

**Cleveland Clinic’s
R. B. Turnbull Jr., MD School of WOC Nursing Education
CCF Onsite CLINICAL Student Handbook**

Table of Contents

Nondiscrimination Statement.....	0
Professional & Technical Essential Standards for Clinical Placements	0
Criminal Background Investigative (CBI) Check Requirement	1
Student Health Services (Cleveland Clinic Health Services Available)	2
Contagious or Infectious Disease.....	2
Caring for Caregivers.....	2
Special Needs/Accommodations	2
Attendance/Illness Absence Policy	3
Academic Misconduct.....	4
Academic Counseling/Corrective Action/Dismissal	4
Clinical Failure Policy.....	5
Clinical Sites	5
Security and Campus Safety.....	5
Conduct (Code of Conduct).....	6
Universal Precautions	7
Confidential Information & HIPAA.....	8
Diversity Statement	9
Title IX	9
Student Flu Policy.....	15
Non-Smoking Policy (Smoke-Free Campus).....	17
Substance Abuse Policy.....	19
Dress Policy for Onsite Clinicals at Cleveland Clinic.....	23
Personal Appearance Policy.....	23
Identification Badges Policy.....	25
Social Media Use Policy	28
Cellular Phones	32
Student Parking.....	35
Weather Emergency (Severe Weather Policy).....	35
Weapons and Contraband Policy.....	35
Equal Employment Opportunity/Workforce Diversity and Inclusion	38
Student Handbook Attestation	41

Nondiscrimination Statement

Cleveland Clinic is committed to providing a working and learning environment in which all individuals are treated with respect and dignity. It is the policy of Cleveland Clinic to ensure that the working and learning environment is free from discrimination or harassment on the basis of race, color, religion, gender, sexual orientation, gender identity, pregnancy, marital status, age, national origin, disability, military status, citizenship, genetic information, or any other characteristic protected by federal, state, or local law. Cleveland Clinic prohibits any such discrimination, harassment, and/or retaliation.

Any participant in a Cleveland Clinic educational program, including any student, trainee or employee, who may have been subject to discrimination on the basis of a protected characteristic is encouraged to make a report.

Reports of discrimination on the basis of sex, gender, sexual orientation, gender identity or gender expression may be made to the Title IX Coordinator. Please visit the [Title IX Internet Site](#) for additional information and/or send an email to TitleIX@ccf.org.

Reports of discrimination on the basis of a disability, may be made to the Section 504 Coordinator, Main Campus NA31.

Reports of discrimination on the basis of any other protected characteristic may be made to the Office of Educational Equity at EduEquity@ccf.org.

Reports of discrimination may be made to the WOC Nursing program director at WOCschool@ccf.org.

In addition, Cleveland Clinic shall provide reasonable accommodations to any qualified student with a disability in order for the student to have equal access to their program. Students needing a reasonable accommodation in order to apply to or participate in the program should contact the program director or designee as early as possible.

Professional & Technical Essential Standards for Clinical Placements

1. **Sensory and Motor Skills** - Students and candidates for program admission should be able to:
 - a. Lift, pull, push and transfer patients in a safe manner.
 - b. Lift, pull, push and carry clinical equipment in a safe and controlled manner.
 - c. Demonstrate basic clinical skills related to the use of extracorporeal equipment, circuitry, and ancillary clinical patient care devices and equipment.
 - d. Execute quick and purposeful movements during emergency treatment of patients.
2. **Communication** - Students and candidates for program admission should be able to:
 - a. Possess excellent verbal and written communication skills in the English.
 - b. Speak clearly.
 - c. Hear sufficiently.
 - d. Produce and transmit patient information in oral and written format to members of the healthcare team.
 - e. Communicate with patients effectively with compassion and empathy.
 - f. Possess demonstrated reading skills at a sufficient grade level to accomplish curricular requirements.

- g. Provide effective care to patients.
- 3. **Intellectual** - Students and candidates for program admission should be able to:
 - a. Measure, calculate, interpret, analyze, question, compile and evaluate information from various modalities to effectively evaluate extracorporeal equipment and treat patients.
 - b. Comprehend spatial relationships of structures and models.
 - c. Comprehend relationships between patient care parameters and anticipate cause and effect responses based on their actions and inactions.
 - d. Learn through a variety of teaching modalities including classroom lecture, cooperative learning, small group activities, medical simulation and laboratory exercises, individual and group presentations, and the use of technology assisted learning.
 - e. Make rapid decisions in life threatening situations where problem solving and critical thinking are required.
- 4. **Behavioral and Social Attributes** - Students and candidates for program admission should be able to:
 - a. Demonstrate emotional stability.
 - b. Exercise good judgment, prompt completion of all responsibilities related to care of patients and participation on a patient care team.
 - c. Develop mature and effective relationships with co-workers and patients.
 - d. Perform problem solving skills in a timely manner.
 - e. Tolerate physically demanding workloads.
 - f. Function effectively under stress.
 - g. Adapt to changing environments, display flexibility, and learn to function in an environment of uncertainty inherent in the clinical practice of cardiovascular perfusion.
 - h. Practice in a safe manner.
 - i. Respond appropriately to emergencies.
 - j. Treat all patients, families, colleagues, and other members of the health care team with dignity and respect.
 - k. Demonstrate honesty, integrity, dedication, compassion and motivation.
 - l. Accept constructive criticism and respond appropriately with an acceptable modification of behavior.
- 5. **Observation** - Students and candidates for program admission should be able to:
 - a. Visualize information presented in images from paper and projections such as PowerPoint slides and video.
 - b. Observe laboratory, lecture and clinical demonstrations.
 - c. Observe patients and members of the healthcare team accurately at a distance and close.

Criminal Background Investigative (CBI) Check Requirement

Students must pass a criminal background check administered by Cleveland Clinic's internal security administrative services (SAS) department.

If a student does not pass the criminal background check, s/he may be granted permission to participate **ONLY** in the online didactic component of this program. Thus, the student will not be allowed into the clinical portion of the program, and neither will the student be considered a graduate of the program.

In this event, the student may potential acquire his/her certification credentialing via the WOCNCB's Experiential Pathway to Testing option; if s/he qualifies. It is advisable that the student research the WOCNCB's Experiential Pathway to Testing option before s/he proceeds with enrollment in this program.

Student Health Services (Cleveland Clinic Health Services Available)

If the student is completing onsite clinicals within the Cleveland Clinic Health System, then its emergency department will provide emergency care in the event of a program-related incident. This excludes any and all dependents. The student is responsible for all health care costs not covered by their health insurance, e.g. co-pays, deductibles, etc. Students are required to report any on-the-job injury to the WOC Nursing program office (ph: 216-317-7163 or WOCschool@ccf.org) and clinical preceptor within 48 hours of its occurrence.

Students experiencing a work related needle stick or blood/body fluid splash should report to the Center for Corporate Health at their clinical facility as soon as possible (refer to Infection Control Policy). Any work related injury is not covered by the Cleveland Clinic and the student should follow the procedure outlined below. An incident report is required to initiate a visit to the Center for Corporate Health. The student will supply the WOC Nursing program a copy of the incident report detailing the injury.

If a student incurs an accidental injury while at the clinical site other than a needle stick or blood/body fluid splash, s/he may visit the emergency department, be sent home, or report to his/her own private physician for care. The student is responsible for any cost incurred for treatment.

Contagious or Infectious Disease

Students assume the risk of exposure to patients who may carry a contagious or infectious disease. In the event any student is exposed to blood from a patient, who is a carrier of a contagious or infectious disease, or a patient, who is in the judgment of the Clinical Site at risk of being a carrier of a contagious or infectious disease, the Clinical Site will, with the consent of the student, either refer the student to an Emergency Room or administer immediate precautionary treatment consistent with current medical practice. Initial screening tests or prophylactic medical treatment shall be paid for by the student's own medical coverage. The Clinical Site shall have no responsibility for any further diagnosis, medication or treatment.

Caring for Caregivers

Students enrolled in a Cleveland Clinic internal health science program (i.e., WOC Nursing education) are eligible for six Employee Assistant Program (EAP) sessions. To access more information, please call 216-445-6970 or 1-800-989-8820, or use the website link below:

<http://portals.ccf.org/caregivers/CaringforCaregiversHome/tabid/3037/Default.aspx>

Special Needs/Accommodations

It is the policy of the WOC Nursing program to grant accommodations, whenever possible, to students with a disability. The Americans with Disabilities Act (ADA) does not require an educational institution to make accommodations if the student/applicant is not otherwise qualified or if the necessary accommodations would substantially alter the course of study or outcome. A disability is defined as a physical or mental impairment, which substantially limits a major life activity (such as learning, seeing, hearing, etc.) Otherwise qualified is defined as meeting all other requirements of the program.

It is the student/applicant's responsibility to declare his/her disability and seek accommodation(s).

1. Procedure for requesting special accommodations
 - A. The student/applicant will be required to submit to the program director written documentation to request special accommodations at WOCschool@ccf.org. The student's request must be accompanied by a letter written by an independent authority (a professional authorized to conclude the need for special accommodations) to include the following information:
 1. The nature of the disability and/or specific diagnosis.
 2. What diagnostic tests have been completed to determine the disability, and the outcome of these tests?
 3. Any treatment undertaken for the disability (medications, therapy, etc.)
 4. Specific accommodations requested.
 - B. A Health Science's Advisory Committee, if necessary, will review the above documentation and determine if the student meets disability criteria.
 - C. If the student/applicant meets the criteria, the Health Science's Advisory Committee will jointly establish reasonable accommodations. It is the responsibility of the student applicant to request specific accommodations.
 - D. The program director will determine if the requested accommodation is reasonable, seeking input from the Director, Health Sciences Education, Education Institute and others as needed.
 - E. The program director will inform the Health Sciences Advisory Committee of the outcome.
 - F. The Health Sciences Advisory Committee will inform the WOC Nursing faculty as applicable and the student applicant of the decision.
2. Information regarding a disability is confidential. However, it may be necessary for individual WOC Nursing faculty members to be informed about a disability if the accommodations may impact the structure of the course. Once a student is classified as disabled and receives reasonable accommodations, the student must continue to meet the ADA criteria in order to continue to receive the accommodations.

Attendance/Illness Absence Policy

It is expected that all WOC students will be present for all weekly scheduled online class group discussions as well as their clinical rotations when those too are assigned to the student.

If a student, who is assigned a clinical date, is ill or tardy, then the student is expected to contact the assigned preceptor by 7:45 AM on that day. If a student is assigned an onsite clinical at Cleveland Clinic, then the student also must notify the WOC Nursing program's business office at 216-317-7163 by 7:45 am that day as well. This phone number has a voicemail box in the event that it is too early for someone to receive the call. Students should leave a voice message along with his/her name and a phone number where s/he can be reached that day.

If a student knows the day before that s/he will be out, then the student must notify the assigned preceptor on that clinical date.

All clinical tardy and absentee hours must be made up. Contact the WOC business office to make an appointment with the program director, who will to discuss the make-up date, time, and activities with the student.

Extenuating circumstances that cause a delay in completing the program should be reported as soon as possible to the WOC business office at 216-317-7163. Failure to communicate extended absences may result in termination from the program.

In the event of a weather or other emergency causing classes or clinicals to be cancelled or delayed, a message will be sent out through the online learning classroom's alert system to all affected students.

Academic Misconduct

Misconduct is defined as fabrication, falsification, plagiarism, or other practices that seriously deviate from those that are commonly accepted within the scientific community for purposing, reporting, or conducting research. Misconduct does not include honest error or honest differences in interpretation or judgments of data.

