

BOARD OF HEALTH AGENDA
EIPH Board Room
1250 Hollipark Drive ~ Idaho Falls, Idaho
February 21, 2019
9:00 a.m.

1. Call Board Meeting to OrderChairman Reed
2. Public Comment.....Chairman Reed
3. Recognition of outgoing Chair, Brian Farnsworth Chairman Reed
4. Approval of Consent Agenda (**Action**) Chairman Reed
 - *If a board member has an issue with something in the Consent Agenda, a request can be made to remove that item from the Consent Agenda for further discussion and a separate vote*
 - Approval of December 11, 2018 and February 5, 2019 Board of Health Meeting Minutes
 - FY19 Year-to-Date Budget Report
 - Employee Policy Manual Revisions
5. Board Member Conflict of Interest Review Geri Rackow
6. Executive Council Report Bill Leake
 - Food Fee Update, House Bill 151
7. Announcements Geri Rackow
 - EIPH General Staff Meetings (February 27 & April 24)
 - Idaho Association of District Boards of Health Annual Conference, June 19-20, Lewiston, ID
 - National Association of Local Boards of Health Conference, August 14-16, Denver, CO
8. Executive Session - §74-206(1)(f) – Pending Litigation (**Action**).....Chairman Reed
9. Adolescent Pregnancy Prevention Program Report..... Geri Rackow & Kaylene Craig
 - House Bill 120
 - Reducing the Risk Curriculum (RTR)
 - Sexual Risk Avoidance Education
10. Subgrant Approvals (**Action**)..... Geri Rackow
11. Director’s Report Geri Rackow
 - Citizen Review Panel
 - State-Funded Home Visiting Program
 - WIC Program Audit
 - Update on Community Conversations/Community Needs Assessment
 - Environmental Health Litigation – Roundy Case
 - Yankee Fork Septic Complaint
12. Fiscal Officer Report Steven Thomas
 - FY2020 Budget Planning
 - FY15-16 Audit Update
13. Communicable Disease Update James Corbett & Amy Gamett
 - 2018-2019 Flu Season
 - Measles Outbreak
 - Meningococcal Rules
14. Travel to Ririe Junior/Senior High School (11:50 am – 2:30 pm)
 - Attend Youth Adult Partnership Meeting
 - Meet with District Administration/Teachers
 - Observe Reducing the Risk Class

Next Meeting: Thursday, April 18, 2019 at 9:00 a.m.

BOARD OF HEALTH MEETING MINUTES

December 11, 2018

10:00 a.m. – 11:30 a.m.

PRESENT:

BOARD OF HEALTH MEMBERS

Brian Farnsworth, Commissioner, Chairman
Bill Leake, Teton County
Brent Mendenhall, Commissioner
Lee Miller, Commissioner
Ken Miner, Commissioner
Bryon Reed, Commissioner
Greg Shenton, Commissioner

STAFF MEMBERS

Geri Rackow
Amy Gamett
Kellye Eager
Cheryl O'Connell
Angy Harwood
James Corbett

ADMINISTRATIVE ITEMS

1. Call to Order

Commissioner Bryon Reed chaired the meeting until 10:30 a.m. when Commissioner Brian Farnsworth arrived. Dr. Barbara Nelson is excused from the meeting.

Commissioner Reed called the meeting to order at 10:00 a.m.

2. Approval of Consent Agenda

- Approval of September 20, 2018 Board of Health Meeting Minutes
- FY19 Year-to-Date Budget Report
- Subgrant Approvals/Renewals

MOTION: Commission Greg Shenton made a motion to approve the December 11, 2018 Consent Agenda with an amendment of the end date of the HIV/AIDS Surveillance subgrant from 6/30/2015 to 6/30/2019.

SECOND: Commissioner Brent Mendenhall

ACTION: MOTION CARRIED UNANIMOUSLY

NEW BUSINESS

1. EIPH Staffing Update

Geri Rackow reported previously that Tammy Cox, Director of the Health Education, Epidemiology, and Preparedness Division, retired in August. She introduced James Corbett as the new Division Director to replace Ms. Cox and reported the change of division's name to Community Health. Mr. Corbett has been with Eastern Idaho Public Health for eight years. He has been working as a Program Manager over some clinical services as well as the SHIP Program. With this change in staffing, some other restructuring was done in the Clinical Services Division (formerly called the Family & Community Health Services Division).

2. Report on Community Conversations

Ms. Rackow provided an update on the Community Conversations held throughout the district as part of a Community Needs Assessment being completed in conjunction with the United Way. Ms. Rackow reports there was good representation and dialogue at the meetings. The topics discussed at the meetings included healthcare, financial stability, and education. For healthcare, issues and priorities identified by participants include lack of behavioral health and mental health services, substance abuse issues, and access to healthcare; however, granular level public health issues/needs were not specifically assessed or identified as part of these conversations. Ms. Rackow would like to continue with a more comprehensive Community Needs Assessment, with data obtained helpful in developing a strategic plan for addressing the identified needs. Ms. Rackow will report more at the next Board meeting.

