



No Smoking and Tobacco-Free Environment

Policy Number: HR0066

Policy Date: July 1, 2011

1. Purpose

To establish and support a tobacco-free environment on Beth Israel Deaconess Hospital-Plymouth's campus located at 275 Sandwich Street, Plymouth, MA and including Sandwich Street and Coles Lane properties. Beth Israel Deaconess Hospital-Plymouth ("BID-Plymouth") is committed to providing a safe, clean and healthy environment for our patients, visitors and staff. As a responsible community leader in healthcare, BID-Plymouth provides a tobacco-free environment to reduce health risks associated with the use of tobacco products (including, but not limited to cigarettes, cigars, pipe tobacco, chewing tobacco, smokeless tobacco, dip, snuff and e-cigarettes) and to promote and encourage healthy lifestyles throughout the community.

2. Philosophy

BID-Plymouth supports the science and findings of the United States Surgeon General that there is no risk-free level of exposure to second hand smoke and that tobacco use in any form, active or passive, is a serious health hazard.

BID-Plymouth acknowledges findings by United States Environmental Protection Agency and American Cancer Society which classify second hand smoke as a carcinogen which means it is a toxic substance known to cause cancer in humans.

3. Scope

This policy applies to all persons, including staff, physicians, inpatients, hospital-based outpatients, visitors, students, vendors, contractors, subcontractors, children/youths, volunteers and others in BID-Plymouth buildings, on hospital-owned grounds, parking lots, in all hospital-owned or leased vehicles, all personal vehicles located or parked on hospital property at its 275 Sandwich Street, Plymouth, MA location including Cole's Lane and Sandwich Street properties owned by the hospital.

4. Definitions

- **Smoking** - a lighted cigar, cigarette, e-cigarette, pipe or other lighted smoking device carried by a person
 - **Campus** - at its 275 Sandwich Street, Plymouth, MA location including Cole's Lane and Sandwich Street properties owned by the hospital.
-

5. Standards

BID-Plymouth campus will be a tobacco-free environment, effective July 1, 2011. The use, sale or noticeable odor resulting from tobacco products is prohibited on all of its premises.

Employees, physicians, patients, visitors, students, vendors, volunteers, contractors are prohibited from tobacco use/smoking on the BID-Plymouth campus.

Individuals located in buildings off campus which are not owned by BID-Plymouth will abide by the tobacco use/smoking policy of the particular building in which they work.

Tobacco products and related paraphernalia will not be sold or dispensed within the hospital premises.

The use of tobacco products is prohibited in personal vehicles when parked on BID-Plymouth campus.

Patients admitted to BID-Plymouth will be offered smoking cessation services and nicotine replacement therapy to ease any withdrawal symptoms while hospitalized.

6. Procedure

- a) Registration staff will inform all patients at the time of registration at both inpatient and outpatient settings about the no tobacco policy.
- b) Physician's offices will be encouraged to share information regarding this policy with their patients who may be coming to BID-Plymouth.
- c) Assistance and information regarding smoke cessation programs, will be offered to employees who wish to stop their use of tobacco.
- d) All hospital staff members and leadership are required to observe and promote compliance with this tobacco-free policy.
 1. All staff members are responsible for encouraging compliance by staff, physicians, inpatients, hospital-based outpatients, visitors, students, vendors, contractors, subcontractors, children/youths, volunteers and others found in violation of this policy by courteously reminding them of this policy and suggesting that they stop smoking or using the tobacco product on the premises.
 2. Staff members with noticeable tobacco odor in their clothing may be asked to change into alternate clothing or be sent home, on their own time, to change. Repeated incidents will subject the staff member to progressive discipline according to the Human Resources Code of conduct Policy.
 3. In the event the violation involves a potential threat to health or safety (i.e., smoking where combustible supplies, flammable liquids, gases or oxygen are used or stored), and in other situations which may warrant Security may be called upon for additional support and intervention. Security will contact/include other departments as appropriate.
 4. Employees are encouraged to inform their manager if they witness repeated violations of this policy.
 5. Effective November, 2013, BID-Plymouth and its' affiliates will not hire tobacco users (see Hiring Policy #0086)