The program director or designee shall investigate allegations of misconduct and enact disciplinary action including expulsion from this program.

If disciplinary action is taken as a result of the misconduct, the student will be notified in writing by the program director or designee. The disciplined student then will have the right to appeal this decision as explained further in this handbook.

If the allegations of misconduct are unfounded, then every effort will be made by the program director, or designee, to restore the reputation of the affected student. This will include a written statement of the decision clearly reached.

Complete deliberation and investigative records will be retained in the student's e-records.

Academic Counseling/Corrective Action/Dismissal

OBJECTIVE:

Students enrolled in the WOC Nursing program must conduct themselves in an appropriate and professional manner; and must adhere to the rules and regulations of the school and clinical sites. The purpose of this policy is to provide guidelines to assist with managing student performance or conduct issues that interfere with the safe, orderly, effective and efficient operation of the program and the organization. It provides standards and rules governing performance and a procedure for consistent, non-discriminatory application of the rules in the interest of maintaining the highest quality patient care and educational environment.

PROCEDURE:

Step 1: Documented Counseling

For infractions considered less serious, a documented counseling action may be the first step in the discipline procedure. It consists of a verbal conference with the student and the program director, or designee, and it will be documented in writing and placed in the student's e-file.

Step 2: Written Corrective Action

The written corrective action is a document summarizing the performance problem or incident. The document and situation will be reviewed with the student outlining the specific problem(s)/incident and warning the student that further behavior will result in further corrective action.

Step 3: Dismissal

Depending on the seriousness of the incident or behavior, the student may receive a dismissal as the first step of the corrective action process. Dismissals general, however, will occur as the final step in the corrective action process. Dismissals may occur for serious offenses or for continued performance or behavioral problems. The program director, or designee, has the final decision on whether a written corrective action or a dismissal is in the best interest of the student and the program based on the specific infraction.

Clinical Failure Policy

A clinical failure is defined as failure of the WOC student to progress beyond an evaluation of needing help by the time she/he has accumulated 100 hours of clinical practice. The student will be advised verbally and in writing of any unsatisfactory performance. Opportunity for supplemental assistance will be available on an individual basis.

In the event a student fails to perform academically or clinically, alternatives for supplemental action are at the discretion of the Program Director, or designee.

A WOC student is subject to dismissal from the program for willful violation of the Cleveland Clinic's policies and procedures. Refer to Cleveland Clinic's policy and procedures manual for details.

Clinical Sites

Students may complete an onsite practicum at a Cleveland Clinic (Northeast OH) location or offsite in his/her own geographical area. For an offsite clinical rotation, it is the student's responsibility to locate and secure an approved offsite preceptor. A preceptor must be [WOCNCB](#) certified in the didactic course specialties which the student successfully completed while in enrolled in this program in order to precept the student. All preceptors must be approved by the school prior to the start of any precepted clinical experiences.

Once an individual has agreed to precept the student, then the student must forward (via email) to him/her: 1) Cleveland Clinic's online preceptor application packet as well as 2) Cleveland Clinic's clinical affiliation agreement template, and instruction sheet. These documents can be located on our program's website under the Registration Tab.

Security and Campus Safety

All students must wear a Cleveland Clinic ID badge in a visible manner while in a Cleveland Clinic building. The badge must be readily available while on the grounds and entering and leaving the building, as hospital security personnel may request to see it.

Police escort service, emergencies or security needs- 216-444-2222 or ext. 4-2222 at any house phone. If a student should see unfamiliar or suspicious looking persons in the hospital, the student should not confront them personally, but should contact security- Ext. 4-2222.

Security personnel routinely patrol the hospital, the parking lots and all grounds. Access via the various property and hospital entrances is controlled according to the day and time.

Students are encouraged to take steps to protect their personal property. Valuable items, i.e. purses, cell phones, book bags, etc. should never be left unattended or inside vehicles parked on hospital grounds.

It is the policy of the Cleveland Clinic to prohibit any person from carrying a concealed handgun or other deadly weapon onto the property of any Cleveland Clinic facility. Only law enforcement officers on official business are exempt from this policy.

Conduct (Code of Conduct)

The purposes of this policy is to provide a process for identifying and addressing behavior that creates an unhealthy environment in online study or clinical experiences.

Cleveland Clinic health system and this program are committed to providing a professional study and clinic environment which promotes teamwork, the free exchange of ideas, and a collaborative approach to problem-solving. It is the policy of Cleveland Clinic to address disruptive or intimidating behavior that creates an unhealthy study or clinical environment and that interferes with the orderly conduct of the classroom or hospitals' business through the provisions of its Non-Discrimination, Harassment, or Retaliation policy.

Definitions:

Disruptive behavior is behavior which interferes with the orderly conduct of classroom and hospital business, including behavior that interferes with the ability of others to effectively carry out their classroom activities or clinical duties, or that undermines a patient's confidence in the hospital clinical setting or another member of the healthcare team.

For purposes of this policy, disruptive behavior may encompass a range of subtle and not so subtle behaviors including, but not limited to: profane or disrespectful language, degrading or demeaning comments or behavior, such as name-calling; sexual comments or innuendo; inappropriate touching, sexual or otherwise; racial or ethnic jokes; outbursts of anger, including throwing instruments, charts or other objects; comments or criticisms that undermine a patient's trust in caregivers or the hospital; comments that undermine a caregiver's self-confidence in caring for patients; intimidating behavior that has the effect of suppressing input by other members of the healthcare team; reluctance or refusal to answer questions, return phone calls, emails, or pages, and inappropriate medical record entries concerning the quality of care being provided by the hospital or a clinical team member.

Reporting an Incident of Disruptive Behavior:

Students, who believe that they've been subjected to disruptive behavior are encourage to initiate a private, non-confrontational conversation regarding that behavior. Often this action alone will resolve the problem. Cleveland Clinic and this program, however, realize that a student may prefer to pursue the matter through formal complaint procedures.

Cleveland Clinic and this program supports the reporting of perceived incidents of disruptive behavior, regardless of the offender's identity or position. Students, who believe that they've been the victim of such conduct or who have witnessed such conduct, should report the matter to their online course instructor and/or the WOC Education Program Director (designee). While no reporting period has been established, early reporting and intervention will be the most effective method of resolving complaints of disruptive behavior.

Investigation of Complaints:

Any reported allegations of disruptive behavior will be investigated promptly this investigation may include individual interviews with the parties involved and, where necessary, with individuals who may have observed the alleged conduct or may have other relevant knowledge.

Confidentiality will be maintained throughout the investigatory process to the extent consistent with adequate investigation and appropriate corrective action.

Corrective Action:

Disruptive behavior is in direct conflict with the mission and values of Cleveland Clinic and this internal health program. IT will not be tolerated. Responsible action may include, for example, training, coaching or other remediation, referral for evaluation and/or counseling, re-assignment and/or corrective action (refer to the Corrective Action Policy in this handbook) up to and including discharge from this program or clinicals, as appropriate under the circumstances.

False and malicious allegations of disruptive behavior are taken seriously and also may be subject to appropriate corrective action.

Statement of Non-Retaliation:

Cleveland Clinic forbids retaliation against any student, who files a complaint regarding disruptive behavior or who assists in the investigation of such a complaint. Acts of retaliation should be reported to the Program Director (designee) for further action.

Universal Precautions

Students are provided educational courses designed to inform them that there is the potential for hospital acquired infections as a result of exposure in the department. Many patients are of an undiagnosed nature when diagnostic work-ups are performed. All patients should be considered potentially infectious and therefore require that Standard Precautions be followed. Hand washing between patient contacts is essential in preventing the transmission of infection. Personnel and students must have a basic knowledge of how diseases are spread and the precautions that must be taken in order to contain them. In this way, imaging services can be provided around the clock without compromise to the patient and with a minimum of risk for all. Students should observe all policies as outlined in the Infection Control Manual of each of the clinical sites as made available during orientation to each site. These policies demonstrate concern for patients and coworkers and affords the student prompt medical attention should the need arise.

Hand washing between patient contacts is essential. The hospital's hand washing policy must be followed. Students are to observe the prescribed dress code for the clinicals and the operating room. Eating and

drinking are prohibited in the Radiology Department except in the designated areas. When isolation procedures are necessary, portable equipment will be used in the patient's room when possible. Students are to be thoroughly familiar with the hospital's isolation policies. When certain procedures are essential to the patient's care, we have an obligation to perform those services. These patients are entitled to the same high quality care that we administer to other patients.

If a student is exposed to blood/body fluids or needle stick during their clinical rotation they are to follow the individual hospital guidelines for exposure. At the Main Campus the student or their clinical instructor/supervising technologist should contact the Exposure Hotline at 216-445-0742 and visit the Infection Control Website at <http://intranet.ccf.org/qpsi/infection/post.asp>. If the student is at a regional hospital, the student would report to the Center for Corporate Health during their hours of operation. If the incident occurs after hours and the patient is a high risk patient (i.e. infectious blood condition) the student should go to the emergency department. If the patient is **not** high risk, the student would report to the CFCH the next business day. In either case, all students must complete a SERS report at <http://intranet.ccf.org/sers/> to report all work related injuries/illnesses, exposures to blood/body fluids or needle sticks.

Confidential Information & HIPAA

During the course of your training, you may have access to confidential information concerning CCF budgets, strategic business plans, patients, or employees. This information may be in the form of verbal, written, and/or computerized data.

The protection of this confidential information is a critical. As such, the unauthorized acquisition, release, and/or discussion of any information related to CCF business, patient medical information, current and past employees, job applicants and computerized data is considered a major infraction, subject to disciplinary action up to and including being dismissed from the program.

As a reminder of your responsibility, the statement below is the one you electronically signed during your RedCarpet onboarding process.

It is understood that during the course of my participation in the Training Program at Clinical Site, I may obtain confidential information about or from Clinical Site ("Confidential Information"), as well as Protected Health Information ("PHI") as defined below. Confidential Information includes, but is not limited to, financial or proprietary data about Clinical Site, information about Clinical Sites' business and employees, patient information, methods of operating, development plans, programs, documentation, techniques, trade secrets, systems, know-how, policy statements, access to proprietary software applications and databases, and other confidential data. The information may be in the form of verbal, visual, written, or computerized data. I agree to maintain in strict confidence all Confidential Information and will not disclose Confidential Information (including, but not limited to, PHI) to anyone, including my family and friends, under any circumstances, unless I am required by law, or I have Clinical Site's prior written consent. I will not make copies of Confidential Information. Prior to discussion of or writing about any Clinical Site patient in an academic context relative to my program of study, all individually identifiable information will be removed or the PHI will be de-identified in compliance with the requirements of the Federal Health Insurance Portability and Accountability Act of 1996, as amended time to time, ("HIPAA").

I agree to maintain patient confidentiality in both written and verbal communication with other students, instructors, any other individuals, in clinical rounds or class discussion, as well as in any published materials. I understand that patient confidentiality is of such great importance that

PHI is NEVER to be shared with anyone even if it is years after I participate in the Training Program.

Under HIPAA, PHI is defined as individually identifiable health information, which is health information created, received or used by Clinical Site relating to (a) the past, present or future physical or mental health or condition of a patient, (b) the provision of health care to a patient; or (c) past, present or future payment for the provision of healthcare to a patient. PHI contains identifiers that identify a patient or for which there is a reasonable basis to believe the information can be used to identify a patient. Examples of individual identifiers include, but are not limited to, patient name, complete addresses, social security number, date of birth, medical record number and dates of treatment. PHI may include any or all of these individual identifiers coupled with a patient's health information, examples of which are a social security number and diagnosis, date of birth and past medical history, or dates of treatment and symptoms present at the time of treatment. PHI may be accessed only by those individuals who, within the scope of their employment or training responsibilities have a legitimate need for such information for purposes of patient care, research, education or administrative uses. I agree that any breach of the Agreement may cause Clinical Site substantial and irreparable damages and, therefore, in the event of any such breach, CCF shall have the right to seek specific performance and other injunctive and equitable relief without the need to post bond.