3. Update on Environmental Health Litigation

Kellye Eager provided an update on the Guy Roundy litigation. The outstanding judgement owed to EIPH is \$6,971.78. A member of Mr. Roundy's family requested an itemization of the money owed, which Ms. Rackow provided. The family also inquired about the possibility of making monthly payments on the outstanding debt. The Board supports some form of written agreement if monthly payments are agreed upon. A representative from the Idaho Department of Environmental Quality asked when EIPH may file a motion to dismiss this case and the assessed penalty. Ms. Rackow responded that that will not be done until the outstanding judgement is paid in full.

4. Food Fee Update

Ms. Eager provided the Board with a food fee update. Data is currently being collected that will help in identifying costs for consideration by the board in the future.

5. Review/Education on Public Health's Memorandum of Understanding with Idaho Department of Environmental Quality

Ms. Eager reviewed the Memorandum of Understanding between the Idaho Department of Environmental Quality and Idaho's Public Health Districts.

6. Election of Officers

MOTION: Commissioner Bill Leake made a motion to defer the election of Officers until the February Board of Health meeting.

SECOND: Commissioner Ken Miner

ACTION: MOTION CARRIED UNANIMOUSLY

Board members thanked Commissioner Farnsworth for his service on the Board of Health.

ADJOURNMENT

All business being conducted, the meeting was adjourned at 11:20 a.m. Board members were excused to attend the Legislative Reception held in the EIPH conference room. The next Board of Health Meeting will be held on February 21, 2019 in Idaho Falls.

Brian Farnsworth, Chairman

Gerri L. Rackow, Secretary

BOARD OF HEALTH MEETING MINUTES
February 5, 2019
5:45 p.m.

PRESENT:

BOARD OF HEALTH MEMBERS

Wayne Butts, Commissioner
Bill Leake, Teton County, Trustee
Brent Mendenhall, Commissioner
Lee Miller, Commissioner (via phone)
Ken Miner, Commissioner
Barbara Nelson, MD, Vice Chairman (via phone)
Bryon Reed, Commissioner
Greg Shenton, Commissioner
Shayne Young, Commissioner

STAFF MEMBERS

Geri Rackow
Kellye Eager (via phone)

NEW BUSINESS

1. Call to Order

Bill Leake called the meeting to order at 5:45 p.m. Commissioner Shayne Young was appointed by the Jefferson County Commission to replace Brian Farnsworth on the Board of Health. Introductions were made.

2. Election of Board Officers

MOTION: Commissioner Mendenhall made a motion to nominate Commissioner Bryon Reed as Board Chairman

SECOND: Commissioner Shenton

ACTION: MOTION CARRIED UNANIMOUSLY

MOTION: Commissioner Young a motion to nominate Dr. Nelson as Board Vice Chairman

SECOND: Commissioner Miner

ACTION: MOTION CARRIED UNANIMOUSLY

Commissioner Miner reported that he had a conversation with Commissioner Riegel from Teton County and they are supportive of Bill Leake continuing to serve as Teton County's representative on the EIPH Board of Health.

MOTION: Commissioner Miner made a motion to nominate Bill Leake as the Board of Health Trustee.

SECOND: Commissioner Mendenhall

ACTION: MOTION CARRIED UNANIMOUSLY

3. Executive Council Report

Mr. Leake reported that the health districts' Executive Committee had a conference call on January 31, 2019. The main agenda item was to discuss potential legislation being worked on by Senator Guthrie, Representative Blanksma, and Pam Eaton from the Idaho Retailers Association. The legislation would create a tiered licensing fee structure for temporary events based on the length of the event, phase in increases to other food licensing fees over time, and incorporate some additional fees such as a late fee and plan review/pre-operational inspection fee. The districts' Environmental Health Director Workgroup has been working with Senator Guthrie and Ms. Eaton on this potential legislation which appears to be an acceptable compromise to the parties involved. The health districts have not seen the final draft of the legislation yet, but there is talk of the proposed legislation having a print hearing in the coming days.

Discussion followed. There is another Executive Council meeting scheduled for February 6, 2019, in which this topic will be discussed.

MOTION: Commissioner Miner made a motion for EIPH's Board of Health to support the concept of the proposed food fee legislation.

SECOND: Commissioner Shenton

ACTION: MOTION CARRIED UNANIMOUSLY

ADJOURNMENT

All business being conducted, the meeting was adjourned at 6:05 p.m. The next of Health Meeting will be held on February 21, 2019 in Idaho Falls.

Bryon Reed, Chairman

Gerri L. Rackow, Secretary

DRAFT

EASTERN IDAHO PUBLIC HEALTH

SUBGRANT SUMMARY

2/21/19

RENEWED OR AMENDED SUBGRANTS/CONTRACTS

Subgrant/Contract Title	Grantor/Contractor	R(Renew)/ A(Amend)	Start Date	End Date	Last Funding Amount	New Funding Amount	Comments
HIV Case Management (Ryan White Part B)	IDHW	R	4/1/2019	3/30/2020	\$67,038.43	\$68,564.63	Annual Renewal
Maternal Child Home Visiting	IDHW	R	2/1/2019	1/31/2020	\$266,500.00	\$270,665.00	Annual Renewal
Physical Activity & Nutrition	IDHW	A1	7/1/2018	6/30/2019	\$20,000.00	\$4,000.00	Added funding to additional provider education
PKU	IDHW	A2	2/1/2017	1/30/2020	\$2,500.00	\$2,500.00	Annual Renewal
Prescriptions Drug Overdose Prescription	IDHW	A1	9/1/2018	8/31/2019	\$54,295.00	\$0.00	Amended scope of work
WIC	IDHW	A1	10/1/2018	9/30/2019	\$1,273,256.00	\$3,980.00	Statewide Reallocation of Breasfeeding Peer Counselor Funding
Women's Health Check	IDHW	A1	6/30/2018	6/29/2019	\$52,225.00	\$1,130.00	Added funding