6. Visitors who smoke or use tobacco products on hospital campus and do not respond cooperatively to communication about the policy will be asked to leave the campus. Security may be called upon for additional support and intervention.
 7. Patients who smoke or use tobacco on hospital campus will be requested to return to the inpatient unit and referred back to their clinical care team who will work with the treating physician for tobacco-free support. If patient refuses to comply, RN caregiver should notify physician of patient noncompliance for physician intervention as appropriate. If continued noncompliance, patient to be considered leaving against medical advice and requested to sign out AMA. See hospital policy.
 8. Volunteers who smoke or use tobacco products on hospital campus and do not respond cooperatively to communication about the policy will be referred to Volunteer Services for appropriate action.
 9. Physicians who smoke or use tobacco products on hospital campus and do not respond cooperatively to communication about the policy are referred to the appropriate administrative person for enforcement as it relates to employees.
- e) Questions regarding enforcement of the policy as it relates to employees should be addressed directly to Human Resources.

7. References

8. Attachments

- Employee Uniforms/Dress Code Policy
 - Code of Conduct Policy
-

9. On-Line Edition

While we make every effort to keep this policy up-to-date, you should consider the on-line edition to be the most current.

10. Review and Approval

The following hospital personnel originated and approved this policy:

Contact	Donna Doherty Vice President Patient Care Services and Chief Nursing Officer
Approved by	Peter Holden President & CEO

11. Quality Improvement Tracking Record

Action	Date
Policy approved (initial effective date)	July 2011
Revision	Month, Year
Revision	August 2013
Next planned revision	August 2016
Replaces policy	Smoking Policy: Emergency Department Patients 100120 Inpatient Smoking 102.07.001

Attachment 1



Beth Israel Deaconess Hospital
Plymouth

Code of Conduct

Policy Number: HR0008

Policy Date: January, 2011

1. Purpose

To provide rules, guidelines, and specific examples of unacceptable conduct.

2. Philosophy

Employees must understand Beth Israel Deaconess Hospital-Plymouth, Inc.'s conduct expectations in support of a culture of safety, quality of care, treatment and services.

3. Scope

Employees must understand Beth Israel Deaconess Hospital-Plymouth, Inc.'s conduct expectations in support of a culture of safety, quality of care, treatment and services.

4. Definitions

Serious Cause - Serious misconduct that results in breakdown of acceptable supervisor/employee relationships or norms and hampers hospital relationships or operations.

Lesser Cause - Employee behavior generally described as poor work habits or behavior that provide no serious effect on organizational routine at the time but, if allowed to continue, may cause a general breakdown of adherence to established rules or hamper operations.

5. Standards

Beth Israel Deaconess Hospital-Plymouth recognizes its responsibility to develop and administer policies, procedures and behavioral standards and disciplinary measures in a fair manner. Beth Israel Deaconess Hospital-Plymouth makes every effort to select qualified, motivated, mature staff (employees, physicians and volunteers). In turn, employees have the obligation to comply with policies and procedures and to adhere to standards of conduct that will ensure efficient, safe, high quality patient care, collaborative relationships and promote high morale.

Any employee, regardless of position, may be subject to discipline. Discipline may be administered via warning, suspension, or termination. Discipline may be imposed for violations of policies, procedures,

standards or other failure to maintain acceptable levels of conduct. Records of these disciplinary actions are maintained in the employee's personnel record in accordance with the personnel policies and applicable laws.

6. Procedure

Human Resources staff is available to consult and assist managers in reviewing and determining appropriate discipline. Each instance of misconduct will be evaluated on a case-by-case basis and any form of discipline may be issued.

1. Verbal Warning

Supervisors may issue a verbal warning. A confirmation of the verbal warning should be signed by the supervisor and the employee and sent to the Human Resources Department to be included in the employee's personnel file.

A verbal warning serves as notice to the employee that a continuation of the specified unacceptable practice or any other policy infraction may result in further disciplinary action up to and including termination of employment.

2. Written Warning

Supervisors may issue a written warning. The original of the written warning should be signed by the supervisor and the employee. A copy of the warning should be retained by the manager and a second copy sent to the Human Resources Department to be included in the employee's personnel file.

A written warning serves as notice to the employee that a continuation of the specified unacceptable practice, or any other policy infraction, may result in further disciplinary action up to and including termination of employment.

3. Suspension

Supervisors may issue a suspension. The original suspension should be signed by the supervisor and employee. A copy of the suspension letter should be retained by the manager and a second copy sent to the Human Resources Department to be included in the employee's personnel file.