The acquisition, release, discussion or other use of Confidential Information for purposes other than to conduct normal authorized business activities during my training at Clinical Site is strictly prohibited. Violation of confidentiality is a very sensitive matter and will be considered grounds for removal from the Training Program, any related employment offer and/or consideration for future employment opportunities.

I understand and agree to my obligations as stated in this signed waiver and statement and that this document shall remain in effect for the duration of my student clinical rotations (or faculty duties) at the Clinical Sites, and that the waiver and obligations of confidentiality and non-disclosure shall remain in effect indefinitely.

Diversity Statement

The Center for Health Sciences Education and Cleveland Clinic are committed to valuing all people through our organization, regardless of background or culture. A diverse and inclusive environment for students and staff and culturally appropriate care for our patients, are essential to fulfilling our vision to be the best place for care anywhere and the best place to work in healthcare. We welcome students from diverse backgrounds and cultures.

Title IX

Purpose

This policy expresses the Cleveland Clinic's commitment to equal opportunity in educational programs and establishes a procedure for addressing complaints.

Policy Statement

In accordance with Title IX of the Education Amendments of 1972 (as amended by the 1988

Civil Rights Restoration Act), Cleveland Clinic prohibits discrimination on the basis of sex in educational programs and activities that receive federal financial assistance. Sexual harassment is a form of sex discrimination. Cleveland Clinic has a designated Title IX Coordinator. The Title IX Coordinator's office is located in the Education Building/Lerner Research Institute, NA-22. The Title IX Coordinator's telephone number is (216) 444-5678. Questions or concerns regarding Title IX, harassment, or discrimination must be directed to the Title IX Coordinator.

Cleveland Clinic is an institution and community committed to the principles of excellence, fairness and respect for all people. As part of this commitment, we actively value diversity and seek to take advantage of the rich backgrounds and abilities of everyone. Our equal opportunity policies (in employment and educational programs) affirmatively protect all employees, students, and applicants, ensuring that decisions are based on individual merit, rather than stereotypes and biases. Copies of our equal employment policies and procedures are available on the intranet, in the employee handbook, and are provided to employees upon request.

Cleveland Clinic also promotes an inclusive organizational culture through diversity education, consultation, and programs that leverage differences to enhance innovation, quality of care, teamwork, and economic impact. Further, it is our policy to encourage all vendors, contractors, and others doing business with the Cleveland Clinic to adhere to these same principles.

Definitions

Sex Discrimination: Behavior or action that denies or limits a person's ability to benefit from, or fully participate in, education programs or activities or employment opportunities because of a person's sex. Examples of the type of discrimination that are covered under Title IX include, but are not limited to, sexual harassment, sexual violence, failure to provide equal opportunity in educational and co-curricular programs, discrimination based on pregnancy, and employment discrimination based on sex in educational and co-curricular programs.

Sexual Harassment: A range of behaviors which includes unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature that (a) is sufficiently severe, persistent, or pervasive to limit a student's ability to participate in or benefit from an education program or to create a hostile or abusive educational environment, or (b) explicitly or implicitly affects an individual's employment or education, unreasonably interferes with an individual's work or educational performance, or creates an intimidating, hostile, or offensive work or educational environment.

Complaint: A description of facts that allege a violation of Cleveland Clinic's policies against discrimination on the basis of sex. All complaints must be made in writing within one year of the occurrence of the events giving rise to the complaint. Complaints may be made by individuals or groups of individuals who have been impacted by sex discrimination.

Respondent(s): Person or persons who are members of the Cleveland Clinic community who allegedly discriminated against, or harassed, another individual on the basis of their sex. Respondents may be individuals, groups, programs, or administrative units, or the institution.

Witnesses: Persons who have information about the alleged sexual misconduct that will tend to prove, disprove, or otherwise illuminate an investigation of a complaint.

Investigation: A fact finding inquiry by the Title IX Coordinator, the Human Resources Department, the Office of Professional Staff Affairs, or the Office of the General Counsel, as

appropriate, that attempts to determine whether behavior in violation of any policy prohibiting discrimination on the basis of sex occurred, and to make recommendations for resolution of the discriminatory or harassing conditions.

Cleveland Clinic United States locations: Includes the main campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, South Pointe, Children’s Hospital for Rehabilitation, Cleveland Clinic Florida, Cleveland Clinic Hospital (Weston), and all Family Health Centers, Physician practice sites, Nevada practice sites, Emergency Departments, Express Care Centers, Urgent Care Centers and Ambulatory Surgical Centers reporting to these facilities.

Policy Implementation

Grievance Procedure

Title IX of the Education Amendments of 1972 prohibits discrimination on the basis of sex in educational programs and activities that receive federal financial assistance. To ensure compliance with Title IX and other federal and state civil rights laws, Cleveland Clinic has developed internal policies that prohibit discrimination on the basis of sex and other protected classifications in employment (see [Equal Employment Opportunity/Workforce Diversity and Inclusion Policy](#) and [Non-Discrimination, Harassment or Retaliation Policy](#)) and in educational programs and activities.

The following procedures have been adopted by Cleveland Clinic to receive, investigate, and resolve complaints of discrimination on the basis of sex in educational programs and activities. These procedures are designed to provide a supportive process for individuals who report discrimination and to ensure a fair process for individuals who are accused of discriminatory conduct. Internal investigation of allegations of institutional discriminatory treatment or systemic discriminatory practices is intended to ensure that Cleveland Clinic meets its commitment to an open and inclusive educational and employment environment. These procedures also describe Cleveland Clinic’s efforts to conduct timely, thorough, and fair investigations as required by law. Similar procedures apply to complaints of discrimination on the basis of race, national origin, disability, age and other protected classifications in employment (see [Equal Employment Opportunity/Workforce Diversity and Inclusion Policy](#) and [Non-Discrimination, Harassment or Retaliation Policy](#)).

Making Reports of Title IX Sex Discrimination

The Title IX Coordinator has primary responsibility for coordinating efforts for investigation, resolution, implementation of corrective measures, and monitoring the educational environment to stop, remediate, and prevent discrimination on the basis of sex in educational programs. Students and applicants who believe that they have been subjected to discrimination, harassment, or retaliation must immediately report their concerns to the Title IX Coordinator. In such cases, the Title IX Coordinator will investigate allegations of discrimination in consultation with appropriate individuals from the educational program.

Employees who believe that they have been subjected to discrimination, harassment, or retaliation must immediately report their concerns to their supervisor, Human Resources, or the confidential Cleveland Clinic Compliance Reporting Line at 1-800-826-9294. In such cases, the Human Resources Department will investigate allegations of discrimination in consultation with the respondent’s immediate supervisor, provided the supervisor is not an alleged perpetrator.

All employees have a duty to identify and report discriminatory behaviors. Chairs, Supervisors, Program Directors, and Department Administrators must be directly involved in resolving allegations of discrimination, as required by the facts of each case.

Supervisors, Program Directors, and Department Administrators also have a duty to monitor the respondent's behavior and to take appropriate disciplinary action if he or she continues to violate CCF policy or procedure, including further acts of discrimination and/or acts of retaliation.

Investigation of Reports of Title IX Discrimination; Oversight by Title IX Coordinator
Cleveland Clinic's Title IX Coordinator has authority to:

- a. Accept all complaints and referrals of sex discrimination raised by applicants and students from all Cleveland Clinic educational programs and locations;
- b. Keep accurate, confidential records of all complaints and referrals for the required time period according to the Cleveland Clinic's retention policy or guidelines;
- c. Conduct investigations to the level required under Department of Education (DOE) regulations;
- d. Make findings of fact;
- e. Identify specific corrective measures to stop, remediate, and prevent sex discrimination including sexual harassment;
- f. Make recommendations for corrective measures including training, counseling and/or discipline where appropriate;
- g. Refer any recommendations for corrective measures to Human Resources and the Office of the General Counsel for implementation according to Cleveland Clinic policy;
- h. Oversee implementation of corrective measures, which may include follow-up to ensure that appropriate action was taken to complete the recommended actions;

Complaints raised by employees will be investigated and handled by other offices within the Cleveland Clinic, such as the Human Resources Department or the Office of Professional Staff Affairs. Employees must ensure that they follow policy [Equal Employment Opportunity/Workforce Diversity and Inclusion Policy](#) and [Non-Discrimination, Harassment or Retaliation Policy](#) to report all instances of discrimination based on sex and other protected classifications. In cases raised by employees where the allegations involve an educational program, however, ultimate oversight remains with the Title IX Coordinator to coordinate and ensure Cleveland Clinic's compliance with Title IX. To ensure enterprise-wide compliance with this policy, the Title IX Coordinator must be advised of all reported instances of sex discrimination arising in educational programs and their resolution, regardless of where the complaint is brought, investigated, or resolved. The Title IX Coordinator will monitor and coordinate the resolution of complaints by other officers with concurrent jurisdiction over Title IX discrimination.

The following procedures apply to complaints raised by students and applicants. The procedure for addressing complaints of sex discrimination by employees is governed by [Equal Employment Opportunity/Workforce Diversity and Inclusion Policy](#) and [Non-Discrimination, Harassment or Retaliation Policy](#).

1) Options for Resolution

Individuals making reports of discrimination shall be informed about options for resolving potential violations of the policies which prohibit discrimination. These options include informal dispute resolution, referral to other offices or programs, formal investigation by the Title IX Coordinator and/or the appropriate department, and the availability of resources outside the Cleveland Clinic process. Cleveland Clinic shall respond, to the greatest extent possible, to reports of discrimination brought anonymously or brought by third parties not directly impacted by the

discrimination. The response to such reports, however, may be limited if information contained in the report cannot be verified by independent facts.

Complainants and other individuals bringing reports of discrimination shall be informed about the range of possible outcomes, including interim protections, remedies for the individual harmed, and disciplinary actions that might be taken against the accused as a result of the report, including information about the procedures leading to such outcomes.

Retaliation: An individual who is subjected to retaliation (e.g., threats, intimidation, reprisals, or adverse employment or educational actions) because he or she (a) made a report of discrimination in good faith, (b) assisted someone with a report of discrimination, or (c) participated in any manner in an investigation or resolution of a report of discrimination, may make a report of retaliation under these procedures. The report of retaliation shall be referred to the appropriate department for investigation (such as the Human Resources Department or the Office of Professional Staff Affairs).

Temporary Measures: Cleveland Clinic may, at any point in the complaint process, elect to place the respondent on investigative leave, reassignment, or authorize other types of temporary measures while an investigation is pending.

Internal Procedures: Title IX compliance activities described as part of this policy are internal activities. Attorneys and other outside parties shall not participate.

a) Procedures for Informal Resolution

Cleveland Clinic encourages informal resolution options when the parties desire to resolve the situation cooperatively, or when inappropriate behavior does not rise to the level of a violation of policy, but nonetheless is adversely affecting the workplace or educational environment. Informal resolution may include an inquiry into the facts, but typically does not rise to the level of an investigation.

Informal resolution includes, but is not limited to options such as referral to another office or program, mediation, separation of the parties, referral to counseling programs, or conducted targeted education and training programs. Situations that are resolved through informal resolution are usually subject to follow-up after a period of time to ensure that resolution has been implemented effectively. Steps taken by the Title IX Coordinator to help the parties achieve informal resolution will be documented.

