



# St. Luke's





**Andy Bagnall**  
*President and CEO*

# St. Luke's Mission and Core Values

## Mission

We are dedicated to providing exceptional care to every patient, every time.

## Core Values

### *Human Dignity:*

Accept all persons as being created in the image of God.

### *Compassion:*

Respond with caring to the needs of others as if they were members of our family.

### *Justice*

Respect each person's rights to equal access to quality care.

### *Excellence*

Deliver high quality, safe care and continually improve.

### *Stewardship*

Use our talents and resources wisely, with honesty and integrity.

# St. Luke's – Caring for our community for more than 150 years



- *Named in honor of St. Luke, the patron saint of physicians*
- *Our community's only independent, nonprofit network of healthcare services*

- Founded in 1866 by leaders of the Episcopal Church to respond to the healthcare needs of people in the growing City of St. Louis; joined in ministry by the Presbyterians in 1948
- Admitted our first patient on February 28, 1866 (recognized annually as St. Luke's Founders Day)
- Operated a School of Nursing from 1889 to 1988.
- Relocated to larger facilities to accommodate rapid growth in our early years, eventually building a large, "modern" hospital in the west area of the city in 1904
- With patient population moving to western suburbs of St. Louis County in the 1970's, St. Luke's Hospital in Chesterfield opened in 1975.
- Acquired Des Peres Hospital from Tenet Corporation in May 2018, now St. Luke's Des Peres Hospital

# Scope of Operations

Net Revenue

**\$752M**

Patients Served  
Annually

**1.35M**

Employees

**4,700+**

Medical Staff

**900+**

Locations of Care

**30+**

Community Benefit &  
Charity Care

**\$20M+**

# St. Luke's Network of Care



**St. Luke's Hospital**



**St. Luke's Des Peres Hospital**



**Surrey Place**



**St. Luke's Rehabilitation**



**St. Luke's Urgent Care Centers (8)**

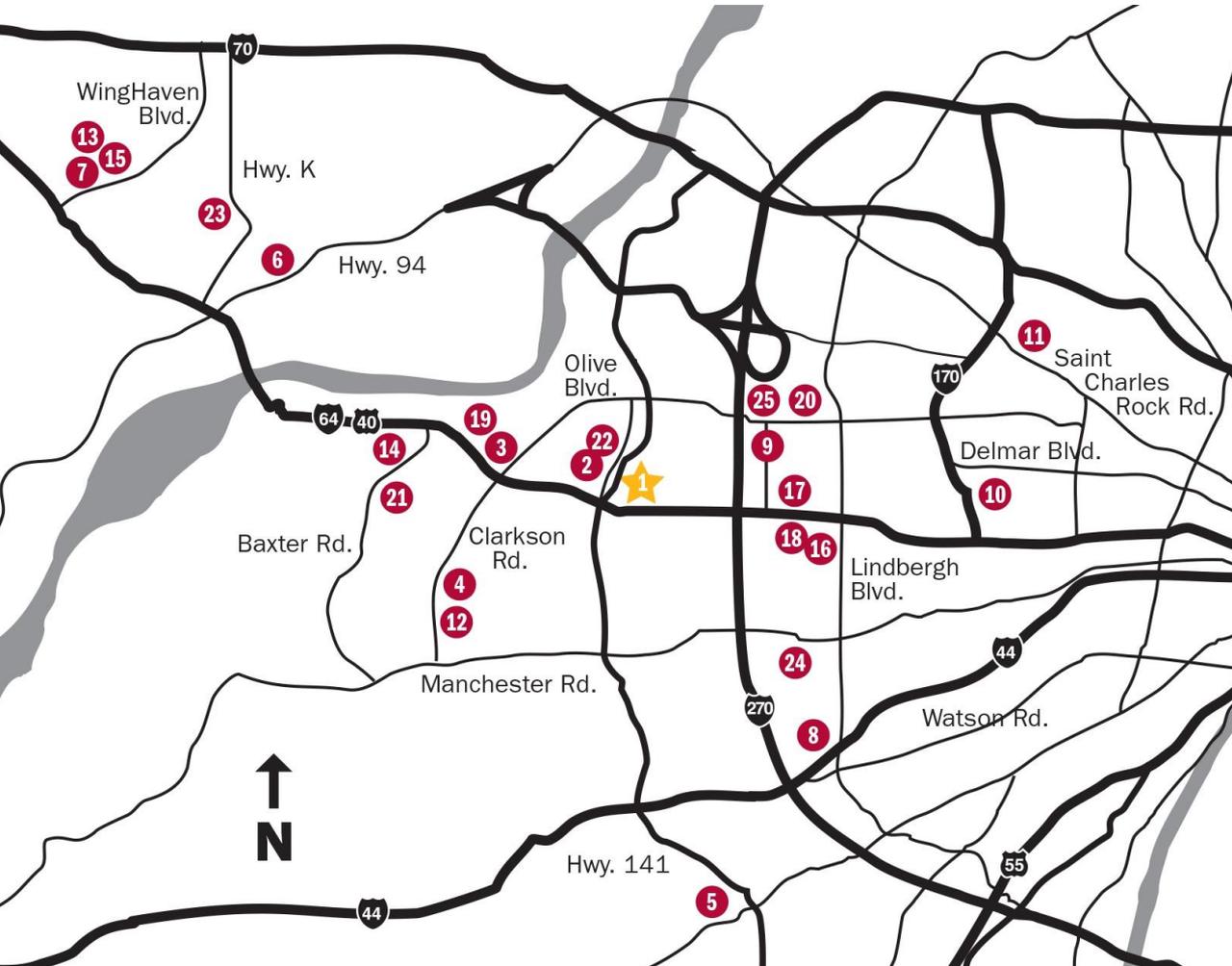


**Desloge Outpatient Center**



**St. Luke's RAYUS Radiology (8)**

# Care Throughout the Community



**2**  
Hospitals

St. Luke's  
Rehabilitation  
Hospital

Desloge  
Outpatient  
Center Campus

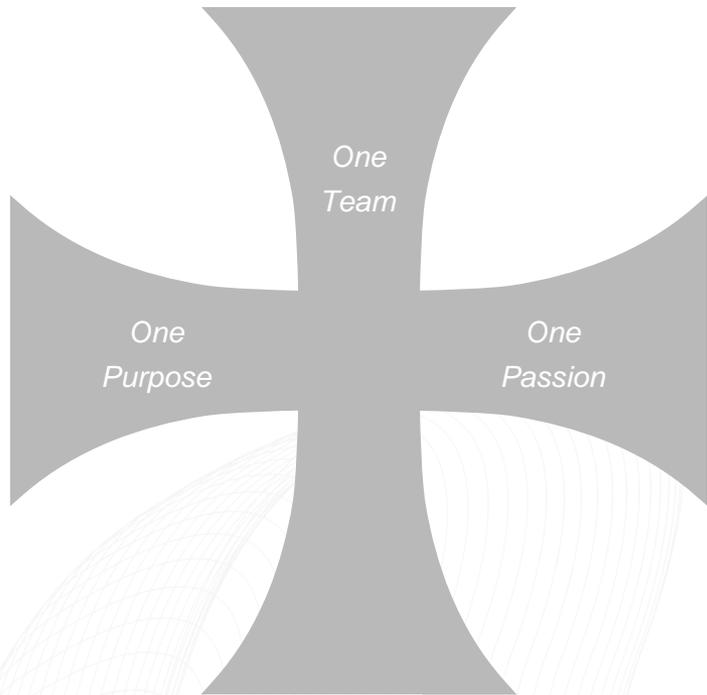
Surrey Place  
(skilled  
nursing)

**8**  
Urgent Care  
Centers

**13**  
Imaging  
Centers

**2**  
Ambulatory  
Surgery Centers

**190+**  
Employed Physicians -  
SLMG



**Pillars of Success**

Winning Culture	Clinical Brilliance	Targeted Growth	Operational Excellence
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**Measurement of Success:**

<p>Fully Integrated Health System</p> <p><b>1</b></p>	<p>Top Decile Patient Experience</p> 	<p>Centers of Excellence Nationally Recognized</p> <p><b>4</b></p>
<p>Net Revenue of</p> <p><b>\$1B+</b></p> <p>3% Operating Margin</p>	<p>5 Star CMS Rating</p> 	<p>Be a Best Employer</p> <p><b>Top 100 Recognition</b></p>

# Generous Support from our Community

## Active Volunteer Program and Auxiliary

- ~200 volunteers; 37,000 hours of service annually
- Auxiliary operates hospital gift shop; proceeds donated to support our mission



## Robust Philanthropic Support

- Friends of St. Luke's and St. Luke's Society
- ~1,100 contributions; \$4.6 Million average/year



# Executive Leadership Team



**Andy Bagnall**  
*President & CEO*



**Ryan Miller**  
*COO*



**Martha Fleischmann**  
*CFO*



**Nate Bigler**  
*CPO*



**Scott Johnson**  
*CSO*



**Scott Holtswarth**  
*CIO*



**Diane Ray**  
*CNO*



**Dr. Sam Flanders**  
*Executive VP Quality*



**Tammy Lett**  
*Sr. VP Physician Network*



**Maged Haikal, MD**  
*Chief Medical Officer,  
Health System*



**Darren Haskell, MD**  
*Chief Medical Office,  
St. Luke's Physician Network*

# MORNING AGENDA

- **Welcome** –  
Andy Bagnall,  
President & CEO
- **Benefits**  
Benefit Team
- **Pay Information and  
Staying Connected**
- **Human Resources  
Information**
- **Environment of Care**  
Safety Manager
- **Infection Prevention and  
Control**  
Infection Prevention Team
- **Risk Management / Corporate  
Compliance / HIPAA** –  
Risk Management Team
- **Lunch**

# HR Contacts

# Orientation Paperwork

**St. Luke's Chesterfield and Des Peres Hospital**

**Human Resources**

**Contact Information**

Chief People Officer	<b>Location: Chesterfield Campus</b>	Nathan Bigler	314-205-6400	
Sr. Executive Assistant	<b>Location: Chesterfield Campus</b>	Diane Cropp	314-205-6628	Tuition Reimbursement, Loan Forgiveness, HR leadership Team calendar management, perks and discounts
Director, Human Resources	<b>Location: Chesterfield/ Des Peres Campus</b>	Kathaleen Clutts	Chesterfield: 314-205-6724 Des Peres: 314-966-9123	Provides oversight for organizational issues, business partners, workers compensation, training/development, and employee benefits
Director, Talent Acquisition	<b>Location: Chesterfield Campus</b>	Mindy Hart	314-205-6775	Provides oversight to Compensation and Talent Acquisition team
Leadership Coach	<b>Location: Chesterfield Campus</b>	Beth Hillestad	314-205-6763	Conducts New Hire Orientation, leadership training and development, leadership coaching, new leader support
Lead Business Partner	<b>Location: Chesterfield Campus</b>	Tashera Dennis	636-685-7858	Employee Relations at the Chesterfield campus
Business Partner	<b>Location: Chesterfield Campus</b>	Mary Smith	314-205-6629	Employee Relations Chesterfield campus
Business Partner	<b>Location: Chesterfield Campus</b>	Elaine Tomlin	314-205-6017	Employee Relations Chesterfield
Business Partner	<b>Location: Des Peres Campus</b>	Stephanie Vilmer	314-966-9623	Employee Relations Physician Practice
Business Partner	<b>Location: Des Peres Campus</b>	Lisa Shin	314-966-9123	Employee Relations Surrey Place and Des Peres
Workers Compensation Specialist	<b>Location: Des Peres Campus</b>	Shelly Smiddy	636-685-7854	Workers Compensation for <i>St. Luke's Network</i>
HR Generalist	<b>Location: Chesterfield Campus</b>	Oceilee Mitchell-Ajagunna	314-205-6680	Leave management and long term disability for the <i>Chesterfield Campus</i>

**St. Luke's Chesterfield and Des Peres Hospital**

**Human Resources**

**Contact Information**

Lead Benefit Analyst	<b>Location: Chesterfield Campus</b>	Tierra Morris	314-205-6386	Contact for benefit appeals, claim disputes and/or utilization for both <i>Chesterfield and Des Peres Campuses</i>
Benefit Analyst	<b>Location: Chesterfield Campus</b>	Yvette Jackson	Phone: 314-205-6016 Fax: 314-205-6016	Contact for benefit appeals, claim disputes and/or utilization for both <i>Chesterfield and Des Peres Campuses</i>
Benefit Representative	<b>Location: Chesterfield Campus</b>	Kim Griffith	Phone: 314-205-6016 Fax: 314-205-6817	Contact for benefit appeals, claim disputes and/or utilization for both <i>Chesterfield and Des Peres Campuses</i>
HRIS Manager	<b>Location: Chesterfield Campus</b>	Chris Beel	314-807-0169	Quality assessment design and implementation, HR reporting, any HR database questions, coordination with payroll for both the <i>Chesterfield and Des Peres Campuses</i>
HRIS Analyst	<b>Location: Chesterfield Campus</b>	Courtney Cartwright	314-576-2302	Quality assessment design and implementation, HR reporting, any HR database questions, coordination with payroll for both the <i>Chesterfield and Des Peres Campuses</i>
Programmer Analyst	<b>Location: Chesterfield Campus</b>	Chris Martin	314-807-0169	Technical resource for Lawson Employee Self Serve, technical resource for LBI, various HRIS processes and projects
Programmer Analyst	<b>Location: Chesterfield Campus</b>	Diane Ruffin	636-685-7855	Technical resource for Lawson Employee Self Serve, technical resource for LBI, various HRIS processes and projects
Associate HR Analyst	<b>Location: Chesterfield Campus</b>	James Benages	314-576-2304	HRIS Related projects/duties/reports

**St. Luke's Chesterfield and Des Peres Hospital**

**Human Resources**

**Contact Information**

HR Tech	<b>Location: Chesterfield Campus</b>	Leisa Ujka	314-576-2303	HRIS inputting for merit increases, including lump sums, ETO sell back, for both the <i>Chesterfield and Des Peres Campuses</i>
Compensation Analyst	<b>Location: Chesterfield Campus</b>	Erik Bates	314-205-6725	Assists with the overall administration of the compensation programs for both <i>Chesterfield and Des Peres Campuses</i>
Talent Acquisition Specialist	<b>Location: Chesterfield Campus</b>	Becky Zucol	314-205-6684	Provides talent acquisition support for professional, clinical, technical and support positions
Lead Talent Acquisition Specialist	Location: Chesterfield Campus	Candie Ingberg	314-205-6140	Provides talent acquisition support for professional, clinical, technical and support positions
Talent Acquisition Specialist	Location: Chesterfield Campus	Sydney Brockmeyer	636-685-7786	Provides talent acquisition support for professional, clinical, technical and support positions
Talent Acquisition Specialist	Location: Remote	Tracy McCullen	636-685-7868	Provides talent acquisition support for professional, clinical, technical and support positions
Talent Acquisition Specialist	Location: Chesterfield Campus	James Floretta	314-205-6815	Provides talent acquisition support for professional, clinical, technical and support positions
Talent Acquisition Specialist	Location: Chesterfield Campus	Hailee Pirkle	314-205-6939	Provides talent acquisition support for professional, clinical, technical and support positions
Talent Acquisition Associate	Location: Chesterfield Campus	Cynthia Morgan	314-205-6729	Provides support to the talent acquisition specialists. Facilitates new hire on boarding
Talent Acquisition Associate	Location: Chesterfield Campus	Jennifer Kilkenny	314-205-6172	Provides support to the talent acquisition specialists. Facilitates new hire on boarding
HR Assistant	Location: Des Peres Campus	Beth Stewart	314-966-9122	Provides support to all visitors to human resources on the Des Peres campus

**St. Luke's Chesterfield and Des Peres Hospital**

**Human Resources**

**Contact Information**

HR Assistant	Location: Chesterfield Campus	<i>Position Currently Vacant</i>	314-205-6728	Provides support to all visitors to human resources on the Chesterfield campus
Disability Inclusion Coordinator	Location: Chesterfield Campus	<i>Position Currently Vacant</i>	636-685-7785	Recruits and retains individuals with developmental disabilities for both the <i>Chesterfield and Des Peres Campuses</i>

## St. Luke's New Hire Orientation Checklist

**St. Luke's General Information:** \_\_\_\_\_ **employee initials**

- Information regarding pay – How and When
- Navigating St. Luke's Intranet
- Navigating Lawson Employee Self-Service Program/Employee Email
- I.D. Badges – Where worn? How to replace if lost or if it stops working
- Career Opportunities at St. Luke's

**Environment of Care:** \_\_\_\_\_ **employee initials**

- Key principles of the environment of care
- Emergency Codes
- Where to Park and parking violations

**Infection Prevention:** \_\_\_\_\_ **employee initials**

- Hand Hygiene
- Standard Precautions
- OSHA Requirements/Bloodborne Pathogens

**Risk Management:** \_\_\_\_\_ **employee initials**

- Reporting of Incidents
- Corporate Compliance and Code of Conduct

**Policies and Procedures:** \_\_\_\_\_ **employee initials**

- Preventing Harassment
- Earned Time Off
- Hours and Days Off Work
- Tobacco Free Campus
- Workplace Violence
- Time and Attendance
- Corrective Action
- Grievances
- Drug Free Workplace
- Performance Review
- Leaves of Absence
- Employee Assistance Program
- Passport To Wellness
- Diversity and Inclusion

**FACES (Friendly, Available, Caring, Efficient and Safe):** \_\_\_\_\_ **employee initials**

- My Commitment to Live the FACES Culture of Service During my Employment

**Benefits:** \_\_\_\_\_ **employee initials**

- 401K/Bank of America
- Medical, Dental, Vision, LTD, Flex Spending

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Employee printed name

Employee #

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Employee signature

Date

I have been informed of and given the opportunity to ask questions regarding the above information.

# St. Luke's Hospital New Hire Orientation Session Evaluation Day 1

*Thank you for completing this evaluation! Your feedback is helpful. Please turn this in to your facilitator by the end of the day.*

Are you going to be working in a clinical or non-clinical position? ..... *Clinical*  *Non-clinical*

During the course of your career, how many orientation programs have you participated in? ..... 1  2  3  4  5+

***Please indicate the degree to which you strongly agree (10) or strongly disagree (1) with each of the following statements:***

	<b><i>Strongly Disagree</i></b>					<b><i>Strongly Agree</i></b>				
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>
Content discussed in the morning session will be helpful for me back on the job .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Content discussed in the afternoon session will be helpful for me on the job .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Handouts for the morning session were well-done and supported the content .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Handouts for the afternoon session were well-done and supported the content .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall I was satisfied with the morning session .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall I was satisfied with the afternoon session .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

This **morning's** program would be even better if . . .

This **afternoon's** program would be even better if . . .

Other comments and suggestions to make your entire orientation experience worthwhile:

# Pay and Timekeeping



Pay dates are bi-weekly on Thursdays  
The work week is Sun-Sat



Clock-in times – check with your  
supervisor



Timeclock will beep and show your  
name/ID

# UKG Dimensions Advanced Timekeeping

- Employees and managers have direct access to time and attendance information in real time
  - Ability to clock in and out from centralized clock locations, mobile devices, or a desktop application
  - Team members will be asked to review and sign off on their time cards
  - Team members can review their available ETO balance, request time off in any amount that is less than or equal to their available ETO balance

# UKG Dimensions Advanced Timekeeping - Continued

- UKG is currently being rolled out in a phased approach. As departments convert to self-scheduling, team members will be able to submit self-schedule requests and swap shifts.
- Managers will have the ability to create and manage schedules on-line in real time.

# MEAL PERIODS

- Shift 5+ hours = 30 min meal auto-deduction
  - This means you do not need to clock in and out for your meal period.
- If the 30 min meal period is interrupted for work and you are unable to take an uninterrupted 30 min break:
  - you must notify your manager and
  - adjust your time to be paid for the 30 min period “no lunch”

## New Employee Log In Information

- **Username:**
  - Provided by the department supervisor or manager
  - Typically, the first four letters of last name, the first letter of first name, and the first letter of middle name
  - Example Beth Hillestad – username: hillbe
- **Password:**
  - welcome# and the last FIVE digits of social security number
  - Example: welcome#12345

# STAYING CONNECTED

- Pay
- Benefits enrollment
- Tax forms
- Other documents

Lawson



- Announcements
- Official HR / Benefits communication
- Surveys

Email



- News
- Events
- Resources
- Access to Lawson and email

Intranet



- Get your username and password from your leader – same for Lawson, email and intranet
- All departments have computers designated for team member use – check your email often!

# St. Luke's intranet

You will find a link to the intranet on any St. Luke's computer

The screenshot displays the St. Luke's intranet interface. At the top, a dark blue navigation bar contains icons for Home, Quick Links, Forms, Clinical, Education, and Departments, along with a Help icon. Below this is the St. Luke's Hospital logo and a search bar labeled "Search People" with radio buttons for "Intranet", "People", and "Google". To the right of the search bar are fields for "User ID:" and "Password:" with a "Login" button and a weather widget showing "48°F". A secondary navigation bar lists various services: Citrix, News, Classes & Events, CPOE, Cerner Rev Cycle & Amb Project, Project ONE, Job Openings, Registration Resources, and ServiceNow.

The main content area features a large banner for the "Healthy Weigh Class & Medicare Diabetes Prevention Program" with a "Nutrition Management Programs" sub-section. Below the banner are several small promotional tiles for "Nutrition Month", "Neurodiagnostic Week", "Around St. Luke's", and "Themed Basket Raffle". A "SAVE THE DATE" tile for May 9, 2023, at 5 PM is also visible.

On the right side, there is a "Cybersecurity Threat Level" widget showing a "Level 3 High" status, a "GREAT JOB!" badge with the text "Recognize a St. Luke's colleague for a job well done!", and a "Quick Links" widget with tabs for "SLAM", "HR", and "Materials & Guides". The "Quick Links" list includes: Ascom Paging, CaterTrax-Des Peres, Cerner RevCycle TRNA, Citrix, Dashboards, Des Peres - Nurse Call, Dr. Flanders' Patient Safety Blog, HSS eReq Horizon Supply Source, Huron (My Rounding), ISMP, Litt Drug Eruption & Reaction Data, Mammography Online, InQuicker, MCN Policy Manager, and Micromedex Solutions.

A vertical blue bar on the left side of the page is labeled "Application Downtimes". A "Feedback" button is located in the bottom right corner of the page.

# Accessing Lawson is a 2-step process:

- Logon to the intranet by entering your username and password in the upper right corner on the St. Luke's intranet homepage.

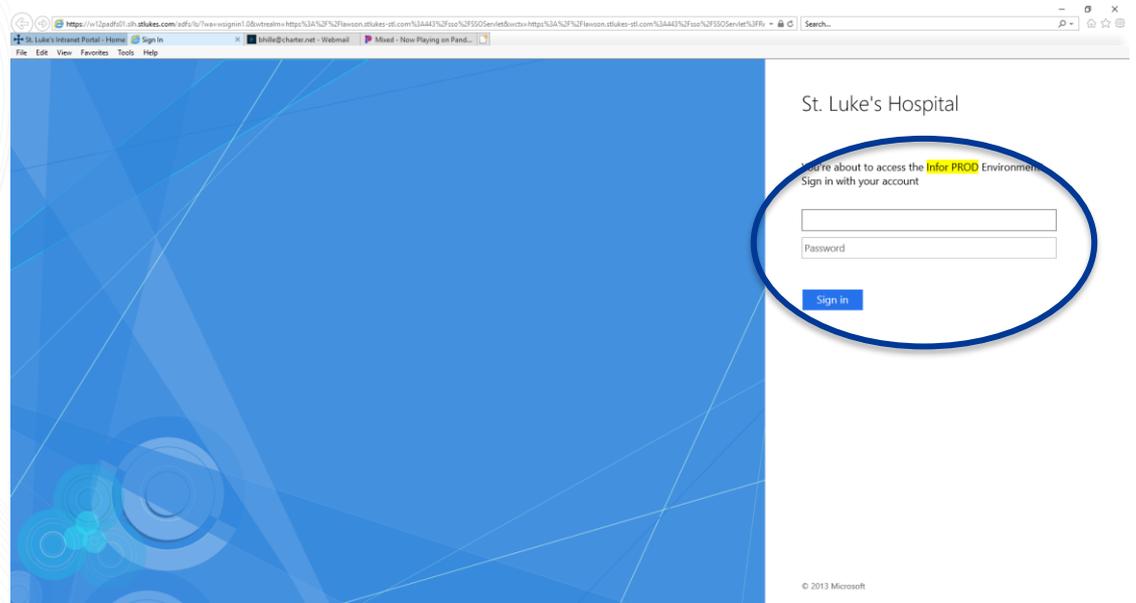
The screenshot displays the St. Luke's Hospital intranet homepage. At the top, a blue navigation bar contains links for Home, Quick Links, Forms, Clinical, Education, and Departments, along with a Help icon. Below this is the St. Luke's Hospital logo and a search bar labeled "Search People" with radio buttons for "Intranet", "People", and "Google". To the right of the search bar is a login form with fields for "User ID" and "Password", and a "Login" button. A blue circle highlights the login form. Below the navigation bar is a secondary blue bar with links for Citrix, News, Classes & Events, CPOE, Center Rev Cycle & Amb Project, Project ONE, Job Openings, Registration Resources, and Service Management. The main content area features a large banner for the "Healthy Weigh Class & Medicare Diabetes Prevention Program" with a "Nutrition Management Programs" link. To the right, there is a "Cybersecurity Threat Level" indicator showing Level 3 (High) and a "GREAT JOB!" message. Below these are "Quick Links" for SLAM, HR, and Materials & Guides, and a "Feedback" button in the bottom right corner. A vertical blue bar on the left side of the page is labeled "Application Downtimes".