NEW SUBGRANT

Subgrant/Contract Title	Grantor/Contractor	Start Date	End Date	New Funding Amount	Comments
Sexual Risk Avoidance Education	IDHW	2/2/2019	6/30/2020	\$25,690.00	Abstinence-only Education for Youth

PENDING SUBGRANTS RENEWAL

Subgrant/Contract Title	Grantor/Contractor	Renew/ Amend	Start Date	End Date	Last Funding Amount	New Funding Amount	Comments
Family Planning - Title X	IDHW	A2	9/12/2018	3/31/2019	\$188,620.00		Annual Renewal



EMPLOYEE HANDBOOK

Date: February 21, 2019

Deleted: November 16, 2017

PREFACE

Eastern Idaho Public Health's (EIPH's) Employee Handbook has been developed in compliance with [IDAPA 15.04.01 - Rules of Idaho's Division of Human Resources and Personnel Commission](#).

All policies contained in this handbook are supported by EIPH's Board of Health. These policies shall prevail, provided they are not in conflict with Idaho Code or the Rules and Regulations of the Division of Human Resources. This manual replaces and supersedes all other employee policy and procedure manuals.

All EIPH employees are required to review these policies and procedures and sign an Acknowledgement Form that will be kept in the Human Resources office. Any questions regarding these policies and procedures may be answered by EIPH's Director, Division Directors, Supervisors, or the Human Resource Specialist. ***Employees who violate these policies are subject to disciplinary action up to and including dismissal.***

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ATTENDANCE (ABSENTEEISM AND TARDINESS)

POLICY

The purpose of this policy is to provide a fair, consistent, and effective method of monitoring employee attendance in order to help maintain efficient operations.

Good attendance habits are an integral part of every employee's job. Habitual tardiness and unscheduled absenteeism is unprofessional and puts a burden on co-workers and clients. It is therefore the policy of the EIPH that all employees practice good attendance habits.

Generally, EIPH's employees work Monday through Friday from 8:00 a.m. to 5:00 p.m. with the exception of designated holidays. However, due to the nature of our business, there may be instances that employees are required to work shifts that are outside of these general business hours (extended clinic hours, special clinics, trainings, community events, etc). As much as possible, employees will be given advance notice when they will be required to work outside of their normal work hours.

In addition, there are situations that an employee may be granted an adjusted work schedule, dependent on the needs of the agency. Any schedule adjustment is at the discretion of the Division Director. Any approved schedule adjustments must be reported to EIPH's Director.

PROCEDURE

Perfect attendance is desirable in the interest of efficient workflow and fairness to co-workers; however, there are instances where absences or late arrivals to work may be unavoidable. A habitual pattern of failure to report for duty at the assigned time or place will result in disciplinary action up to and including dismissal from employment.

Definitions:

Scheduled Absence - An absence that is known, requested, and approved in advance by the employee's supervisor (or designee). Examples include, but are not limited to, approved leave (vacation, compensation time, sick, or leave without pay).

Unscheduled Absence - An absence that occurs suddenly and is taken without advance notification or approval. Examples include, but are not limited to, an unplanned illness, the failure to report to work as scheduled, tardiness, leaving a post early, or abandoning a post or job.

An employee may be asked to provide a doctor's certification of illness or injury for absences in excess of three (3) days, or for periods of less than three (3) consecutive working days whenever a supervisor believes it is warranted (IDAPA 15.04.01.240.07). Any employee who is on approved sick leave and is found to be improperly using that sick leave shall be subject to disciplinary action up to and including dismissal (Rule 190).

Employee Responsibility

1. Employees are responsible to be at their work station on time as scheduled and prepared to work. (For example, if your shift starts at 8:00 a.m., you are expected to be at your assigned station ready to begin work at 8:00 a.m., not walking in the door at 8:00 a.m.). An employee is tardy when he/she arrives at the assigned work station after the scheduled start time.
2. Maintain a consistent and reliable level of attendance.
3. Know and follow the notification requirements of their division for reporting absence or tardiness. Notification requirements include: whom to notify, how to notify (such as email, phone, text, or similar), and timeline for notification.
4. Accurately report in I-Time all work performed and leave time.
5. Request time off as far in advance as possible.
6. Don't work beyond your scheduled hours unless you have been given permission from your supervisor, except in emergency situations.
7. Remain at your work station unless the needs of the job require being elsewhere, except during authorized breaks (including restroom breaks).
8. Remain at work during entire work schedule, unless excused by their supervisor.

Director/Supervisor Responsibility

1. Manage work schedules and leave requests of employees. Be aware of employee's leave accrual when approving leave requests.

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2. Post or make known to division employees the notification requirements of the division. Notification requirements include: whom to notify, how to notify (such as email, phone, text or similar), and timeline for notification.
3. Address employee attendance issues promptly and investigate suspected attendance-related performance issues such as excessive absence or tardiness and take appropriate action in a timely manner.
4. Train employees to ensure all staff are knowledgeable about the attendance policy.
5. Notify Human Resources of staff who has consecutive absences over three days. This does not apply to pre-planned vacation.