Some reports of discrimination may not be appropriate for informal resolution, but may require a formal investigation at the discretion of the Title IX Coordinator, the Director of Human Resources, and/or the Director of the Office of Professional Staff Affairs.

b) Procedures for Formal Investigation

In response to reports of discrimination in cases where the complainant does not wish to engage in informal resolution, where informal resolution is not appropriate, or in cases where attempts at informal resolution are unsuccessful, the Title IX Coordinator/Human Resources Department/Office of Professional Staff Affairs may conduct a formal investigation. To initiate a formal investigation, a complainant must file a written complaint within one year of the events giving rise to the complaint.

Investigations of reports of discrimination shall incorporate the following standards:

1. The Title IX Coordinator is the designated unit to conduct formal investigations of allegations of discrimination raised by students and/or applicants to educational programs, and to coordinate responses to complaints of the same. The Human Resources Department is the designated unit to conduct formal investigations of allegations of discrimination raised by employees, and to coordinate responses to complaints of the same. The Office of Professional Staff Affairs is the designated unit to conduct formal investigations of allegations of discrimination raised by or involving members of the professional staff, and to coordinate responses to complaints of the same.
2. The individuals accused of violating the policy prohibiting sex discrimination shall be informed of the substance of the allegations. If the individual accused cannot be located, attempts at notification shall be documented.
3. The individual(s) conducting the investigation shall be familiar with the applicable policies and shall have training and/or experience in conducting investigations. The investigation generally may include, as the facts of each case indicate necessary interviews with the parties, interviews with other witnesses, and a review of relevant documents. Disclosure of facts to witnesses shall be limited to what is reasonably necessary to conduct a fair and thorough investigation. Participants in an investigation shall be advised that maintaining confidentiality is typically essential to protect the integrity of the investigation and will be advised to refrain from discussing the pending investigation if the investigator determines that the situation requires such measures.
4. At any time during the investigation, the investigator may recommend that interim protections or remedies be put into place.
5. The investigation shall be completed as promptly as possible, ideally within 60 business days of the date that the written complaint was received. In the event that the investigation cannot be completed within this time frame, the complainant shall be notified in writing.
6. Generally, an investigation will result in determination of whether the allegations of discrimination were substantiated (more likely than not that the allegation is true), unsubstantiated (not possible to determine whether the allegation is true or untrue/insufficient evidence), or unfounded (more likely than not that the allegation is untrue). A finding that the allegations were unfounded does not indicate that the complaint was improper or knowingly false.
7. No person shall make an allegation that he or she knows to be untrue or provide false information during the course of an investigation. Making a false complaint or giving false information is a violation of the Code of Conduct and Cleveland Clinic Policies, and may be a basis for discipline, including termination or expulsion.
8. The complainant and the respondent shall be informed in writing of the completion of the investigation and the outcome of the investigation.
9. Regardless of the method of resolution and the outcome, complainant is at all times free to pursue a complaint with the Equal Employment Opportunity Commission, the United States Department of Education (Office of Civil Rights), the United States Department of Labor, or by consulting an attorney at his/her own expense.

Confidentiality of Reports of Discrimination

Cleveland Clinic attempts to balance the needs of the parties for privacy with its responsibility to provide a safe educational and work environment. Confidentiality is an aspiration, but is not always possible or appropriate. An individual's requests for confidentiality will be considered in determining an appropriate response; however, such requests will be considered in the dual context of the Cleveland Clinic's obligation to provide a working and learning environment that is free

from discrimination and the rights of the accused to be informed of the allegations and their source. Some level of disclosure may be necessary to ensure a full, fair, and complete investigation.

Regulatory Requirement/References The Title IX Compliance Policy is under PPM Review as of September 2019. A section 504 Compliance policy is under development at of September 2019. Please reach out to the Title IX Compliance Officer, Rachel King at kingr3@ccf.org for guidance.

Title IX of the Education Amendments of 1972 (as amended by the 1988 Civil Rights Restoration Act)

34 CFR, Part 106

Oversight and Responsibility

The Center for Health Sciences and Education is responsible for the oversight of this policy as well as disseminating the policy to interested parties. The Title IX Coordinator is responsible for implementing the policy, with assistance from the Human Resources Department.

It is the responsibility of each hospital, institute, department and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable.

Other Background Information

Issuing Office

Center for Health Sciences and Education

Reviewed by Human Resources

Student Flu Policy

Purpose

This document outlines the process for annual immunizations of all students.

Policy Statement

The Cleveland Clinic strives to protect patients, employees, employees' family members, students and the community from influenza infection through annual immunizations of all students.

Definitions

Cleveland Clinic health system: Includes the main campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, South Pointe, Children's Hospital for Rehabilitation, and all Family Health Centers, Physician practice sites, Nevada practice sites, Emergency Departments, Express Care Centers, Urgent Care Centers and Ambulatory Surgical Centers reporting to these facilities.

Student: A person enrolled in Cleveland Clinic's WOC Nursing Education internal health science program; someone who is studying in order to enter a particular profession; a person who is

enrolled in coursework and/or seeking practical experience leading to a career in health care; someone who is at Cleveland Clinic for their own learning and is not benefiting the Cleveland Clinic enterprise as a volunteer; a learning experience greater than 5 days.

Policy Implementation

A. Annual Influenza Immunization

1. All students, regardless of age, including academic (School) clinical instructors or preceptors, who are placed in the Cleveland Clinic health system (CChs) for more than 5 days and receive a Cleveland Clinic (CCF) identification (ID) Badge for a planned clinical or educational experience during the flu season (typically occurs sometime between November through March) are required to comply with this policy.
2. Any student or academic clinical instructor or preceptor who does not comply with the Student Flu Immunization Policy will not be allowed to participate in a clinical or educational experience within the CChs.
3. Students, academic clinical instructors and preceptors who do not receive the seasonal flu vaccine, but meet all other health and background check requirements will be provided a clinical placement if available outside of the influenza season (generally, April 1st through October 31st). This policy is to protect vulnerable patient populations.

B. Exemptions

- Cleveland Clinic will consider, as part of its Student Influenza Immunization Policy, bona fide religious and/or medical conflicts with the vaccine. Exemption requests should be managed through the academic (School) institution and Cleveland Clinic's education representative of the specific education program, who will work together to address the request in light of applicable patient safety concerns.

C. Infection Control Procedures

- Influenza season typically occurs sometime between November through March. The exact dates will be determined annually when influenza is identified in the community.
- Occupational Health is responsible for reporting CChs hospital student and academic instructor or preceptor data to Centers for Medicare & Medicaid Services (CMS).

D. Flu Vaccine Requirements

- Students, academic clinical instructors and preceptors (non-CCF employees) are not eligible to participate in the Employee Cleveland Clinic Influenza Immunization Program and must obtain a vaccination at their own (or their institution's) cost.
- Students or academic clinical instructors or preceptors (non-CCF employee) placed in the health system before or after the flu season begins (typically November) must obtain the annual flu vaccine when it becomes available from their primary care provider (PCP), public clinics, pharmacies, etc. and provide evidence of receiving the flu vaccine to their appropriate academic (School) program.

- Students or academic (School) clinical instructors or preceptors placed in the health system during the flu season (typically occurs in November through March) must show evidence of receiving the flu vaccine to their appropriate academic program before they are on-boarded into the Cleveland Clinic Health System (CCHS).

E. Flu Vaccine Documentation

- Academic (Schools) institutions will attest to student and academic instructor or preceptor compliance with the Student Flu Immunization Policy. Students not affiliated with an academic institution must show evidence that they received the flu vaccine to the CCF employee responsible for student placement.

F. Internal Centers for Medicare & Medicaid Service (CMS) Reporting

- Student Flu Vaccine compliance (CMS data) will be communicated to the Occupational Health Department by Protective Services.

Oversight and Responsibility

The Education Institute is responsible for establishing and maintaining the Student Flu Immunization Policy.

All Institutes and services are responsible for adhering to the Student Flu Immunization Policy.

Compliance with Student Flu Immunization Policy will be monitored by the students' academic institution or those responsible for student placement and onboarding within the CChs.

Other Background Information

Issuing Office: Education Institute

[Non-Smoking Policy \(Smoke-Free Campus\)](#)

Purpose

To promote the safety, health, and wellness of our organization, enhance the quality of life for each other and those we serve, support state and local ordinances, and meet The Joint Commission standards.

Policy

Cleveland Clinic is committed to providing a safe and healthful environment for all employees, visitors and patients. Therefore, smoking or the usage of any tobacco products is prohibited on all Cleveland Clinic owned and leased properties and private property adjacent to the facilities.

No tobacco products will be sold on Cleveland Clinic properties.

Definitions

Cleveland Clinic United States locations - Includes the main campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, South Pointe, Children's Hospital for Rehabilitation, Cleveland Clinic Florida, Cleveland Clinic Hospital (Weston), and all Family Health Centers, Physician practice sites, Nevada practice sites, Emergency Departments, Express Care Centers, Urgent Care Centers, and Ambulatory Surgical Centers reporting to these facilities.

Licensed Independent Practitioner (LIP): A licensed provider acting within their scope.

Policy Implementation

Employees

Employees who violate this policy will be subject to corrective action in accordance with the Corrective Action policy.

To assist employees, Cleveland Clinic offers smoking cessation resources.

Patients

Patients found in violation of this policy, will be kindly informed about our Non-Smoking policy. Repeated violations may result in confiscation of tobacco products in order to protect the safety of others from fire risk.

Nicotine replacement options may be available, as determined by a physician/LIP. In addition, smoking cessation information is made available.

Contractors

This Non-Smoking policy applies to all construction areas and contracted work activities. Nonemployees performing work on Cleveland Clinic properties are expected to follow this policy. Instances of non-compliance should be reported to the contract manager or designated employee representative.

Repeated non-compliance is grounds for removal from the property.

Visitors

Visitors will be discouraged from using tobacco products on Cleveland Clinic properties.

Visitors who are in violation of our Non-Smoking policy will be kindly informed about our policy.

Repeated violations may result in confiscation of tobacco products in order to protect the safety of others from the fire risk or removal from the property.

Regulatory Requirement/References

Corrective Action Policy
Joint Commission Standard EC.02.01.03
State Laws and Local Ordinances

Oversight and Responsibility

Human Resource Management is responsible to review, revise, update and operationalize this policy to maintain compliance with regulatory or other requirements. It is the responsibility of each hospital, institute, department and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable.

A focused enforcement may be delegated to specific departments or individuals on a facility-by-facility basis.

Other Background Information

ISSUING OFFICE: Employee Relations, Human Resources

Substance Abuse Policy

Purpose

This policy is to define prohibited behavior with regard to the possession and/or use of alcohol and/or drugs in the workplace and to provide information on how to manage substance abuse issues in the workplace.

Policy Statement

Cleveland Clinic is committed to maintaining a safe, healthful and efficient working environment for its employees, patients and visitors. Consistent with the spirit and intent of this commitment, Cleveland Clinic prohibits:

- A. The unlawful or unauthorized use, manufacture, possession, sale, or transfer of illegal drugs and/or controlled substances on Cleveland Clinic premises.
- B. Reporting to work or working impaired or under the influence of any illegal drug, controlled substance, and/or alcohol.
- C. Consumption of alcohol (except at approved or sponsored Cleveland Clinic functions) on Cleveland Clinic premises.
- D. Improper self-medication of over-the-counter or prescribed drugs on Cleveland Clinic premises.