# Access Lawson Employee Self Service

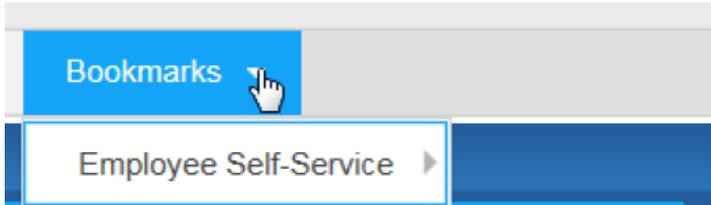
- After you logon to the intranet, the Lawson icon will appear in the top ribbon on the right



- Click the icon to access Lawson and use the same username and password



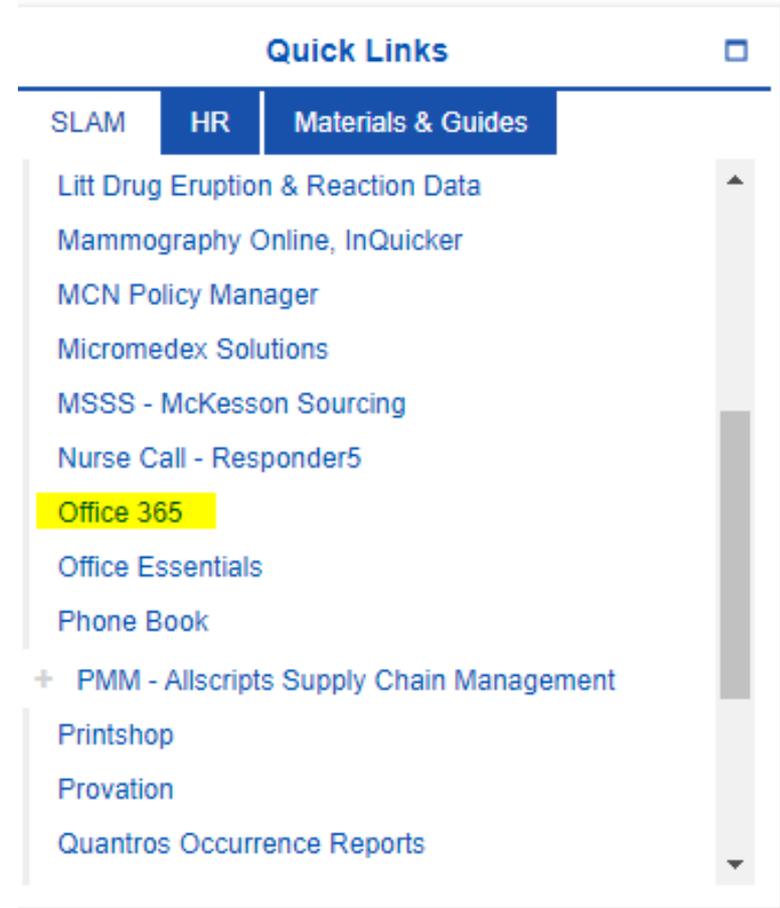
# Using Lawson



- Your data is held in the Bookmarks section (on the left side of the screen)
- Hold the cursor on each option to see additional options
- Click on the menu item you wish to access
- To enroll in benefits, select benefits/new hire enrollment

# Accessing email

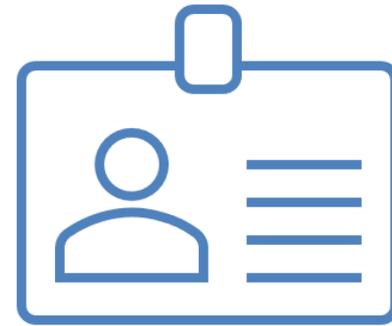
- On the intranet, select Office 365 in the quick links
- Sign in with your email address –
  - [first.last@stlukes-stl.com](mailto:first.last@stlukes-stl.com)
  - and the same password
- Click the waffle on the top left for the menu and select Outlook



# Human Resources

# ID Badges

- Always wear while at work
- Wear below the shoulder and above the waist
- Viewable – name showing
- Lost badges
- Changes or revisions
- Cashless
- Badge access



# Tuition Reimbursement

- College level courses and/or degree completion programs pertinent to business operations and job opportunities within St. Luke's.
- Full and Part-time (90-day waiting period)
- 100% of credit hour cost for full-time employee up to \$4,000 per calendar year.
- 50% of credit hour cost for part-time employee up to \$2,000 per calendar year.
  - Tuition will be reimbursed upon completion of the course.
  - B for Graduate
  - C for Undergraduate

# Career Opportunities

- Transfer, promotion, second position
- St. Luke's intranet/St. Luke's website
  - 6-Months
  - Good Standing
  - Complete Online Internal Application
  - HR will Inform Your Manager
- iCIMS portal/dashboard

# Get *Rewarded* for your Referrals!



## St. Luke's Referral Bonus Program

Up to \$2,000 when you help us grow the team! Click Link to see open positions.



Dr. Flanders'  
Patient Safety  
Blog



Lunch Special - Jan. 27



TOWNHALL  
MEETING

Recorded Session



GROUP CHALLENGE

Passport to Wellness

# Next Steps

- Surrey Place Team Members –  
*meet at 8 am in the lobby*

# Environment of Care

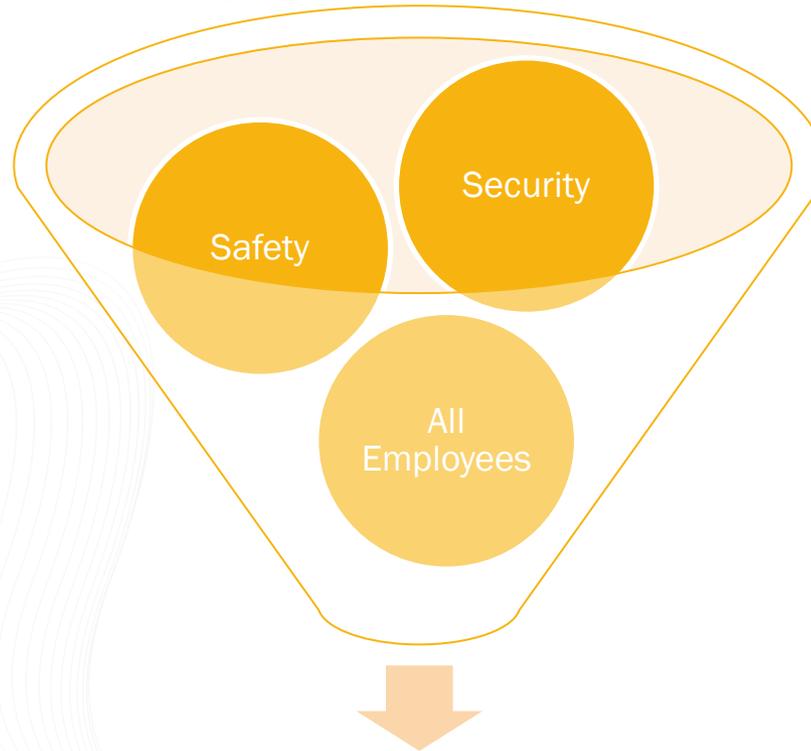


## Management Plans

- Safety/Security Management
- Hazardous Materials and Waste Management
- Emergency Management
- Fire Safety Management
- Medical Equipment Management
- Utilities Management
- Life Safety Management



# Safety and Security Teamwork



**St. Luke's Environment**

# SAFETY and SECURITY



# Reporting a Safety Issue or Concern



# Employee Badge / Paging Codes Card

ID Badges are to be worn below the shoulder and above the waist.

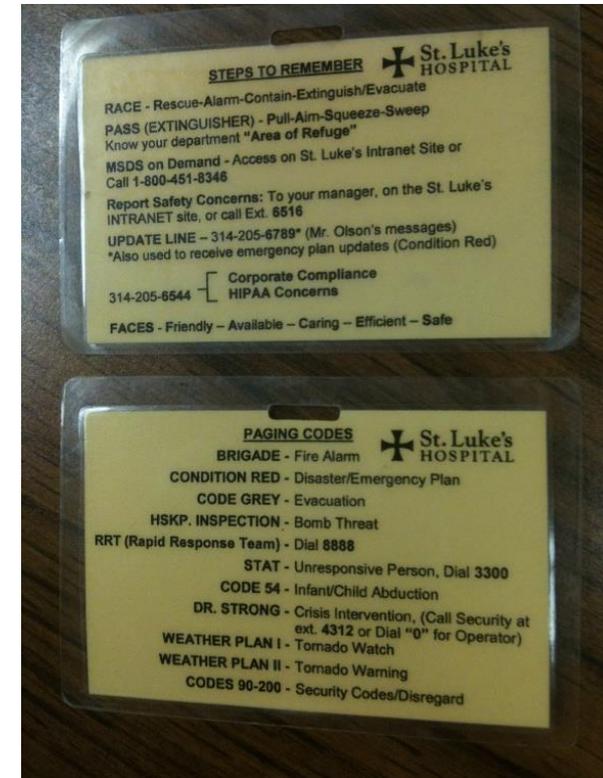
Emergency Codes

Safety Contact Numbers

How to Report Safety Issue / Suggestion

PASS – RACE – FACES Acronyms

SDS 800 Number



# Workplace Violence Zero Tolerance Policy



## On-Site:

### Call Security:

- Ext. 4312 Chesterfield
- Ext. 60060 Des Peres
- “Dr. Strong”
- “Code Silver” – Run, Hide, Fight

## Off-Site:

- Dial 911
- Deploy panic button

- What types of Workplace Violence need to be reported?
  - Physical Assault
  - Bullying
  - Verbal abuse
  - Sexual (verbal / physical)
  - ALL

## QUANTROS Reporting

# Hazardous Materials Waste Management

You have the right to *Know and Understand*

- The proper use, labels, storage and disposal of hazardous materials
- The correct Personal Protective Equipment (PPE) and availability
- How to obtain an SDS
- How to respond to a hazardous spill or exposure



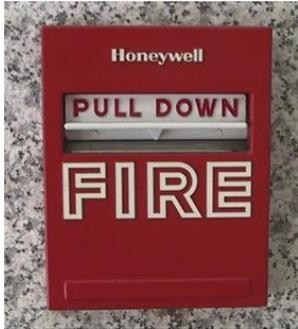
# Emergency Management



- “All-Hazards” Emergency Management Plan (EMP) and an Emergency Operations Plan (EOP) for the organization
- Reasons the EOP, “Activate Incident Command”, may be enacted:
  - An external disaster
  - An internal disaster
  - Incident Command activated in phases:
    - ✓ Phase 1 = Minor Activation
    - ✓ Phase 2 = Major Activation



# Fire Safety Management –



## “CODE RED”

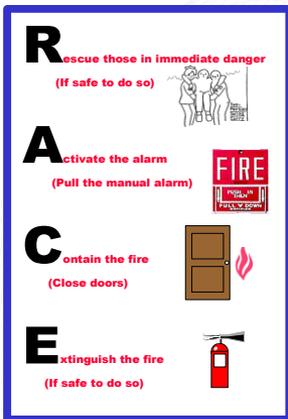
### Know the Location

- Fire Exits
- Fire Alarm Pull Boxes
- Fire Extinguishers

### Authorized to shut off medical gases:

- Respiratory Therapy Services
- Assistant Director Of Nursing (ADON)
- Anesthesiologist (Surgical Fires)
- All Medical Gas Outlets are Labeled:
  - ✓ Pink = All Areas Except Surgical Services
  - ✓ Green = All Surgical Services Areas

- Areas of Refuge



# Evacuation



## Horizontal - FIRST OPTION TO EVACUATE!!

Move to a safe area on the same floor (fire/smoke compartments)

## Vertical

Move to a lower floor only if it isn't safe on the same floor

## Total

Moving outside of the building to your area of refuge

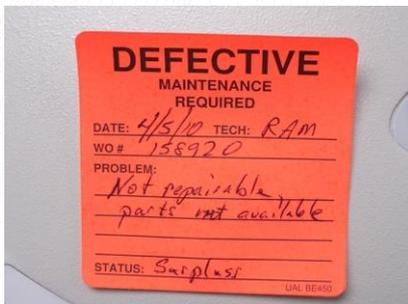
Identify and assist patients, visitors, and staff with special needs.

Do not use the elevators to avoid getting trapped.



**Know your department's evacuation plan.**

# Medical Equipment Management

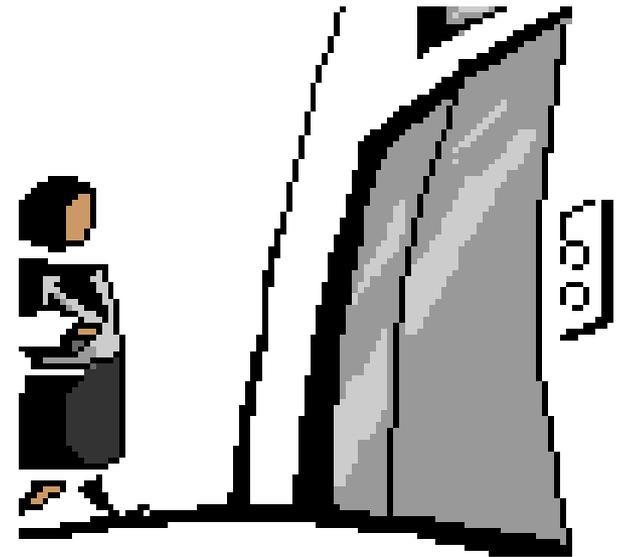


- Perform a physical inspection before using.
- Verify a current inspection tag which indicates a performance/safety inspection was completed.
- Dry hands before handling electrical equipment.
- Keep excess cord wound up and out of the way.
- An inspection is overdue if the date on the tag is past the due date. – please update image at left for more current tag
- Equipment failures: remove the equipment from service, do not alter settings/controls, contact Clinical Engineering (CE).
- Contact the patient's attending physician, CE, your manager, and Risk Management if a patient was harmed due to the defective equipment.

# Utilities Management

Refer to the “Systems Failure” sheet on your safety bulletin board for any of the following system failures:

- Electrical
  - \*Emergency Generators
  - \*Red Outlets
- Elevators
- Medical Gases
- Fire Alarm System
- Sewer/Water problems
- Air Conditioning or Heating



# Take Away Points

- Know where the policies and procedures are located in your department.
- All Safety/Emergency Policies are on the Intranet.
- Know your role in a “**Code PINK.**” “**Code RED**” “**Code GREEN**”
- Locate the nearest pull box, fire extinguisher and your area of refuge.
- Complete Care Learning modules for fire prevention and safety, electrical safety and emergency preparedness.
- Be aware and know your **Safety and Security** procedures

# Security and Parking

# “Where Should I Park?”

## *Chesterfield Campus Employee Parking:*

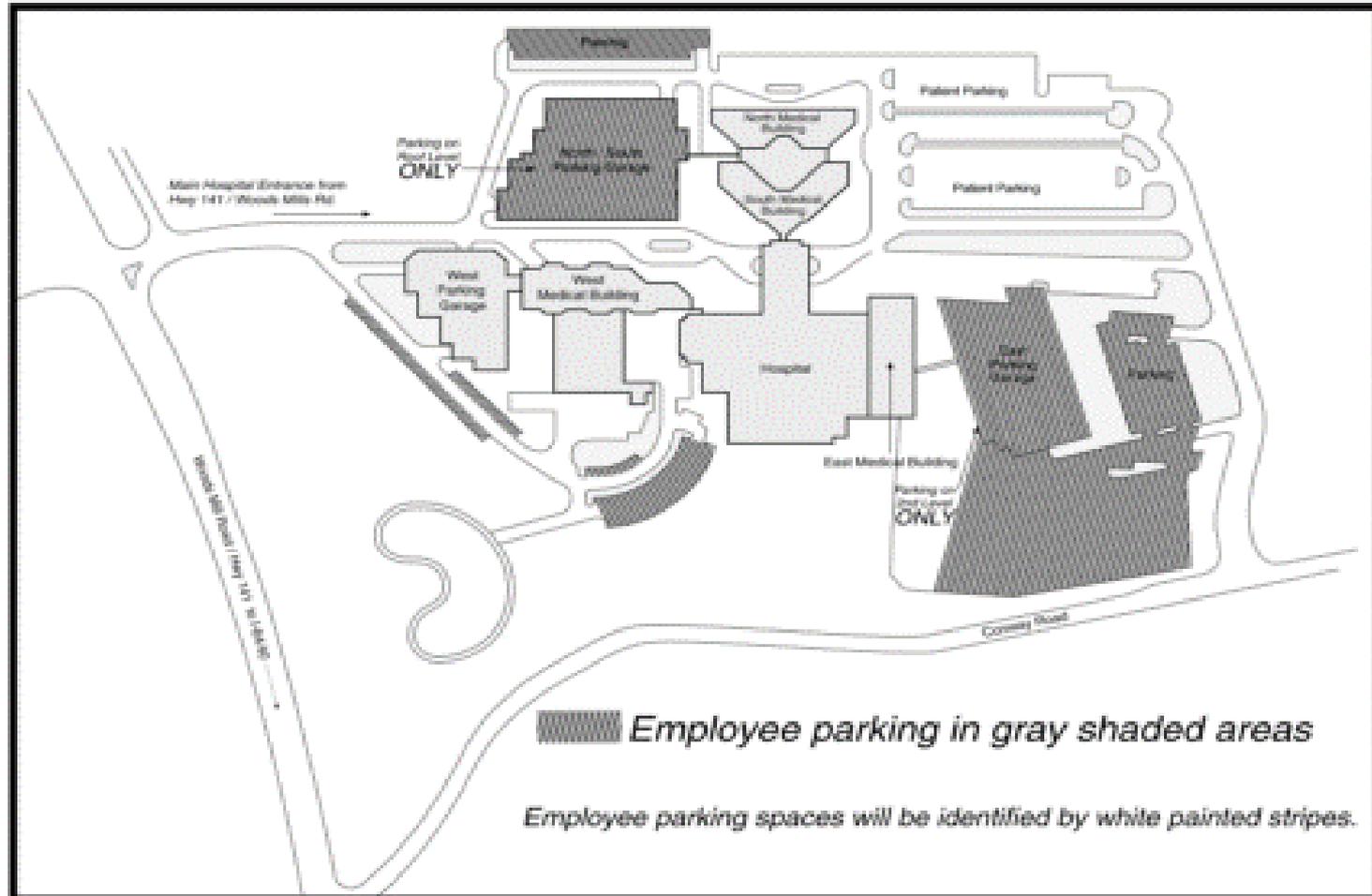
Parking for St. Luke’s employee’s is provided in the WHITE striped parking spaces located in the following locations:

- East Garage – Easiest access is from the Conway Rd. entrance!
- Southeast Surface Parking Lot
- West Service Drive
- Southwest Surface Parking Area

Please refrain from parking in visitor and patient designated YELLOW striped parking areas!

# Chesterfield Parking Map

## St. Luke's Hospital Employee Parking Areas



# “Where Should I Park?”

## *St. Luke’s Des Peres Hospital Employee Parking:*

- Currently, all day shift employees are being asked to park in the upper lot (pink shaded area on the parking map)
- Currently, all night shift employees are being asked to park in the lot next to the medical office building, next to the ER (red shaded area towards the back of the hospital)

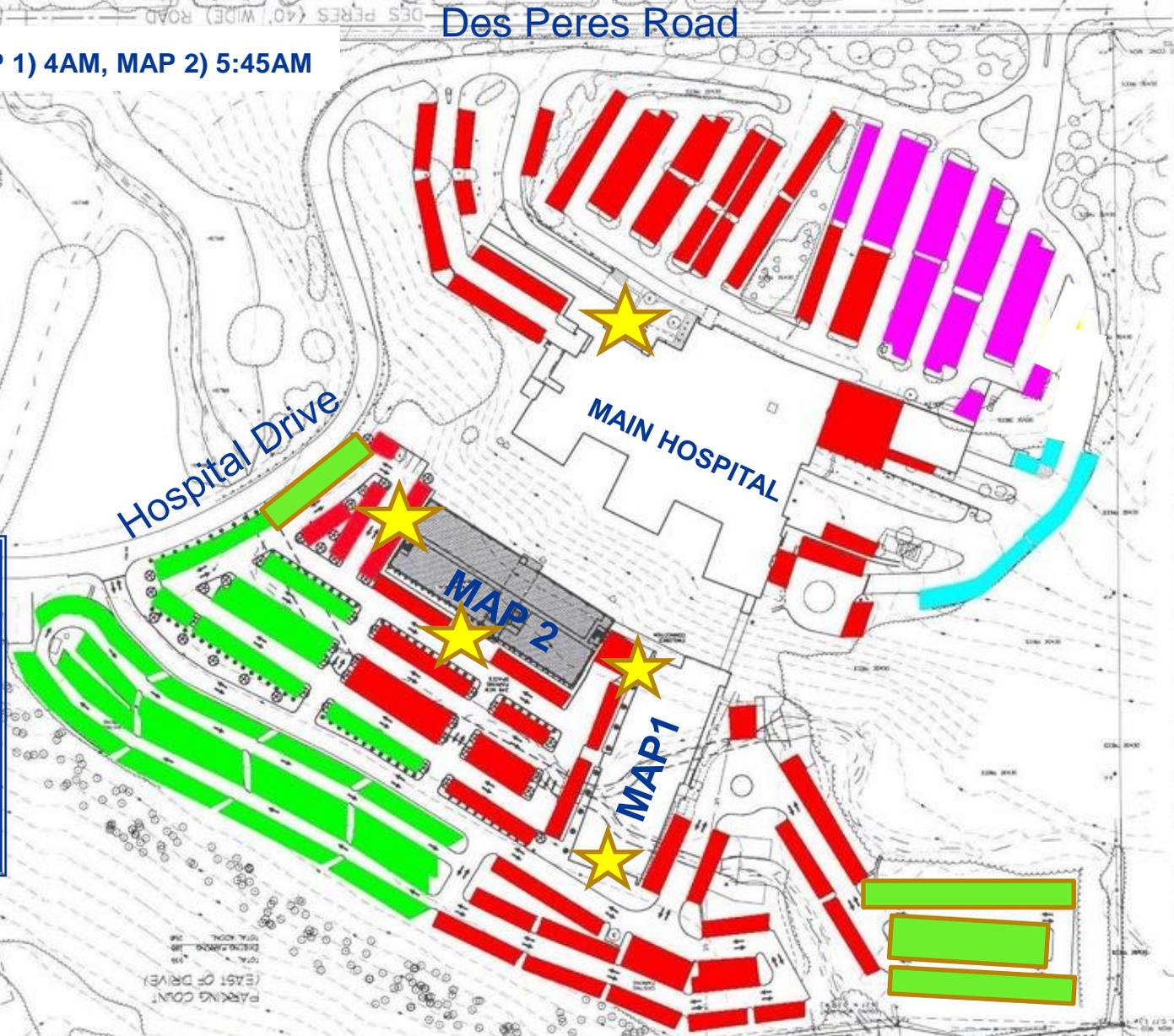
Entrances=  MAP 1) 4AM, MAP 2) 5:45AM

**Red Area**  
DPH Employee Parking Prohibited!  
Subject to Fine.

**Green Area**  
Employee Parking  
Shift starts after 5:00AM

**Purple Area**  
Employee Parking  
-Shift starts *before* 5 am  
-Shift starts *after* 2 pm  
-Weekends (Sat/Sun)  
-On Call (Rad, ENDO, OR)

**Blue Area**  
Manager Parking



## Other Campus Parking:

### *Surrey Place:*

All Surrey Place employees are required to park in the back of the building or on the side of the entrance road.

### *Desloge Outpatient Center:*

All DOC employees are required to park in the white striped spaces provided on the left side of building A or the right side of Building B.

**St. Luke's Security teams are also available to assist with the following:**

- **Patient, visitor and employee safety concerns**
- **Escorts to your car**
- **Minor help with vehicle problems (keys locked in car, battery assist, etc.)**
- **Patient transportation overflow**

**Please never hesitate to call [Security](#) for help:**

**Chesterfield : X. 4312 or X. 6318**

**Des Peres: 314-267-6233**

# SAFETY IS EVERYONE'S RESPONSIBILITY



**Questions or Comments, Contact:**

**Gary A. Christmann**

**Safety Manager**

**314-205-6108**

**[gary.christmann@stlukes-stl.com](mailto:gary.christmann@stlukes-stl.com)**

# General Orientation in Infection Prevention

**Elysa Sirtak, RN, BSN, CWCN**

**Mackenzie Martin, MLS(ASCP)**

**Madison Martin-Giacalone, MPH, CPH**

**Emily Leinauer, BA, MPH**



## Who are infection preventionists?

Infection preventionists use their detective skills to find the bad germs and make sure everyone is doing the right things to keep you safe.



Catheters or other devices will be placed in your body after your skin receives proper cleaning.



Healthcare workers will clean their hands before and after they care for you.



Your healthcare workers will wear gloves, gowns, and masks at the right times.

If you are in isolation, you and your visitors may need to do this too.



Your room and any equipment that is used on you will be clean.



# What do Infection Preventionists do?

- Review culture reports, make rounds in patient care areas assessing environment and adherence to infection control practices
- Conduct investigations on HAIs (Healthcare Associated Infections) based on NHSN (National Healthcare Safety Network) criteria and definitions
- Provide consultation regarding isolation status and protective measures
- Provide surveillance data regarding trends, patterns, and outbreaks. Review exposure cases for educational opportunities.
- Provide educational resources and research
- Assist with communicable disease reporting to the Department of Health (local and state)
- Report/Upload data to NHSN
- Consult on construction processes in the facility to be sure infection prevention guidelines and barriers are adhered to.
- Work with all departments in and out of the hospital to be sure infection prevention and control best practices are being followed to protect staff and patients.