Exceptions

Corrective action against an employee, up to and including dismissal, may be taken to resolve issues with the employee’s attendance based on the unique characteristics of each case and the presence or absence of other work-related problems.

If the absence is authorized under the Family Medical Leave Act (FMLA), an employee shall not be considered as having excessive absenteeism.

Except for those employees on authorized leave, an employee who has not returned to work within five working days after approved paid or unpaid leave or release by their medical provider shall be considered as having voluntarily separated. (IDAPA 15.04.01.244)

AUDIO-VISUAL EQUIPMENT

Equipment

Each Division and satellite office should maintain a list of all audio-visual equipment assigned to their division.

Scheduling

The use of any audio-visual equipment that has not been assigned to a specific division or program is scheduled through the IT office. Each division should maintain a schedule for checking out audio-visual equipment. Never take any equipment, even for a short time, without scheduling it first.

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Responsibility

When a staff member checks out any equipment, he/she is responsible for stating when they plan on using that equipment and when the equipment will be returned. If you do not know how to operate the piece of equipment, get instructions from someone who does before using it. Any problems noted with the equipment must be reported to the supervisor upon check-in for repairs to be made.

Check-out Policy

Only EIPH staff may be allowed to check out equipment for work-related duties. It is **NOT** to be loaned to any other agency, facility, organization, or to be used for personal use.

AUTOMATED EXTERNAL DEFIBRILLATOR (AED)

Location of AEDs

Automated External Defibrillators (AEDs) are located in all EIPH offices, except Mud Lake, Dubois, and Mackay. All staff should familiarize themselves with the location of the device in the office(s) in which he/she works.

Indications for AED Use

The AED is indicated for emergency treatment of victims exhibiting symptoms of sudden cardiac arrest who are unresponsive and not breathing. EIPH’s AED machines provide audible step-by-step instructions for their use.

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Emergency Medical Response Plan Activation

Any employee witnessing or being made aware of a medical emergency in EIPH facilities in which CPR or AED use is indicated should follow these steps:

1. Page “Medical Assistance Needed” to (area that incident is occurring), “Medical Assistance Needed” to (area that incident is occurring).”
2. Call or assign someone to call “911” to report the emergency.
3. If trained, initiate CPR until help arrives. This could include use of the AED if indicated. This should be done in accordance with the American Heart Association’s CPR/AED Protocol.
4. After the incident, if the AED was used, complete the AED Incident Use Report Form (Appendix J) and turn it in to the district’s AED Coordinator as noted on the form.

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BENEFITS

EIPH employees receive the same benefits as State of Idaho employees. Benefits are available to all employees who are expected to work at least twenty (20) hours per week for a period of at least five (5) months. Further information regarding employee benefits can be found on the State of Idaho Employee Portal at <http://employee.idaho.gov>. EIPH’s Human Resources Specialist can assist you with enrollment, changes, additional information and any questions you may have.

INSURANCE

EIPH employees’ insurance information is accessible through Idaho’s Department of Administration, Office of Group Insurance.

Department of Administration - Insurance <http://ogi.idaho.gov/employees>

On this site, employees can find information on the following topics:

- | | | |
|-------------------|-----------------------------------|---------------|
| Health Promotion | Benefits Summary & Plan Contracts | Premium Rates |
| Medical Plans | Dental Plans | Vision Plans |
| Prescription Drug | Flexible Spending Accounts | |

RETIREMENT

State employee retirement benefits information is accessible through PERSI, the Public Employment Retirement System of Idaho.

PERSI: <http://www.persi.idaho.gov/>

EMPLOYEE ASSISTANCE PROGRAM (EAP)

EAP benefits are included in each medical plan. The EAP is designed to provide short-term counseling services for you and your dependents. In addition to individual counseling, the EAP also includes Conflict Resolution and Critical Incident Stress Debriefing services (http://ogi.idaho.gov/employees/additional_benefits.html). Employees should consult their individual medical plan contract for more details about this service.

Deleted: (1 to 5 visits per person per benefit period with no copayment required).

STATE HOLIDAYS

EIPH offices are closed on the following Holidays.

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Idaho State Holidays	
New Years Day	January 1st
Martin Luther King, Jr.-Idaho Human Rights Day	3rd Monday in January
Presidents' Day	3rd Monday in February
Memorial Day	Last Monday in May
Independence Day	July 4 th
Labor Day	1st Monday in September
Columbus Day	2nd Monday in October
Veterans Day	November 11th
Thanksgiving	4th Thursday in November
Christmas	December 25th

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WORKERS COMPENSATION

Workers compensation insurance is a no-fault insurance policy which provides wage loss and medical benefits to workers with a job-related injury or disease. EIPH carries workers compensation insurance on all employees through the State Insurance Fund. Employees are covered beginning with their first day of work and during all hours when they are actually working.

Any job-related injury or disease must be reported immediately to the employee's immediate supervisor. The employee is required to complete an [Incident Report Form \(Appendix A\)](#) or [Medication Error Report Form \(Appendix B\)](#) as soon as possible after the injury occurs, even if the employee does not require medical attention. The completed form should be given to the employee's immediate supervisor who is to report the injury to the Human Resource Specialist. (If the immediate supervisor is not available, the incident should be reported directly to the Human Resource Specialist or EIPH Director).

