOGIST I/II	3		
NURSE MIDWIFE	2		
NURSE PRACTITIONER	2		
NURSING ATTENDANT	6		
OBSTETRICAL TECHNICIAN I	6		
OBSTETRICAL TECHNICIAN II	6		
ORTHOPEDIC TECHNICIAN III	3		
PATIENT ACCESS SERVICES SUPERVISOR	1		
PERINATAL HEALTH WORKER	3		
PHARMACIST	2		
PHARMACY TECHNICIAN I	3		
PHARMACY TECHNICIAN II	3		
PHARMACY TECHNICIAN III	3		
PHYSICAL THERAPIST	2		
PHYSICIAN'S ASSISTANT	2		
PRELICENSED CLINICAL LABORATORY SCIENTIST	2		
PROGRAMMER I/II	5		
RADIOLOGIC TECHNOLOGIST I	3		
RADIOLOGIC TECHNOLOGIST II	3		
RADIOLOGIC TECHNOLOGIST III	3		
RESPIRATORY THERAPIST I/II/III	3		
RESPIRATORY THERAPIST IV	3		
SENIOR INFORMATION SYSTEMS SPECIALIST	5		
SENIOR PARALEGAL	3		
SENIOR PHARMACIST	1		
STAFF DEVELOPMENT AND EDUCATION COORDINAT	2		
SUPERVISING CLINICAL LABORATORY ASSISTANT	1		

ADDENDUM A TO HRM-HR-201.00 HIRING POLICY - LIST OF JOBS WITH 12-MONTH PROBATION			
CURRENT CLASSIFICATION TITLE	Bargaining Unit		
SUPERVISING CLINICAL LABORATORY SCIENTIST	1		
SUPERVISING CLINICAL MICROBIOLOGIST	2		
SUPERVISING RADIOLOGIC TECHNOLOGIST	1		
SUPERVISOR, CORE LAB/CLIENT SERVICES	1		
SURGICAL ROBOTIC TECHNICIAN	3		
SURGICAL TECHNICIAN I	3		
SURGICAL TECHNICIAN II	3		
SYSTEMS ANALYST II	5		
TECHNOLOGY SERVICES SUPERVISOR	1		
THERAPY AIDE	3		
THERAPY SUPERVISOR	1		
TRAUMA NURSE COORDINATOR	2		
ULTRASOUND TECHNOLOGIST I	3		
ULTRASOUND TECHNOLOGIST II	3		
UTILIZATION REVIEW NURSE I	2		
UTILIZATION REVIEW NURSE II	2		
VOCATIONAL NURSE I	3		
VOCATIONAL NURSE II	3		
WOUND AND OSTOMY NURSE	2		

	Department: Human Resources			
	Policy No. HRM-HR-401.00	Effective Date: August 2017	Review Date: August 2020	Page 1 of 8 (with addendums)
Title: Disciplinary Policy				

I. PURPOSE:

To define and outline the Kern Medical Center’s Disciplinary Policy

II. DEFINITIONS: N/A

III. POLICY STATEMENT:

It is the policy of Kern Medical Center that an employee may only be disciplined for job related performance and/or job related conduct, including off duty conduct, which has a nexus to the employee’s ability to perform his or her job at Kern Medical Center or the Hospital Authority. With the exception of layoffs for organizational necessity, discipline, up to and including termination, shall be for just cause. For purposes of this policy, “for just cause” shall have the same meaning as commonly used among labor arbitrators and developed throughout labor arbitration. This policy applies only to represented employees. Confidential, management, mid-management, and non-represented employees are excluded from this policy.