# How to Contact Infection Prevention

## **STLH – Chesterfield**

Monday – Friday Office Hours

8 am – 4:30 pm

**General Office number:**

**314-205-6088**

**EMERGENCY Pager:**

**314-407-5427 (24/7)**

**Office Location: Hospital 9<sup>th</sup> Floor**

## **STLDPH – Des Peres**

Variable on site coverage

**General Office number:**

**314-966-9673 or 314-205-6088**

**EMERGENCY Pager:**

**314-407-5427 (24/7)**

**Office Location: 4<sup>th</sup> floor (4C)**



Search Intranet

User ID:   
 Password:   


 70°F

Intranet
  People
  Google

Intranet > Clinical > Clinical Departments > Infection Prevention

- Clinical Departments**
- Cancer Center Infusion
  - Cancer Center Pharmacy**
  - Cancer Program
  - Cardiac and Vascular Services
  - Care Management
  - Center for Clinical Excellence
  - Clinical Education
  - Clinical Research
  - Coronavirus Disease 2019 (COVID-19)
  - Emergency Department
  - Endoscopy Department
  - Food & Nutrition Services
  - Infection Prevention**
  - Institutional Review Board (IRB)
  - Laboratory
  - Local Medical Review Policies (LMRP)
  - Nuclear Medicine & PET/CT
  - Nursing/Patient Services
  - Pharmacy
  - Premier Pain Consultants
  - Pulmonary Function
  - Pulmonary Rehabilitation
  - Radiation Oncology
  - Radiology
  - Registration News/Resources
  - Respiratory Care Services
  - Sleep Medicine & Research Center
  - SLMG (St. Luke's Medical Group)

**Infection Prevention**

For Infection Prevention issues contact:  
**After Hours Pager:** 314-407-5427  
**Department Ext:** 6088  
**Fax:** 314-205-6742

**Infection Prevention Team**

<b>Elysa Sirtak, RN, BSN, CWCN</b>	Infection Preventionist 205-6695
<b>Elvir Begic, MPH, CIC</b>	Infection Preventionist 205-6553
<b>Emily Leinauer, BA, MPH</b>	Infection Preventionist Des Peres Hospital 966-9673

**Ask-the-Expert**  
 During normal business hours call Department Ext OR

- [Submit a Question Online](#)

**Hours of Operation**  
 M-F: 8:00 am to 4:30 pm

**Weekend Emergent Issues For Infectious Disease Physicians**  
 Call Exchange: (1 of the ID physician group available)  
 205-6600 (office) or 388-6218 and request return call (MD will notify ID on call)

**Website Links**

- [Centers for Disease Prevention - Infectious Disease A-Z Index](#)

- IP Safety Tips**
- 2014
  - 2013
  - 2012

- Infection Prevention Manual**
- [Section 1: IP Program Overview](#)
  - [Section 2: Surveillance and Reporting](#)
  - [Section 3: Employee Education and Health](#)
  - [Section 4: Isolation](#)
  - [Section 5: Sterilization and Disinfectant](#)
  - [Section 6: Patient Care](#)
  - [Section 7: Bloodborne Pathogens](#)
  - [Section 8: Tuberculosis](#)
  - [Section 9: EOC](#)
  - [Section 10: Influenza Pandemic Bio-disaster](#)
  - [Section 11: Patient Education](#)

- Infection Prevention Forms**
- [Hand Hygiene Observation](#)
  - [Pre-op CHG Bathing](#)
  - [Refrigerator Temperature Log](#)
  - [TST and N95 Fit Testing](#)

- Infection Prevention Education Resources**
- [5 Moments of Hand Hygiene FAQs](#)
  - [Antibiotics](#)
  - [Catheter Associated Blood Stream Infections](#)
  - [Catheter Associated Urinary Tract Infections](#)
  - [C. difficile](#)
  - [CDI Algorithm](#)
  - [Chickenpox](#)
  - [Hand Hygiene](#)
  - [Isolation](#)
  - [Meningitis Neisseria](#)
  - [Meningitis Viral](#)
  - [MRSA](#)

# Find us on the Intranet...

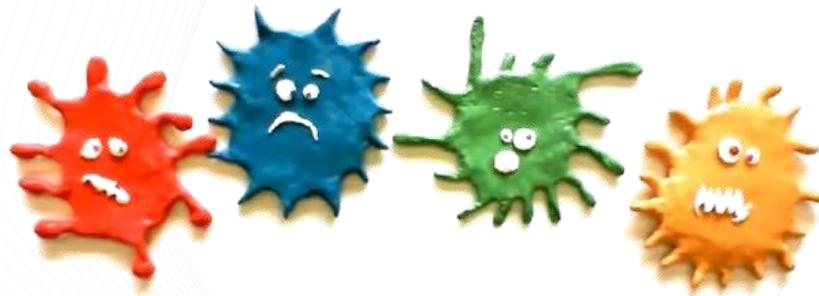
- [Contacts](#)
- [Policies](#)
- [Education](#)
- [Resources & Links](#)



# Increased Risk of Infection

Patients entering a healthcare setting are at risk of acquiring an infection because of:

- Weakened immune system
- Exposure to a variety of disease-causing organisms
- Chemotherapy/ Medications



# The Statistics



- **At any Time in the United States** – 1 out of every 25 hospitalized patients is affected by an HAI (Healthcare-associated infection)
  - The CDC estimates that 5% of all hospital admissions result in a healthcare-associated infections, culminating in approximately 722,000 infections and 75,000 deaths each year as well as \$28-33 billion in excess cost
- **One infection is one too many**
  - Studies show that most frequently infections are spread from one patient to another
  - Hand Hygiene is the primary measure used to reduce infections in the healthcare setting

# How can you help us?

- Always follow the 5 Moments of Hand Hygiene
- Always wear PPE (Personal Protective Equipment) when required in an isolation room
- Always remove PPE before leaving isolation rooms
- Check with us before discontinuing isolation
- Contact us with any questions, concerns or suggestions to improve care.



# Hand Hygiene

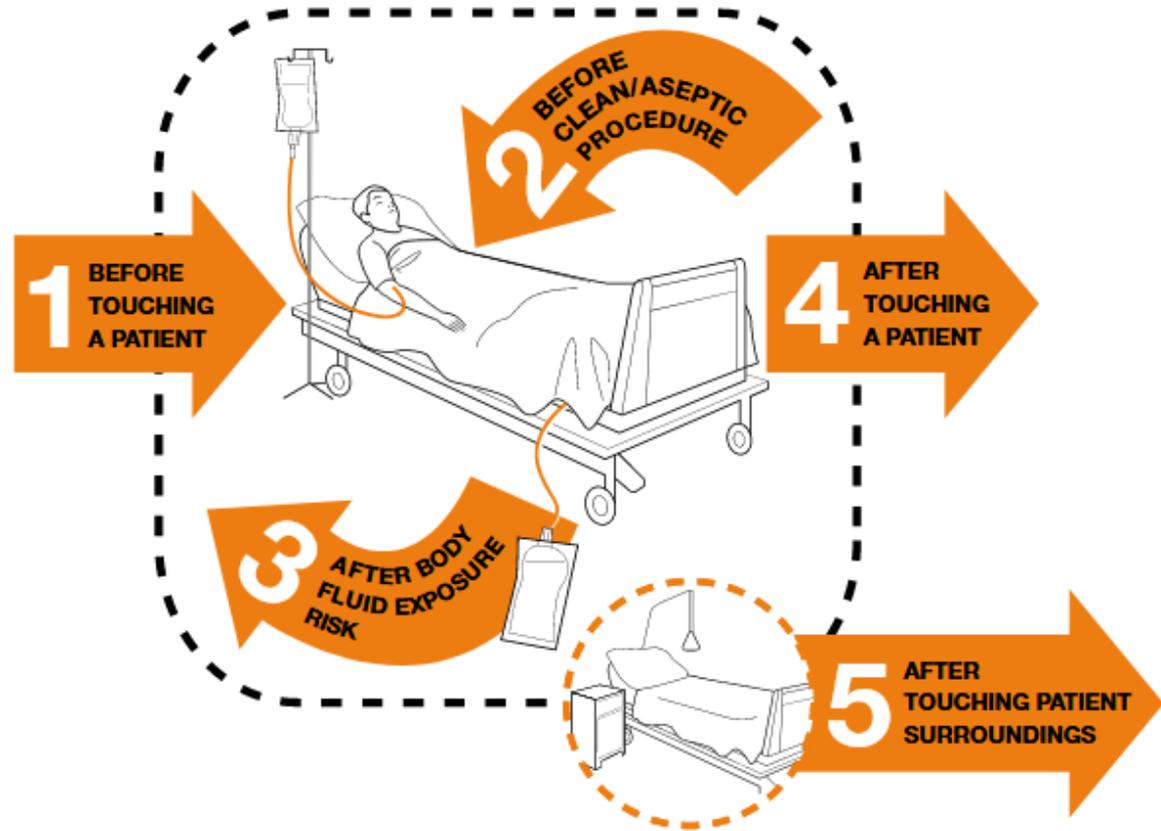
The single most important means of preventing the spread of infection



St. Luke's goal for compliance is **100%**:

- Expectation of The Joint Commission & The Centers for Medicare and Medicaid as well.
- Audits are randomly done to monitor compliance of all healthcare providers.

# When do you perform hand hygiene?



# Performing Hand Hygiene with *Soap and Water*

## How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

 Duration of the entire procedure: 40-60 seconds



Wet hands with water;



Apply enough soap to cover all hand surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Rinse hands with water;



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.

# Hand Hygiene with Alcohol-Based Hand Sanitizer

# How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

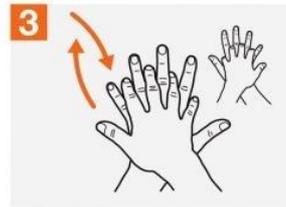
 Duration of the entire procedure: 20-30 seconds



Apply a palmful of the product in a cupped hand, covering all surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Once dry, your hands are safe.

# Hand & Nail Maintenance

- Natural fingernails must be kept short (1/4 inch or less) and well groomed.
- Employees who provide direct patient care cannot wear artificial fingernails or enhancements. This includes but is not limited to gel, acrylic, silk nails, overlays, nail jewelry or any item that is glued to or pierced through the nail
- Fingernail polish may be worn provided it is in good repair.



# Standard Precautions

Designed to reduce the risk of transmission of organisms from both Recognized AND unrecognized sources of infection

They are the basic level of infection control precautions which are to be used, as a minimum, in the care of all patients.

Must be used when handling:

- Blood
- All body fluids, secretions, and excretions except sweat, ***regardless of whether they contain visible blood.***
- Non-intact skin
- Mucous membranes

# PPE (Personal Protective Equipment) in Healthcare



# Personal Protective Equipment

- Gown must always be tied in the back.
- All PPE must be removed prior to leaving the room and hand hygiene done immediately after removal.
  - Includes mask in the OR and shoe covers
- Avoid touching your face or hair when gloves are on.



# PPE... As Seen on TV



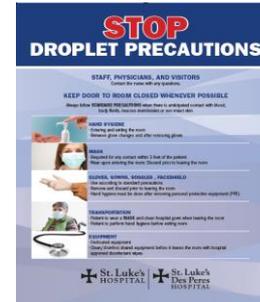
# Transmission-Based Precautions

- A physician order is not required to start precautions.
- Must be started as soon as possible upon suspicion, ordering of clinical tests or diagnosis of a highly infectious illness or condition transmitted by direct or indirect contact.

## • Contact



## • Droplet



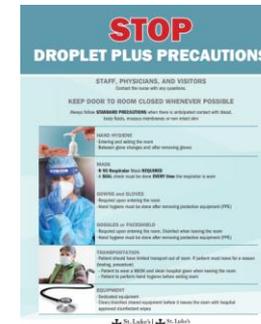
## • Airborne



## • Contact Plus



## Droplet Plus



# STOP CONTACT PRECAUTIONS

## STAFF, PHYSICIANS, AND VISITORS

Contact the nurse with any questions.

Always follow **STANDARD PRECAUTIONS** when there is anticipated contact with blood, body fluids, mucous membranes or non intact skin



### HAND HYGIENE

- Entering and exiting the room
- Between glove changes and after removing gloves



### GOWN and GLOVES

- Required upon entering the room; discard prior to leaving the room
- Hand hygiene must be done after removing personal protective equipment (PPE)



### MASK, GOGGLES, FACESHIELD

- Whenever splash is expected or possible
- Always follow **STANDARD PRECAUTIONS** when there is anticipated contact with blood, body fluids, mucous membranes or non intact skin
- Remove and discard prior to leaving the room
- Hand hygiene must be done after removing personal protective equipment(PPE)



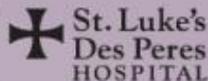
### TRANSPORTATION

- Patient to wear clean hospital gown when leaving the room
- Patient to perform hand hygiene before exiting room



### EQUIPMENT

- Dedicated equipment
- Clean/disinfect shared equipment before it leaves the room with hospital approved disinfectant wipes



## Contact Transmission

- Gown and gloves are required upon entering room.
- Direct contact
  - Direct contact with contaminated fluid
- Indirect contact
  - Environmental source
    - Fomites can survive a long time on surfaces



# Contact-Plus Precautions

- Transmission via fecal/oral route
- Hands must be washed with soap and water.
- Room cleaning done twice a day with an EPA approved bleach disinfectant

# Droplet Transmission

- Mask required before entering room
- Wet & heavy
  - Historically, 3 feet range
  - CDC suggest 6 feet
- Spread via nose/mouth

**STANDARD PRECAUTIONS**

**PHYSICIANS, AND VISITORS**  
Contact the nurse with any questions.

**DOOR TO ROOM CLOSED WHENEVER POSSIBLE**

**STANDARD PRECAUTIONS** when there is anticipated contact with blood, body fluids, mucous membranes or non intact skin

**HAND HYGIENE**  
- Entering and exiting the room  
- Between glove changes and after removing gloves

**MASK**  
- Required for any contact within 3 feet of the patient  
- Wear upon **entering** the room; Discard prior to leaving the room

**GLOVES, GOWNS, GOGGLES , FACESHIELD**  
- Always follow **STANDARD PRECAUTIONS** when there is anticipated contact with blood, body fluids, mucous membranes or non intact skin  
- Remove and discard prior to leaving the room  
- Hand hygiene must be done after removing personal protective equipment (**PPE**)

**TRANSPORTATION**  
- Patient to wear a **MASK** and clean hospital gown when leaving the room  
- Patient to perform hand hygiene before exiting room

**EQUIPMENT**  
- Dedicated equipment  
- Clean/disinfect shared equipment before it leaves the room with

# STOP DROPLET PLUS PRECAUTIONS

## STAFF, PHYSICIANS, AND VISITORS

Contact the nurse with any questions.

### KEEP DOOR TO ROOM CLOSED WHENEVER POSSIBLE

Always follow **STANDARD PRECAUTIONS** when there is anticipated contact with blood, body fluids, mucous membranes or non intact skin



#### HAND HYGIENE

- Entering and exiting the room
- Between glove changes and after removing gloves



#### MASK

- **N 95 Respirator Mask REQUIRED**
- A **SEAL** check must be done **EVERY time** the respirator is worn

#### GOWNS and GLOVES

- Required upon entering the room
- Hand hygiene must be done after removing protective equipment

#### GOGGLES or FACESHIELD

- Required upon entering the room. Disinfect when leaving the room
- Hand hygiene must be done after removing protective equipment



#### TRANSPORTATION

- Patient should have limited transport out of room, e.g. for testing, procedure
- Patient to wear a **MASK** and clean hospital gown
- Patient to perform hand hygiene before and after transport

#### EQUIPMENT

## Droplet Plus- NEW!

- Applies to COVID-19 and Mpox suspected and/or positive patients.
- If requiring Aerosolizing procedure ALSO needs Airborne (Negative pressure room)
- **PPE per CDC**
  - N-95 respirator or higher
  - Gown
  - Gloves
  - Goggles or face-shield

# Airborne Transmission

- N95 Mask required upon entering room – Must be fit tested for
- Airborne Infection Isolation Room (AIIR)- Negative pressure
- Tiny particles (<5  $\mu$ ) spread
- Travels far
  - Can attach onto dust particles and travel on air currents
  - Can remain in the air for hours

## STOP AIRBORNE PRECAUTIONS

**STAFF, PHYSICIANS, AND VISITORS**  
Contact the nurse with any questions.

**NEGATIVE PRESSURE ROOM**  
KEEP DOOR TO ROOM CLOSED AT ALL TIMES

Always follow **STANDARD PRECAUTIONS** when there is anticipated contact with blood, body fluids, mucous membranes or non intact skin.

**HAND HYGIENE**  
- Washing and Drying the Hands  
- Before Glove Changes and After Removing Gloves

**MASK**  
- **N 95 Respirator Mask REQUIRED** for any contact with TB/SARS  
- A **SEAL** check must be done **EVERY** time the respirator is worn  
- Wear isolation mask upon entering room for all others.  
- Discard mask in the trash upon leaving the room

**GLOVES, GOWNS, GOGGLES, FACESHIELD**  
**STANDARD PRECAUTIONS** when there is anticipated contact with blood, body fluids, mucous membranes or non intact skin.  
- Eye protection is required for SARS  
- Remove and discard prior to leaving the room  
- Hand hygiene must be done after removing protective equipment (PPE)

**TRANSPORTATION**  
- Patient to wear a **MASK** and clean hospital gown when leaving the room  
- Patient to perform hand hygiene before exiting room

**EQUIPMENT**  
- Dedicated Equipment  
- Clean/disinfect shared equipment before it leaves the room with hospital approved disinfectant wipes

**St. Luke's HOSPITAL** | **St. Luke's Des Peres HOSPITAL**

## STOP AIRBORNE PRECAUTIONS



# Respiratory Infection Prevention Program



- Annual Influenza Vaccination & COVID-19 Vaccination
  - Mandatory for St. Luke's Employees
- TB Plan with fit testing and PPD testing based on risk
- Respiratory Etiquette
  - Necessary to prevent spread of all respiratory illnesses
    - Cover your cough
    - Hand hygiene before touching your eyes, nose or mouth
- Stay home if you are sick
  - Must be afebrile for 24 hours without antipyretics before returning to work.

# OSHA Bloodborne Pathogen Plan

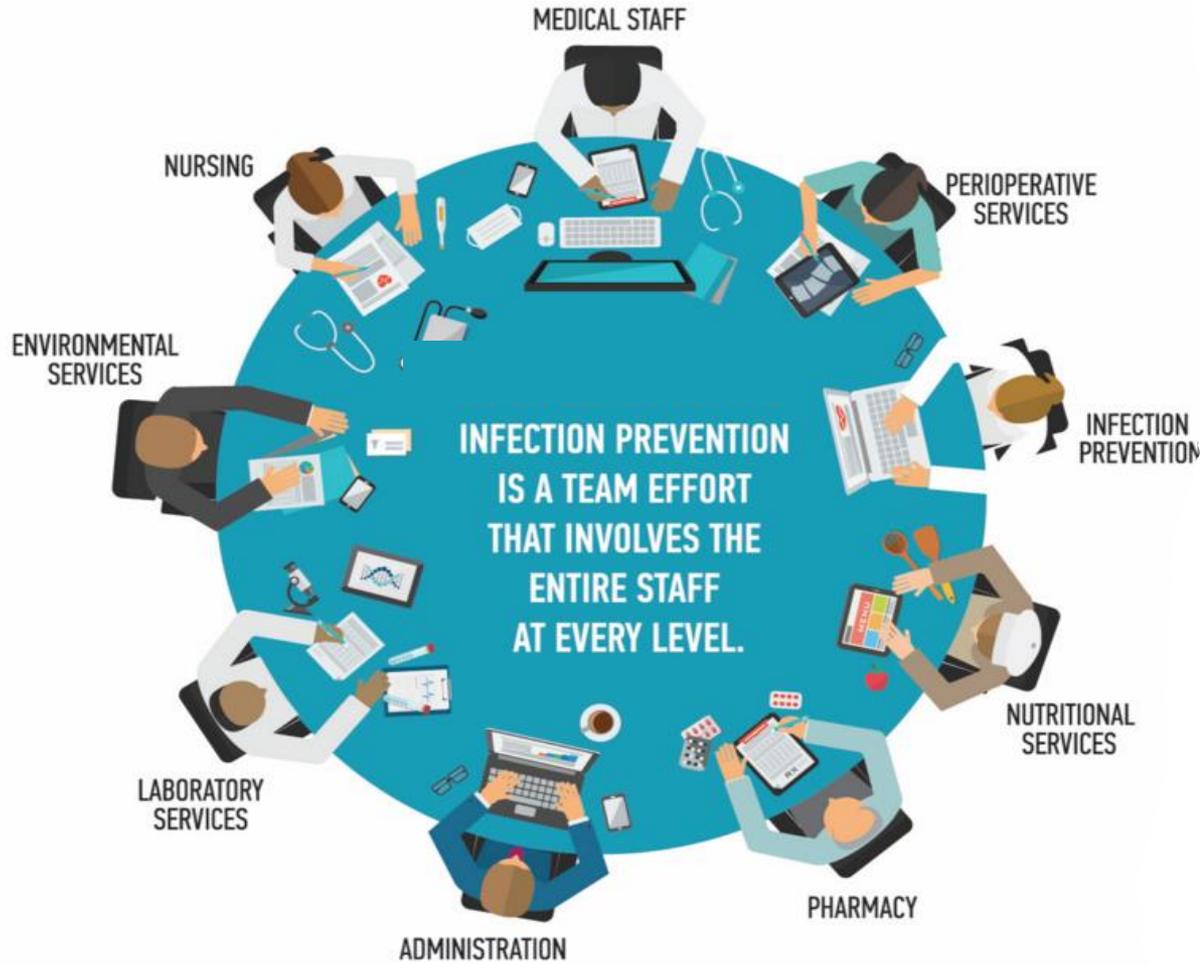
## Consists of:



**Applies to all workers with potential occupational exposure to blood or other potentially infectious material, (OPIM)**

- Exposure Control Plan & Annual Education
- Universal/Standard Precautions
- Policies to protect you (Work Practice Controls) ...  
Example: Do not eat/drink in a patient care area.
- Hepatitis B Vaccine – Safe & Effective prevention
- Safety Needles / Sharps containers / Regulated Waste (Red) Containers
  - Regulated Waste: **ONLY** items contaminated with blood or other potentially infectious materials
- Biohazard Warnings and labels
- PPE to prevent exposure to blood & other potentially infectious materials (OPIM)

75



# Thank you!

**WELCOME TO THE TEAM!**

# Risk Management and Corporate Compliance

Charla Craig, Director, Corporate Compliance Officer/Privacy Officer

Kathy Price, Manager

Arlene Riordan, Risk/Compliance Coordinator

Linda Blest, Administrative Assistant

# What is Risk Management?

A collection of practices designed to ensure St. Luke's operates safely and in accordance with financial and governmental regulations

Reduce errors through a culture of risk awareness

Shield the organization from financial and legal repercussions

Protect patients and staff alike from medical errors and other harm



# Risk Management Essentials



Know where the policies and procedures are located in your department.



Listen to patients and their families – do not ignore their concerns.



Document, document, document!



Report the unexpected or unusual.



It's okay to apologize.

# Adverse Events



# Just Culture



Human  
Error

Slip  
Lapse  
Mistake



At Risk  
Behavior

“Drift”  
Cutting  
Corners  
while  
convinced  
in a safe  
place



Reckless  
Behavior

“The  
Gamble”  
Conscious  
disregard  
of a known  
risk of  
harm



Knowingly  
Causing  
Harm

“Me First”  
Aware that  
harm is  
caused but  
not the  
main  
intention



Purpose to  
Harm

Goal and  
intention is  
to cause  
harm

If you see something, say something

# Just Culture for Adverse Events

## Examples:

Human Error – dropping a tube of blood or a sterile dressing on the floor (slip, lapse, mistake)

At Risk Behaviors – cutting corners while convinced you're in a safe place (skipping the 2 patient identifiers, texting while driving)

Reckless Behaviors – showing up to work drunk or impaired, drunk driving (Conscious disregard of substantial and unjustifiable risk)

Knowingly Causing Harm – stealing supplies or patient/coworker belongings (Person's focus is on what their action will do to benefit themselves instead of the harm it causes – aware harm is caused but it's not their main intention)

Purpose to Cause Harm – posting a derogatory comment about a coworker on social media, (Action can never be justified and will be met with disciplinary action/sanctions)

# What to Report in Quantros

	<u>PATIENT</u> Event	<u>VISITOR</u> Event
<b>What to Report</b>	<ul style="list-style-type: none"> <li>❖ Falls</li> <li>❖ Medication Errors</li> <li>❖ Near Misses</li> <li>❖ Adverse Drug Reaction</li> <li>❖ Patient Safety Care Event</li> <li>❖ Unanticipated Outcome</li> </ul>	<ul style="list-style-type: none"> <li>❖ Fall</li> <li>❖ Accident/ Incident</li> <li>❖ Property Damage</li> </ul>
<b>What to Do</b>	<ul style="list-style-type: none"> <li>❖ Notify your manager</li> <li>❖ Complete a <b>Quantros</b> Report</li> <li>❖ Contact Risk Management ext. 6516</li> </ul>	<ul style="list-style-type: none"> <li>❖ Offer assistance first</li> <li>❖ Notify security ext. 4312</li> <li>❖ Complete a <b>Quantros</b> Report</li> </ul>



Intranet
  People
  Google

User ID: 
  
 Password: 
  

48°F

*Recorded Session Now Available*

# TOWNHALL MEETING

with Andy Bagnall, President & CEO



**Townhall Meeting**  
Watch the Video







- ### In The News
- Healthgrades 2023 Outstanding Patient Experience Award™  
Mar 14, 2023
  - St. Luke's Hospital Hires New Chief Strategy Officer  
Mar 13, 2023
  - St. Louis Sprout & About, Chesterfield Chamber of Commerce, Feature 2023 Women's Choice Awards  
Jan 02, 2023
  - KTVI FOX 2 News, KSDK, KMOV and Many More Share St. Luke's Santa Babies  
Dec 26, 2022
  - St. Luke's ACO and Allison Rajaratnam Featured in St. Louis Metropolitan Medicine  
Dec 12, 2022

### Cybersecurity Threat Level

Level 1 Guarded	Level 2 Elevated	Level 3 High	Level 4 Critical
--------------------	---------------------	-----------------	---------------------

New Information - Updated 1/26/23



Recognize a St. Luke's colleague for a job well done!

### Quick Links

- SLAM
- HR
- Materials & Guides
- Office Essentials
- Phone Book
- + PMM - Allscripts Supply Chain Management
- Printshop
- Provation
- Quantros Occurrence Reports
- RL6 Solutions Feedback
- ServiceNow
- symplr
- The Patient Channel Neighborhood
- Updates
- UpToDate
- WebEPSi Homepage

From the St. Luke's Intranet click on "Quantros Occurrence Reports."



RLDatix SAFETY & RISK MANAGEMENT Customer Support

St. Luke's Hospital - Corporate  
Chesterfield, MO

St. Luke's

Enter an event ID to finish or view history

Registered Users

User name

or

Password

Log In

Forgot your password?