If an injury is life threatening, call 911

For injuries that do not require 911 emergency response:

- Administer first aid as necessary.

If the injury requires medical attention beyond first aid:

- Employees should contact their supervisor, manager, or the Human Resource Specialist prior to seeking medical attention for work related injuries or illnesses.
- Employees will be referred to **Mountain View Hospital Occupational Health Solutions 208-557-2890.**
The employee will present to **RediCare**, 2730 Channing Way, Idaho Falls, OPEN 6AM-1AM or one of our other locations:
Idaho Falls Community Care – 2725 Channing Way or 765 Utah Ave.
Rigby Community Care– 167 East 1st South
Rexburg Community Care – 72 East Main
Pocatello Community Care– 1595 Yellowstone Ave
Blackfoot Medical Center Urgent Care – 1441 Parkway Drive

Additional Information:

- Employees in areas without a designated medical facility may seek treatment locally but should follow the same notification and reporting procedures.
- Mountain View Hospital's Occupational Health Solutions will provide the employee with documentation of return-to-work status. This documentation should be given to the employee's supervisor or the Human Resource Specialist.
- If the employee seeks treatment outside of the authorized provider, he/she could be held responsible for the associated medical bills.

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BIOHAZARDOUS AND CHEMICAL MATERIALS

POLICY

It is the responsibility of each employee to be aware of potential exposure to biohazardous and chemical materials and the safety precautions necessary for the handling of such materials.

PROCEDURE

It is the responsibility of the employee to obtain the knowledge on how to safely handle any product prior to usage. Employees who have not been instructed in biohazardous and chemical handling precautions should not handle any of these products.

Each office has a binder that contains Material Safety Data Sheet (MSDS) on all chemicals used by EIPH.

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Deleted: Workers compensation insurance pays for "reasonable and necessary" medical care to treat a job-related injury or disease. Such care usually includes, but is not limited to: payment for emergency medical care, doctor bills, x-rays, medications, hospitalization, crutches, and some travel expenses required for medical care. Bills for medical treatment are sent by the medical care provider (physician, clinic, emergency room) directly to the State Insurance Fund and do not need to be paid by the employee. ¶

¶ In addition, if the physician confirms that an employee cannot immediately return to work because of the job-related injury or disease, the employee is eligible for temporary disability benefits until the physician releases the employee to return to work OR the condition has reached a point of maximum improvement. Normally, the employee qualifies for compensation for lost wages if he/she misses more than five (5) days of work or is hospitalized as an in-patient. If such a time loss exceeds fourteen (14) days, Workers Compensation will pay for the first five (5) days as well. ¶

¶ If an employee is able to return to part-time or modified work while recovering, but is receiving less than the usual earning, he/she may be entitled to temporary partial disability benefits. If the employee is determined to have permanent impairment, he/she may receive permanent partial impairment or disability benefits. For further information on these benefits, refer to the Idaho Industrial Commission. ¶

Deleted: , including when, where, and how the injury occurred

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Deleted: EIPH has entered into a working relationship with to provide occupational health services. Employees in the Idaho Falls office whose injury necessitates medical intervention are to contact the Human Resource Specialist and she will occupational health services that will designate a particular physician. Idaho law allows an employer to designate physicians for injured employees. If time is a factor or during evenings and weekends, the employee should go directly to the emergency department at the hospital or an emergency care facility. The physician will examine the employee, schedule necessary evaluative tests (such as x-rays, MRI's, etc.), determine the treatment plan, make referrals for therapy and other treatments as indicated, determine work limitations, and issue the release to return to work when appropriate. **Employees can be held responsible for medical costs associated with their injuries if they decline to use the designated physicians.** ¶

There are exceptions to the above plan. If an employee's injury requires emergency treatment, he/she is to seek treatment immediately, reporting the injury as soon as possible afterwards. If an injury to an employee in a satellite county occurs, the employee should seek treatment locally and report the injury per the policy above. ¶

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EXPOSURE CONTROL PLAN

PURPOSE

EIPH's is committed to providing a safe work environment for our entire staff. In pursuit of this endeavor, an Exposure Control Plan (ECP) has been developed to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens (BBP)."

DEFINITION

Bloodborne Pathogens: Infectious microorganisms present in blood that can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV); hepatitis C virus (HCV); and human immunodeficiency virus (HIV), the virus that causes AIDS. Other potentially infectious materials include the following human body fluids: semen, vaginal fluid, saliva in dental procedures, and any body fluid that is visibly contaminated with blood. Workers exposed to bloodborne pathogens are at risk for serious or life-threatening illnesses.