A supervisor may suspend an employee for any violation and/or repeated violations of policies. Suspensions are without pay.

A suspension serves as notice to the employee that a continuation of the specified unacceptable practice, or any other policy infraction, may result in further disciplinary action up to and including termination of employment.

If the employee fails to return to work without notice on the assigned date and shift following the suspension, s/he will be deemed to have resigned and thus terminated from employment. The effective date of termination will be the day following the day the employee was to report back to work.

4. Discharge

No employee shall be discharged without consulting/notifying the Human Resources Department. Discharge may be imposed for a first violation; multiple violations; failure to show improvement in performance; or for an infraction that warrants discharge. Beth Israel Deaconess Hospital-Plymouth reserves the right to discharge employees for any offense where circumstances warrant based on the individual circumstances present in each case.

The supervisor will give the employee written notice of the decision. The copy of the Notice of Disciplinary Action will be sent to Human Resources to be placed in the employee's personnel file.

B. Violations

Offense can be generally categorized as follow:

Serious Cause - Serious misconduct that results in breakdown of acceptable supervisor/employee relationships or norms and hampers hospital relationships or operations. Usually, major violations will result in disciplinary time off on the first offense and discharge if repeated. It also includes violations of an obvious nature that violate accepted and understood codes of ethical, moral and legal behavior in an employment situation. It includes other serious offenses that result in danger to life or destruction of property. These matters of an obvious nature will likely result in discharge on the first offense.

The following conduct is considered serious in nature and may result in discipline up to and including discharge. This list is not meant to be all-inclusive, but rather to highlight specific areas of particular concern regarding the more common serious violations. This list is subject to change at any time.

Each Case is reviewed individually.

- Lying about or failing to providing information regarding any job-related matters, including participating in workplace investigations; omission; misrepresentation; falsification or unauthorized use of any record, time card or time sheet, report or any other document;
- Stealing, misappropriating or receiving property belonging to patients, visitors, physicians, other employees, the Hospital, or any other person affiliated in some way with the Hospital;
- Removal or use of Hospital property without proper authorization;
- Misappropriation or misuse of any Hospital narcotics, medications or equipment, uniforms, supplies, records, documents or other property;
- Organizing, operating, conducting or participating in illegal gambling or other illegal activities on Hospital property, or while in a Hospital vehicle or while in a Hospital uniform at any time;
- Defacing, marking, possessing, completing or altering another employee's time card or any other record of time and attendance;
- Permitting another employee to punch or alter your own time card or any other record of time and attendance;
- Issuing or inappropriately using another employee's password for any reason;
- Issuing or using another employee's access card or keys or other Hospital property without proper authorization;
- Willfully or negligently destroying, defacing or damaging property belonging to patients, visitors, physicians, other employees, the Hospital, or any other person affiliated in some way with the Hospital;
- Possessing or using firearms, other weapons, incendiaries, explosives or unauthorized restraints or other dangerous device or materials on Hospital property, or in the Hospital's vehicles, or while in the Hospital's uniform at any time;
- Disruptive behavior such as : threatening, intimidating, harassing, provoking, undermining or coercing a patient, visitor, physician, Hospital employee, government employee, or other person affiliated in some way with the Hospital;
- Deliberately interfering with or delaying the work of another employee;
- Fighting, assault, battery or other disorderly conduct such as the use of abusive, profane, or threatening language/conduct while on duty or in the Hospital uniform at any time;
- Insubordination, including failure to carry out or properly perform instructions or assignments, including refusing to participate in workplace investigations;
- Patient abuse, neglect, mistreatment (including, but not limited to, the use of abusive, profane or threatening language), abandonment of a patient or failure to adhere to any patient care standard (including, but not limited to, delay in response) which results in, or could result in, an adverse patient outcome;
- Possessing, selling, distributing, using, or being under the influence of, or consuming intoxicants, non-prescription drugs, alcoholic beverages, or other legally controlled substances on the Hospital's premises, or in Hospital vehicles, or while wearing the Hospital's uniform at any time;