Thank you for making St. Luke's a safer place.

\* St. Luke's Des Peres Frontline Staff - please use the Guest/Anonymous reporting option to report safety events.

\*\* St. Luke's Des Peres Managers and Leaders - please use your new Quantros user ID and password to access your events. For managers who were hired prior to 5-1-18, you will need to use the temporary password of Welcome1, then set your new password and set your security questions.

[Event Reporting Tutorial](#) [HIPAA, Confidentiality & Non-Punitive Disclaimers](#)

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- Managers will be set up with a login/password to Quantros upon hire.
- All other employees will not use a login. Simply use the center section of this window to select a facility and location from the dropdown menu and proceed with entering a Patient or Visitor event.
- You may choose to complete these reports anonymously or you may include your name at completion of the report.

# Medical Malpractice Coverage

- You are covered by St. Luke's Hospital's insurance whenever you are working
- Purchase of additional insurance is a personal decision



# Corporate Compliance

- Com·pli·ance

noun \kəm-ˈplī-ən(t)s\  
the act or process of doing what you have been asked or ordered to do : the act or process of complying

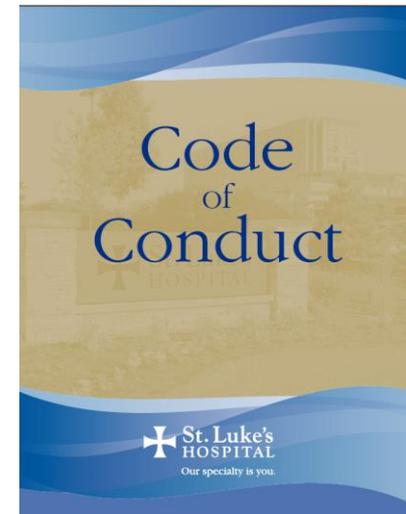
Webster's Dictionary

## The Regulatory Alphabet Soup of Healthcare

HIPAA	OIG
DOJ	HITECH
CMS	AKS
FERA	STARK
OSHA	RAC
FCA	CMP

# Commitment to Compliance

- St. Luke's is committed to full compliance with all laws/ regulations.
- Compliance is part of a job performance evaluation criteria.
- Compliance Resources:
  - Compliance Manual & Policies on intranet
  - Code of Conduct



# Federal False Claims Act Laws

**FRAUD:** False statement made by a person or entity who knows the statement is false and knows that false statement could result in some otherwise unauthorized benefit/payment.

- Medicare/Medicaid prohibits:
  - Billing for services not rendered
  - Billing for undocumented services
  - Falsifying cost reports
  - Billing for medically unnecessary services
  - Assigning improper codes to get paid at a higher rate
  - Participating in kickbacks
  - Keeping an overpayment for services/items



# Consequences of Fraud/False Claims

False Claims/fraud may result in civil, criminal and/or administrative penalties, including:

- Monetary penalties (for individual providers and organizations)
- Imprisonment
- Exclusion from participation in Medicare/Medicaid (for individual providers and organizations)
- Loss of licensure (for individual providers and organizations)



# Whistleblower Protections



Federal protections exist for persons who report wrongdoing.  
St. Luke's has a non-retaliation policy.

# Expectations

- Do your job in good faith
- Follow the guidelines in the Code of Conduct.
- Use the Code of Conduct and Compliance Policies to guide you.
- Report any concerns – if you're not sure, ASK!  
**Hotline ext. 6544**



Exhibit A

Corporate Compliance Program  
Compliance Certificate

I, \_\_\_\_\_, an employee/volunteer of St. Luke's Hospital or one of its affiliates, hereby acknowledge that I have received a copy of the St. Luke's Hospital Code of Conduct and have completed the training session concerning this material. I have had an opportunity to ask questions about the Code of Conduct during the training session and understand that I may seek further clarification or information at any time by contacting my supervisor or St. Luke's Hospital's Director of Corporate Compliance.

I hereby agree to uphold the principles and standards set forth in the Code of Conduct and to uphold St. Luke's Hospital's mission.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Employee ID#

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Date

Please complete the Acknowledgement form in your Code of Conduct

# HIPAA and Safeguarding PHI

- **Health Insurance Portability and Accountability Act.**  
The HIPAA Privacy Rule provides:
  - Federal protections for Protected Health Information (PHI)
- **All** employees, volunteers, and medical staff are responsible for safeguarding PHI maintained in any form, including paper and electronic records.



# What is Protected?

- PHI is any information pertaining to a patient, regardless of form (paper, electronic, verbal)
- Past, present, or future physical or mental health or condition of an individual.

## 18 Specific Identifiers

- Name
- Address
- Dates (DOB, death, admission, etc)
- Phone Number
- Fax Number
- Email Address
- SSN
- Photos
- URLs
- Medical Record Number
- Account Number
- Health Insurance Number
- License Number
- Device/Serial Numbers
- Vehicle Identifier (VIN, License Plate, etc)
- IP address
- Finger/Voice Print
- Any characteristic that uniquely identifies a person

# Should I Share Patient Information?

- Not every healthcare provider is entitled to know about a patient just because they're a healthcare worker
- Family and friends are not entitled just because they are family or a friend - patient consent must be given
- If you have access to clinical systems, you:
  - CAN access your own records
  - CANNOT view or access anyone else's without written consent (i.e. family, spouse, friends, neighbors, etc.)

Written consent for you to access someone else's records MUST be on file and acknowledged by Health Information Services before accessing the records.

# Things You Can Do to Protect PHI

## Phone calls to patients:

- Dial the right #
- Speak only with the patient unless you have written auth to speak to others
- Never leave details (i.e. test results, etc) on voicemail.



## Semi-private Rooms:

- ALWAYS ask if you can speak freely in front of visitors
- Speak as softly as possible, pull curtains, ask visitors to step out



## Giving Forms/Papers to Patients:

Check EVERY page for correct patient info

## Faxing PHI:

Always use a fax cover sheet, DIAL THE RIGHT NUMBER!

**Texting:** Use ONLY the AMS Connect app for texting PHI

FAX COVER SHEET

St. Luke's HOSPITAL  
222 S. Summit St. Suite 200  
Chapel Hill, NC 27517  
www.stlukes-oh.com

Please detach the following page(s) to:

SEND TO:	FROM:
PHONE NUMBER:	PHONE NUMBER:
FAX NUMBER:	FAX NUMBER:
DATE:	OFFICE LOCATION:

Total pages, including cover:  none  one page  two pages  three pages  four pages

This document contains information which is may be LEGALLY PRIVILEGED, PROPRIETARY IN NATURE, OR OTHERWISE PROTECTED BY LAW. PHISHING, REVERSE ENGINEERING, and its use or disclosure is strictly prohibited. If you are not the addressee, you are hereby notified that making, copying or distributing this document is prohibited. If you have received this document in error, please telephone or mail immediately and mail the document back to us at the above address. Thank you.

Comments

IF YOU HAVE QUESTIONS OR PROBLEMS RECEIVING THIS FAX, PLEASE CALL NUMBER 800-827-8725. THANK YOU.

# What You Need to Know About PHI and:

**Social Media:** No patient information, directly or indirectly, may be referenced or posted on social media, including photographs.



**Photographs/Video:** No videotaping, recording, or photographing of patients without written consent, and NEVER on personal mobile devices.

**Email:** Secure (encrypt) emails that contain PHI by typing [secure] in the subject line.

# Key Take-Aways

Casual review for personal interest of patients' medical records is unacceptable and against the law.

If it's not job related, don't look, share, post it or talk about it without written permission from the patient.

Secure PHI like it's your own!

# Patient Rights

- Dignity
- Compassion
- Cultural Sensitivity
- Informed Decision
- Participate in Care
- Choose Physician
- Respect
- Courtesy
- Communication
- Privacy
- Safe
- Know Caretaker

Regulatory Agencies investigate complaints/violations

# Patients have the Right to be Free from Abuse & Neglect

## ABUSE

- Intentional maltreatment of an individual that may cause injury, either physical or psychological (physical, emotional, financial/exploitation, sexual)

## NEGLECT

- The absence of minimal services or resources to meet basic needs of food, clothing, shelter, medicine and assistance with activities of daily living.

If there is reason to suspect, or if abuse/neglect is disclosed for a patient of any age group, Contact Care Management and your Manager immediately!

# Questions?

# Spiritual Care Services

# St. Luke's Practices Holistic Care\*

- To increase patient satisfaction.
- Because we engage in “best practices” of medicine.
- Because relationship-based care is an important part of the healing process.
- Because it is a Joint Commission requirement to provide spiritual support for patients and their families.
- Because research supports the benefits of spiritual care
- Because patients return to hospitals and remain loyal to healthcare providers who exceed their expectations.

*\*Holistic care is the integration of mind, body, and spirit.*

# Spiritual Care may:

- Relieve fear and decrease anxiety
- Increase relaxation
- Reduce heart rate and blood pressure
- Improve coping skills
- Improve quality of life and self-care
- Decrease the need for pain medication
- Provide hope and give a sense of peace
- Connect patients and families with the Divine
- Connect patients with their faith community

# Indications for Collaboration with Chaplains

- Suffering
- Complex medical decision making
- Spiritual and cultural practices
- New or difficult diagnosis
- Removal of life-sustaining treatment
- Actively dying patients
- Death/dying
- Referral to outside clergy
- Loss
- Grief
- Crisis
- Trauma

# Ethical and Moral Issues

St. Luke's adheres to all ethical standards for medicine. Our Spiritual Care staff team has specific training and experience in navigating ethical and moral issues.

We also offer support for members of the healthcare team or patients or family members experiencing moral distress.

Our chaplains are trained to offer:

- Critical Incident Stress Debriefings
- Staff Support for Morally-Distressing Events  
(Code Lavender)

# Spiritual Care Services

- St. Luke's chaplains are available 24/7/365.
- Regular office hours at Chesterfield are Monday-Friday, 8:00 am - 4:30 pm. Call the Spiritual Care Office at ext. 4301.
- Chaplains visit St. Luke's Des Peres Hospital and Surrey Place, Monday - Friday. Call the Spiritual Care Office if a chaplain is needed at these locations Monday-Friday, 8:00 am - 4:30 pm.
- Evenings, weekends and for help at all other locations, *please call the hospital operator for the On-Call Chaplain.*
- We offer a ministry of presence, a listening ear, spiritual guidance, prayer, help with medical decision making, and confidential, highly skilled support for whatever you are experiencing.

# Chapels

All Chapels are open 24/7 for prayer and meditation. Each site has worship and prayer services. Please call the Spiritual Care Office at ext. 4301 for more information about service times.

The Chapel and Spiritual Care Office at St. Luke's Hospital are located near the main entrance on the third floor.



The Chapel at St. Luke's Des Peres Hospital is located near the main entrance on the fourth floor.



The Chapel at Surrey Place is off the main lobby.



# Spiritual Care Staff

Rev. Emily Rosencrans, Director



Rev. Renita Heinzl, Senior Chaplain & ACPE Certified Educator



Rev. Nathan Burgell, Staff Chaplain



Rev. James Eckhardt, Staff Chaplain



Rev. Amelia McCown, Staff Chaplain



Paula Parcher, Administrative Assistant



# Spiritual Care Staff

Rabbi Laurence Glestein, On-Call Rabbi Chaplain



Rev. Tim Robinson, On-Call Chaplain



LUNCH!  
time

# AFTERNOON AGENDA

- Policy Pictionary – HR Business Partner
- St. Luke's FACES Culture and DEI – Leadership Coach
- Perks/Discounts/Passport to Wellness/EAP
- Adjourn

# Let's play – Policy Pictionary!

## *Key HR policies with your HR Business Partners*

- Tashera Dennis, Lead Business Partner  
[636-685-7858](tel:636-685-7858)
- Mary Smith, Business Partner  
[314-205-6629](tel:314-205-6629)
- Stephanie Vilmer, Business Partner  
[314-966-9623](tel:314-966-9623)
- Lisa Shin, Business Partner  
[314-966-9123](tel:314-966-9123)
- Elaine Tomlin, Business Partner  
[314-205-6017](tel:314-205-6017)
- The policies we will go over today are in your folders.
- All policies are on the intranet under Materials and Guides.

# **Policy Pictionary Possibilities**

**Tobacco Free Campus**

**Performance Review**

**Earned Time Off**

**Corrective Action**

**Preventing Harassment**

**Leaves of Absence**

**Time and Attendance**

**PURPOSE:**

The purpose of this policy is to maintain a workplace free from any type of unlawful harassment including sexual, ethnic or racial harassment.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**DEFINITION:**

Harassment as used in this Policy includes harassment based on race, religion, ancestry, national origin, age, genetic information, disability, pregnancy, military status or sex, or for any other basis protected by law.

**POLICY:**

St. Luke's will maintain a workplace free from any type of unlawful harassment, including sexual, ethnic or racial harassment. Any action that interferes with St. Luke's ability to provide a safe and harassment free environment for St. Luke's team members, patients, physicians, volunteers, applicants and guests will not be tolerated. Team members who violate this policy will be subject to corrective action, up to and including separation of employment.

**PROCEDURE:**

1. Harassment as used in this Policy, which includes harassment based on race, religion, ancestry, national origin, age, genetic information, disability, pregnancy, military status or sex, or for any other basis protected by law, is a violation of St. Luke's policy. This policy can be used by a team member who feels he or she is the victim of racial, religious, ancestry, national origin, age, gender, sexual orientation, gender identity or expression, genetic information or disability harassment. This policy does not apply to claims of harassment other than as outlined above.
2. Under this policy, sexual harassment may include:
  - Unwelcome sexual advances
  - Providing or withholding job advancements based on the request for sexual favors or lack of such favors
  - Unwelcome touching or sexual jokes
  - Requests for sexual favors
  - Verbal and/or physical conduct of a sexually harassing nature
  - Non-verbal conduct, such as a display in the workplace of demeaning, insulting, intimidating, or sexually suggestive objects, pictures, photographs or obscene gestures.

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3. Any team member who feels he or she has been a victim of or a witness to harassment should report the incident to his or her supervisor. The supervisor/manager is responsible to immediately report all incidents/complaints under this policy to a Human Resources Business Partner. If the supervisor is the offending party, the victim and witness must report the harassment to the next higher level of supervision or Human Resources. Individuals should not assume that St. Luke's is aware of the harassment. Team members who are aware of incidents that could violate this policy are responsible for reporting such incidents to their supervisors and/or Human Resources. If an individual believes an imminent threat is present and believes that his or her safety or the safety of others is in jeopardy, he or she can follow the Workplace Violence Policy and contact the Security Department in addition to Human Resources.
  4. For patient or visitor reports of harassment, neglect, or abuse, please refer to the Abuse and Neglect Policy (Section 11.)
  5. Human Resources is responsible for the investigation of all harassment complaints. A prompt, thorough, impartial and confidential investigation of the complaint will be conducted. All reports of sexual harassment or other offensive conduct will be reviewed and addressed by Human Resources in a sensitive and confidential manner, to the extent feasible and practical.
  6. When appropriate, any team member who violates this policy will be subject to corrective action up to and including separation of employment.
  7. St. Luke's prohibits any form of retaliation against team members, patients or visitors for reporting a complaint or providing information about harassment.
  8. All complaints under this policy will be taken seriously. All team members are responsible for ensuring compliance with this policy. A copy of this Policy is posted on the Intranet and in the Human Resources section III of the Administrative Manual. On an annual basis, team members are responsible for completing a required online education on harassment, bullying and respect.

**EXHIBITS:**

**RESOURCES:**

**Cross-Reference Documentation**

Standard(s) -

Policy – Abuse and Neglect  
Corrective Action

Form(s) –

**Approval:**

Janette Taaffe, VP Human Resources – September 2020

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**PURPOSE:**

St. Luke's has established certain policies and work rules in order to operate in an orderly and efficient manner. This policy sets guidelines to address any non-compliance with these standards.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**POLICY:**

St. Luke's team members' conduct reflects upon St. Luke's, therefore, team members are expected to observe the highest standards of professionalism at all times. Team member conduct, on or off duty, which violates policies and rules may result in corrective action, including separation with or without warning. The objective of corrective action is to correct any inappropriate behavior or violation of St. Luke's Policies, rules or standards as well as to prevent any reoccurrence of such behaviors or violations. The following procedure does not limit the discretion of St. Luke's in corrective action matters and does not prevent immediate action by St. Luke's. Situations being considered for corrective action will be reviewed according to the Just Culture process (Refer to Just Culture Policy in the HR Manual).

St. Luke's is an equal opportunity employer. All corrective action shall be initiated without regard to race, color, religion, national origin, ancestry, age, sex, sexual orientation, disability or veteran status.

**PROCEDURE:**

## 1. Corrective Action Process:

- a. Any situation that could result in corrective action will undergo a Just Culture review to determine what actions are appropriate. This review will occur prior to any decision on issuing formal corrective action (Refer to Just Culture Policy).
- b. The following should be used to document all formal corrective action on an Employee Conference Report. Corrective action for non-compliance with privacy standards shall be followed as outlined in Section 2. The original conference report must be provided to Human resources and filed in the team member's personnel file in Human Resources. Team member Conference Report forms are located on the Intranet under the Forms tab.
  - 1) Level 1 warning – for minor and/or initial incident.
  - 2) Level 2 warning – for a more serious or repeated incident or violation of St. Luke's policy, procedures, and/or standards. (Recommend notification to Human Resources Business Partners)

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- 3) Final warning – when Level 1 and/or Level 2 warning(s) are not successful in correcting behavior or for very serious incidents. (Final warnings require notification to Team Member Relations)

\*\*Active Level 2 and/or Final Warning – will hold merit increase until the warning has expired. Vice President approval required to transfer positions when on a Final Warning. See Merit Guidelines. \*\*

- 4) Suspension – for serious incidents when investigation is necessary or to allow appropriate management personnel time to resolve the situation. (Suspensions require notification to Business Partners)
- 5) Separation – for incidents which follow a Final warning or for serious incidents or violations of St. Luke’s policies, procedures, and/or standards. Separations require advance notification to Business Partners wherever practical. To complete a separation, the manager needs to complete an Employee Separation Form.

2. The corrective action process is designed to be progressive. This process normally follows the steps of a Level 1, Level 2, Final Warning, and/or Separation. However, based on the seriousness of the incident, St. Luke’s reserves the right to initiate the corrective action at any level of the process, regardless of the fact that a team member has not been placed on the previous level of corrective action.

### 3. Disciplinary Examples:

- a. This list is not intended to be all-inclusive. St. Luke’s specifically reserves the right to discipline, suspend and/or separate without warning any team member for conduct, behavior or violation of policy rules and standards it deems inappropriate or detrimental to its interests. In addition, St. Luke’s adherence to the employment-at-will doctrine is not altered in any way by providing these guidelines.

- 1) Absenteeism, tardiness, leaving early or unauthorized absence.
- 2) Failure to clock in/out when leaving St. Luke’s during scheduled work hours for personal reasons.
- 3) Knowingly clocking in/out for another team member, having one’s time clocked in/out by another, altering or tampering with the time keeping record in a way that may compromise accuracy or to reflect false data for any reason whatsoever.
- 4) Inappropriate use or wasting of time, loitering, leaving place of work during work hours without permission, unexcused absence from the work area or department, accessing an area where a team member has no legitimate work business during scheduled hours (includes excessive personal phone calls).
- 5) Intentional or inadvertent sleeping (i.e. dozing off) in an assigned work area during scheduled work hours.
- 6) Falsifying St. Luke’s Records including but not limited to time records, employment applications, fraudulent worker compensation claims, medical record documentation, reports, etc.

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- 7) Breach of Confidentiality (Refer to Confidential Information Policy in the HR Manual) including confidential information that compromises a patient's right to privacy. This right extends to team members when receiving health care services.
  - 8) Failure to obey or carry out orders, verbal or written.
  - 9) Insubordination (Refusal to carry out a verbal or written directive).
  - 10) Inability to maintain acceptable standards of work quality. Unsatisfactory work performance.
  - 11) Failure to follow department policy or established procedure.
  - 12) Carelessness or inefficient work habits.
  - 13) Improper conduct/language such as immoral, indecent or disorderly conduct, or using profane, abusive, insulting or threatening language in the workplace which involves fellow team members, visitors or families.
  - 14) Patient abuse or neglect involving physical, emotional abuse and/or neglect, or using profane, abusive, insulting or threatening language to a patient (Refer to Abuse and Neglect Policy).
  - 15) Failure to demonstrate corporate value expectations. Inclusive of inappropriate communications/actions to patients, families and others as well as conduct that may disrupt operations, display a lack of cooperation, or other actions that compromise overall efficiency, effectiveness and productivity of the area.
  - 16) Boisterousness behavior which may endanger team members, patients, visitors, or families or may result in accidents, physical injury and/or damage to St. Luke's property.
  - 17) Theft.
  - 18) Sexual or other harassment (Refer to No Harassment Policy).
  - 19) Aggressive, threatening or violent verbal or physical acts (direct or indirect) of any nature including intimidating, coercing, or interfering with fellow team members, patients, families or visitors. Vandalism, arson or sabotage. Stalking, fighting or provoking a fight, or any other act which in management's opinion is inappropriate for the workplace (Refer to Workplace Violence Policy).
  - 20) Reporting to work under the influence of illicit drugs, narcotics or any other substances that may render a team member unfit to work (Refer to Drug-Free Workplace Policy).
  - 21) Failure to comply with any provisions of a Return to Work Agreement (Refer to Drug Free Workplace Policy).
  - 22) Violations of safety procedures.
  - 23) Creating or contributing to unsanitary conditions or poor housekeeping.

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- 24) Smoking or use of tobacco products in unauthorized/non-designated areas of St. Luke's and/or non-designated times. (Refer to Tobacco Free Organization Policy in the EOC Life Safety Manual).
  - 25) Unauthorized possession of firearms or explosives on St. Luke's premises (Refer to Firearm and Weapons Policy in the EOC Security Manual).
  - 26) Gambling on St. Luke's premises.

4. Non-Compliance with Privacy Standards:

- a. Any situation involving non-compliance with privacy standards that could result in corrective action will undergo review by the Privacy Officer and Corporate Compliance Officer or their designee in conjunction with the department chief, director and/or manager to determine appropriate actions. This review will occur prior to any decision on issuing formal corrective action.
- b. Corrective action for physicians will be in accordance with Medical Staff Bylaws and Rules and Regulations.
- c. For the purposes of this policy, "Offense" is defined as each 'look' or instance in which a patient's protected health information (PHI) is accessed in a paper record or via the electronic clinical systems without a valid job-related reason or authorization, or each 'tell' or instance in which another person is told of a patient's PHI obtained through an individual's position at St. Luke's where that other person has no authorization or valid job-related reason to receive the patient's PHI.

**Offenses for Non-Compliance with St. Luke's Privacy Standards**

*If the team member is already on a step of corrective action for misconduct or other performance related reasons, an offense for non-compliance with privacy standards will advance the corrective action to the next step.*

**Type 1: Inadvertent Access or Disclosures of PHI in Any Format**

Type 1 Discipline

1st Offense: Level 1 up to and including Termination

2nd Offense: Final Warning or Termination

3rd Offense: Termination

Examples:

- Failure to sign off or lock a computer with access to PHI when leaving it.
- Failure to follow guidelines for use of fax, mail, email, computer or other transmission of patient information causing a disclosure to an unintended recipient
- Failure to encrypt emails with PHI to recipients outside St. Luke's
- Failure to encrypt any hospital owned laptop or portable electronic device that is not in a secured St. Luke's location

**Type 2: Intentional Access and Willful Disregard - "Looked and/or Discussed Without Valid Reason or Permission"**

Type 2 Discipline

1st Offense: Final Warning or Termination

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## 2nd Offense: Termination

### Examples:

- Sharing a password with a co-worker
- Accessing a patient's confidential medical, billing or demographic information for which there is no job-related responsibility or written authorization, including patients who are friends, co-workers and/or family
- Discussing confidential medical, billing or demographic patient information gleaned from normal course of work with others for which there is no job-related responsibility or written authorization to share the information, including patients who are friends, co-workers and/or family

## Type 3: Purposeful Intent

### Type 3 Discipline

#### 1st Offense: Termination

### Examples:

- Using another's password without their knowledge or permission to access PHI for which you have no job-related responsibility or written authorization
- Accessing and/or releasing data with PHI for personal gain
- Accessing and/or releasing data with PHI with intent to harm the reputation of an individual or St. Luke's
- Unauthorized or impermissible disclosure or access of HIV results/status, records of sexual assault, drug, alcohol, psychiatric or **any condition** with special protection from the state or federal government.

## 5. Issuing Corrective Action:

- a. For serious privacy related infractions, a team member may be suspended pending an investigation or to allow appropriate managerial personnel time to resolve the situation. Suspension will be with pay if the team member is found not to be at fault and is reinstated. If the investigation results in separation of employment, the suspension is without pay and the separation date is the date the final decision to separate is made.
- b. All aspects of a team member's performance are considered in determining progressive corrective action. For instance, absenteeism, defective and improper work, or violating a St. Luke's policy will be considered for the purposes of corrective action.
- c. The Employee Conference Report must be completed by the department supervisor or manager, must clearly indicate an explanation of the incident, and show a time frame to show improvement. Additional documentation may be attached if the remarks section does not provide sufficient space.
- d. The time frame the warning will be in effect must be marked clearly on the Employee Conference Report. Final Warnings issued for non-compliance with privacy standards are indefinite and do not expire.