IV. EQUIPMENT: N/A

V. PROCEDURE:

A. Progressive Discipline

1. In an effort to modify substandard performance, a constructive and progressive discipline process will generally be used unless the performance or conduct is of such a nature to warrant serious disciplinary action without first going through progressive disciplinary steps. Progressive disciplinary actions may affect an employee’s future advancement or employment.
2. Progressive discipline process means the following steps are taken in a timely manner. (Note: Some or all of the steps may be skipped or the order changed, depending on the severity of the conduct and overall circumstances.)
 - a) Performance coaching
 - b) Written reprimand
 - c) Suspension without pay
 - d) Reduction in pay
 - e) Demotion
 - f) Termination of employment
3. Each situation is evaluated on the basis of its own factual circumstances to ensure the proposed disciplinary action is reasonable under the circumstances. Factors considered include but not limited to:
 - a) The employee’s past work and disciplinary history, including the nature of other offenses

- b) The character of the position to which the employee is assigned (the more responsible the position, the more exacting is the standard of performance or conduct on and off the job)
 - c) The nature and consequences of the offense
 - 4. A partial list of reasons for discipline can be found in Exhibit A, attached.
- B. Performance Coaching
 - 1. Performance coaching is an attempt to handle problems before they seriously hamper an employee's effectiveness. A verbal counseling is generally the first step taken in situations of a minor nature involving the violation (s) of a rule, regulation, standard of conduct, safety practice or authorized instruction. The employee is interviewed and informed of the specific infraction or breach of conduct and is permitted to explain his or her conduct or action of commission or omission. Verbal counselings are generally made at or shortly after the time of the offense or immediately upon the supervisor's knowledge that the offense has occurred.
- C. Level 1 Disciplinary Actions – Written Reprimands
 - 1. Employees receiving a Level 1 written reprimand will be provided with the following instructions:
 - a) The reason for the reprimand, the date it will be effective and the specific grounds and particular facts upon which the disciplinary action is being taken
 - b) The non-confidential materials upon which the action is based (which may include confidential material with redacted information)
 - c) A statement informing the employee of his or her right to appeal in the manner set forth in this policy.
- D. Level 2 Disciplinary Actions – Unpaid Suspensions, Reductions in Pay, Demotions and Terminations
 - 1. See Exhibit B, outlining the process for Level 2 disciplinary actions.
- E. Appeal Process
 - 1. Neither probationary nor temporary employees shall have the right to appeal any disciplinary action.
 - 2. Level 1 Disciplinary Actions – Appeal Process
 - a) Employees receiving a Level 1 written reprimand may provide a written rebuttal within 30 days from the date of the reprimand. This rebuttal will be placed in the employee's personnel file along with the written reprimand.
 - b) Level 2 Disciplinary Actions – Appeal Process
 - 1) See Exhibit B, outlining the process for Level 2 disciplinary actions.
 - 2) Employees who do not appeal a Level 2 disciplinary action within the prescribed timelines outlined herein waive all rights to an appeal. The proposed action (s) will be upheld and the employee will be notified through an Order Letter outlining the following:
 - (a) The ordered action and date to be imposed
 - (b) The specific rule violations and the acts or omissions that warrant the ordered action
 - (c) Notification of waiver of appeal rights

F. Shared Cost of Arbitration

1. All costs associated with arbitration will be shared equally between the Hospital Authority and the employee organization.

G. Timing of Terminations

1. Employees for whom termination has been proposed may be terminated upon Step 1 affirmation of the termination decision. If the employee appeals the Step 1 decision and the hearing office disagrees with the decision and the CEO confirms a reversal of the decision, the employee will be reinstated with back pay from the date of the termination.

H. Administrative Leave with Pay in Conjunction with Discipline

1. The Human Resources Department may place an employee on administrative leave with pay if it is determined that the employee is engaged in conduct posing a danger to Hospital Authority property, the public or other employees or if the continued presence of the employee at the work site will hinder an investigation of the employee's alleged misconduct or will severely disrupt the business of the Hospital Authority or employee's assigned department.
2. During the paid administrative leave, the employee shall be ordered to remain at home and available by telephone during the normally assigned work day. The Employee Relations Representative (ERR) may, if necessary, adjust the employee's work schedule to provide availability during normal business hours, Monday through Friday, 8:00am-5:00pm. No overtime or other specialty pay (excluding longevity pay) will be paid to an employee while on Paid Administration Leave.
3. Employees who violate the provisions of paid administrative leave or who do not adhere to prescribed directives during the disciplinary process forfeit their eligibility to remain on paid status.