Definitions

Cleveland Clinic United States locations

Includes the main campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, South Pointe, Children's Hospital for Rehabilitation, Cleveland Clinic Florida, Cleveland Clinic Hospital (Weston), and all Family Health Centers, Physician practice sites, Nevada practice sites, Emergency Departments, Urgent Care Centers and Ambulatory Surgical Centers reporting to these facilities.

Cleveland Clinic Premises: all Cleveland Clinic buildings, other buildings where Cleveland Clinic employees work, parking garages, parking lots or other open areas owned or under control of Cleveland Clinic, in any Cleveland Clinic vehicle, or at any other location while on Cleveland Clinic business.

Diversion: the unauthorized removal of a controlled substance from a patient and/or patient care setting.

Illegal Drugs and Controlled Substance: any substance which in any manner alters normal perception, thought functions, behavior or mood, including, but not limited to marijuana, cocaine, narcotics, tranquilizers, amphetamines and barbiturates.

Impairment: The effect of the use of alcohol or any psychoactive or mood-altering substance on mental, emotional and/or physical functioning Symptoms may include, but are not limited to, drowsiness and/or sleepiness, odor of alcohol on breath, slurred/incoherent speech, unusually

aggressive or bizarre behavior, unexplained change in mood, lack of manual dexterity, lack of coordination in walking, unexplained work related accident or injury.

Improper Self Medication: includes, but not limited to, using drugs prescribed to someone else, using drugs at other than the prescribed dose, or using over-the-counter medication in a manner not in accord with the manufacturer's instructions.

Policy Implementation

Voluntarily Seeking Assistance

Cleveland Clinic recognizes that substance abuse/dependency is a progressive, chronic, disease that has adverse effects on both the employee's quality of life and job performance. However, substance abuse/dependency is treatable and early recognition and treatment is advisable. Employees who suspect they may have a problem with substances are encouraged to voluntarily seek assistance.

It is the employee's responsibility to seek assistance before job performance is adversely affected. Cleveland Clinic maintains Caring for Caregivers Staff and Employee Assistance Program (Employee Assistance Program (EAP), the Licensed Professionals Health Program, (LPHP), and a Physician's Health Committee (PHC) in order to provide confidential assistance in receiving appropriate treatment. An employee's decision to seek/receive treatment through any Cleveland Clinic service or other service will not be used as a basis for corrective action. On the other hand, such treatment will not be viewed as a substitute or a defense for appropriate corrective action, if corrective action is otherwise applicable.

Programs of Education, Prevention, Treatment and Support

Cleveland Clinic provides programs of education, prevention, treatment and support to encourage a drug-free workplace/lifestyle.

Post-Offer Pre-Placement Substance Testing

Post-offer pre-placement testing is required of all prospective new hire, rehired or reinstated individuals as part of a routine post-offer pre-placement protocol. Positive results may preclude an applicant from being hired.

Random Testing

Where permitted by law, employees may be subject to random, unannounced drug testing throughout the year. Additionally, random alcohol testing will be conducted where required by Department of Transportation regulations.

Reasonable Suspicion of Impairment/For-Cause Referral

Reasonable Suspicion Testing

All employees may be subject to "for Cause" urine and/or breath testing when reasonable suspicion exists that the employee appears to be working in an impaired condition and/or under the influence of drugs and/or alcohol. A reasonable suspicion referral for testing will be made on the basis of documented objective facts and circumstances that are consistent with the effects of substance abuse or alcohol misuse.

For the purpose of this policy, the term "reasonable suspicion" shall be defined as "aberrant" behavior or unusual on-duty behavior of an individual employee who:

- (a) is observed on duty by either the employee's immediate supervisor, higher ranking employee, or other managerial personnel. (Observations shall be documented by the observers).and
- (b) exhibits the type of behavior that shows symptoms of intoxication or impairment caused by drugs and/or alcohol; and
- (c) such conduct cannot reasonably be explained by other causes.

If, after observing the employee the manager continues to have reasonable suspicion that the employee is using, consuming and/or under the influence of alcohol and/or drugs while on duty, the employee will be notified of the need for immediate testing and evaluation.

Link to [Substance Abuse - Reasonable Suspicion or For Cause Testing Procedure](#)

Reasonable Suspicion of Diversion/Possession

If a supervisor suspects diversion of a controlled substance, the supervisor shall:

- A. Contact Human Resources/Professional Staff Affairs/Graduate Medical Education, Caring for Caregivers (Employee Assistance Program, Licensed Professional Health Committee, Physician Health Committee) and/or the Nursing Institute for guidance.
- B. Contact the Pharmacy Department for assistance in compiling investigatory reports.
- C. Conduct a thorough investigation checking doctor's orders, documentation of medications dispensed, and other appropriate records/resources.
- D. If evidence supports intervening with the employee, contact Caring for Caregivers Employee Assistance Program, the Licensed Professionals Health Program or Physician Health Committee, as applicable.

If a supervisor has reasonable suspicion that an employee is in improper possession of alcohol, illegal drugs and/or a controlled substance, the supervisor may request Cleveland Clinic Police/Hospital Security to perform appropriate searches of the employee and Cleveland Clinic premises.

Link to [Substance Abuse - Reasonable Suspicion or For Cause Testing Procedure](#)

Reporting Drug-Related Convictions

Employees are required to report to their supervisor any criminal convictions of drug-related violations on Cleveland Clinic premises and/or while conducting Cleveland Clinic business. Employees convicted of a felony offense or offenses while employed by Cleveland Clinic must notify Human Resources of the conviction within three (3) days of the court entering its Judgment.

Refusal to Comply

Any employee refusing to comply with a lawful search, alcohol or drug test, or otherwise failing to cooperate with an investigation conducted in accordance with this policy will be subject to removal from Cleveland Clinic premises and subject to corrective action up to and including termination (see Corrective Action Policy).

Safe Transportation

Supervisors will arrange for transportation for the employee to his/her home when the supervisor has reasonable suspicion the employee is impaired. The Cleveland Clinic Police Department/Hospital Security can be contacted to obtain cab vouchers and also for consultation. If the employee refuses transportation assistance, the supervisor should document the fact and notify the Cleveland Clinic Police Department.

Violation of Policy

Any employee who is found to be in violation of this policy:

- A. Is subject to corrective action up to and including termination (see Corrective Action policy).

- B. Will be afforded the opportunity to participate in the Caring for Caregivers Programs (Employee Assistance Program, the Licensed Professionals Health Program (licensed professionals only), and/or the Physician Health Committee), as applicable. These programs and services provide assessment; treatment planning, referral and follow-up services (see Employee Assistance Program policy). Licensed health professionals will be referred to the Licensed Health Professionals Program or the Physician Health Committee for on-going monitoring of the licensed health professionals re-entry to work and review, recommendation and oversight of any restrictions on their license (see Licensed Health Professionals Impairment policy).

Treatment expenses not covered by the employee's health plan, including substance screens, are the responsibility of the employee. Non-compliance with treatment requirements may result in corrective action up to and including termination.

Confidentiality

Employee information related to this policy (e.g., reasonable suspicion of impairment, medical evaluation results, etc.) shall be held in strict confidence as outlined in the Employee Assistance policy and the Licensed Health Professionals Impairment policy. The Staff and Employee Assistance Program operates under Federal Confidentiality Rules and releases only limited information to supervisors.

Licensing Boards

Cleveland Clinic maintains a cooperative, working relationship with all appropriate licensing/certification boards. Appropriate boards/peer assistance programs will be notified when patient safety and/or minimum professional standards are not met or as otherwise mandated by law.

Regulatory Requirement/References

Corrective Action

Employee Assistance Program

Licensed Health Professionals Impairment

Reasonable Suspicion or For Cause Testing Procedure

Oversight and Responsibility

Human Resources Management is responsible to review, revise, update, and operationalize this policy to maintain compliance with regulatory or other requirements.

It is the responsibility of each hospital, institute, department and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable.

Other Background Information

ISSUING OFFICE: Occupational Health, Human Resources

Dress Policy for Onsite Clinicals at Cleveland Clinic

For WOC Nursing students' Cleveland Clinic clinical assignments, students are required to wear white nurses uniform and shoes or if working in homecare, then the uniform of their Visiting Nurse Agency. **All students are required to wear a white lab coat or jacket (i.e. long or short).** Artificial fingernails, tattoos and body piercing are **NOT** permitted. For more information, refer to the Cleveland Clinic's Personal Appearance Policy in this handbook below.

Personal Appearance Policy

Purpose

The purpose of this policy is to provide standards for dress and grooming to ensure the professional appearance of its employees on a consistent basis.

Policy Statement

Cleveland Clinic recognizes the importance of the professional appearance of its employees in maintaining an atmosphere conducive to the delivery of quality health care services. To promote such an atmosphere, employees are expected to dress in a manner appropriate to the jobs they perform. Management is responsible for enforcement and also reserves the right to determine what constitutes appropriate attire.

Definitions

Cleveland Clinic United States locations: Includes the main campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, South Pointe, Children's Hospital for Rehabilitation, Cleveland Clinic Florida, Cleveland Clinic Hospital (Weston), and all Family Health Centers, Physician practice sites, Nevada practice sites, Emergency Departments, Express Care Centers, Urgent Care Centers and Ambulatory Surgical Centers reporting to these facilities.

- A. Hair style, jewelry, makeup and fingernail lengths should be appropriately chosen to achieve a look of professional credibility. Additionally, hair, if colored, should be maintained in a natural tone. Facial hair must be well groomed.
- B. Hosiery should be neutral in tones such as flesh tone, taupe, black, grey, or solid color opaque or sheer. Socks may be worn only if they are covered by pants or slacks.
- C. Shoes should be appropriate for the work being performed. Acceptable styles include oxfords, dress flats, loafers, or moderately heeled dress shoes. Some departments may permit athletic shoes with uniforms.
- D. In those areas where employees are providing movement or exercise therapy, athletic shoes and sport shirts may be worn. In situations where employees are participating in recreation or athletic activities with patients, departments may permit sweat suits, jogging attire, or walking length shorts.
- E. Natural and artificial nails should be kept short and polish, if worn, may not be chipped and should be kept to a basic color to convey a professional image. Employees with

- direct patient care or food handling responsibilities may not wear artificial nails (e.g. acrylic nails, wraps, gels).
- F. F. Business Casual attire may include khakis with a polo shirt (no vendor logo other than Cleveland Clinic), blazers, full length pants or slacks, skirts with sweater, etc. Jeans and denim material are not acceptable. Department managers will determine if and when business casual attire is appropriate.
 - G. Tattoos must be covered during working hours. Body piercing jewelry may not be visible except in the ear lobes. No more than two pair of simple earrings may be worn per ear.
 - H. Departments may implement policies, further define standards of dress and grooming relative to jobs within their area and will be responsible for determining if employees are adhering to standards of dress and grooming.
 - I. Contractors and vendors who are routinely on Cleveland Clinic premises should be advised of the expectation to comply with Cleveland Clinic standards of dress and grooming.
 - J. Cleveland Clinic will make reasonable accommodations for dress or grooming directly related to an employee's religion, ethnicity, or disability unless such accommodation poses a risk to the safety or health of the individual or others.

Uniformed Employees

Employees working in an area, department or function with a specific uniform requirement are expected to wear the uniform, while on duty, in accordance with the uniform policy of that particular department or area. Decisions regarding the provision and replacement of uniforms and the associated cost to the employee will be the determination of the department.