*Note: Attendance related corrective actions are in effect until the team member is considered to be meeting current attendance policy standards. If a corrective action was issued previously and in effect for other reasons, the previous correction will remain active until the expiration date is reached.*

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- e. The supervisor should confidentially discuss the matter with the team member.
  - f. All Employee Conference Reports should be signed by the department director, supervisor or manager. The team member will be asked to sign the Employee Conference Report form to acknowledge receipt and understanding. The team member may add or attach any comments. If the team member refuses to sign the form, it should be indicated by placing a check in the designated box on the form. Team member signature indicates neither agreement nor disagreement, but does indicate a corrective action has been discussed.
  - g. Supervisors are encouraged to provide information regarding the Employee Assistance Program as a resource in an effort to assist team members with any difficulties they may be having. Formal corrective action may result in a supervisor referral, in which case the supervisor or manager would be informed by the EAP whether or not the meeting took place. If either is the case, select the appropriate option in the section of the Conference Report regarding EAP. (See EAP Supervisory Referral Form, Team member Assistance Policy.)
  - h. It is necessary that the supervisor or manager inform a Business Partner regarding cases involving a Final Warning, Suspension or Separation. All counseling should be performed in a confidential manner. Therefore, if another individual's presence is needed (i.e. Business Partner, Security, Manager, etc.), they should be selected on a need-to-know basis as appropriate and should not be a peer or co-worker. This individual should provide their signature on the second signature line. While a witness is not required to carry out corrective action, at times the situation may warrant a witness. The second signature on the form can be from another Manager or Human Resources.
  - i. After reviewing the corrective action with the team member, the report shall be distributed as follows:
    - 1) The original Employee Conference Report shall be forwarded to the Business Partner to be made part of the team member's personnel file.
    - 2) A copy shall be maintained by the department
    - 3) A copy shall be given to the team member

**Cross-Reference Documentation**

Standard(s) -

Policy – Just Culture  
 Confidential Information  
 Abuse and Neglect  
 Workplace Violence  
 Drug-Free Workplace  
 Tobacco-Free Organization  
 Firearms and Weapons  
 Team Member Assistance

Form(s) - Employee Separation Form  
 Employee Conference Report  
 EAP Supervisory Referral Form

**Approval:**

Jeanette Taaffe, VP Human Resources – February 2020

**PURPOSE:**

St. Luke's is committed to providing a safe and non-violent environment for its Team Members, patients, guests, and visitors.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**DEFINITIONS:**

**Threat:** Defined as any expressed intention, verbal or physical, directly or indirectly, to harm an individual, endanger a group of team members, patients or visitors on the premises, or destruction of property.

**Direct Threat:** Defined as any behavior which a reasonable person would interpret as a potential physical assault or use of a weapon or actions or statements that have the immediate potential to place persons or property in imminent danger.

**POLICY:**

Aggressive, threatening or violent acts of any nature will not be tolerated. These include, but are not limited to the following:

- Verbal or physical threats, intimidation or coercion
- Fighting or provoking a fight
- Stalking
- Vandalism
- Use or carrying of weapons on the property
- Sabotage
- Arson
- Any other act, which in management's opinion, is inappropriate to the workplace

Appropriate action will be taken against anyone who is found to be in violation of this policy. Patients and visitors will be subject to removal from the premises and/or prosecution. Team Members will be subject to corrective action, up to and including termination and/or prosecution.

**PROCEDURE:**

1. Team Members who feel they have been subjected to any of the behaviors listed above, or other behaviors of an aggressive, threatening or violent nature, will report the incident immediately to their supervisor, the Security Department, or a Human Resources representative.
2. Supervisors are required to report all incidents to the Human Resources Department.

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3. If team members feel their safety or the safety of someone else is in jeopardy, they should follow the process for an Imminent Threat.
  4. Additionally, a report of any acts or threats of violence will be completed by the Security Department.
  5. Response to Imminent Threat:
    - a. When the nature of a threat involves imminent and/or serious physical harm, team members should immediately contact the Switchboard by dialing “0” and requesting an overhead page for “Dr. Strong”. Be sure to provide the location of the incident. The operator will then page “Dr. Strong, please report to \_\_\_\_\_”. This announcement will be repeated four times.
    - b. A Security Officer, the Assistant Director of Nursing (ADON) and the supervisor/manager of the area will respond to the “Dr. Strong.”
    - c. Those responding will be briefed on arrival. Team Members will take direction from the Security Officer, ADON, manager of the area and/or law enforcement personnel.
    - d. If possible, access to the area should be restricted. Team Members, patients or visitors should be moved away from the area.
    - e. If the incident involves a team member, the Security Department will notify Human Resources. If needed, Human Resources will notify an Employee Assistance Program (EAP) counselor (see Employee Assistance Program Policy).
    - f. If a weapon (i.e. firearm or knife) is involved, or the team member feels a law enforcement presence is required, staff may call 911 first, then contact the Security Department at ext. 4312 or request the switchboard to make notification to the Security Department. “Dr. Strong” will not be paged overhead if the incident involves a weapon.
      - 1) A Security Officer(s) and law enforcement will respond to the incident.
      - 2) Those responding will be briefed on arrival. Team members will take direction from the Security Officer and/or law enforcement personnel.
      - 3) If possible, access to the area should be restricted. Team members, patients and visitors will be moved away from the area.
      - 4) The administrator on call and the ADON will be notified by Security in a timely manner. The ADON will determine if a Phase 1 activation of the Incident Command is needed.
      - 5) If the incident involves a team member, the Security Department will notify Human Resources. If needed, Human Resources will notify an EAP counselor.
  6. Post Incident
    - a. If an incident requires a Security Officer and law enforcement involvement, the area will not be cleaned. Nothing will be removed from the area until approval from the Security Department or the police have been granted.
    - b. The supervisor or manager of the area will evaluate the needs of patients, visitors and staff that were involved or witnessed the incident.

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- c. Debriefing/Counseling for team members who experienced/witnessed workplace violence will be offered. For educational purposes, it is recommended that the supervisor or manager of the area review/analyze the “Dr. Strong” with staff members.
  - d. Incidents of workplace violence will be reviewed by the Security Department. Major incidents will be evaluated within 24 hours of their occurrence.
  - e. Incidents of workplace violence will be reported at the Environment of Care Committee and reviewed by type of incident as listed below and outcome.
    - 1) Team member to team member violence
    - 2) Patient to team member violence
    - 3) Stranger to team member violence
    - 4) Significant other to team member violence

7. Assessment of Potential Workplace Violence

- a. Managers and Supervisors will be aware of potential signs of violent behavior in order to minimize the risk of violent or threatening incidents.

8. Training:

- a. Managers, Supervisors, and Team members who work in areas identified as having a higher than average risk for workplace violence are required to attend an initial Crisis Prevention Training (CPI) session, and a refresher course thereafter on a periodic basis.
- b. All new team members will receive education pertaining to the Workplace Violence Policy during their initial hospital Orientation.

**Cross-Reference Documentation**

Standard(s) -  
Policy –  
Form(s) –

**Approval:**

Janette Taaffe, VP Human Resources – June 2020

## **ADMINISTRATIVE MANUAL**

### **TOBACCO FREE**

St. Luke's is dedicated to the philosophy of prevention of disease and the promotion of good health.

Smoking-related illness and death is the number one health problem in the United States today. Cigarette smoking has been identified as the single largest known preventable cause of cancer and has been linked to emphysema, heart disease and birth defects. Research has also shown that non-smokers, exposed to second-hand smoke, are at an increased risk for developing smoking-related diseases.

St. Luke's Hospital feels a responsibility as a health care provider to be a leader in the community and to serve as a role model for others in the promotion of healthy lifestyle behaviors. In keeping with our mission and philosophy to promote the health and well-being of our patients, team members and visitors, and in compliance with Missouri State Regulations, the following Tobacco-Free Policy is in effect.

#### **SCOPE**

This policy applies to all team members, including all staff at off-site locations, patients, medical staff, students, contracted personnel, auxiliaries, volunteers, visitors, vendors and tenants of SLH and the general public. Tobacco products include but are not limited to pipes, smokeless tobacco, electronic cigarettes, cigarettes, cigars, snuff, herbal tobacco and vaping products.

Every team member, visitor, patient and physician is responsible for adhering to this policy. All team members are authorized to communicate this policy with courtesy and diplomacy, especially with regard to visitors and patients.

#### **PROCEDURE**

1. Tobacco use is prohibited on the St. Luke's campuses and all of its facilities including all of the following areas owned and/or operated by the hospital:  
*The hospitals and medical office buildings, parking facilities, adjacent offices including administrative and physician offices and offices affiliated with the hospital but not physically adjacent to the hospital (where approved).*
2. All staff have the responsibility of adhering to the Tobacco Free Policy. Additional responsibilities include:

**HR Responsibilities:**

- HR will communicate to all applicants that St. Luke's is a tobacco-free facility
- The Tobacco-Free Policy will be reviewed in Orientation
- Work with Passport To Wellness committee to offer education and support measures to staff who use tobacco

**Manager Responsibilities:**

- Support team members who use tobacco by encouraging them to attend classes and use other support measures
- Educate all staff on the Tobacco-Free policy
- Enforce the Tobacco Free policy for area of responsibility. Violation of this policy will be treated like violation of other policies, and may result in corrective action up to and including separation of employment if initial reminders and support measures are unsuccessful

**Team member Responsibilities**

- Team members are all authorized and encouraged to communicate this policy with courtesy and diplomacy to coworkers, patients, and visitors
- Team members smoking or using tobacco products on a St. Luke's owned or leased facility will be in violation of the Tobacco Free Policy, and may be subject to corrective action if initial reminders or support measures are not successful

**Security Responsibilities**

- Security staff are assigned to approach team members, patients and visitors and remind them of our Tobacco-Free status
  - Team members who are approached by Security for tobacco use on a St. Luke's facility will be reported to their Department Manager for follow-up
3. The selling of tobacco products in the Hospital Gift Shop or on any St. Luke's facilities is prohibited.
  4. Tobacco product use will not be allowed in St. Luke's owned vehicles.
  5. "No Smoking" signs will be posted in all buildings and areas controlled by St. Luke's where patients are seen or housed.
  6. Upon admission, patients are to be informed of our smoking policy. Outpatients are informed by signage at registration and by other postings.

7. Staff will address patients who are non-compliant. If patients continue to be non-compliant they will be reported to Security for additional assistance in addressing the issue with the patient.
8. Visitors who are continually non-compliant may be asked to leave the building.
9. Security will create incident reports on unique reported incidents of smoking.

### **ENFORCEMENT**

Team members who violate this “Tobacco-Free Policy” will be subject to the same disciplinary actions (progressive discipline) that accompany infractions of other hospital policies. All managers are responsible for consistent application of this policy and the disciplinary process in their areas.

### **COMMUNICATION**

Communication of this policy will be done through new team member orientation, word of mouth, signs, and other written communications as appropriate.

### **SUPPORT**

A variety of tobacco-cessation classes are available through the Community Outreach Department. Additional educational resource material is also accessible in the Health and Cancer Education Center.

Contact Person: Janette Taaffe, Human Resources

Revised: January 2006

Reviewed: May 2011

Revised: January 2013

Revised: March 2017

Revised: June 2017

Revised: March 2020

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**PURPOSE:**

To provide guidelines for the use of Family and Medical Leave of Absence (FMLA) benefits.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**POLICY:**

Team members who have worked for St. Luke's for at least 12 months or 52 weeks (does not need to be consecutive) and have worked at least 1,250 hours (actual hours worked) during the 12-month period immediately preceding start of FMLA leave are eligible for this benefit.

If, any team member anticipates the possibility of taking Family or Medical Leave, or if they have any questions about the application of this policy to a particular situation, the team member should contact their respective manager and/or the Human Resources Department.

**DEFINITIONS:**

**Son or Daughter:** Includes not just biological or adopted children but also foster children, stepchildren, legal wards and the son or daughter of individuals who serve in loco parentis.

**In Loco Parentis:** Persons standing as "those with day-to-day responsibilities to care for financially support a child".

**Immediate family member** is defined as a spouse, child or parent.

**Serious health condition** means an illness, injury, impairment, or physical or mental condition that involves either:

- **Inpatient care** (i.e., an overnight stay) in a hospital, hospice or residential medical-care facility including any period of incapacity (i.e., inability to work, attend school or perform other regular daily activities) or subsequent treatment in connection with such inpatient care.
- **Continuing treatment** by a health care provider includes:
  - A period of incapacity lasting more than three consecutive, full calendar days and any subsequent treatment or period of incapacity relating to the same condition, which also includes treatment two or more times (within 30 days) by or under the supervision of a health care provider (first visit within 7 days) or one treatment by a health care provider (within 7 days of the first day of incapacity) with a continuing regimen of treatment;
  - Any period of incapacity related to pregnancy or prenatal care. A visit to the health care provider is not necessary for each absence;
  - Any period of incapacity or treatment for a chronic serious health condition which continues over an extended period of time, requires periodic visits to a health care

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provider (at least 2 visits per year) and may involve occasional episodes of incapacity (i.e., asthma, diabetes). A visit to a health care provider is not necessary for each absence;

- A period of incapacity that is permanent or long-term due to a condition for which treatment may not be effective (i.e., Alzheimer's, a severe stroke, terminal cancer). Only supervision by a health care provider is required rather than active treatment;
- Any absences to receive multiple treatments for restorative surgery or for a condition which would likely result in a period of incapacity of more than three days if not treated (i.e., chemotherapy or radiation treatments for cancer).

**Eligible Service Member is defined as:**

- Member of Armed Forces, National Guard or Reserves
- Who is undergoing medical treatment, recuperation or therapy
- Is otherwise in outpatient status, or
- Is otherwise on temporary disabled retired list for serious injury or illness
- Team members eligible for military caregiver leave include an eligible team member who is a spouse, child, parent, or next of kin to the service member.
- Team members eligible for qualifying exigencies leave include an eligible team member who is a spouse, child or parent to the service member.

**Qualifying Exigencies include:**

- Short-notice deployment;
- Military events and related activities;
- Childcare and school activities;
- Financial and legal arrangements;
- Counseling;
- Rest and recuperation'
- Post-deployment activities;
- Additional activities not encompassed in the other categories, but agreed to by the employer and team member.

**Health Care Provider means:**

- Doctors of medicine or osteopathy authorized to practice medicine or surgery by the state in which the doctors' practice;
- Podiatrists, dentists, clinical psychologists, optometrists, and chiropractors (limited to manual manipulation of the spine to correct a subluxation as demonstrated by X-ray to exist) authorized to practice and performing within the scope of their practice under state law;
- Nurse practitioners, nurse-midwives and clinical social workers authorized to practice and performing within the scope of their practice as defined under state law;
- Christian Science practitioners listed with the First Church of Christ, Scientist in Boston, Massachusetts;
- Any health care provider recognized by the employer or the employer's group health plan's benefits manager; and
- A health care provider listed above who practices in a country other than the United States and who is authorized to practice under the laws of that country.

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## **QUALIFYING REASONS:**

An eligible team member may be granted leave under the FMLA for one or more of the following qualifying reasons:

1. To care for a son or daughter with a serious health condition.
2. The birth of a son or daughter of the team member and in order to care for such child.
3. Placement of a son or daughter with the team member for adoption or foster care.
4. To care for an immediate family member with a serious health condition.
5. The serious health condition of the team member.
6. For any qualifying exigency arising out of a family member's active duty or call to active duty in the National Guard or Reserves in support of a contingency operation.
7. To care for an injured or ill covered service member.

## **AMOUNT, DURATION AND TYPES OF LEAVE:**

1. An eligible team member may be granted up to 12 workweeks of leave under the FMLA during a 12-month period for reasons 1 through 4 as listed above in section B and up to 26 workweeks of leave during a 12-month period for reason 5 as listed above in section B.
2. St. Luke's follows a "rolling" 12-month period method to measure the use of up to 12 workweeks of FMLA during a 12-month period for all qualifying reasons except reason 5 in section B. For the care of an injured or ill service member, which allows up to 26 workweeks of FMLA time, a "single 12-month period" method is used. This means the 12-month period begins on the first day of the approved FMLA leave and ends 12 months after that date.
3. Under some circumstances, eligible team members may take FMLA leave intermittently or on a reduced leave schedule.
4. If both spouses are employed by St. Luke's Hospital, they are limited to a combined total of Twelve (12) workweeks of leave under FMLA for the birth of a child or placement of a child for adoption or foster care (leave must conclude within 12 months of the birth or placement).

## **PROCEDURE:**

1. When the need for leave is foreseeable, the team member must provide at least 30 days advance notice. When the team member becomes aware of a need for FMLA leave less than 30 days in advance, notice of the need should be provided to Prudential within three days. When the need is not foreseeable, the team member must comply with usual and customary notice and procedural requirements for requesting leave, absent unusual circumstances. Team members must provide sufficient information for Prudential to reasonably determine whether the FMLA may apply to the leave request. Leave should be requested by contacting Prudential at 877-367-7781.
2. Prudential will review for FMLA. Team members must have worked 12 months and 1250 hours in the previous 12 months. Team members with intermittent or multiple leave requests

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need to have eligibility evaluated on an ongoing basis when the need for FMLA usage occurs.

3. When calling to report an absence, the team member is responsible for stating if the absence is related to an active FMLA. The team member must also call Prudential to report the absence. It is then the manager, or their designee's, responsibility that this is recorded to the appropriate leave(s) and in Kronos.
4. Prudential will respond to the team member's request by completing and forwarding to the team member Employee Rights and Responsibilities under the Family and Medical Leave Act and the appropriate certification form within five business in compliance with FMLA regulation.
5. Prudential will discuss the following:
  - a. The required forms; including the Certification of Health Care Provider for Serious Health Condition (Family and Medical Leave Act) form
  - b. Expected commencement date of the leave and return to work date;
  - c. Requirements related to reporting status updates while on leave;
  - d. Prudential will send the Employee Fit for Duty/Return to Work Form will be sent to the team member. The team member will need to provide the document to their manager or Human Resources prior to their return to work.
6. During an approved leave provided under this policy, team members shall first exhaust all available Earned Time Off (ETO) hours for scheduled shifts that he/she misses and/or Earned Sick Bank (ESB) as applicable for their own health condition, before continuing such leave on an unpaid basis.
7. Use of paid time during FMLA is outlined in St. Luke's ETO policy.
8. If the leave is due to a work-related injury, the team member will be compensated according to the Missouri Workers' Compensation law, and this time off will be charged to the team member's FMLA entitlement (see Worker's Compensation Policy).
9. Prudential will provide email updates for approved and denied leave time off requests. If the leave is intermittent, the supervisor/manager or their designee may use the tracking calendar to keep track of leave usage and remaining balances of available FMLA hours in that rolling 12-month period. During the leave, the team member should keep their manager and Human Resources informed of their status and when they reasonably expect to return to work. Prudential may also request team members re-certify their leave if the frequency and dates do not meet the criteria originally approved by the health care provider.
10. As far in advance as possible, but no less than 2 days prior to the stated day of return to work, the team member should contact their manager and Human Resources to confirm their intent to return to work date and complete a "Fit for Duty Return to Work" form.
11. If the leave is due to the team member's own serious health condition, prior to returning to work, a "Fit for Duty/Intent to Return to Work" form should also be submitted to Human Resources in advance to validate the ability to return to work, any work restrictions and the duration of the work restrictions. If the appropriate documentation is not submitted by the return to work date, the team member may not be allowed to return to work until documentation is provided and approved.

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12. Human Resources will review any work restrictions with the team member's supervisor/manager and Human Resources will respond to the team member regarding reasonable accommodations for work restrictions in advance of the team member's return to work date.
  13. Team members whose leave is continuing will require recertification. This will occur at least annually, although recertification may be requested more frequently. Recertification can be requested in a variety of situations including:
    - a. The team member is seeking an extension of the original time off approved
    - b. The frequency of illness exceeds the amount documented in the approved certification
    - c. If information is received that casts doubt on the information in the certification or the nature of the illness
  14. If the annual performance appraisal is due during the leave, it should be completed in a timely manner and forwarded to Human Resources for processing. While on leave, the merit may be put on "hold" and reviewed with the team member upon his/her return to work. If a merit increase is warranted, it will be released upon the team member's return to work and will be effective retroactive to the team member's annual performance evaluation date.
  15. If the team member fails to return to work on the return to work date or after 12 weeks of authorized leave, whichever occurs first, Human Resources, in conjunction with Prudential and the department manager, will notify the team member of their failure to comply with the leave policy.
  16. In some situations, team members may be eligible for additional non-job protected leave time. (See other Leave of Absence Policies that may apply). St. Luke's Hospital is committed to following the Americans with Disabilities Act Amendments Act and applicable state statutes. Therefore, if these laws offer greater rights, whether federal or state, those rights will apply.

## **EXHIBITS:**

**Exhibit A:** Family and Medical Leave of Absence Form

### **Cross-Reference Documentation**

Standard(s) -

Policy – Leave of Absence – Medical Non-FMLA  
Leave of Absence - Military  
Leave of Absence - Personal

Form(s) -

### **Approval:**

Jeanette Taaffe, VP Human Resources – January 2020

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**PURPOSE:**

To provide guidelines for requesting a medical leave of absence that is non-FMLA related.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**POLICY:**

The Team Member Medical Leave of Absence is designed to allow approved time off for team members not eligible for FMLA for their own health condition or have exhausted their 12-week FMLA entitlement for their own health condition. Team members who do not qualify for FMLA may request a Team Member Medical Leave of Absence for their own health condition. Requests and approval for team member medical leave will be on a consecutive leave basis only. **Intermittent or Reduced Hours leave is not permitted under the Team Member Medical Leave of Absence for those who do not qualify under FMLA.** Requests, made through Prudential, are subject to a maximum of 12 week increments. Twenty-four (24) weeks of medical leave (including, if applicable, 12 weeks under FMLA) are allowed as a guideline, but actual medical leave time will be based on a case-by-case evaluation of the team member condition and needs.

Human Resources will coordinate appropriate leave dates with the department manager. All team member medical Leave of Absences are subject to supervisory and Human Resource approval. Time taken under leave policies are counted toward the 24-week maximum and are reported to Prudential for absence tracking purposes.

The ETO and/or ESB Policy will be applied, as appropriate. When on a non-paid Leave of Absence, team members do not accrue benefit hours. Team members out on a non-paid leave are responsible for submitting monthly medical, dental, vision and all other premiums as applicable to Human Resources by the first of each month or coverage will be discontinued. Team members will receive notice prior to any coverage being discontinued.

**PROCEDURE:**

1. Team members may request a team member medical leave of absence through their immediate supervisor and by contacting Prudential at (877) 367-7781.
2. Before a leave of absence ends, the team member must contact their immediate supervisor to let him/her know that they are available and intend to return to work. Before being returned to work, the team member who is on team member medical leave of absence as a result of their own serious health condition will be required to have completed the "Employee Fit for Duty/Return to Work" form and have obtained a medical release. The form may be turned into the supervisor or submitted to Human Resources prior to returning from leave.

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3. Team member must contact their supervisor regarding work schedule. This form must include information stating that the team member is able to return to work without or with restrictions. Team members must be able to perform all the essential functions/duties of their job in order to return to work.
  4. Team members out on an approved Medical Leave of Absence are considered to be in a non-job protected status. Their department is not obligated to hold their position open for the duration of their leave. Team members should stay in communication with their manager while on leave so they are aware if their position is still available once they are released to return to work.
  5. Team members whose position is no longer available upon their return date will be given consideration for open positions for which they qualify. Refusal to accept an offer of work constitutes voluntary resignation.
  6. If no position is available upon their release/return, a team member may make application for a Personal Leave for up to 30 days (see Personal Leave of Absence Policy) to explore transfer opportunities. The leave will be non- paid 30 days if under the Workers' Compensation Policy.
  7. If the leave is due to a work related injury the team member will be compensated according to the applicable Missouri Workers' Compensation Law, and this time off will be charged to the team member's medical leave of absence time off (see Workers' Compensation Policy).
  8. Full time team members out for over 90 days for their own health condition may be eligible for Long Term Disability benefits. Please refer to the Benefit Summary Book or contact the Benefits Office for information regarding disability benefits.

**EXHIBITS:**

Exhibit A: Employee Fit for Duty / Return to Work

**Cross-Reference Documentation**

Standard(s) -

Policy –

Form(s) - Employee Fit for Duty/Return to Work

**Approval:**

Jeanette Taaffe, VP Human Resources – January 2020

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**PURPOSE:**

To provide guidelines for requesting a leave of absence that is related to educational needs.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**POLICY:**

An Educational Leave of Absence is considered on a case-by-case basis and must be job related as defined in St. Luke's Tuition Reimbursement policy. The ETO policy will be applied if appropriate.

Requests for an Educational Leave of Absence (LOA) more than fourteen (14) calendar days will be reviewed on a case-by-case basis and require supervisory, Human Resource, and Vice President approval and will not exceed 24 weeks. If approved, a maximum of (one) Educational Leave is permitted within a 12-month period. Team members out on an approved Educational Leave for greater than 14 days need to contact their supervisor or Human Resources to discuss their ability to return to work.

**PROCEDURE:**

1. A team member requesting an Educational LOA must call Prudential at (877) 367-7781 and submit to their respective manager and the Human Resources Department for approval.
2. If the Educational LOA extends beyond fourteen (14) calendar days and is unpaid, a Change Request Form must be completed to change the FTE status. This form must be submitted effective the first unpaid day beyond (14) calendar days of leave and when all eligible/applicable accruals have been exhausted.
3. When on a non-paid Educational LOA, team members do not accrue benefit hours. Team members out on a non-paid leave are responsible for submitting monthly medical, dental, vision and any other premiums as applicable to Human Resources by the first of each month or coverage will be discontinued. Team members will receive notice prior to any coverage being discontinued.

**Cross-Reference Documentation**

Standard(s) -

Policy – Tuition Reimbursement

Form(s) - Change Request

**Approval:**

Jeanette Taaffe, VP Human Resources – January 2020

**PURPOSE:**

To provide guidelines for requesting a military leave of absence.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**POLICY:**

Pursuant to the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA), team members, other than special assignment team members, and including per diem team members, who are military reservists including the National Guard, called to active duty or who are committed to military service other than weekend duty, must call Prudential at (877) 367-7781 to request a military leave of absence. Prudential will send email notifications upon receipt and approval.

**PROCEDURE:**

1. Benefits:

- a. A team member beginning a Military Leave of Absence is responsible for making the appropriate team member premium payments to the Human Resources Department to continue health, dental, vision and life insurance coverage. The team member has the option, however, of suspending health, dental, vision and life insurance coverage for the period of the leave and coverage may resume upon his/her return to work.
- b. Depending on the period of service specified in the military orders, St. Luke's may offer the worker and family members an election for continuation coverage up to a period of twenty-four (24) months at their own cost. For military service of less than 30 days, employers are required to maintain medical coverage as if the service member had remained employed.
- c. Regarding benefits that are based on length of service, the law requires individuals to be accorded such benefits upon reinstatement in the same manner as if they had remained continuously employed. Reinstated team members are entitled to full seniority benefits.
- d. For team members called to non-routine active duty, St. Luke's will provide pay to equal the difference between the Military pay and St. Luke's base pay rate for a period not to exceed 90 days annually. If a team member is called to active duty for more than 90 days in a calendar year, the situation will be reviewed on a case-by-case basis. This compensation will not apply to the regular two-week or weekend training required for individuals in the reserves.
- e. Upon request, a team member participating in their routine training or weekend obligations may be paid any ETO that was accrued and/or unused prior to the start of

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military leave. If ETO accruals are unavailable or exhausted, an unpaid Military Leave will be in place, and benefit accruals will cease. Benefit accruals will resume when the team member returns to active status.