POLICY

Employees covered by the bloodborne pathogens standard receive an explanation of the Exposure Control Plan during their initial orientation. The plan is reviewed annually thereafter as a refresher training for all staff. All employees have an opportunity to review the plan at any time by accessing EIPH's intranet or by contacting EIPH's Reproductive Health Manager. [\(Link to Plan when it's been added to the intranet.\)](#)

The Exposure Control Plan is a key document to assist EIPH in implementing and ensuring compliance with the standard, thereby protecting employees. The Exposure Control Plan includes:

1. Program Administration
2. Employee Exposure Determination
3. Methods of Implementation and Control
 - o Universal Precautions
 - o Engineering Controls and Work Practices
 - o Personal Protective Equipment (PPE)
 - o Housekeeping
 - o Labeling
4. Hepatitis B vaccination
5. Post Exposure Evaluation and Follow-up
6. Employee Training
7. Recordkeeping
8. Forms
 - o Appendix A-Clinic Room Checklist
 - o Appendix B-Hepatitis B Declination
 - o Appendix C-Post-Exposure Incident Checklist
 - o Appendix D-Sharps Injury Log

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BREASTFEEDING MOTHERS – REASONABLE BREAK TIME

EIPH shall provide reasonable break time for an employee to nurse or express breast milk for her nursing child for up to one year after the child's birth. EIPH shall provide a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public, which may be used for this purpose. Breaks of more than 20 minutes will be unpaid.

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Deleted: BLOODBORNE PATHOGENS

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Occupational Exposure: Actual, or potential, parenteral, skin, eye, or mucus membrane contact with blood; or other potentially infectious material that may result from the performance of an employee's duties.¶

Universal Precautions: Treating all human blood and other potentially infectious material as if known to be infectious for bloodborne pathogens. - ¶

¶

RESPONSIBILITIES¶

Under this policy, divisions with a potential for occupational exposures are required to develop a written Exposure Control Plan designed to minimize or eliminate occupational exposure. This plan should include the following:¶

Program Administration¶

Methods of Implementation and Control¶

Personal Protective Equipment¶

Hepatitis B Vaccination¶

Post-exposure Evaluation and Follow-up¶

Procedure for evaluating circumstances surrounding an exposure incident¶

Annual employee training and review¶

Recordkeeping¶

¶

PROCEDURES¶

Exposure Control Plan¶

Divisions with potential for occupational exposure are to identify, in writing, tasks and procedures, as well as job classifications where such exposures may occur without regard to the use of personal protective clothing and equipment.¶

¶

Divisions must also set forth the schedule for implementing other provisions of this policy and specify the procedure for evaluating circumstances surrounding exposure incidents. The procedure must be accessible to employees and available for annual review. Updates are to be performed as necessary when departmental changes occur.¶

¶

Methods of Compliance¶

Divisions, to prevent and control exposure to blood or other potentially infectious materials, must observe several precautions and control strategies. Most importantly, employees must use universal precautions to prevent contact with blood, or other potentially infectious materials. Other strategies include:¶

Engineering controls: i.e., puncture resistant disposal containers for contaminated sharp instruments, resuscitation bags, and ventilation devices.¶

Work practice controls: i.e., hand washing immediately after removing gloves; restricting eating and drinking, applying cosmetics or lip balm, handling contact lenses; prohibiting mouth pipetting; preventing the storage of food or drink in refrigerators or other locations where blood, or other BBP, are kept; decontaminating equipment, or labeling it as contaminated, before shipping to disposal facilities; no recapping, shearing, or breaking of contaminated needles. ¶

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CLEAN INDOOR AIR POLICY

PURPOSE

Due to the acknowledged dangers arising from exposure to environmental tobacco smoke and other indoor air pollutants, limiting exposure to indoor air pollutants is vital since air quality is linked to asthma, allergies, and other respiratory disorders. It is the intent of EIPH to provide a safe and healthy environment for its employees and customers. Therefore, the purpose of this policy is to address the issues that may have an impact on ~~EIPH employees~~ and customers.

POLICY

In an effort to reduce the incidences of complications related to asthma, allergies, and/or other respiratory disorders, the following steps will be implemented in order to limit exposure to these particular indoor air pollutants by employees and customers of EIPH.

1. There will be no smoking or use of electronic ~~nicotine delivery devices~~ allowed on/in EIPH ~~property (including vehicles)~~ at any time. Any use of these products or devices must be done off district property or in approved designated areas.
2. ~~Only district-approved air deodorizers/fresheners are allowed for use in EIPH's buildings and vehicles. All products must be approved by the district's Custodial Foreman.~~
3. Candles, ~~wax~~ melts/warmers, sachets, diffusers, and other such scented materials are not allowed in EIPH offices.

[See also - Nicotine-Free Policy](#)

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~~(removed – client policy, not employee policy)~~ [Return to Table of Contents](#)

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Deleted: cigarettes (e-cigs) or vaping

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Deleted: There will be no smoking or use of electronic cigarettes in EIPH vehicles at any time.