- A. Employees who are furnished uniforms or other garments by Cleveland Clinic are held responsible for all garments supplied to them and will be charged accordingly for any such garment that is carelessly destroyed, rendered unwearable, lost, stolen or not returned upon departmental transfer or termination.
 - 1. Uniforms which are provided by Cleveland Clinic should be worn by employees only during working hours for the specific purpose intended, except in those departments where it is permitted to wear Cleveland Clinic issued uniforms while traveling to and from work.
 - 2. Employees who are furnished uniforms or other garments by Cleveland Clinic are expected to keep them clean, pressed, and in good repair.
 - 3. The Textile Care Services Department will maintain the uniforms for those areas, as identified by the Infection Control Committee, with a high degree of exposure to bodily fluids.
- B. Employees who furnish their own uniforms are expected to report to work in a uniform which is clean, pressed and in good repair in accordance with the uniform policy of the department.
- C. Hats or other headwear should be worn only if they are part of the approved uniform.

Non-Uniformed Employees

Employees working in areas or departments that do not have a specific uniform requirement should dress in a professional manner which is appropriate to the job being performed and consistent with the business needs of the area.

- A. Examples of appropriate attire are clean, neat, non-wrinkled skirts, suits, dresses, tailored pants, slacks (ankle-length), blouses, shirts, sweaters, blazers, sports coats and turtlenecks. Dresses or skirts must be of sufficient length. Ties are encouraged to be worn unless they pose a safety hazard.
- B. Examples of inappropriate attire are revealing, low-cut, form fitting, stained, or see through clothing, T-shirts, (except as part of an approved uniform top), sweat suits, jogging suits, tank tops, shorts, jeans, denim of any color, leggings, Capri style pants, overalls, sandals, flip flops, fishnet or patterned hosiery, and midriff shirts.

Miscellaneous

- A. The employee ID Badge should be worn above the waist and with the photo ID facing outward.
- B. Good personal hygiene is expected of all employees.
- C. The hospital recognizes that exposure to strong scents and fragrances in the environment can be offensive to others. Therefore, the use of only minimally scented perfumes, colognes, and other fragrance products is encouraged.
- D. D. Failure to adhere to standards of dress and grooming may result in corrective action.

Regulatory Requirement/References

Corrective Action Policy
Identification Badges Policy

Oversight and Responsibility

Human Resources Management is responsible to review, revise, update, and operationalize this policy to maintain compliance with regulatory or other requirements.

It is the responsibility of each hospital, institute, department and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable.

Other Background Information

ISSUING OFFICE: HR Services, Human Resources

Identification Badges Policy

Purpose

Identification badges are issued to provide employees and non-employees with a means of identification, to promote safety and security on Cleveland Clinic property, to be used for access controls, parking, timekeeping, payroll deductions, and to assist in emergency identification as necessary. The identification badges assure Cleveland Clinic patients, visitors, and coworkers have the ability to identify non-employees and employees and the discipline in which they are employed.

Policy Statement

It is the policy of Cleveland Clinic to provide every employee and every individual who requires regular, unescorted, access to the interior of Cleveland Clinic facilities with an identification badge to be worn. Such badges must be worn above the waist at all times while on property owned or leased by Cleveland Clinic. In addition, all volunteers, privileged positions, contractors, consultants and vendors must wear identification badges. All badge holders are required to provide their identification badge to management and/or Protective Services, including the Cleveland Clinic Police Department, hospital and hotel security officer, upon request. Failure to properly display, or present, a valid Cleveland Clinic identification badge can result in the revocation of the badge and/or other appropriate corrective action.

Background checks are completed on everyone who works directly or indirectly for Cleveland Clinic. Please see the [Criminal Records Background Check Policy](#) to review the complete criminal record check procedure.

The standard identification information to be included on the badge is:

- **I.D. Holder's Photograph**
- **Name** (Legal first and last; no nicknames)
- **Licensure/Education status as relevant** (Only highest education/licensure due to space constraints)
- **Title**
- **Department**

Any variation from the standard format must be reviewed and approved by Human Resources. Requests to delete last names for security reasons must be reviewed and approved by Human Resources in collaboration with Protective Services Administration.

Temporary employees, medical students, healthcare students, and visiting physicians as well as consultants and contractors must obtain a temporary identification badge during their Cleveland Clinic assignment. The temporary identification badge is valid for the period of each student's assigned clinical rotation.

Cleveland Clinic uses colors to distinguish between the employee and non – employee populations:

- **White badges** - all Cleveland Clinic employees and privileged positions
- **Blue badges** - non-employees
- **Green badges** – volunteers
- **Pink badges** – only authorized **nursing staff clinically trained** to provide care to babies

Access control is requested through the accesscontrol@ccf.org email address. The authorized approver for the area must submit the access request. The requests are typically reviewed within 24 hours of receipt. The decision to grant access is communicated through email or phone. Protective Services also approves and issues access codes where applicable. Each badge will automatically de-activate if the badge is not used for ninety (90) days. The badge can be reactivated with supervisor approval.

An identification badge shall not be used by anyone other than the individual to whom it was issued. Furthermore, an identification badge will not be issued until an appropriate background check, including debarment checks and criminal record checks, have been initiated and/or completed on the individual. Such background checks shall be completed by Protective Services

consistent with applicable policies and procedures. Other onboarding requirements may also have to be completed prior to the issuance of an identification badge. Protective Services shall authorize the issuance of all identification badges.

In addition to regular, Cleveland Clinic identification badges, a separate process applies to sales representatives who will be within a Cleveland Clinic facility for one day or less, and who have a previously scheduled appointment. That process, called Vendormate, is an online system that is sponsored by Supply Chain Management and is further described within this policy.

Definitions

Cleveland Clinic United States locations: Includes the main campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, South Pointe, Children’s Hospital for Rehabilitation, Cleveland Clinic Florida, Cleveland Clinic Hospital (Weston), and all Family Health Centers, Physician practice sites, Nevada practice sites, Emergency Departments, Urgent Care Centers and Ambulatory Surgical Centers reporting to these facilities.

Policy Implementation

Identification Badge Procedure

On-Boarding Requirements

On-boarding requirements are decided by how much patient interaction will take place upon hire.

- Cleveland Clinic Employees (white badges, pink badges) - must have a background check, TB test and complete MyLearning training prior to their start date. TB testing and MyLearning training will be completed on an annual basis thereafter.
- Contractors (blue badges; contracted workers, agency nurses, students) - must have a background check, TB test prior to their start date and must also complete a series of MyLearning training modules before a badge will be issued. These requirements must also be met in order to renew an expiring badge.
- Construction workers (also blue badges) - all construction workers must have a background check and complete a life safety class prior to working on a job site. No TB tests are required for construction workers. These requirements must also be met in order to renew an expiring badge.
- Volunteers (green badges) - Must have background check, TB test, and complete MyLearning training. These requirements must also be met in order to renew an expiring badge.

A Cleveland Clinic identification badge will not be displayed or worn in any forum that would lead a reasonable observer to believe the activity is Cleveland Clinic sponsored and/or approved and that the individual is representing the organization in an official capacity. The badge may be only worn for its issued, specific purpose within the individual’s scope of work performed at Cleveland Clinic.

Regulatory Requirement/References

Corrective Action

Oversight and Responsibility

Human Resources Management in conjunction with the Cleveland Clinic Department of Protective Services, is responsible to review, revise, update and operationalize this policy to maintain compliance with regulatory or other requirements.

It is the responsibility of each hospital, institute, department and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable.

Other Background Information

ISSUING OFFICE

Employee Relations, Human Resources
Protective Services

Social Media Use Policy

Purpose

To provide all Cleveland Clinic employees with rules and standards for participation in social media (also known as social networking).

Policy Statement

This policy will also apply to any students, volunteers, contractors, or vendors who are obligated to comply with Cleveland Clinic policies and procedures. The intent of this policy is not to restrict the flow of useful and appropriate information, but to safeguard the interests of Cleveland Clinic, its employees, and its patients. This policy is not intended to limit any employee's rights under the National Labor Relations Act (NLRA) and does not apply to communications protected by the NLRA.

Although Cleveland Clinic recognizes the value of social media as a tool for communicating and gathering information, time spent posting on, or viewing social media sites must not interfere with job responsibilities.

Definitions

Cleveland Clinic United States locations- Includes the main campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, South Pointe, Children's Hospital for Rehabilitation, Cleveland Clinic Florida, Cleveland Clinic Hospital (Weston), and all Family Health Centers, Physician practice sites, Nevada practice sites, Emergency Departments, Express Care Centers, Urgent Care Centers and Ambulatory Surgical Centers reporting to these facilities.

Content- Employee, business, patient, or financial information, healthcare practices or protocols, or any other information that is transmitted or maintained in any form medium including text, images, video, and audio formats .

Social Media (Social Networking) - Social media and social networking include, but are not limited to the following:

- Cleveland Clinic internal intranet sites and blogs;
- Cleveland Clinic publicly facing internet web sites;
- Social networking sites, such as Facebook®, MySpace® or LinkedIn®;
- Blogs (including corporate or personal blogs and comments to blogs) and other on-line journals and diaries;
- Forums and chat rooms, such as discussion boards, Yahoo! Groups®, or Google® Groups;
- Microblogging, such as Twitter®;
- Online encyclopedias, such as Wikipedia®; and
- Video or image based sites such as Flickr®, YouTube® and similar media.

In addition to posting on websites like those mentioned above, social media and social networking also include permitting or not removing postings by others where an employee can control the content of postings, such as on a personal profile or blog.

Policy Implementation

When communicating on Cleveland Clinic social media sites, communicating about Cleveland Clinic, or as a representative of Cleveland Clinic on any social media site unaffiliated with Cleveland Clinic, Cleveland Clinic employees are expected to follow the same standards and policies that otherwise apply to them in the workplace as a Cleveland Clinic employee. For example, social media activity is subject to Cleveland Clinic policies that strictly prohibit discrimination, harassment, threats, and intimidation. The standards set forth in Cleveland Clinic's Health Insurance Portability and Accountability Act of (HIPAA) and Confidential Information policies also apply to social media activity, such as comments posted to Facebook, blogs, or discussion forums, as do the standards set forth in Cleveland Clinic's Telephone and Cellular Phone Use policy. Likewise, Cleveland Clinic does not intend to limit any employee's rights under the NLRA as such policies do not apply to communications protected by the NLRA.

Employees must not post content about coworkers, supervisors, or the Cleveland Clinic that is knowingly false, vulgar, obscene, threatening, intimidating, harassing, defamatory, or maliciously detrimental to Cleveland Clinic's legitimate business interests. Relatedly, employees must not post content that violates Cleveland Clinic's workplace policies against discrimination, harassment, or hostility based on race, color, religion, gender, sexual orientation, gender identity, pregnancy, marital status, age, national origin, disability, military status, citizenship, genetic information or any other protected class, status, or characteristic protected by state and federal law. Inappropriate postings may include, for example, discriminatory remarks; harassment on the basis of race, sex, disability, religion and other protected characteristics; malicious posts meant to intentionally harm someone's reputation; posts that could contribute to a hostile work environment; and threats of violence or other similar inappropriate and unlawful conduct. Employees should use good judgment and discretion in developing postings.

In the interest of guarding the privacy of our patients, employees must not publish any content including photos, names, likenesses, descriptions or any identifiable attributes or information – related to any Cleveland Clinic patient. Postings that attempt to describe any specific patient and/or patient care situation, or that contains any patient identifier, or in combination may result in identification of a particular patient directly or indirectly, are inappropriate and strictly prohibited. Violations of Cleveland Clinic policies that occur online or in social media may subject the violator to disciplinary action, up to and including termination.