- f. Benefit accruals will cease during military leave and will resume when the team member returns to active status. Upon request, a team member called up for military service/active duty may elect to use any accrued ETO in lieu of unpaid leave during their military leave of absence.
  - g. USERRA provides that service in the uniformed services is deemed to be service with the employer for pension purposes. Therefore, pension plan accrual and vesting must continue during a worker's military service as though no break in service occurred. For contributory plans (such as the matched savings plan), the returning team member must be allowed to make up missed deferrals or contributions over a period equal to three times the period of military service but no longer than five (5) years.
  - h. The Employee Assistance Program (EAP) continues to be available to team member's dependents throughout the military leave period.
2. Advance Notice/Applying for Reemployment:
- a. Team members called to active duty may be placed on military leave as soon as they receive military orders. Members of the uniformed services who are called to active duty are "generally required" to give verbal and/or written (preference: hand carry a copy of written orders) notice of their upcoming absence to their manager and fax to Prudential.
  - b. A team member who does not give advance notice that he/she is leaving because of military duty would no longer be protected under USERRA.
3. Reemployment Rights:
- a. Upon a team member's honorable discharge or release from active duty under honorable conditions, the team member must clearly communicate with HR and/or their manager of their intent to return to work under their reemployment rights. St. Luke's will provide the same or an equivalent job in terms of seniority and pay level as the team member held prior to his/her leave.
  - b. The team member may be on military leave for up to five (5) years of active duty, not including training time (regardless of branch of service).
4. Reemployment Documentation:
- a. USERRA provides time limits, based on length of military service, during which returning workers must apply for reemployment. Team members who fail to report within the specified time limits would be subject to the employer's rules and practices dealing with un-excused absences (up to and including suspension and ultimately discharge), but, would not necessarily lose all reemployment rights.
  - b. A team member who does not return to work at the end of an authorized leave will be considered to have voluntarily resigned.
  - c. St. Luke's requests documentation from a returning service member that proves the individual is eligible for reemployment. Specifically, St. Luke's will request proof that

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the team member has made timely application; has not exceeded service limitations and has been released from service under honorable conditions. All documents should be provided to Human Resources

d. Service Time:

- 1) **Service less than thirty-one (31) days** -- Team members must report at the beginning of the first regularly scheduled workday after release from service. Team members must be allowed a “reasonable” time to arrive back at their residence, rest, and travel to their place of employment.
- 2) **Service from thirty-one (31) to one hundred eighty (180) days** -- Team members must report no later than fourteen (14) days following completion of service.
- 3) **Service over one hundred eighty (180) days** -- Team members must report no later than ninety (90) days after completion of military service.

**Cross-Reference Documentation**

Standard(s) -

Policy –

Form(s) -

**Approval:**

Jeanette Taaffe, VP Human Resources – January 2020

**PURPOSE:**

To provide guidelines for requesting a personal leave of absence.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**POLICY:**

All requests for personal leave of absence are reviewed carefully. A team member requesting a personal leave must discuss with their supervisor and Prudential to make a request for a personal leave. All Personal Leave of Absences are subject to supervisory and Human Resources approval.

**PROCEDURE:**

1. Team members may request a team member personal leave of absence through their immediate supervisor and by contacting Prudential at (877) 367-7781.
2. A team member may be granted as many as fourteen (14) calendar days off without pay for personal reasons at the discretion of their respective manager. The ETO policy will be applied as appropriate. Such time off should be granted only if it does not create a hardship on the remaining staff or result in unnecessary overtime as determined by the department management.
3. If the Personal Leave of Absence extends beyond fourteen (14) calendar days, and is unpaid, a Change Request Form must be completed to change the FTE status. This form must be submitted effective the first unpaid day beyond (14) calendar days of leave and when all eligible/applicable accruals have been exhausted.
4. Requests for Personal Leave of Absence more than fourteen (14) calendar days will be reviewed on a case-by-case basis and require Vice President's approval. Team members out on an approved Personal Leave for greater than 14 days need to contact their Supervisor or Human Resources to discuss their ability to return to work.
5. When on a non-paid Personal Leave of Absence, team members do not accrue benefit hours. Team members out on a non-paid leave are responsible for submitting monthly medical/dental and vision and any other premiums as applicable to Human Resources by the first of each month or coverage will be discontinued. Team members will receive notice prior to any coverage being discontinued.

**Approval:**

Jeanette Taaffe, VP Human Resources – January 2020



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**PURPOSE:**

St. Luke's offers paid parental leave to support eligible team members in caring for and bonding with a newborn or a child newly placed for adoption.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**POLICY:**

St. Luke's will provide up to one (1) week of paid parental leave to team members following the birth of a child or the placement of a child for adoption. This policy will run concurrently with Family and Medical Leave Act (FMLA) and other approved leaves of absence, as applicable. This policy will be in effect for births and adoptions occurring on or after January 2, 2022.

**ELIGIBILITY:**

Eligible team members must meet the following criteria:

1. Full- or part-time, regular status (per diem and temporary team members are not eligible for this benefit).

Additionally, eligible team members must be either a biological or adoptive parent of a newborn or child newly placed for adoption. Adopted children must be age 17 or younger. The adoption of a new spouse's child is excluded from this policy.

**AMOUNT, TIME FRAME AND DURATION OF PAID PARENTAL LEAVE:**

1. Eligible team members will receive a maximum of one (1) week of paid parental leave per birth, adoption or placement of a child for adoption. Multiple births or adoptions (e.g., the birth of twins or adoption of siblings) does not increase the one-week total amount of paid parental leave granted for that event. In no case will an employee receive more than one (1) week of paid parental leave in a rolling 12-month period, regardless of whether more than one birth or adoption occurs within that 12-month time frame.
2. Leave approved under this policy will be paid according to the team member's budgeted hours at the regular rate of pay for the primary position held, not including differential pay.

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3. When possible, team members should give thirty (30) days-notice of the need for paid parental leave.
  4. Approved paid parental leave may be utilized at any time during the three-month period immediately following the birth or placement of a child for adoption. Paid parental leave may not be used or extended beyond this three-month time frame.
  5. Team members must take paid parental leave in one continuous period of leave and must use paid parental leave during the three-month time frame indicated above. Time off requests under Parental Leave are subject to manager approval and will follow regular departmental rules for requesting time off.
  6. Paid Parental Leave is not a vested benefit and any unused leave will not be paid out upon termination of employment.

#### **COORDINATION WITH OTHER POLICIES:**

1. Paid parental leave taken under this policy will run concurrently with FMLA or other approved leaves of absence. This means that use of paid parental leave will decrease the amount of FMLA or other leave available and may not be used to extend a team member's FMLA or other leave time.
2. After paid parental leave is exhausted, the balance of FMLA or other approved leave will be compensated through accrued ETO or ESB time in accordance with the ETO policy. Upon exhaustion of accrued ETO or ESB any remaining approved leave will be unpaid.
3. St. Luke's will maintain elected benefits for team members during the paid parental leave period just as if they were taking any other approved leave of absence.
4. If a company holiday occurs while the employee is on paid parental leave, it will be paid under the ETO policy; however, such holiday pay will not extend the one (1) week total paid parental leave.
5. Please refer to the Adoption Assistance Policy for additional information about other benefits related to the adoption process.

#### **PROCEDURE:**

Team members should request a leave of absence through the immediate supervisor and by contacting Prudential at (877) 367-7781 and following the procedures in the corresponding policies for the type of leave requested.

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**Cross-Reference Documentation**

Standard(s) -

Policy – Family and Medical Leave of Absence (FMLA)

Leave of Absence – Medical Non-FMLA

Leave of Absence - Personal

Form(s) –

**Approval:**

Janette Taaffe, VP Human Resources – October 2021

# VICTIMS OF DOMESTIC OR SEXUAL VIOLENCE

## LEAVE TIME ALLOWED

See [Section 285.630, RSMo.](#), and refer to [Sections 285.625 to 285.670 RSMo.](#) for definitions.

**EMPLOYEES** who are victims of domestic or sexual violence, or have a family or household member who is a victim of domestic or sexual violence, may take unpaid leave from work to address such violence by: \_\_\_\_\_

- Seeking medical attention for, or recovering from, physical or psychological injuries caused by such violence.
- Obtaining services from a victim services organization.
- Obtaining psychological or other counseling.
- Participating in safety planning, temporarily or permanently relocating, or taking other actions to increase the safety of the employee or employee's family or household.
- Seeking legal assistance or remedies to ensure health and safety.

In the case of domestic or sexual violence as defined by statute, an individual who works for a business with 50 or more employees is entitled to up to two workweeks of unpaid leave within any 12-month period to address the related matters above. An individual who works for a business employing 20 to 49 employees is entitled to up to one workweek of unpaid leave within any 12-month period to address such matters.

*Leave may be taken intermittently or on a reduced work schedule. The employee shall provide to the employer 48 hours notice unless such notice is not practicable.*

**EMPLOYER:** \_\_\_\_\_

- May request certification that the employee or member of family or household is a victim as described above.
- Must restore the employee to the position of employment held prior to the reporting of domestic or sexual violence or an equivalent position.
- Must maintain coverage for the employee and any family or household member under any group health plan for the duration of such leave at the level and under the conditions coverage would have been provided had the employee continued in the employment previously held.
- May, under many circumstances, recover from the employee the premium paid for maintaining coverage if the employee fails to return from leave after the leave period has expired.





## **ADMINISTRATIVE MANUAL**

### **PARKING**

#### **PURPOSE**

It is the intent of St. Luke's Hospital that our patients and visitors be provided the courtesy of the closest and most accessible parking spots. In that effort, parking areas have been designated on the campus of St. Luke's Hospital for patients, visitors, handicap accessibility, physicians, and employees.

Under an ordinance of the City of Chesterfield, a parking ticket can be issued at any time by the Chesterfield Police Department for parking violations, including but not limited to, misuse of handicapped spots and the blocking of a fire lane.

The Security Department is responsible for enforcing the parking policy.

#### **HOSPITAL VISITOR AND PATIENT PARKING**

Parking is provided to all visitors and patients in the North/South, East and West Garages, and the surface parking lots adjacent to the medical office buildings and Hospital.

#### **VALET PARKING**

Complimentary valet parking is provided on the Chesterfield campus from 7:30 am until 4:00 pm, Monday through Friday, (except on designated holidays) and offered to patrons of all medical office buildings on campus. This service is intended to aid elderly, handicapped or chronically ill visitors or patients in parking their vehicles in close proximity to the doctor's offices.

Valet Parking attendants are located at the first level entrance to the East Medical Office Building, the north side of the North Medical Office Building, the third level entrance to the West Medical Office Building, and the lobby entrance at the Desloge Outpatient Center. Valet Parking is a free,

complimentary service offered by the hospital and is maintained by the Transportation Department. Any offerings of gratuities are politely refused.

### **RADIATION ONCOLOGY AND HYPERBARIC MEDICINE PATIENT PARKING**

There is an area located on the west side of the east employee parking lot designated for patient parking for radiation oncology and hyperbaric medicine patients, and CVICU visitors. This area will be reserved for patients from 7:00 am until 6:00 pm, and then used as a no parking zone thereafter. Parking is also available in the East Garage for patients and visitors.

### **EMERGENCY ROOM PATIENTS**

Parking for patients seeking emergency treatment or service is located in an area designated with parking signage "EMERGENCY ROOM PATIENTS ONLY" along the east side of the hospital adjacent to the Emergency Room. Those spaces are available to patients of the Emergency Room only. This parking provision is strictly enforced.

### **HANDICAPPED PARKING**

Areas for handicapped parking are designated throughout the campus in several locations. Handicapped parking may be expanded on any given day to facilitate patient needs.

Handicapped vehicles must be identified by the universal symbol located on the license plate or rear view mirror placard.

### **PHYSICIAN PARKING**

Designated parking is provided for physicians in all of the garages, the surface parking lot on the east side of the Hospital Emergency Department, and the south parking lot at the Desloge Outpatient Center.

Medical Residents in Training are considered “employees” for the purposes of this policy, and are not included as eligible for physician parking privileges.

### **EMPLOYEE PARKING ON THE CHESTERFIELD CAMPUS**

Parking for all of St. Luke’s employees, is provided in WHITE striped parking spaces located in the East Garages, and the southeast surface parking lot (Employee Parking Lot), the west service drive, southwest surface parking area, the top level parking at the Resource Center, and the south parking lot at the Desloge Outpatient Center. Parking is on a first come, first serve basis. Employees are restricted from parking in visitor and patient designated YELLOW striped parking areas.

The top level of the North/South garage as well as the back section of the “D” lot just north of the North/South garage are to be used as an overflow area for employees working in the Hospital who cannot locate an employee space to park in. The parking lot on the north side of the Desloge Outpatient Center is also an overflow area for employees.

Employees displaying the proper universal handicapped placard should park in designated employee handicapped reserved spaces or other handicapped spaces contained in assigned employee parking areas.

Designated personnel and departments may be asked to park in different parking areas to best accommodate patient and visitor parking and to promote business continuity. The parking area adjacent to the Receiving Dock/ Fitness Center will be restricted to patient and delivery parking.

Special parking has been allocated at certain times for Meals on Wheels volunteers in the parking lot east of the East MOB entrance.

All employees, contractors and or tenants whose shift begins at or later than 4:00 PM, Monday thru Friday, and all day on Saturday, Sundays and Holidays, may park in any visitor or employee spot, except those designated with signage (Handicap, Physician, Reserved, etc..). All employee vehicles in non-employee spaces must be out of those spaces by 6:00 AM, Monday thru Friday.

Parking for employees on the St. Luke’s campus is provided as a privilege of employment. St. Luke’s will not be liable for theft, fire damage or personal injury involving automobiles.

Medical office building employees (who are not employees of St. Luke's Hospital) should park in designated spaces on the top levels of the North/South and West parking garages. Employees of St. Luke's Hospital who work in physician offices located in the North, South or West Medical Buildings should park on the top level of the North/South parking garage or in the back section of the "D" lot just north of the North/South Garage.

### **EMPLOYEE PARKING ON THE DES PERES CAMPUS**

Parking for all Des Peres employees is provided in the WHITE striped spaces that are shown in the green area on the Des Peres parking map. Any employee found to be parking in any of the spaces that are shown in the RED area on the Des Peres parking map will be subject to a fine as these areas are prohibited to any employee. Employees who arrive prior to 0430 or after 1400 are allowed to park in the areas shown in PINK on the Des Peres parking map. All areas shaded in BLUE on the Des Peres parking map are for Managers/Directors. All on-call employees may park in the areas shaded in YELLOW on the Des Peres parking map

### **EMPLOYEE PARKING VIOLATIONS**

It is the strong philosophy of St. Luke's that our patients and visitors be provided the greatest courtesy and convenience in regard to available parking spots. Employees who park in non-designated areas will be subject to a parking violation process.

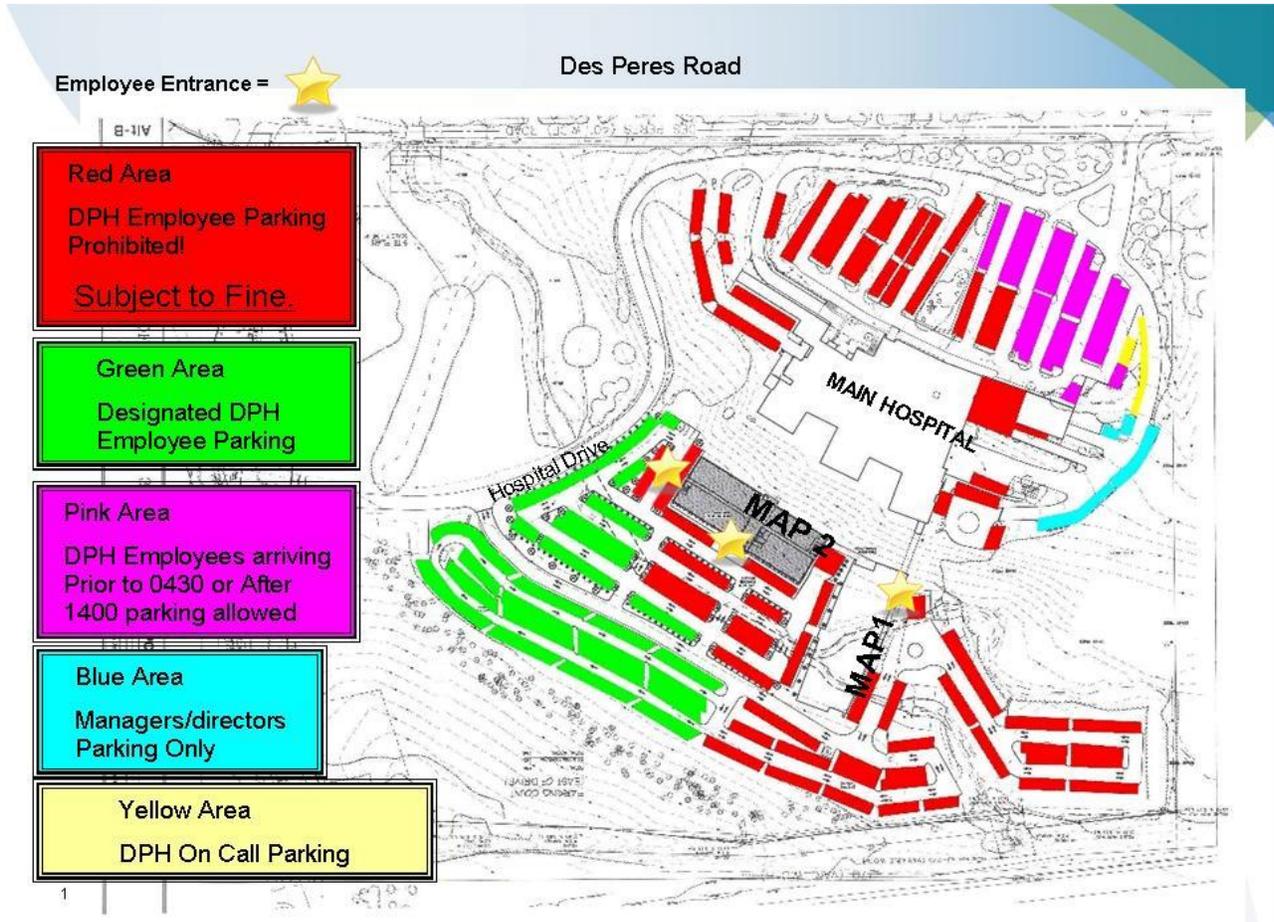
First time violators will have a ticket placed on their windshield that identifies them as being in violation of the parking policy. Security will also maintain a copy of this ticket. Employees being identified in violation a second time will receive a ticket and a \$10 fine will be deducted from their paycheck. Each subsequent violation will result in an additional \$10 fine.

Security will be responsible for monitoring employee parking and issuing tickets. Employees who can validate that they were here as a visitor or patient may contact security about canceling their ticket. Security may also approach individuals appearing to be employees who are in unauthorized parking. Employees who do not move their car will be issued a \$10 violation. All monies from parking violations will be directed to the St. Luke's Employee Crisis Fund.

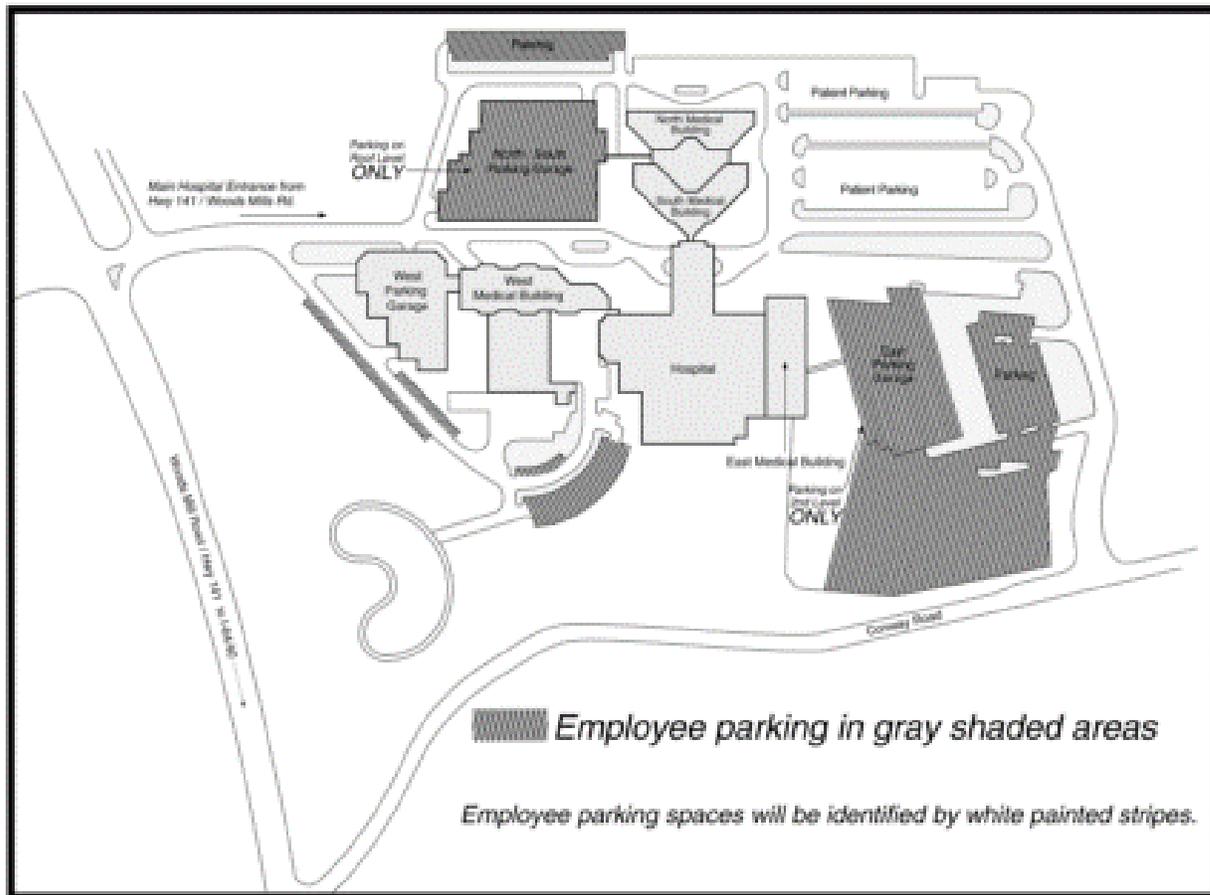
**Contact: Ron Birdsong, Security Department**

**Revised: May 2019**

# St. Luke's Des Peres Hospital Employee Parking Areas



# St. Luke's Hospital Employee Parking Areas



**PURPOSE:**

To provide guidelines for the attendance expectations for St. Luke's employees.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**POLICY:**

Regular attendance and punctuality are required for St. Luke's to provide quality patient care. Team members unable to meet St. Luke's attendance control standards will be counseled and given the opportunity to correct their record. If attendance continues to be a problem, appropriate corrective action will be taken.

**DEFINITIONS:**

**Attendance:** Defined as "at work on time for each scheduled shift" as outlined in each area's Department Specific Guidelines.

**Late:** Defined as reporting for work after the scheduled start of the shift as defined above in Attendance.

**Leaving Early:** For the purposes of this policy is defined as leaving before the end of a scheduled shift, without prior approval.

**Absence:** Defined as any scheduled shift missed by a team member for any reason, except for approved purposes. This includes all types of scheduled time, including seminars and education time.

**Approved Absence:** Defined as time off scheduled at least 24-hours in advance and approved by the team member's supervisor/manager.

**Excessive Absence:** Defined as occurrences in any rolling 12-month period that exceed levels identified in the grid below.

**Occurrence:** *An occurrence of absence applies in the following situations:*

- Absence for illness or other reasons for one (1) one or more consecutive scheduled shifts equal one (1) occurrence.
- Incidents of improper call-ins as defined in Department Specific Guidelines will count as one (1/3) occurrence.
- Incidents of arriving late, leaving early or failure to clock in or out will count as one (1/3) occurrence.
- Failure to provide a physician's note as required will count as one (1) Occurrence.

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## PROCEDURE:

### 1. General Information:

- a. All team members shall hold absences, arriving late, leaving early, and failing to clock in or out to an absolute minimum.
- b. One or more consecutive scheduled shifts missed due to the same illness or medical reasons will be treated as one (1) occurrence.
- c. Written documentation from a physician will be required for three (3) or more consecutive scheduled shifts missed due to illness.
  - 1) Verification of the illness and the physician's approval to return to work should be presented to the team member's supervisor before the team member returns to work.
  - 2) This documentation is required to clear the team member to return to work, but does not prevent the absence from being counted towards the total number of occurrences.
- d. Three (3) consecutive scheduled shifts of **unreported** absence will result in a team member being separated under the assumption that he/she has voluntarily resigned.
- e. One (1) unreported absence will result in corrective action.
- f. Three (3) occurrences of absence during the initial 90-day orientation period are unacceptable and may be grounds for corrective action up to and including separation of employment.

### 2. Corrective Action:

- a. Occurrences of absence will be treated in the following fashion:
  - 1) Team members' records will be monitored as a rolling twelve-month period of time. During this time frame, if a team member generates occurrences of absence, as noted below, the team member is placed on a step of corrective action.
  - 2) If the team member is not currently on any type of corrective action, this process would begin with a Level 1 warning. If the team member is already on a step of corrective action for misconduct or other performance related reasons, then an occurrence of absence, as noted below, will advance the corrective action to the next step.
  - 3) On the following grid, occurrences are mapped to the corrective action step needed. In general, team members will be evaluated against a 12-month rolling time frame and if occurrence numbers increase, staff will move through a Level 1 Warning, a Level 2 Warning, a Final Warning and Separation.
  - 4) This process is accelerated if misconduct or other corrective actions have been issued in this timeframe.