- Divulging confidential information to anyone other than a properly authorized person, or accessing or sharing restricted patient records, business records, or other medical records without proper authorization;
- Sleeping on work time;
- Dereliction of duties during work hours;
- Offensive or obscene conduct;
- Revocation or failure to maintain or failure to produce on request original evidence of any required certification or licensure for the employee's position;
- Soliciting or accepting tips/gratuities or other items of value from patients or vendors, or selling/offering goods or services to patients or vendors except as part of the employee's job duties;
- Violation of safety rules and/or practices;
- Operating or using machinery or equipment not assigned to the employee or allowing others to do so;
- Performing work assignments or patient care responsibilities in an unsafe or detrimental manner
- Performing work assignments while impaired by prescription or over-the-counter drugs;
- Soliciting, canvassing, selling or distributing goods, services or printed material to Hospital patients, visitors or employees;
- Abuse, misuse or fraudulent use of unscheduled Earned Time, bereavement leave, FMLA Leave or any other leave time granted by the Hospital;
- Two (2) consecutive instances of no-call, no-show will be considered a voluntary resignation of employment;
- Failure to return to work at the expiration of an authorized leave of absence or an extension of such a leave will be considered job abandonment;
- Abandonment of a work shift or work assignment, including leaving the work area (except on an authorized break) without prior approval of a supervisor; and
- Violation of the Hospital's anti-discrimination and anti-harassment policies (including, but not limited to, retaliation).
- Off duty misconduct which affects the work or reputation of the hospital.

Lesser Cause - Employee behavior generally described as poor work habits or behavior that provide no serious effect on organizational routine at the time but, if allowed to continue, may cause a general breakdown of adherence to established rules or hamper operations. Initial disciplinary action will usually be a documented warning outlining that unless the problem is corrected further action will be taken with increasingly severe penalties, including written warning, suspension or discharge.

The consequences of the actions or inactions described below may also result in disciplinary action, up to and including discharge, depending on the circumstances. This list is not meant to be all-inclusive, but rather to highlight specific areas of particular concern regarding the more common violations. This list is subject to change at any time and each case is reviewed individually.

1. Excessive or disruptive or an unacceptable pattern of absence and/or tardiness.
2. Posting unauthorized or improper notices; defacing or removing authorized notices.
3. Failure to maintain an appropriate level of personal hygiene.
4. Violation of any written Hospital policies.
5. Smoking in an unauthorized area.
6. Failure to perform duties in accordance with the Hospital's standards.
7. Failure to possess and display an employee identification badge above the waist.
8. Being in an unauthorized area to include using unauthorized entrances and exits.
9. Failure to respond appropriately to requests of Hospital security.

Regardless of the violation, the Hospital reserves the right to impose any level of discipline, including immediately discharge of an employee based on its assessment of all the circumstances, including, but not limited to, the seriousness of the offense and/or the frequency of the violation and/or the actual or potential consequences, and/or the employee's prior disciplinary and/or performance record.

7. References


8. Attachments

9. On-Line Edition

While we make every effort to keep this policy up-to-date, you should consider the on-line edition to be the most current.

10. Review and Approval

The following hospital personnel originated and approved this policy:

Contact	Kristen Wood Acting Director, Human Resources
Approved by	Peter Holden President & CEO 
	Kristen Wood Department Director

Disclaimer:

The Human Resource Policies and its language are not intended to create or constitute a contract between the Hospital and any of its employees. Beth Israel Deaconess Hospital-Plymouth reserves the right to unilaterally modify, revoke, suspend, terminate or change any and all policies, procedures and benefits it may have with or without notice, at any time. Beth Israel Deaconess Hospital-Plymouth reserves the right to decide not to apply any particular policy in a given situation if, in its sole discretion, it determines that to do so should better serve its interest.

11. Quality Improvement Tracking Record

Action	Date
Policy approved (initial effective date)	Jan 2011
Reviewed	Jan, 2013
Revision	Month, Year
Revision	Month, Year
Next planned revision	Jan 2016
Replaces policy	Not applicable

Attachment 2



Employee Uniforms/Dress Code

Policy Number: HR0029

Policy Date: 1/11

1. Purpose

To ensure staff are dressed so as to present a professional image of Beth Israel Deaconess Hospital-Plymouth (“BID-Plymouth”).

2. Philosophy

It is important for all employees of BID-Plymouth to project a professional image. In the interest of the promotion of this image, to set expectations for employee appearance which will ensure the grooming, clothes and uniforms staff wear will be safe for the work environment, to present a professional appearance and promote a positive working environment the following policy is established.

3. Scope

This policy applies to Beth Israel Deaconess Hospital-Plymouth and all its entities and affiliates.