VI. SPECIAL CONSIDERATIONS: N/A

VII. EDUCATION:

- A. Kern Medical Center Staff: Will receive education pertaining to this policy at time of orientation and as changes occur in legislation or regulatory requirements.

VIII. DOCUMENTATION: N/A

IX. ADDENDUMS:

- A. Exhibit A
- B. Exhibit B – Level 2 Disciplinary Action Notice and Appeal Process

X. REFERENCES: N/A

XI. KEY WORDS: Disciplinary Policy, Paid Administrative Leave, Appeal

OWNERSHIP (Committee/Department/Team) Human Resources Department	
ORIGINAL August 2017	
REVIEWED, NO REVISIONS	
REVISED	
APPROVED BY BOARD OF GOVERNORS COMMITTEE August 2017	
DISTRIBUTION Human Resources Department Manual	
REQUIRES REVIEW August 2020	
Administrative Signature of Approval	Date
Signature of Approval	Date

Exhibit A

Reasons for Discipline. Each of the following may constitute a reason for disciplinary action; but such action shall not be restricted to the particular reasons listed below, the disciplinary action may be based on other reasons,

1. Fraud, dishonesty or omission in securing the appointment, including misrepresentation in an employment application or other documents submitted before employment, or oral misrepresentations.
2. Incompetence or general unfitness for the assigned position.
3. Inefficiency.
4. Neglect of duty.
5. Unsatisfactory job performance.
6. Reporting to work or working while impaired by alcohol, medically prescribed medications which could foreseeably interfere with the safe and effective performance of duties or the operation of the hospital, or illegal drugs.
7. Willful disobedience.
8. Insubordination.
9. Inexcusable absence without leave.
10. Discourteous treatment of the general public or fellow employees.
11. Willful misuse, damage or waste of public property, supplies or equipment.
12. Disorderly conduct.
13. Dishonesty.
14. Conviction of a felony or any offense involving moral turpitude.
15. Failure to maintain confidentiality in hospital or patient records.
16. Any failure of good behavior or acts either during or outside of assigned working hours which are incompatible with or obstructive, harmful, detrimental, or destructive to the public service.
17. Engaging in business or accepting outside employment while an employee of the Authority which is incompatible with Authority employment or gives rise to a conflict of interest.
18. Failure to maintain the standards, licenses, qualifications, or training required for a specific position.
19. Violation of Authority policies and procedures.
20. In possession, in use, under the influence of, or trafficking of a controlled substance or narcotics, except when prescribed for the employee by his/her doctor, during the employee's working hours or at his/her work site.
21. Falsifying or making a material omission on Authority document (e.g., time card, Authority/hospital record).
22. Possessing or bringing firearms, weapons, or hazardous or dangerous devices onto Authority property.
23. Theft of Authority property or unauthorized possession of property that belongs to the Authority or another employee, patient, or visitor to the hospital.
24. Misconduct.
25. Violations of regulatory or compliance provisions that the Hospital Authority is required to meet.

It is impossible to provide an exhaustive list that identifies every type of conduct that may result in disciplinary action. However in order to offer employees some guidance, the aforementioned list provides examples of conduct that may result in disciplinary action up to and including termination.

Exhibit B
Level 2 Disciplinary Action
Notice and Appeal Process

In the event the Authority proposes to impose a Level 2 disciplinary action as described in this policy, the process set forth below will be followed.

Employees receiving a Level 2 disciplinary notice will be provided with the following information:

- a. The type and reason for the proposed disciplinary action, the date it will be effective, and the specific grounds and particular facts upon which the disciplinary action is proposed to be taken;
- b. The non-confidential materials upon which the proposed action is based; and
- c. A statement informing the employee of his or her right to appeal in the manner set forth in this policy.