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¶ Clients of EIPH and their families have a right to expect that employees will comply with the following:¶

¶

Access to Care¶

Individuals shall be accorded impartial access to treatment or services that are available regardless of race, color, sex, national origin, religion, age, handicap, sexual preference, or diagnosis.¶

¶

Respect and Dignity¶

The client has the right to considerate, respectful service at all times and under all circumstances with recognition of his/her personal dignity.¶

¶

Privacy and Confidentiality¶

The client has the right, within the law (Health Information Portability and Accountability Act – HIPAA), to personal and information privacy and to expect that all communications and records pertaining to his/her service will be treated as confidential. All clients are offered a copy of the District's privacy policy upon receiving services. The District's privacy policy is also available on the District's website. ¶

¶

Personal Safety¶

The client has the right to expect reasonable safety in obtaining Health District services. In the event a client is involved in an incident while obtaining services at EIPH, proper documentation of the event is required. District staff should complete either the [Incident/Damage Report Form \(Appendix A\)](#) or the [Medication Error/Clinic Services Injury Report Form \(Appendix B\)](#) and give it to his/her supervisor immediately for follow-up with the client. ¶

¶

Information¶

The client has the right to obtain from the staff responsible for coordinating his/her service, complete and current information regarding services to be provided. This information should be communicated in terms the client can reasonably be expected to understand. ¶

¶

Consent¶

The client has the right to reasonably informed participation in decisions involving his/her service. Teaching or counseling will be provided to enable the client to understand treatment or service options prior to his/her consent.¶

¶

Refusal of Treatment¶

The client may refuse services to the extent permitted by law. The client has the right to present grievances about services without fear of discrimination or reprisal, to have grievances investigated, and to be informed of the resolutions.¶

¶

Health District Program Charges¶

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COMMUNITY SERVICE

POLICY

Eastern Idaho Public Health is an integral part of the communities in which we serve and is looked to as a community partner. In an effort to support healthy communities and promote the health district within the communities we serve, EIPH employees are being provided the opportunity to provide service within the community as a representative of Eastern Idaho Public Health.

EIPH will maintain a list of partner agencies on EIPH's intranet for which employees can choose to provide service. Employees are welcome to suggest additional community partners to be added to the approved list by providing the information about the agency/organization to the EIPH director for consideration.

Community Service Hours

Full time employees will be granted one hour of community service per month; part time employees' community service hours granted will be prorated based on their budgeted hours.

Weekly Budgeted Hours Granted per Month	Community Service Hours
40	1
32	45 minutes
24	30 minutes
8-16	15 minutes
Less than 8	0

At the start of the fiscal year, employees may begin using the allotted community service hours for that year. The time does not have to be earned first before it is used. For example, in August a full time employee wants to serve at Community Night Out for 5 hours. If approved by the employee's division director, this employee will then have 7 hours of community service time remaining for the fiscal year. Any time worked by an employee that exceeds the approved Community Service hours will not be compensated. Community Service hours do not roll over from year to year.

Adjusting Time

Employees must make every effort to adjust their time during the week to prevent the Community Service Hours from creating comp time. In addition, employees should not expect adjustments to their work schedules to accommodate Community Service commitments above and beyond those hours granted in accordance with this policy.

Community Service Dress Code

While participating in community service, EIPH employees will dress in a professional manner which will include wearing a logo shirt with appropriate pants/jeans or skirts for the event. Employee should check with the event organizer regarding specific dress guidelines for the event. Employee will also wear their official name badge (unless not allowed by the agency/organization) to further identify you as an EIPH employee.

PROCEDURE

Employees interested in participating in EIPH's Community Service need to complete the Community Service Request Form (Appendix [\[1\]](#)). It is fully the employee's responsibility to make the arrangements for the Community Service. The employee may participate in the proposed Community Service once it is approved by the respective Division Director.

While performing the Community Services, the employee must obtain the signature of the agency's/organization's event coordinator on the Community Service Request Form. This completed form must be turned in to the employee's Division Director by the end of the pay period in which the service was performed. If the signed form is not returned to the Division Director, the employee will be ineligible for performing Community Service in the future.

During your community service, if possible, please take a photo and email or text it to EIPH's PIO or District Director to use on our Facebook page. Employees must get a signed "Media Consent Form" from any individual included in the photo.

Time Coding for Community Service

All employees will code Community Service hours to PCA 9050.

COMPENSATION

This is the Idaho Division of Human Resources Policy (IDHR) that is applicable to all State of Idaho executive branch agencies, including EIPH. To access the policy, click here: [Section 1: COMPENSATION](#)

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- Permanent Merit Increases*
- Temporary Merit Increases*
- Performance Bonuses*
- Bonuses for Employee Suggestion Program*
- Retention Award Pay*
- Recruitment Award Pay*
- State Minimum Wage*
- Holiday Compensation*
- Shift Differential*
- Geographic Differential*

It is the intent of EIPH to fund competitive employee compensation and benefit packages that will attract qualified applicants, retain employees who have a commitment to public service excellence, motivate employees to maintain high standards of productivity, and reward employees for outstanding performance. Maintaining a competitive compensation system is based on the following conditions and standards:

1. EIPH is not a state agency; therefore, [EIPH](#) can only compensate employees to the extent funding is available from the following sources: State General Funds, County Contributions, Fees Collected, and Subgrants/Contracts Awarded.
2. Advancement in pay shall be based on job performance; market changes may also be taken into consideration
3. Pay for performance shall provide faster salary advancement for higher performers based on a merit increase matrix. For more details about the matrix, contact your Division Director, the Fiscal Officer, or EIPH Director.

It is the intent of this policy to ensure a consistent and fair approach to EIPH's hiring process and to provide specific parameters which determines salary rates for newly hired and permanent employees.