<b>Action Step</b>	<b>9-10 Days Per Pay Period</b>	<b>8 Days Per Pay Period</b>	<b>6-7 Days Per Pay Period</b>	<b>5 or Less Days Per Pay Period</b>
Document and discuss with team member	1 <sup>st</sup> through 5 <sup>th</sup> Occurrence	1 <sup>st</sup> through 4 <sup>th</sup> Occurrence	1 <sup>st</sup> through 3 <sup>rd</sup> Occurrence	1 <sup>st</sup> through 2 <sup>nd</sup> Occurrence
Place and/or advance one step of Corrective Action	6 <sup>th</sup> Occurrence	5 <sup>th</sup> Occurrence	4 <sup>th</sup> Occurrence	3 <sup>rd</sup> Occurrence
Advance one Step Corrective Action	9 <sup>th</sup> Occurrence	7 <sup>th</sup> Occurrence	6 <sup>th</sup> Occurrence	5 <sup>th</sup> Occurrence
Advance one Step Corrective Action	11 <sup>th</sup> Occurrence	9 <sup>th</sup> Occurrence	8 <sup>th</sup> Occurrence	7 <sup>th</sup> Occurrence
Separation	12 <sup>th</sup> Occurrence	10 <sup>th</sup> Occurrence	9 <sup>th</sup> Occurrence	8 <sup>th</sup> Occurrence

### 3. Management Responsibilities:

- a. It is the responsibility of the Manager to monitor and document attendance at least on a monthly basis. This review may be done more frequently. The Manager should maintain a record for the reason for the absence, tardy, late, or when leaving early. The manager should also maintain a record if the absence was reported properly according to the department call in procedure and/or reporting an absence.
- b. The team member is to be notified of an occurrence of absence or a corrective action in a timely fashion. The manager will review the facts and circumstances involved and make an appropriate determination regarding the classification of the occurrence.
- c. After appropriate review and actions required under the Just Culture Policy, managers may address abusive absence issues through the corrective action process. Abusive absence is defined as absence days, which frequently occur immediately before or after scheduled days off, or around holidays and weekends.
- d. Managers are required to review time for both non-exempt staff and exempt staff. Note: Exempt team members are expected to work whatever hours are necessary to accomplish the goals and deliverables of the position. As a result, exempt team members have more flexibility in their schedules to come and go as necessary to accomplish work than non-exempt team members.
- e. Managers are required to evaluate the nature and reason for an absence and provide appropriate FMLA/LOA paperwork when indicated. Absences determined to be approved under our FMLA policy do not count toward an occurrence. (See Leaves of Absence Policy).
- f. Attendance Control policy is intended to address absences, lateness and leaving early issues. When team members have performance or misconduct issues, in addition to attendance issues, this will result in accelerated counseling and/or progressive corrective action or discharge.

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4. Control:

- a. Department directors or their designees are responsible for keeping attendance records and applying the Attendance Control Policy for all team members under their supervision.

**Cross-Reference Documentation**

Standard(s) -  
Policy –  
Form(s) -

**Approval:**

Jeanette Taaffe, VP Human Resources – February 2020

**PURPOSE:**

St. Luke's is committed to providing a safe and non-violent environment for its Team Members, patients, guests, and visitors.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**DEFINITIONS:**

**Threat:** Defined as any expressed intention, verbal or physical, directly or indirectly, to harm an individual, endanger a group of team members, patients or visitors on the premises, or destruction of property.

**Direct Threat:** Defined as any behavior which a reasonable person would interpret as a potential physical assault or use of a weapon or actions or statements that have the immediate potential to place persons or property in imminent danger.

**POLICY:**

Aggressive, threatening or violent acts of any nature will not be tolerated. These include, but are not limited to the following:

- Verbal or physical threats, intimidation or coercion
- Fighting or provoking a fight
- Stalking
- Vandalism
- Use or carrying of weapons on the property
- Sabotage
- Arson
- Any other act, which in management's opinion, is inappropriate to the workplace

Appropriate action will be taken against anyone who is found to be in violation of this policy. Patients and visitors will be subject to removal from the premises and/or prosecution. Team Members will be subject to corrective action, up to and including termination and/or prosecution.

**PROCEDURE:**

1. Team Members who feel they have been subjected to any of the behaviors listed above, or other behaviors of an aggressive, threatening or violent nature, will report the incident immediately to their supervisor, the Security Department, or a Human Resources representative.
2. Supervisors are required to report all incidents to the Human Resources Department.

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3. If team members feel their safety or the safety of someone else is in jeopardy, they should follow the process for an Imminent Threat.
  4. Additionally, a report of any acts or threats of violence will be completed by the Security Department.
  5. Response to Imminent Threat:
    - a. When the nature of a threat involves imminent and/or serious physical harm, team members should immediately contact the Switchboard by dialing “0” and requesting an overhead page for “Dr. Strong”. Be sure to provide the location of the incident. The operator will then page “Dr. Strong, please report to \_\_\_\_\_”. This announcement will be repeated four times.
    - b. A Security Officer, the Assistant Director of Nursing (ADON) and the supervisor/manager of the area will respond to the “Dr. Strong.”
    - c. Those responding will be briefed on arrival. Team Members will take direction from the Security Officer, ADON, manager of the area and/or law enforcement personnel.
    - d. If possible, access to the area should be restricted. Team Members, patients or visitors should be moved away from the area.
    - e. If the incident involves a team member, the Security Department will notify Human Resources. If needed, Human Resources will notify an Employee Assistance Program (EAP) counselor (see Employee Assistance Program Policy).
    - f. If a weapon (i.e. firearm or knife) is involved, or the team member feels a law enforcement presence is required, staff may call 911 first, then contact the Security Department at ext. 4312 or request the switchboard to make notification to the Security Department. “Dr. Strong” will not be paged overhead if the incident involves a weapon.
      - 1) A Security Officer(s) and law enforcement will respond to the incident.
      - 2) Those responding will be briefed on arrival. Team members will take direction from the Security Officer and/or law enforcement personnel.
      - 3) If possible, access to the area should be restricted. Team members, patients and visitors will be moved away from the area.
      - 4) The administrator on call and the ADON will be notified by Security in a timely manner. The ADON will determine if a Phase 1 activation of the Incident Command is needed.
      - 5) If the incident involves a team member, the Security Department will notify Human Resources. If needed, Human Resources will notify an EAP counselor.
  6. Post Incident
    - a. If an incident requires a Security Officer and law enforcement involvement, the area will not be cleaned. Nothing will be removed from the area until approval from the Security Department or the police have been granted.
    - b. The supervisor or manager of the area will evaluate the needs of patients, visitors and staff that were involved or witnessed the incident.

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- c. Debriefing/Counseling for team members who experienced/witnessed workplace violence will be offered. For educational purposes, it is recommended that the supervisor or manager of the area review/analyze the “Dr. Strong” with staff members.
  - d. Incidents of workplace violence will be reviewed by the Security Department. Major incidents will be evaluated within 24 hours of their occurrence.
  - e. Incidents of workplace violence will be reported at the Environment of Care Committee and reviewed by type of incident as listed below and outcome.
    - 1) Team member to team member violence
    - 2) Patient to team member violence
    - 3) Stranger to team member violence
    - 4) Significant other to team member violence

#### 7. Assessment of Potential Workplace Violence

- a. Managers and Supervisors will be aware of potential signs of violent behavior in order to minimize the risk of violent or threatening incidents.

#### 8. Training:

- a. Managers, Supervisors, and Team members who work in areas identified as having a higher than average risk for workplace violence are required to attend an initial Crisis Prevention Training (CPI) session, and a refresher course thereafter on a periodic basis.
- b. All new team members will receive education pertaining to the Workplace Violence Policy during their initial hospital Orientation.

#### **Cross-Reference Documentation**

Standard(s) -  
Policy –  
Form(s) –

#### **Approval:**

Janette Taaffe, VP Human Resources – June 2020

**PURPOSE:**

St. Luke's has established certain policies and work rules in order to operate in a safe, orderly and efficient manner. This policy sets guidelines to address any non-compliance with these standards.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**DEFINITIONS:**

**Just Culture:** Defined as an environment of trust and fairness where it is safe to report and learn from mistakes and system flaws that is clear about the difference between human error in complex systems and intention unsafe acts.

**POLICY:**

St. Luke's team member's conduct reflects upon St. Luke's, consequently, team members are expected to observe the highest standards of clinical expertise and observe safe practices at all times. Situations resulting in or potentially resulting in an undesired clinical outcome will be reviewed according to the Just Culture process. This review is designed to encourage transparency in patient care issues and allow a fair environment within which team members can report an error and actual or potentially harmful patient situations in order to educate and correct processes and prevent any reoccurrence of such situations.

Additionally, any situation that could have or did result in patient harm will undergo a Just Culture review to determine what actions are appropriate. This review will occur prior to any decision on issuing formal corrective action to a caregiver. The following procedure does not limit the discretion of St. Luke's in corrective action matters and does not prevent immediate action by St. Luke's.

**PROCEDURE:**

1. The following review process should be used to document all formal reviews of a situation where the actions of St. Luke's team members could have or did result in patient harm.
  - a. Issue reported to Manager:
    - 1) Errors should be reported to managers in the understanding that they will not automatically result in formal corrective action.
  - b. Evaluation of Process Issues:
    - 1) Each situation will be evaluated by the manager, or at times by Human Resources Business Partners and or Sr. Leadership to determine why the error /undesired outcome occurred.

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- 2) In reviewing the incident, information will be gathered from all involved parties and identify what opportunities exist for procedural clarification or education and training of staff to prevent similar errors from occurring in the future. Caregivers involved in adverse events will receive attention that is just, respectful, compassionate, supportive and timely. When appropriate, caregivers involved in the event will be added to assist in the investigation, risk identification and mitigation activities designed to prevent future adverse events. This review will be in coordination with patient safety and risk management.
  - 3) When a process is identified as needing further clarification or education, an Action Plan will be developed and implemented to address the issue. When planning and implementing safety improvements, the process will include the expertise of front-line staff who understand the process and risks to patients.
  - 4) In situations when at risk behavior or human errors occur, a plan will be developed to coach and counsel the involved caregiver. If an individual is deemed to require additional training or education, an Action Plan will be developed identifying educational needs and to establish goals for progress. An anecdotal letter will be provided to the individual outlining the issues and expectations. This communication will also inform the individual that repetitive safety errors could result in formal corrective action up to and including separation. This letter will be placed in the team member file.

2. Failure to Follow Safety Guidelines/ Repeated Errors:

- a. If an error or patient harm situation is reviewed, and it is determined that an established safety process/procedure was knowingly and or willfully bypassed (reckless behavior), then the normal Corrective Action policy will apply with formal discipline being issued. Additionally, if there are repetitive errors following implementation of an Action Plan, the normal Corrective Action policy would also be applied.

**Cross-Reference Documentation**

Standard(s) -

Policy –

Form(s) –

**Approval:**

Jeanette Taaffe, VP Human Resources – February 2020

**PURPOSE:**

To outline the method of accrual and procedure for utilization of the Paid Time Off (PTO) program.

**SCOPE:**

St. Luke's

**POLICY:**

Immediately upon hire, PTO is provided to team members whose position is budgeted for eight or more hour(s) per pay period with paid time off from work. The program has two parts: 1) paid time off that is paid time off for illness, vacations, holidays, personal business; and 2) an extended sick bank (ESB) which provides protection for team members with illnesses that result in prolonged absence. Access to ESB is based on a team member's status and consecutive hours of absence.

**DEFINITIONS:**

**Unscheduled Absences:** Generally defined as any time missed without advanced approval.

**PROCEDURE:**

1. Paid Time Off:

- a. Eligible team members who are budgeted for and work at least 8 hours per pay period, accrue PTO each pay period. The rate at which PTO is accrued is based on length of service and hours worked pay period as outlined in the table below:

Length of Continuous Service	PTO Hours Accrued Per Bi-Weekly Pay Period	
	Max Accrual (80 Hr./PPD)	Prorated Accrual
0 to 4 Years	7.38	.09225 x hours worked
5 to 9 Years	8.92	.11150 x hours worked
10 Years and Above	10.46	.13075 x hours worked

- b. The team member's supervisor must approve all PTO requests. Team members must request PTO as far in advance as possible. PTO requests may not exceed the number of regularly scheduled work hours.
- c. In the event that two or more team members in the same department request to utilize PTO at the same time, the supervisor will consider length of service in the department and previously granted PTO time off.

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- d. PTO, if available, must be paid for any time off, as well as for the first week of work missed due to an eligible team member's own illness. The number of hours will vary based on the team member's FTE (See ESB guidelines below). There are 2 exceptions to this requirement:
    - 1) When non-exempt team members are required to take a scheduled day off due to low census or workload.
    - 2) When a team member is honoring a subpoena to testify at, attend, or participate in a criminal proceeding.
  
  - g. Team members must use PTO for illnesses and other unexpected or unscheduled absences. Unscheduled absences will be reviewed in accordance with the attendance policy and the department's attendance procedure. For a team member's own illness, after missing a week of work, a team member may use available hours in his/her Extended Sick Bank (ESB) during the course of the illness.
  
  - h. When on an approved FMLA leave of absence, team members need only cover the first week of missed work time with PTO. PTO used to cover the first week of absence prior to accessing the ESB will be based on the position's budgeted status.
  
  - i. Subject to manager's approval and consideration of operational requirements and business needs, or as otherwise dictated by applicable law, team members may request time off without pay if they have exhausted their PTO bank. Exempt team members may only use full-day increments. Non-exempt team members may use shorter time increments as necessary and approved.
  
  - j. If a department is closed before an exempt team member has accrued enough available time to cover the closure, exempt team members must be paid for the entire work week if any work was performed during that week.
  
  - k. Team members may have the option to sell back some PTO hours one time each year. Sell back will be elected in October and paid in February of the following calendar year. The 3-year service requirement must be met by September 30th of the year the election to sell is made.
    - 1) The maximum sellback amount is determined annually. Once an election has been made to sellback, it cannot be altered or cancelled for any reason.
    - 2) Full-time (1.0 FTE) team members must use 80 hours of PTO the prior twelve-month period to be eligible to sell back.
    - 3) Team members working less than 1.0 FTE are required to use a pro-rated amount of PTO in the prior twelve-month period and retain a pro-rated amount outlined below in their bank to be eligible to sell back. These amounts are based on the budgeted hours for their position where hours budgeted and worked are at least as noted below:

Current Budgeted FTE	Hours Taken	Hours Retained
0.1 through 0.4	32 hours	16 hours
0.5 through 0.6	48 hours	24 hours
0.7 through 0.9	64 hours	32 hours
1.0	80 hours	40 hours

- m. PTO hours are not considered hours worked for the purpose of calculating overtime within the work week. In an emergency staffing situation, a supervisor, with administrative approval, may approve hours previously taken in a pay period as PTO to be considered hours worked.

**Example:** A team member requests 8 hours of PTO time and works 34 hours without approval for over his/her scheduled hours. The team member would be paid 42 hours at straight time. If the team member had approval for working over his/her scheduled hours, then the team member would be paid at 40 hours of straight time and 2 hours at time and a half.

- n. Team members may carry unused PTO into the next year. The maximum amount a team member may carry is defined below. Please note that accrual rate changes begin at the team member’s anniversary date of the fifth and tenth year, and each pay period thereafter the amount of PTO will accrue at the higher rates.

Length of Continuous Service	PTO Accrued Per Bi-Weekly Pay Period		Maximum PTO Hours in Bank
	Max Accrual (80 HR/PPD)	Prorated Accrual	
0 to 4 Years	7.38	.09225 x Hrs. worked	384.0
5 to 9 Years	8.92	.11150 x Hrs. worked	464.0
10 Years and Above	10.46	.13075 x Hrs. worked	544.0

Length of Continuous Service	Max PTO Days Per Year (26 Pay Periods)	Maximum PTO Days in Bank
0 to 4 Years	24	48
5 to 9 Years	29	58
10 Years and Above	34	68

- o. Management team members accrue at the next accrual rate above their years of service, not to exceed the “10 Years and Above” maximum accrual.

**Example:** A manager with 0-4 years of service will accrue at the 5-9 “Length of Continuous Service” rate.

2. Extended Sick Bank (ESB)

- a. The extended sick bank (ESB) provides protection for illnesses that cause eligible team members to be absent more than a week of work.
- b. If the team member does not have enough PTO available, any missed time in the first week will be unpaid.

- c. In accordance with the leave policy, team members may be required to apply for a leave of absence and provide a physician’s statement.
- d. When a team member is ill, the number of hours of PTO used to cover the first week of absence before ESB may be used varies based on the position’s budgeted FTE, not the amount of hours actually worked in a particular pay-period.
- e. Team members will begin accruing ESB hours their first pay period worked.
- f. ESB use will be handled in accordance with the appropriate FMLA and Leave of Absence (LOA) policies.
- g. Team members accrue ESB each pay period. The rate is 2.15 hours for full-time (1.0 FTE) team members. Team member accrual rates are based on the number of hours worked and benefit hours paid up to a maximum of 80 hours per pay period.

Hours of ESB Accrued Per Bi-weekly Pay Period		Maximum ESB Hours in Bank	
Max Accrual (80 HR/PPD)	Prorated Accrual	Annual Max	Bank Max
2.15	.02688 x hr. worked	56	480

- h. The maximum number of hours a team member may accrue in their ESB bank is 56 hours per year and 480 hours total. Once a team member reaches the 480 maximum, the pay period accrual stops until the amount falls below the maximum.
- i. ESB hours paid will not count toward the calculation or payment of overtime.

3. Pay Out at Termination or Transfer to PRN:

- a. Team members who terminate employment with St. Luke’s or transfer into a PRN position and have completed three (3) years of service or more are paid for any unused PTO. However, because ESB hours are intended to cover long-term illnesses only, ESB balances are not paid out at termination of employment or transfer to a PRN position.
- b. Team members who resign from employment with St. Luke’s may not extend their last day of employment by utilizing PTO.

4. Standard Holidays:

- a. There are six standard holidays. PTO pay is based on the team member’s scheduled hours for the holiday:
  - New Year’s Day
  - Memorial Day
  - Independence Day
  - Labor Day
  - Thanksgiving Day
  - Christmas Day

- 
- b. The standard holidays may differ from one St. Luke's department to another as determined by the operational needs of the department (see Differential Policy for payment of differentials).
  - c. PTO must be used for scheduled holidays. For those team members who are required to be on-call on a standard holiday and are called in to work on a standard holiday, the team member will have the choice of utilizing PTO for that holiday.
  - d. All St. Luke's departments recognize certain holidays within the operating year. Team members in some departments are required to work on holidays to provide safe patient care. Additionally, each St. Luke's department defines the holiday related attendance expectations and any related corrective action processes for failure to meet holiday shift expectations.
  - e. When operational needs require team members to work on a standard holiday, their PTO hours will remain in their banks for use on another approved date.
  - f. For work areas that are primarily open Monday through Friday, and a holiday falls on a Saturday, the holiday is observed on the Friday before. If a holiday falls on a Sunday, the holiday is observed on the next Monday.
  - g. For areas open seven days a week, the holiday is recognized only on the actual holiday. (Subject to department guidelines)

**Cross-Reference Documentation**

Standard(s) -  
Policy –  
Form(s) -

**Approval:**

Nathan Bigler, Chief People Officer

**PURPOSE:**

To allow team members of St. Luke's Hospital approved time away from work during regularly scheduled hours for certain circumstances as defined below.

**SCOPE:**

St. Luke's Hospital, Chesterfield  
St. Luke's Des Peres Hospital, Des Peres

**POLICY:**

Approved time off may for bereavement leave, jury duty, lunch, break periods, appointments and voting will be arranged according to the needs of St. Luke's Hospital, its patients, or as mandated by Missouri and Illinois State Legislation.

**DEFINITIONS:**

**Immediate Family:** Defined as a spouse, child, parent, grandparent, brother, sister, mother-in-law, father-in-law or dependent living in the team member's household.

**PROCEDURE:**

1. Bereavement Leave:
  - a. Bereavement Leave is time off provided to attend a funeral or to attend to issues in preparation for the funeral or management of the affairs of the deceased. The Bereavement Leave policy follows the following rules and processes:
    - 1) Team members will only be paid bereavement leave for days they are scheduled to work.
    - 2) Team members must notify and obtain approval from their department Director or Supervisor for Bereavement Leave.
  - b. All full-time and part time team members may be granted up to a maximum of three (3) consecutive calendar days (maximum of 24 hours paid bereavement time) in the event of a death of a team member's immediate family member. Team members on 12 hour shifts may still take three consecutive days off, however the maximum paid bereavement time is 24 hours, so the third day would require use of ETO pay.
  - c. All full time and part time team members may be granted one day (maximum of 8 hours paid bereavement time) in the event of the death of a team member's grandchild, aunt, uncle, brother-in-law, sister-in-law, great-grandparents, son-in-law, daughter-in-law, step parent (three days if team member lived with step parent), and step child (three days if child was raised by team member.) Team members on a 12-hour shift may still take the full shift off, but as the maximum paid bereavement time is 8 hours, ETO time would need to be utilized to the remaining 4 hours.

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- d. Team members wanting additional time off after using the allowed Bereavement Leave need to obtain manager approval and use available Earned Time Off (ETO) hours. Substantiation of funeral services may be required.

## 2. Jury Duty:

- a. All full time and part time team members of St. Luke's who are called for Jury Duty will be given time off without loss of pay providing that they follow this procedure. Team members are required to present a copy of the summons to their department Director or Supervisor in advance of the Jury Duty date.
- b. All team members will be paid their regular pay for any days scheduled to work while on Jury Duty. Team members will not be paid for serving on Jury Duty on scheduled days off. Team members may keep any moneys received from the courts for time served on Jury Duty.
- c. Upon completion of Jury Duty, team members must obtain a statement of attendance from the court and submit it to their Supervisor. If a statement of attendance is not provided, pay will be adjusted.
- d. The amount of Jury Duty paid by St. Luke's will be computed on the team member's current hourly rate. Team members working straight evenings or nights and receiving differential as part of his/her base rate will be paid at the normal rate including differential. Team members working rotating shifts will be paid at their normal base rate not including differential.
- e. Team members working a night shift will be given paid time off for Jury Duty the night before the scheduled Jury Duty. However, these team members are expected to work their normal shift if they are not selected or scheduled during the day for Jury Duty. For example: Sunday night would be paid time off for Jury Duty on Monday morning. If Jury Duty ended on Monday, the team member would be expected to work as scheduled Monday night (11-7) or arrange time off other than Jury Duty.

## 3. Lunch and Break Periods:

- a. Lunch periods will be thirty (30) minutes. When needed, Supervisors may alternate lunch schedules in order to provide department coverage. Lunch periods are not to be skipped in order to make-up time or leave early unless supervisory approval is received.
- b. Lunches are comprised of thirty (30) minutes of uninterrupted time. Responding to phone calls, pages or other work related communication is considered an interruption of the lunch period. In order to facilitate an uninterrupted lunch period, team members are required to hand off any work-related communication devices to a qualified co-worker during the lunch period.
- c. If a work related need would occur and interrupt the thirty (30) minute lunch period, and/or a team member is unable to take a lunch break, the team member must notify their manager that a "no lunch" occurred for that day. When a "no lunch" occurs, team members will receive pay for the thirty (30) minute lunch period.
- d. It is the philosophy of St. Luke's Hospital to provide break periods of no more than 15 minutes to its team members. However, workload or patient care needs may require that

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break periods not be granted. Break periods are not to be run concurrent with lunch or be cumulative to the beginning or end of a shift.

- e. All team members who are required to clock in and out are required to do so when leaving the premises for lunch periods.

4. Personal Appointments:

- a. Team members should avoid scheduling appointments during their scheduled working hours. In those cases when appointments during the team member's regularly scheduled work hours are unavoidable, time off must be approved by the department Supervisor.
- b. Approved time off requires the use of available ETO hours. If a series of appointments must be scheduled, the team member should discuss the situation with the department Supervisor prior to making the appointments (See FMLA and or Worker's Compensation Policies).
- c. Extended Sick Bank (ESB) cannot be used for routine medical checks or dental appointments. For specifics, please refer to the ETO and ESB Policy.
- d. All team members who are required to clock in and out are required to do so when leaving the premises for personal time.

5. Voting Time:

- a. St. Luke's shall comply with Missouri and Illinois State law by providing time off with pay to team members who request it in order to vote in a State or National election or any primary election held in preparation for such State or National election.
- b. Team members who do not have three consecutive hours off duty when the polls are open will be allowed paid time off at the beginning or end of their shift. This will allow time off in which to vote as long as approval is obtained by the department supervisor at least one day in advance of Election Day. Team members leaving the premises at any time to vote without specific permission will be in violation of this policy.
- c. Authorized absences for the purpose of voting are not cause for disciplinary action and if team members vote, they are not liable for wage deductions on account of being absent from work.
- d. St. Luke's reserves the right to send a list of voting team members to the Board of Election Commissioners and if it is verified that the team members did not vote, their pay would be adjusted accordingly. In the event the team member requested time off to vote and then failed to do so, appropriate corrective action may be taken.

6. Crime Victims:

- a. St. Luke's shall comply with Missouri law by providing time off for team members testifying at, attending, or participating in a criminal proceeding.
- b. St. Luke's may not discharge or discipline a team member for attending a criminal proceeding or require any witness, victim, or member of the victim's family to use ETO time, personal time, or sick leave for honoring a subpoena issued as a result of a criminal proceeding.

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**Approval:**

Jeanette Taaffe, VP Human Resources – January 2020

# Diversity and Inclusion at St.



# What's different about you?

- How do you fit in to the St. Luke's Puzzle?
- Let's See!

[Stand Up Sit Down Diversity Exercise.pptx](#)

- Surprised to see how many similarities and differences are in the room?
- How do these similarities and differences contribute to our growth?
- How does an organization accepting and promoting differences contribute to a feeling of inclusiveness?