STEP 1 APPEAL PROCESS: (UNPAID SUSPENSIONS, REDUCTIONS IN PAY, DEMOTIONS AND TERMINATIONS)

- 1) Employees shall have 10 calendar days from the notification delivery date to inform the Employee Relations Representative (ERR) in writing of their desire to respond to the allegations resulting in the proposed disciplinary action. If an employee does not request a meeting within the required timelines, the right to meet shall be considered waived unless an extension of time is mutually agreed upon by the employee and the Hospital Authority due to extenuating circumstances. The proposed disciplinary action will be considered conclusive and shall take effect as described in the disciplinary notice.
- 2) Upon timely receipt of an employee's request, a meeting will be scheduled no more than 30 calendar days from the date the request is received. The employee shall be heard by a hospital administrator, starting with the first name from the hospital administrator list, and continuing down the list in order until the list is exhausted, at which time the list will resume using the first name. The list and its use shall be maintained by the Human Resources department. The list, which includes the following positions, shall be in alphabetical order and shall exclude the Vice President of Human Resources:
 1. Associate Administrator for Operations
 2. Chief Financial Officer
 3. Chief Information Officer
 4. Chief Medical Officer
 5. Chief Nursing Officer
 6. Chief Operations Officer
 7. Chief Strategy Officer
 8. Vice President of Administrative Services
 9. Vice President of Ambulatory Care

All administrators appearing on the list shall receive annual training provided by the Hospital Authority on the principles of just cause and progressive discipline.

If the employee's assigned administrator is the administrator whose position is next in the rotation to hear the appeal, the next administrator in the rotation shall be chosen. Further, if the chosen administrator is unable to meet the time-frame as provided by this policy, the next administrator in the rotation shall be chosen.

- 3) The ERR will coordinate a meeting with the Administrator, the employee, and if applicable, his or her representative. The purpose of this meeting is to allow the employee to respond to the proposed disciplinary action. Within ten (10) days after that meeting, or such longer period as the chosen administrator may determine is required to review the matter, the chosen administrator shall provide the employee with a written decision.
- 4) If the proposed disciplinary action is confirmed, the action will take effect immediately or as soon as possible, as determined by the Hospital Authority. Employees for whom termination has been proposed may be terminated upon Step 1 affirmation of the termination decision. If the employee chooses to appeal the Step 1 decision and that decision is overturned by an arbitrator or other qualified person and confirmed by the CEO (Step 2), the employee will be reinstated with back pay from the date of termination.

STEP 2 APPEAL PROCESS:

- 5) If the proposed disciplinary action is a Level 2 discipline and the employee is not satisfied with the Step 1 decision, the employee may appeal within ten (10) calendar days of the Step 1 decision. The appeal shall consist of a statement indicating that the employee is appealing and an explanation of why they disagree with the decision.
- 6) Within ten (10) calendar days of the date that the Hospital Authority receives the notice of appeal, the Hospital Authority and the employee, or if the employee is represented, the employee's representative, shall attempt to mutually agree to an experienced labor arbitrator or other qualified person to serve as the impartial hearing officer for a non-binding arbitration hearing. The parties may extend this date by mutual consent.
- 7) If the parties are unable to mutually agree upon and select a hearing officer, the ERR shall request a list of five experienced labor arbitrators from the State Mediation and Conciliation Service (SMCS). Selection of the hearing officer shall be determined through an alternate strike method, with the employee or the employee's representative making the first strike. The strike method shall be concluded within 5 days of receipt of the list by the recognized employee organization. The date(s) of the hearing shall be chosen within 10 days after the selection of the arbitrator. The hearing officer's report shall be limited to the issue of whether "just cause" existed for the proposed disciplinary action. The hearing officer shall have no authority to add to, detract from, alter, amend, or modify any of the Hospital Authority's rules, policies, or procedures.

The hearing officer's proposed decision will include findings of facts and conclusions regarding the charges and shall be advisory to the CEO, who shall issue the final decision. The CEO can accept, reject or modify the hearing officer's proposed decision, and issue his/her own findings of fact and conclusions. The CEO's written decision must be served on the employee and include information regarding the right to file a petition for writ of mandate in superior court.