4. Definitions

N/A

5. Standards

- It is important that staff are identifiable and present a professional image to patients and the public. All staff are required to wear the Hospital issued identification badge in a visible area above his/her waist. ID Badge consists of two parts, worn back to back with identifying information (full name, title and photo) remaining visible at all times. The badge is not to be altered in any way.
- Patients have a right to expect general cleanliness and hygiene of staff. Staff are expected to report to the worksite clean and presentable for work. Employees should

avoid the use of body fragrances such as cologne, lotions, and perfume.

- While at work employees are expected to exercise the same discretion in using personal electronic devices (e.g., cellular phones Blackberries, iPods, head phones) as is expected for the use of company phones. Use of personal electronic devices for non-work related purposes while on duty is prohibited except in cases of emergency. Excessive personal calls during the work day, regardless of the phone used, can interfere with employee productivity and be distracting to others. Employees are encouraged to make any personal calls on non-work time where possible and to ensure that friends and family members are aware of Hospital policy.
- All staff must dress in a modest and professional manner, wearing clean clothes that are not casual or recreational-type attire but are appropriately coordinated and neat while on duty. If someone is unsure if an article of clothing is acceptable, most likely it is not. If in doubt, do not wear it.

Examples of unacceptable attire include but are not limited to:

- Dungaree or denim pants;
- Shorts;
- Sweatshirts;
- T-shirts with logos (unless as part of a BID-Plymouth uniform);
- Tank tops, sundresses, spaghetti straps;
- Athletic wear (sweatshirts/pants, tights or leggings worn as pants);
- Revealing clothing of an inappropriate length, tightness, etc.;
- Earrings for pierced ears are allowed, but jewelry for body piercing is not;
- Wearing of scrubs or other hospital attire which is not part of a uniform or required by the department; and
- Head gear such as baseball caps or visors (unless part of a uniform).

Uniforms: In certain areas and for certain positions, uniforms or scrub suits may be required. Such attire assists patients/visitors in identifying staff function. Staff in these areas must wear the required uniforms provided by the department. Alterations to uniforms are not permitted. The wearing of scrubs or other hospital attire which is not part of a uniform or required by the department is prohibited.

Footwear: The Hospital has determined that certain footwear in clinical areas can present a safety hazard – flip-flops, sandals, slippers, excessively high-heeled shoes and open-toe footwear are prohibited. In non-clinical areas, employees may wear appropriate business shoes (heels, flats, sandals, etc). All footwear, including shoes or sneakers, must be clean.

Safety: The hospital shall provide personal protective equipment for staff who will be required to wear such equipment.

Fingernails: Direct patient care givers, those who touch patients and those whose job indirectly impact patient care (Food Service, CSR, Pharmacy, Laboratory and Volunteers) must comply

with the Hospital's Fingernail Policy. Specifically, they may not wear artificial nails or nail-jewelry. Natural nails must not exceed ¼ inch beyond the finger. Polish may be worn but must be in good repair without cracks or chips. Polish is not permitted in food services.

Other (tattoos, body piercing, hair color etc): In certain instances jewelry, hair color, hair length or tattoos, may impact an employee's ability to perform effectively in the position they hold or the specific work environment they are in. Factors used to determine whether jewelry, hair color, hair length and/or tattoos pose a conflict with the job or work environment will include, but are not limited to:

- Safety of self or others (e.g. hair may need to be tied back)
- Productivity or performance of tasks
- Perceived offense on the basis of race, sex, religion, etc.
- Community norms
- Customer complaints

If a potential conflict is identified, the employee will be encouraged to identify appropriate solutions such as removal of excess jewelry, covering of tattoos, transfer to alternative positions, etc.

6. Procedure

7. References

None

8. Attachments

None

9. On-Line Edition

While we make every effort to keep this policy up-to-date, you should consider the on-line edition to be the most current.

10. Review and Approval

The following hospital personnel originated and approved this policy:

Contact	Kristen Wood Acting Director, Human Resources
Approved by	Peter Holden President & CEO
	Kristen Wood

	Acting Director, Human Resources
--	----------------------------------

11. Quality Improvement Tracking Record

Action	Date
Policy approved (initial effective date)	1/11
Revision	7/14
Reviewed	1/13
Next planned revision	7/17
Replaces policy	Not applicable