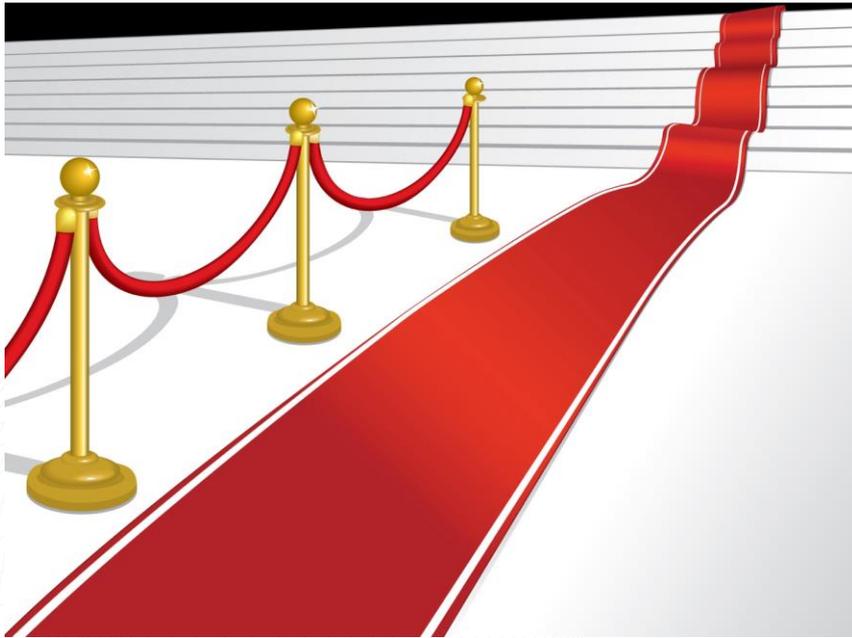
# To be an Inclusive Workplace I Suggest

- Find a few other people to brainstorm 3 ways or things we could do to create an inclusive workplace environment
- One group member will write the suggestions on the back of the new hire orientation evaluation
- No need to write your names on the suggestion list
- in·clu·sive | \ in-'klü-siv , -ziv \
  - Definition of inclusive -
    - including everyone *especially*:
    - allowing and accommodating people who have historically been excluded (because of race, gender, sexuality, or ability)

# Our Specialty is You

The role you play in FACES

# Exceptional Service



- What's your definition?
- Who decides if the service is/was truly EXCEPTIONAL?

How do you tailor  
the service you are  
providing for the  
patient, visitor, or  
co-worker?



**A good rule of thumb to  
remember when tailoring  
service to anyone is . . .**

**Perception!**

# What can lead to poor service?

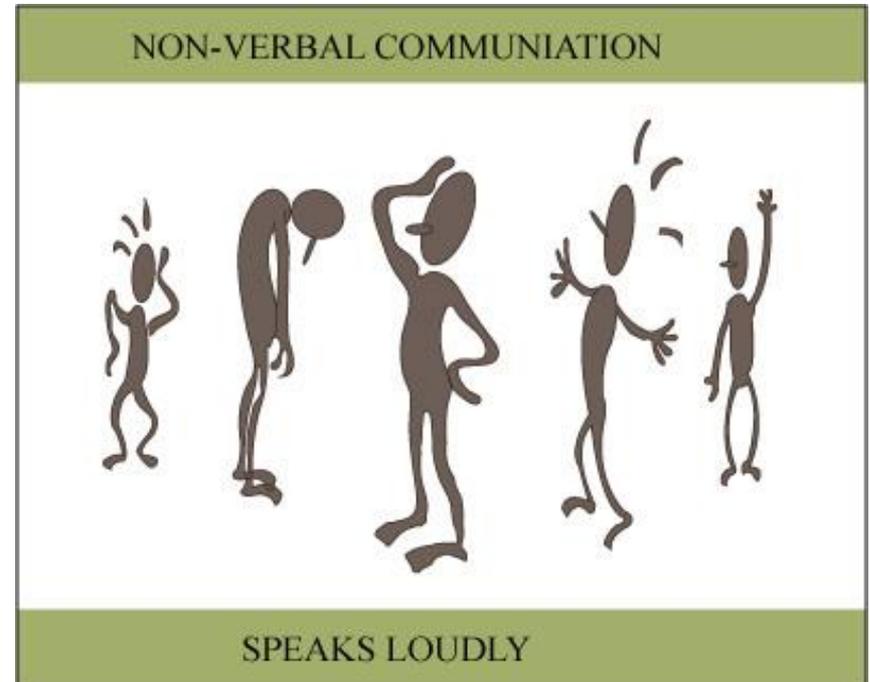


# What is FACES?

- **FACES** is St. Luke's philosophy of exceptional customer service.
- St. Luke's team members live our FACES culture in caring for our patients, visitors, the community and each other!
- **Friendly**
- **Available**
- **Caring**
- **Efficient**
- **Safe**

# What about body language?

- 55% of what your patient, visitor, or co-worker will hear from your message will be non-verbal
- 45% of what they will hear will be verbal



# When you do speak, remember

- Listen aggressively...not just to respond
- Use appropriate language and tone of voice    Avoid the use of jargon
- Address people with respect, not with Honey, Sweetie, Dear
- Make sure people get the message. Check for understanding
- Protect issues of privacy and confidentiality
- Always practice AIDET!

# AIDET – Helps put patients at ease

## **Acknowledge:**

- Greet the patient by name. Make eye contact, smile, and acknowledge family or friends in the room.

## **Introduce:**

- Introduce yourself with your name, skill set, professional certification, and experience.

## **Duration:**

- Give an accurate time expectation for tests, physician arrival, and identify next steps. When this is not possible, give a time in which you will update the patient on progress.

## **Explanation:**

- Explain step-by-step what to expect next, answer questions, and let the patient know how to contact you, such as a nurse call button.

## **Thank You:**

- Thank the patient and/or family, express gratitude to them for choosing our hospital, for their communication and cooperation, and for being there to support the patient.

# When things go wrong

- Do not take the situation personally.
- Keep your emotions under control – Getting defensive or angry will make matters worse.
- Focus on the other person's emotions. Be careful not to ask questions or make statements before the individual is emotionally ready to deal with the situation.
- Always introduce yourself.
- Listen and show concern. Put yourself in the other person's shoes and consider how you would feel.

# Always apologize

- Regardless of the situation or who is at fault
- Even if you didn't cause the problem
- Always say "I'm sorry..." not..."We're sorry."
- Make the apology a blameless apology
- Apologize at the right time
- Say it like you mean it
- Do not place blame

# Customer Service Standards Commitment Booklet

- What is it?
  - A detailed set of standards to assist you in providing exceptional customer service and living the mission and core values of St. Luke's Hospital.
- How does it work?
  - It affords you the opportunity of knowing exactly what behaviors are required of you while you are on duty.
- Why?
  - Because our patients deserve the very best you have to offer and performing at the highest standards possible is the right thing to do.
  - St. Luke's Hospital is dedicated to providing services that consistently exceed the expectations of our patients, visitors, the community and our team.



2023

# Health and wellbeing at your fingertips

## Log in or register for holistic tools and resources.

Visit [stlukes.livehealthyignite.com](http://stlukes.livehealthyignite.com) to learn more about the St. Luke's Passport to Wellness program! Log in for everything you need to know about the program, and for holistic tools and resources organized under 8 Pillars of Wellbeing: balance, community, financial, mindfulness, nutrition, physical, purpose, and social.

### Earn rewards

You can earn rewards for your participation! Use the tracking table on the platform's home page to learn how to earn and to submit your progress. You can also learn more in the program overview.

### Learn and grow

Videos, articles, and other tools support a wide range of topics related to financial, physical, mental, and emotional wellbeing.

### Have fun!

Healthy living doesn't have to be a chore. Join personal and group challenges, create your own group "snap challenges," and share your successes on the social wall and photo gallery.

You can also sync apps and devices, find delicious healthy recipes, track your nutrition, hydration, and sleep, and much more. Wherever you are on your wellbeing journey, you'll find resources to help you get to your destination.

### If you need to register:

1. Visit [stlukes.livehealthyignite.com](http://stlukes.livehealthyignite.com)
2. Select JOIN NOW
3. Enter your group code: PTW
4. Follow the onscreen prompts.  
*Enter your first and last name EXACTLY as shown in Lawson. Your "Unique ID" is your Employee Identification Number (EIN).*

**\*ONLY BENEFITS ELIGIBLE EMPLOYEES ARE ELIGIBLE FOR PARTICIPATION IN PASSPORT TO WELLNESS IN 2023.**

### Returning user

If you are a returning user, enter your username and password.

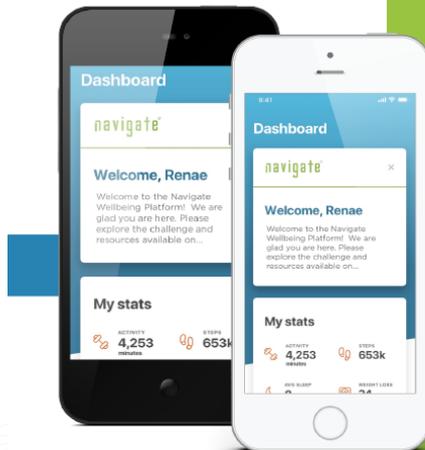
### Questions

**Passport to Wellness:** 636-685-7719

**Technical Issues:** 866-404-5344



Don't forget to download the Navigate Wellbeing app for a convenient and easy way to track your activities. The app is available as a free download in the Apple App Store and Google Play App Store! Scan the QR code to download.



# DOWNLOAD THE NAVIGATE WELLBEING SOLUTIONS APP

*Holistic Wellbeing Resources Are a Few Taps Away*

The Navigate Wellbeing Solutions App is now available as a free download in the Apple App Store and Google Play App Store!

The convenient and easy-to-use app is a perfect complement to your wellbeing portal that allows users to:

- Easily track health-activity behavior (step count, activity minutes, nutrition, hydration and sleep hours).
- Complete your group challenge tasks by tracking behavior.
- Send encouragement to one another in the Message Center.
- Seamlessly link the wellbeing portal for access to full resources: program overviews, recipes, videos and anything else someone might need while on the go.

The app syncs with the portal, so up-to-date information is always available from either a mobile or laptop. It is also free to download and use, so make sure you take advantage of this great new resource!

## How To Download

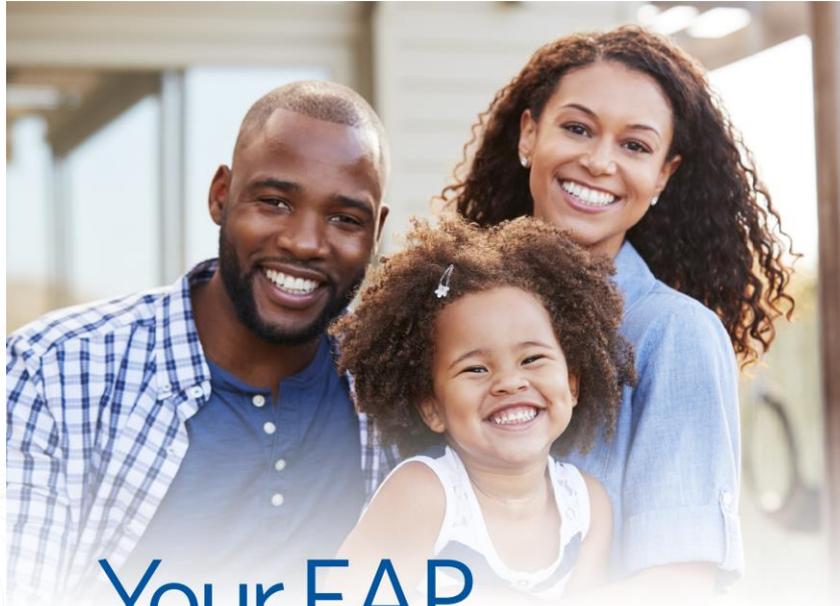


1. Open the Apple App Store
2. Search for Navigate Wellbeing
3. Select GET
4. After the app downloads, tap it to open and follow the onscreen prompts to login



1. Open the Google Play App Store
2. Search for Navigate Wellbeing
3. Select Install
4. After the app downloads, tap it to open and follow the onscreen prompts to login





# Your EAP

*Employee Assistance Program*

Free, confidential counseling and resources

24 hours a day • 7 days a week • 365 days a year

**314.729.4600 #2 or  
800.413.8008 #2**



<p><b>AAA Auto Club of America</b></p>	<p>Discounted Rated for St Luke's Employees</p>  <p>AAA 8.2023.pdf</p>	<p>Contact: James Dake at <a href="mailto:Dake.James@aaamissouri.com">Dake.James@aaamissouri.com</a> or 636-875-9398</p>
<p><b>AT&amp;T</b></p>	<p>Mention <b>FAN# 03011400</b> to receive discount from local store. <b>Must bring in paycheck stub to set up discount.</b></p>	<p>Information can also be found on the Intranet under HR – All HR Forms</p>
<p><b>Bella Baby Photography</b></p>	<ul style="list-style-type: none"> <li>All hospital employees are entitled to a free print, in addition to their complimentary slideshow and photo session.</li> <li>All OB employees are entitled to a free digital download with the purchase of \$90. This digital download is normally \$195 and is a great value as it contains all the edited high-resolution digital images with a print release.</li> <li>All hospital employees are entitled to 50% off Regular Bella Life sessions and 30% off Bella Life products.</li> </ul>	<p>Contact: Lauren Naldzin 610-608-2418</p>
<p><b>Bank of America</b></p>	<p>Learn more about Bank of America benefits available to St. Luke's Team Members.</p>	<p><b>Employee Financial Wellness Program</b> <a href="#">Click Here</a> Bank of America, N.A. Member FDIC. © 2023 Bank of America Corporation. All rights reserved</p>
<p><b>Bi-State Bus Pass/Metro Link</b></p>	<p>Cost Regular Fare \$78.00 Reduced price <b>\$50.00</b> Disability \$39.00 Reduced price <b>\$20.00</b></p>	<p>Purchase in Human Resources – Must reserve 1 month in advance – available only to Full time and Part time (.4 and above) only Only available thru payroll deduction</p>
<p><b>Brinton Vision</b></p>	<p>Brinton Vision Ocular Analysis fee will be waived for St. Luke's employees (\$120 value)</p>	<p>Contact: Dave Heywood 314-375-2020 555 N. New Ballas Rd; Ste. 310 St. Louis, MO 63141</p>
<p><b>CDLC Day School</b></p>	<p>10% Discounts off regular tuition</p>	<p>Eileen Frank – 314-275-8800</p>
<p><b>Centre At Conway</b></p>	<p>10% off Tuition Enrollment fee waived for St. Luke's Employee's</p>	<p>13725 Conway Road Leila Busevac 314-434-3300</p>
<p><b>Chesterfield Montessori School</b></p>	<p>Application fee waived for St. Luke's employees</p>	<p>14000 Ladue Road (Ladue at 141) Contact: <a href="mailto:info@chesterfieldmontessori.org">info@chesterfieldmontessori.org</a> <a href="http://www.chesterfieldmontessori.org">www.chesterfieldmontessori.org</a> Contact: Kimberly Schneider at <a href="mailto:Kim@chesterfieldmontessori.org">Kim@chesterfieldmontessori.org</a> 314-469-7150</p>

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<p><b>City Museum</b></p>	<p>Buy tickets online at <a href="#">Employee Discounts - City Museum</a> Discount code: STLukes</p>	<p>Contact: Courtney Russell 314-231-2489 x601</p>
<p><b>Club Fitness</b></p>	<p>You must enroll online before going to the gym. <a href="https://www.clubfitness.us/jointheclub/">https://www.clubfitness.us/jointheclub/</a> Promo Code: STLUKES22</p>	<p> Club Fitness 8.1.23.pdf</p>
<p><b>Coolsculpting Dr. Scott Geiger</b></p>	<p><b>Call office to check for discounts available</b></p>	<p>Call Dr. Scott Geiger at Chesterfield Plastic &amp; Reconstructive Surgery at 314-205-6420 to schedule a free consultation for Coolsculpting</p>
<p><b>Costco</b></p>	<p>Annual Memberships available</p>	<p>Contact: David Coleman - 636-686-7418 or <a href="mailto:W01060mkt03@Costco.com">W01060mkt03@Costco.com</a></p>
<p><b>Commerce Bank</b></p>	<p><b>Benefits Banking:</b> Discounts on Loan Rates-Higher deposit Rates-Free Mobile banking and alerts and much more</p>	<p>Contact: Foster Sqrow 314-746-5081</p>
<p><b>Dell Computers</b></p>	<p>Up to 30% off select systems, discounts on thousands of electronics and accessories. Open enrollment into Dell Advantage - 5% eGift-card and free 2<sup>nd</sup> business day shipping (enroll at <a href="http://www.Dell.com/mpp/stlukesstlAdvantage">www.Dell.com/mpp/stlukesstlAdvantage</a>)</p>	<p>To chat/shop: <a href="http://www.Dell.com/mpp/stlukesstl">www.Dell.com/mpp/stlukesstl</a> Or call 1-888-243-9964 and reference Member ID: HS129443923</p>
<p><b>Digital Doc</b></p>	<p>Discounts for services on all your personal electronic devices</p>	<p>Located: 16897 Chesterfield Airport Road Chesterfield, MO 63005 636-333-1563</p>
<p><b>Dogtopia of Ellisville</b></p>	<p>Complimentary dog evaluation with free full day of daycare. 10% off all our daycare full day passes, packages, and memberships.</p>	<p>Contact: Dogtopia 15400 Manchester Rd 636-283-2444</p>
<p><b>Drury Plaza Hotel - Chesterfield</b></p>	<p>Employee Discount on Hotel Rooms Corporate code: 308034 <a href="https://www.druryhotels.com/bookandstay/newreservation/0121?corpid=308034">https://www.druryhotels.com/bookandstay/newreservation/0121?corpid=308034</a></p>	<p>Contact Karen Whitchurch at 618-570-1098</p>
<p><b>Employee Assistance Program</b></p>	<p>Counseling for employees and family members at no charge.</p>	<p>1-800-413-8008</p>
<p><b>Extended Stay America</b></p>	<p>Discounts on Rooms-varies on location</p>	<p><a href="http://www.extendedstayamerica.com/?CompanyCode=EASLH">http://www.extendedstayamerica.com/?CompanyCode=EASLH</a></p>
<p><b>Face &amp; Body</b></p>	<p>Discounts on several service, Must show current picture badge each visit  Face &amp; Body.pdf</p>	<p>Contact: Judy Pilcher 314-249-8879</p>

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<b>Fairfield Inn by Marriott</b>	Employee Discount on Hotel Rooms Corporate Code: <span style="background-color: yellow;">          </span> Link: <span style="background-color: yellow;">                          </span>	Contact Chuck Meckfessel 636-519-7500 <a href="mailto:cmeckfessel@hotelequities.com">cmeckfessel@hotelequities.com</a>
<b>Farmers Insurance Group</b>	Discount for Auto and Home Need to mention you are a St Luke's employee when you call	Contact: Julie Gillani 636-223-4080 <a href="mailto:jganev@farmersagent.com">jganev@farmersagent.com</a>
<b>Flu Shots</b>	Yearly Flu Shot-no charge to employees!	Coordinated by Workplace Health
<b>From You Flowers</b>	20% Discount on Flowers Contact person: Lionel Ortiz 860-395-5730	log on to: <a href="http://www.fromyouflowers.com/stlukes">www.fromyouflowers.com/stlukes</a> or call 800-838-8853 and enter code 1392
<b>GLAS-TEK WINDSHIELD REPAIR</b>	25% off Windshield Rock Chip & Long Crack Repairs \$15.00 off Windshield Replacement 100% Lifetime Guarantee – Free mobile service	Contact Dennis at 314-922-7777 Be sure to mention that you are a St Luke's employee to receive discount <a href="http://www.bestwindshieldrepairstlouis.com">www.bestwindshieldrepairstlouis.com</a>
<b>Green Bean Delivery</b>	Home delivery of produce, see flyer for details  GBD-StLukes-Employee-Discount.pdf	For additional Questions contact: James Nimmer and Jamesn@greenbeandelivery.com
<b>HealthCare Associates Credit Union</b>	Credit Union specifically for Health Care	Jaimee Hartman – 314-779-7259
<b>Hotel Discounts</b>	See "Area Hotels" listing via the Intranet Prices and services vary	Additional information on "Area Hotels" can be acquired through our Patient Relations Dept.: Call 314-205-6655.
<b>Hospital Wellness Classes</b>	Variety of wellness related topics and classes	Information available on the Intranet under Departments, Passport to Wellness
<b>Hyatt Place St. Louis/Chesterfield</b>	Employee Discount on Hotel Rooms Corporate code: 06178 Complimentary shuttle 7 am – 7 pm 3.8 miles from St. Luke's	Contact: Anita Faircloth 636-536-6262
<b>Kinder Care</b>	10% Discount for St. Luke's Employees Must show Badge or Paycheck Stub	Click on link below for more information and locations <a href="https://www.kindercare.com/stlukes">https://www.kindercare.com/stlukes</a>
<b>Learning Care Group Daycares</b>	10% discount for St Luke's employees	877-747-2492 or <a href="http://Mylearningcaregroup.com/hospitals">Mylearningcaregroup.com/hospitals</a> For more information
<b>Lucky Lane Nursery School</b>	Employees receive 10% off tuition-Currently on Hold due to COVID 12546 Conway Road Creve Coeur, MO 63141	Contact: Julie 314-434-4462

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<p><b>Marcus Theatre</b></p>	<p>\$8.00 each</p>	<p>Purchase in Human Resources Cash, check, and payroll deduction is available!</p>
<p><b>MOST Missouri</b></p>	<p>Missouri Savings for Tuition program Tax-free higher education savings program for your children</p>	<p>Packets available on the HR page on the Intranet under Benefits enrollment forms.</p>
<p><b>PNC WorkPlace Banking</b></p>	<p>No minimum balance, no monthly service charges, no fee debit cards, performance checking and virtual wallet, must have direct deposit.</p>	<p>Contact: Alicia Hoffmann @ 216-222-5520</p>
<p><b>Raging Rivers</b></p>	<p>Discounts of One Day Admission and Season Passes</p>	<p>Click on PDF below to get Discount Codes  Raging Rivers 2023.pdf</p>
<p><b>Ride Finders</b></p>	<p>Commuter Connections, "Share the Ride"  RideFinders pdf.pdf</p>	<p>Contact: Kym Brown, Outreach Manager 314-621-7433</p>
<p><b>Sam's Club</b></p>	<p>See Working Advantage link</p>	<p><a href="https://stlukesstl.savings.workingadvantage.com">https://stlukesstl.savings.workingadvantage.com</a></p>
<p><b>Savings Bonds</b></p>	<p>Payroll deduction available for Series I and EE Bonds</p>	<p>Account needs to be set up thru Treasury Direct website first and then fill out payroll deduction form with that routing and account number and amount.</p>
<p><b>Silver Dollar City</b></p>	<p>Discounted Adult/Child Day and Season Tickets White Water tickets and Showboat Branson Belle Tickets available online  SDC Attractions 2023 Promo Code FI</p>	<p><b>SDC-2023</b> <b>2023 - Adult 1-day pass - \$77.83 Child 1-day pass - \$68.67</b> <b>Child – ages 4 -11</b> <b>For Season passes take ticket to Guest Services for discount to upgrade, can only upgrade with a promo bought one day ticket</b> Available <b>Online</b> only at: <a href="http://www.SilverDollarCity.com/Save">www.SilverDollarCity.com/Save</a> St Luke's Promo Code: <b>22583</b></p>
<p><b>Six Flags – Hurricane Harbor</b></p>	<p>Discounted Day and Season Tickets <b>Children age 2 and under - Free</b></p>	<p>Purchase thru Working Advantage link <a href="https://stlukesstl.savings.workingadvantage.com">https://stlukesstl.savings.workingadvantage.com</a></p>
<p><b>St. Luke's Hospital Fitness Center</b></p>	<p>FREE for all St. Luke's Employees Located in WMOB and at Desloge Center Employees receive 10% discount on massages and classes</p>	<p>Sign-in at the Fitness Center. Classes available for an additional charge</p>

<p><b>Sylvan Learning Center</b></p>	<p>Free Assessment &amp; 10% off Tutoring –good in most St. Louis locations Employee will need to show badge or Business Card to receive Discount</p>	<p>Contact: 636-537-8128 to be directed to the correct location</p>
<p><b>T-Mobile/Sprint</b></p>	<p>Sprint is now part of T-Mobile</p>	<p>See information on Intranet, under HR- All HR Forms</p>
<p><b>Together Credit Union</b></p>	<p><b>Checking is FREE at Together Credit Union</b> FREE Debit Card, FREE Online Access, FREE Online Bill Pay, Free Mobile Access, NO Monthly Fee, NO Minimum Balance. It's fast and easy to open your new <b>FREE</b> Checking account</p>	<p>Visit <a href="http://www.togethercu.org">www.togethercu.org</a></p>
<p><b>Verizon</b></p>	<p>To get the Verizon discount as a St. Luke's Employee..... Link is <a href="http://www.verizonwireless.com/getdiscounts">www.verizonwireless.com/getdiscounts</a></p>	<p>Employee discount verified by using hospital email on their link See information on Intranet under HR – All HR Forms</p>
<p><b>VPI Pet Insurance</b></p>	<p>Received 5% discount (up to 15% w/ multiple pets)</p>	<p><a href="http://www.petinsurance.com/affiliates/stlukeshospital">http://www.petinsurance.com/affiliates/stlukeshospital</a></p>
<p><b>Working Advantage</b></p>	<p>Multitude of Discounts from Electronics to Theme Parks You will need to set up account with an email and password.</p>	<p><a href="https://stlukesstl.savings.workingadvantage.com">https://stlukesstl.savings.workingadvantage.com</a>.</p>
<p><b>YMCA</b></p>	<p>Contact: Pixie Gerken – 314-530-8142 pixiegerken@gwymca.org Discounts also available for YMCA Trout Lodge</p>	<p><a href="http://www.gwymca.org">www.gwymca.org</a> <a href="http://www.ymcaoftheozarks.org/corp-discounts">http://www.ymcaoftheozarks.org/corp-discounts</a></p>