STANDARDS

A. Authorized Social Networking

1. Employees who, within the scope of their job responsibilities are permitted to and wish to post content to a Cleveland Clinic social media site, must first get approval from their supervisor and Corporate Communications (by emailing Corporate Communications' Public and Media Relations team at pubmedrel@ccf.org).
2. Cleveland Clinic provides its electronic property, including laptops, PCs, phones and other devices to employees solely for the purpose of achieving enterprise objectives. Please refer to Cleveland Clinic's Acceptable Use of Information Assets Policy before using such devices to engage in social media activity.

B. Employer Monitoring

1. Employees should have no expectation of privacy with respect to any communication sent or received through Cleveland Clinic's computer system or networks, including Cleveland Clinic public or private Wifi. Also, employees should have no expectation of privacy when using social media during work time, or in regard to anything posted that is accessible by the general public.
2. Social media activity using the Cleveland Clinic's electronic resources is subject to all Cleveland Clinic policies, including the Acceptable Use of Information Assets Policy. Cleveland Clinic will, in its discretion, review and restrict social media activity to the fullest extent permitted by applicable law.

C. Rules for Social Media and Social Networking

1. In the interest of guarding the privacy of our patients, employees must not publish any content – including photos, names, likenesses, descriptions or any identifiable attributes or information – related to any Cleveland Clinic patient on any form of social media or to any third party. Postings that attempt to describe any specific patient and/or patient care situation, or that contain any patient identifier, or in combination with other information may result in identification of a particular patient directly or indirectly, are inappropriate and strictly prohibited.
2. Time spent posting or viewing any social media sites, including Cleveland Clinic social media sites, must not interfere with or affect work responsibilities.
3. For the purpose of respecting all copyright and intellectual property laws, and Cleveland Clinic's interest in the use of its brand, employees must not use Cleveland Clinic's name, logo, trademark, or proprietary graphics in a way that suggests that the employee is representing Cleveland Clinic without receiving permission from the Chief Marketing Officer and the Tax Department. If permission is granted, an employee still must not create a social media page with Cleveland Clinic's logo placed in a way that suggests to readers that Cleveland Clinic is sponsoring or endorsing the page or any of the information contained on it. Employees also must not use Cleveland Clinic's logo, trademark, or proprietary graphics in any commercial activity. Nor shall employees use the Cleveland Clinic logo, trademark, or propriety graphics while engaging in conduct that violates Cleveland Clinic policy.
4. Employees must not use their enterprise e-mail address to register for any personal social media account or site, or as an identifier needed to participate in any personal social media activity, except to engage in social media activity authorized by Cleveland Clinic and for Cleveland Clinic's business purposes.

5. Employees should not post photos of other Cleveland Clinic employees on social media sites without the other employee's permission. This rule does not prohibit posting of photos of co-workers engaging in protected activity under the NLRA.
6. Employees must not post content on any social media site that is related to confidential or proprietary information of Cleveland Clinic, its patients, or vendors, such as health information or trade secrets. Trade secrets may include information regarding the development of systems, processes, procedures or other internal business-related confidential communications. This is not intended to limit any employee's rights under the NLRA, and does not apply to communications protected by the NLRA.
7. Statements on social media sites could be considered endorsements under Federal Trade Commission Guidelines, 16 Code of Federal Regulations (CFR) Part 255 ("255"). Therefore, if the employee recommends one of Cleveland Clinic's products or services on any social media site, the employee must be accurate and disclose the employee/employer relationship. Making false or unsubstantiated statements, or failing to make applicable disclosures, may subject the employee to liability under the law.
8. Employees must not use Cleveland Clinic-sponsored sites to solicit for or promote personal businesses or other organizations, including but not limited to outside business ventures, charities, political campaigns, or religious groups. For example, employees must not use Cleveland Clinic-sponsored sites to promote a personal cosmetics business or a political candidate. Use of Cleveland Clinic-sponsored sites to solicit for or promote Cleveland Clinic-approved activities requires the prior approval of the employee's supervisor and the Executive Director of Corporate Communications.
9. If an employee's social networking includes any information related to Cleveland Clinic, the employee must not represent in any way that the employee is speaking on behalf of Cleveland Clinic, unless the employee is otherwise authorized to do so or such activity is a part of the employee's regular job duties. If any of an employee's online activity creates a risk that a third party may believe that he or she is acting on Cleveland Clinic's behalf, that employee must use an appropriate disclaimer, such as: "The postings on this site are my own and do not necessarily reflect the views of the Cleveland Clinic."
10. Employees must not post content to Cleveland Clinic-sponsored sites endorsing any product or service, lobbying or soliciting contributions for any political candidates or parties, or discussing political campaigns, issues, legislation or law.

Regulatory Requirement/References

Federal Trade Commission Guidelines, 16 CFR Part 255 ("255").
The Health Insurance Portability and Accountability Act (HIPAA)

Acceptable Use of Information Assets Policy

[Corrective Action Policy](#)

[Electronic and Voicemail Policy](#)

Information Security Privacy Manual

[Non-Discrimination, Harassment or Retaliation Policy](#)

[Telephone and Cellular Phone Use Policy](#)

Oversight and Responsibility

Human Resources Management is responsible to review, revise, update, and operationalize this policy to maintain compliance with regulatory or other requirement.

Department managers and supervisors are responsible for uniform administration of this policy. Employees are responsible for adhering to the provisions of this policy in their use of social media websites.

It is the responsibility of each hospital, institute, department and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable. Other

Background Information

Issuing Office: HR Services, Human Resources

Cellular Phones

Purpose

To provide standards on the appropriate use of business telephone and voicemail systems as well as personal cellular phones or similar devices.

Policy Statement

Cleveland Clinic maintains telephone and voicemail systems for business purposes as a vital link to our patients and community. For this reason, Cleveland Clinic discourages the making or receiving of personal calls during working hours either on hospital owned phones or personal cellular phones. This policy is also intended to provide and maintain a quiet, healing environment, and to protect patient confidentiality. Use of cellular phones in patient care areas will be permitted at the discretion of departmental management.

Definitions

Cleveland Clinic United States locations: Includes the main campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, South Pointe, Children's Hospital for Rehabilitation, Cleveland Clinic Florida, Cleveland Clinic Hospital (Weston), and all Family Health Centers, Physician practice sites, Nevada practice sites, Emergency Departments, Express Care Centers, Urgent Care Centers and Ambulatory Surgical Centers reporting to these facilities.

Cellular phone: For the purposes of this policy, the term "cellular phone" is defined as any handheld electronic device with the ability to receive and/or transmit voice, text or data messages without a cable connection (including but not limited to cellular phones, Smartphones, tablets, digital wireless phones, radio-phones, telephone pagers, PDAs (personal digital assistants) with wireless communications capabilities which may or may not have the capability to take pictures and videos). Cellular phone devices may also be considered any device capable of being networked by a private network provider to obtain information and send information over the internet.

Policy Implementation

Personal Telephone Calls

Cleveland Clinic understands that employees may periodically need to make and receive personal calls during working hours. Such calls, whether utilizing Cleveland Clinic telephone equipment or personal cell phones and relating to personal, non-emergency issues during work hours, are disruptive to the normal flow of business and should be strictly limited. When at all possible,

personal calls during working hours should be limited to the use of personal cellular phones in authorized non-working areas during employee breaks or meal periods.

Voicemail

Voicemail, like other components of Cleveland Clinic's telephone system, is intended for business use. All messages, whether left of Cleveland Clinic owned desk phones or cellular phones, are company records. While voicemail passwords are intended to limit access to authorized individuals only, employees should not have an expectation of privacy in connection with voicemail messages and should exercise professional discretion and judgment when utilizing the system.

Monitoring Telephone Calls for Customer Service

Cleveland Clinic reserves the right to monitor the calls of employees to ensure a consistent level of service and verify that information provided to customers is accurate. Employees who work in departments where phone monitoring occurs will be informed of this requirement during their departmental orientation process.

Cellular Phones

While at work, employees are expected to exercise the same discretion in using personal cellular phones as they use with Cleveland Clinic telephones. Excessive personal calls, text messaging, social media activity, or internet activity during the workday, regardless of the device used, can interfere with employee productivity and be distracting to others. Employees should restrict all such activity during work time, and should use personal cellular phones only during scheduled breaks or lunch periods in non-working areas and avoid patient care areas when possible. Cellular phone devices should be on vibrate or silent mode when carried by employees on Cleveland Clinic premises during work time. Cellular phones should not be answered during patient care delivery or where it would interrupt employees' day-to-day work responsibilities, with the exception of conducting business related calls impacting patient care.

Cleveland Clinic cellular phones are provided to assist employees in the performance of their jobs and intended for business use only. Employees are expected to use common sense and exercise good judgment regarding the personal use of Cleveland Clinic mobile devices and accounts. Personal use must not conflict in any way with Cleveland Clinic's business objectives, or interest, organizational values, standards of business conduct, nor should such use jeopardize Cleveland Clinic's status as a non-profit organization. Employees should not have an expectation of privacy or personal ownership in connection with their use of Cleveland Clinic issued cellular phones.

Employees who are issued a Cleveland Clinic cellular phone have the responsibility to be consistent with the following documents:

- Information Security Policy
<https://ccf.policytech.com/dotNet/documents/?docid=18573>
- Acceptable Use of Information Assets Policy
- Acceptable Use of Information Assets Policy
- Mobile Device User Guidelines
<http://portals.ccf.org/Portals/17/documents/Mobile-Device-User-Guidelines-v3.pdf>.

Recording and Photographing

Given privacy concerns, the use of audio recording and/or electronic imaging function of cell phones (i.e., cell phone cameras and video recorders) or of any other devices with similar capabilities is prohibited on Cleveland Clinic premises except when conducting authorized or

approved Cleveland Clinic business and/or with express consent from the subject(s) of any such recording or photograph. This provision should not be considered to prevent employees from engaging in activity protected by the NLRA (i.e. employees engaging in protected concerted activity on non-work time in non-work areas).

Cellular Phone Use While Driving

Employees are required to be familiar with and comply with local laws when using a cellular phone while operating a motor vehicle. It is highly recommended that when operating a company-owned vehicle, or a personal vehicle while in the performance of Cleveland Clinic business, employees use hands-free devices when using a cellular phone, electronic communication device or any other electronic equipment. This shall apply to company owned/ issued devices or devices owned by the employee, whether used for business or personal reasons.

Employees should use caution when using data services on their cellular phones while driving in the performance of Cleveland Clinic business, and must comply with applicable state and local laws prohibiting communication via text message, e-mail, or instant message while driving.

Application of Policy

- All new employees will be informed of this policy during their new hire orientation. It will be the responsibility of each department to inform current employees and any vendors/contractors working in their areas of the policy.
- The Environmental Safety Committee will be responsible for investigating and reviewing all incidents that involve suspected interference with clinical devices due to electromagnetic interference (EMI).

Harassment, Fraud or Illegal Activity

Cleveland Clinic prohibits the use of its telephones, owned cellular phones and voicemail systems for purposes of harassment, fraud or other illegal activities. The use of personal phones is also prohibited for this type of activity.

Violations of this policy may result in corrective action up to and including termination.

Regulatory Requirement/References

Cleveland Clinic documents:

- Acceptable Use of Information Assets Policy
- Corrective Action Policy
- Electronic and Voicemail Policy
- Information Security Policy
- Mobile Device User Guidelines
- Non-Discrimination, Harassment or Retaliation Policy
- Policy on Patient Recordings (Photo, Video, and Audio)
- Transportation & Fleet Services: CCHS Fleet Vehicle Policy

Oversight and Responsibility

Human Resources Management is responsible to review, revise, update, and operationalize this policy to maintain compliance with regulatory or other requirements. Human Resources is responsible for determining, in collaboration with management, if a violation of this policy has occurred.

It is the responsibility of each hospital, institute, department and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable.

Other Background Information

Issuing Office: HR Services, Human Resources

Student Parking

Parking assignments for all Cleveland Clinic student programs will be at an off-site surface parking lot at no charge. Students must have a Cleveland Clinic ID badge to receive a parking assignment. The transportation department provides free shuttle service to and from Main Campus. Students are required to park in their assigned off-campus lots during normal business hours (5:30 am to 5:30 pm). If students are required to be on campus for third shift, weekends and holidays, they will have automatic default access to a designated on-campus parking garage. For student programs only, the default garage access hours begin at 5:30 pm and end at 10:30 am.

Weather Emergency (Severe Weather Policy)

It is Cleveland Clinic health systems' policy to maintain a safe and reliable workforce in the event of a weather emergency and to remain open. Thus, students are expected to make all reasonable efforts to report to their clinical assignments as assigned. Any lateness or tardiness will need to be discussed with your practicum instructor to review make-up requirements.

A Cleveland Clinic emergency code list is provided to students, who are completing an onsite clinical rotation, within their clinical orientation packet.

Weapons and Contraband Policy

Purpose

To provide Cleveland Clinic health system (CCHs) personnel with a standardized process in preventing the introduction of weapons and contraband to CCHs property and mitigate incidents wherein weapons or contraband are present.

Policy Statement

CCHs personnel will take precautions to prevent introduction of weapons/contraband to its facilities while respecting the inherent rights of the individual as specified by local, state and federal law.

Definitions

Chain of Custody – Is the chronological documentation showing the seizure, custody, control, transfer, analysis and disposition of evidence/contraband.

Cleveland Clinic health system – Includes the main campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, South Pointe, Children's Hospital for Rehabilitation, and all Family Health Centers, Physician practice sites, Nevada practice sites, Emergency Departments,

Express Care Centers, Urgent Care Centers and Ambulatory Surgical Centers reporting to these facilities.

Contraband – The Ohio Revised Code 2901.01 defines contraband as:

“Contraband means any property that is illegal for a person to acquire or possess under statute, ordinance or rule, or that a trier of fact lawfully determines to be illegal to possess by any reason of the person’s involvement in an offense.” Any item determined by hospital staff to be hazardous or that may unduly violate the privacy of other patients may be classified as contraband. If any item or substance is suspected of being contraband, it is to be reported to Police/Security authority immediately.

“Contraband includes, but is not limited to, all of the following:

- *Any controlled substance as defined in section 3719.01 of the Revised Code, or any device or paraphernalia.*
- *Any unlawful gambling device or paraphernalia.*
- *Any dangerous ordnance or obscene material.”*

Contraband comment: The broad definition makes it impossible to list all those items which may be considered contraband. Contraband in a hospital environment, especially in a behavioral health care unit, may also include otherwise legal items that could be harmful or dangerous for a patient, employee, non-employee, or visitor to possess based upon the environment. Cigarettes are considered contraband at CChs.

Dangerous Ordnance – Is any explosive device including, but not limited to, a hand grenade, dynamite, bomb, blasting cap, or incendiary device.

Deadly Weapon – Is any device capable of causing death, and that is either designed or specially adapted for use as a weapon including, but not limited to, a firearm, knife, crossbow, ax/hatchet, etc.

Hand Held Metal Detectors (wand) – A security scanner used to detect the presence of offensive weapons on a person or in his/her personal effects, and to check parcels or letters for metal objects.

Non-Employee – individual who needs access to CChs property who does not receive a pay check with a Cleveland Clinic logo on it. Examples are students, contractors, observers, etc.

Police/Security Authority – For the purposes of this policy, Police/ Security Authority will be defined as the on-site Cleveland Clinic Police Department Police Officer, Security Officer or the Officer provided by the approved security contract vendor. The term will also be used to reference the local police authority having jurisdiction in circumstances wherein on-site police/security personnel are not assigned to a facility.

Screen – Includes the visual observation, wand, passing through a magnetometer or physical pat-down of a person by police/security or clinical staff

Weapon – Any device that could be carried, possessed or used for the purpose of inflicting physical harm.

Policy Implementation

CChs strictly prohibits the possession of contraband by patients, visitors, employees and nonemployees.

All persons entering CChs premises are subject to reasonable search of their person, belongings, and rooms to ensure the health and safety of all persons.

Cleveland Clinic Police or the security department will evaluate violation of this policy and will recommend corrective action up to and including termination of employment.

Threatening statements made relating to weapons or contraband will result in termination and/or criminal prosecution.

Police or the security department at the location will respond to all Caregivers who discover or suspect a patient, visitor, vendor contractor or other non-employee in possession of a weapon.

Weapons and Contraband

- a. Weapons are not permitted on CChs premises, at enterprise sponsored functions, while conducting organization business off-premises, or in CChs -owned or leased vehicles. For the purpose of this policy, CChs premises include all enterprise-owned or leased buildings and surrounding areas such as parking lots, sidewalks and driveways, except where specifically exempted by law.
- b. Weapons are not permitted on CChs premises with the exception of on duty law enforcement officers, licensed armored car companies conducting business on behalf of the CChs or its leased properties (e.g. Brink's, Dunbar, Wells Fargo etc.), Cleveland Clinic Police Officers, or Cleveland Clinic Inspectors of the Protective Services Department and those individuals employed by CChs Protective Services authorized concealed carry by Federal statute.
- c. CChs employees are not permitted to bring weapons onto CChs premises. Violation of this policy will result in corrective action, up to and including termination.
- d. Contractors, volunteers, vendors and any other non-employees are prohibited from bringing weapons onto CChs premises.
- e. Firearms are not permitted in any CChs location. The Carry Concealed Weapon (CCW) permit does not authorize patients, visitors, employees, or non-employees to carry the weapon in a CChs facility. Signs are posted at entrances to CChs facilities advising of this prohibition.

Room Searches

In order to protect the safety and welfare of patients, visitors, staff and others from the threat caused by the presence of contraband in a clinical setting, CChs reserves the right to conduct a reasonable search of a patient's room and/or personal property in the following situations:

- a. Reasonable suspicion to believe a patient is concealing weapons/contraband covered by policies.
- b. A patient's personal property will be searched only in circumstances in which the police/security authority, in consultation with the clinical staff, determine that there is reasonable suspicion to believe a patient is in the possession/control of weapons/contraband and there is risk of harm to the patient, visitors, staff or other persons if the weapon/contraband is not removed.

Regulatory Requirement/ References

Ohio Revised Code sections 2901.01 and 3719.01

EC.02.01.01

Center for Medicare and Medicaid Services Conditions of Participation 482.13 (c)(2)

Corrective Action Policy

Major Policies for the Professional Staff - Policy for the Due Process/Right of Review for a Member of the Professional Staff

Oversight and Responsibility

Cleveland Clinic Protective Services will review, revise, update, and operationalize this policy to maintain compliance with regulatory or other requirements.

It is the responsibility of each hospital, institute, department and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable.

Equal Employment Opportunity/Workforce Diversity and Inclusion

Purpose

The purpose of this policy is to affirm the commitment of Cleveland Clinic to the principles of equal opportunity employment and workforce diversity and inclusion in its human resources policies and practices.

Policy Statement

Cleveland Clinic is an equal opportunity employer. It is the policy of Cleveland Clinic to prohibit discrimination and harassment of all kinds, afford equal employment opportunities to employees and applicants, and to administer all terms and conditions of employment including, but not necessarily limited to recruitment, employment, promotion, compensation and salary administration, benefits, transfers, training and education, working conditions and application of policies without regard to race, color, religion, gender, sexual orientation, gender identity, pregnancy, marital status, age, nationality, ethnicity, ancestry, disability, military status, genetic information, or protected veteran status.

The policies and principles of equal employment opportunity also apply to the selection and treatment of independent contractors, personnel working on Cleveland Clinic premises who are employed by temporary agencies and any other persons or firms doing business for or with Cleveland Clinic.

Cleveland Clinic also promotes an inclusive organizational culture through diversity education, consultation, and programs that leverage differences to enhance innovation, quality of care, teamwork, and economic impact. Further, it is our policy to encourage all vendors, contractors, and others doing business with Cleveland Clinic to adhere to these same principles.

Definitions

Cleveland Clinic United States locations: Includes the main campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, South Pointe, Children's Hospital for Rehabilitation, Cleveland Clinic Florida Hospital, and all Family Health Centers, Physician practice sites, Nevada

practice sites, Emergency Departments, Urgent Care Centers and Ambulatory Surgical Centers reporting to these facilities.

Policy Implementation

Application

This policy applies to all applicants and employees in non-Professional Staff positions. Conduct prohibited by this policy is unacceptable in the workplace or in any work-related setting outside the workplace, such as during business trips or business meetings. Applicants and employees in Professional Staff positions are covered by the companion EEO policy contained in the “Major Policies for the Professional Staff”.

Communication

Federal and state nondiscrimination posters will be displayed in conspicuous locations at all facilities. The Equal Employment Opportunity/Workforce Diversity and Inclusion policy is also addressed in the employee handbook.

Complaint Procedure

An employee who has questions or concerns about behavior or actions which may constitute discrimination or harassment under Cleveland Clinic policy or state/federal laws, regardless of whether the discrimination or harassment is directed at the employee individually or at another employee, should communicate these concerns to his/her supervisor, Human Resources management, the Office of Diversity, or the Law Department for prompt investigation, follow up and appropriate remedial action.

Policy Violations

Violations of this policy, whether or not a law has been violated, are in direct conflict with the mission and values set by the organization, interfere with our ability to cultivate and retain diverse talent, and will not be tolerated. Responsive action may include training, referral to counseling, reassignment, and/or corrective action up to and including discharge.

Knowingly false and malicious allegations of harassment, discrimination, or retaliation are taken seriously and may also be subject to appropriate corrective action.

Statement of Non-Retaliation

Cleveland Clinic forbids retaliation against any individual who files a complaint of discrimination or harassment or who assists in the investigation of such a complaint whether internal or as part of an external agency charge.

Regulatory Requirement/References

Title VII of the Civil Rights Act of 1965

Ohio Revised Code, Title [41] XLI LABOR AND INDUSTRY, Chapter 4112: CIVIL RIGHTS COMMISSION, 4112.01 – Unlawful discriminatory practices

Non-Discrimination, Harassment, Retaliation

Corrective Action

Oversight and Responsibility

Human Resources, in collaboration with the Office of Diversity, is responsible for developing, revising, and overseeing compliance with this policy. Our Executive Leaders, Administrators, Directors, Managers, and Supervisors are responsible for implementing equal opportunity

practices within each department and maintaining a work environment that allows every employee to develop talent and contribute to his or her fullest potential. This responsibility includes the absolute necessity to immediately report to Human Resources any apparent acts of discrimination or harassment either directly witnessed or brought to their attention by another employee.

It is the responsibility of each hospital, institute, department and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable.

Other Background Information

ISSUING OFFICE: Employee Relations, Human Resources

Student Handbook Attestation

The WOC student handbook contains important information with regard to Cleveland Clinic policies and procedures pertaining to employees and students enrolled in all internal Cleveland Clinic education programs and affiliate-based programs.

I attest that I have received a copy of the WOC Nursing student handbook, and it is my responsibility to review it in its entirety and ask any questions for further guidance and clarification on areas that I do not understand.

I will comply, at all times, with the policies and procedures as stated in this student handbook. I understand that failure to comply can result in disciplinary action, including denial of clinical access, depending on the frequency and/or severity of the failure to comply, or immediate dismissal from the WOC Nursing program.

Student Signature

Date

NOTE: Please return the sign/dated form to the WOC Nursing program at WOCschool@ccf.org.