EIPH adopts the Rules of Division of Human Resources and Personnel Commission, IDAPA 15.04.01 as required. [EIPH's Compensation Plan](#) (available on EIPH's intranet under the Administration section), which is updated annually, incorporates those items outlined in Idaho Code 67-5309B.
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COMPUTER USE ACCESS AND SECURITY

All EIPH computers any other applicable devices (smart phones, tablets, etc.) require a user name and password to access the network shared or mapped drives. Access to information stored on the network also requires system rights, which are set up by IT support staff.

COMPUTER PASSWORDS

A password may be reset at any time by a network administrator by request or at the request of a supervisor. Regardless, the user will be informed of the generic password which they will be required to change at their next logon attempt.

Password Length

- A password must be a minimum of 8 characters in length.
- There is not currently any regulation concerning a maximum password length.

Complexity Requirements

A password must contain characters from 3 of the 4 categories listed below:

1. UPPERCASE LETTERS [A-Z]
2. Lowercase letters [a-z]
3. Numerals [0-9]
4. Special Characters [! # \$ ^ * () ? - ~ _ | < = > +] including spaces

A password may not contain any part of your given names or logon username.

Certain special characters should not be used: At @, single " or double "" quotation marks, percent %, period ., comma ,, apostrophe ', ampersand &, forward slash /, backward slash \, curly braces {} or square brackets [].

Automatic Account Access Lock

If you attempt to logon and are unsuccessful 20 times, consecutively, you will be forced to wait at least 20 minutes prior to attempting again.

Expiration

Passwords will expire every 90 days. You will be prompted to change your password once it has expired. Any new password will need to be unique in comparison to the prior 24 passwords used.

Retention and Security

EIPH employees are to never divulge passwords to anyone except the employee's immediate supervisor, Division Director, the EIPH Director, or members of the IT Staff. Instances requiring disclosure of an employee's password are extremely rare as the IT staff may change an employee's logon password at any time.

If the password needs to be written down, it should never be kept in or around an employee's work area or in any place accessible to others. Employees should memorize their credentials as quickly as possible and hard copies destroyed securely.

- Do not say the credentials while typing them or otherwise broadcast them.
- Do not reuse the credentials with any other logon process

Employees should be extremely cautious of any communication requesting any information about his/her logon or password, as NO ONE will ever request them via e-mail or unsolicited phone call. Requests for your user credentials will only be conducted in person and by the people identified previously.

First Logon / Password Reset Instructions

1. Enter the account logon, as it has been provided to you by the IT staff
2. Enter the initial password which has also been provided to you by the IT staff
3. You should be prompted to change your password immediately, and the "Change Password" screen will be displayed
4. After reviewing the aforementioned criteria for password complexity, enter your new password in the spaces provided.

SCREEN LOCK

In an effort to not only protect the sensitive information of our clients, but also that of our personnel, and to ensure the proper handling of said information, EIPH requires the use of the Screen-Lock functionality of workstations to limit access from unauthorized sources.

EIPH's current policy dictates automatic Screen Lock after 10 minutes of inactivity (subject to change); however, employees should lock their workstations manually prior to leaving them unattended, regardless of time frame.

To conduct a manual Screen Lock = press and hold Windows key + L

Image of the Windows key on a keyboard (located in the bottom left hand corner of your keyboard).



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CONFERENCE/MEETING ROOM USAGE

EIPH has several meeting rooms available for use by district employees and other authorized outside agencies, including state, county, and city agencies and non-profit organizations (only non-profit organizations that have a public health mission; meeting rooms should not be scheduled for non-profit organizations that do not have a public health purpose or mission).

EIPH Meeting Rooms

Board Room (room 145) ~~Clinical Services~~ Classroom (Room 186) ~~Community Health~~ Classroom (Room 155)
WIC Classroom (Room 223) Environmental Health Meeting Room (Room 107)

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EIPH Conference Rooms

Idaho Falls Conference Room EIPH Satellite Meeting Rooms

POLICY

1. EIPH staff should schedule meeting/conference rooms through the District's Outlook calendars. For training on how to schedule a room, please contact EIPH's IT staff.
2. Use of EIPH's conference rooms by an outside agency must be approved by a Division Director or EIPH Director and then scheduled through the district's Human Resource Specialist. With authorization, the conference rooms may be scheduled during regular business hours, evenings, and/or weekends. The Human Resource Specialist will then coordinate with the outside agency.
3. Fees for conference room rentals can be found on the district's website under the Fees tab (<http://www.eiph.idaho.gov/Fees/feesmain.html>). Then, click on the "Miscellaneous Fees" document.

*Fees may be waived by the Director in instances where the training/meeting being held in EIPH's conference/meetings by an outside agency is a benefit to EIPH employees.

4. No business or other public agency may use the district's other meeting rooms (Board Room, EH, ~~Clinical Services~~, ~~Community Health~~, WIC or satellite classrooms) outside of regular business hours (8:00 a.m. – 5:00 pm.)
5. Each division is responsible for their own classroom and conference room that they have granted the use of to an outside agency. This includes scheduling, set-up, and cleaning of the room. If assistance is needed with cleaning of a meeting room, a [Service Request Form \(Appendix J\)](#) should be completed and turned in to the Human Resource Specialist. EIPH will not provide custodial or IT assistance other than during normal working hours.
6. When any meeting room is scheduled to be used by an outside agency, the division submitting the request for approval must provide at least one district employee to be in attendance at all times and supervise the use of the room.

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Since district maintenance staff does not check the cleanliness of the meeting rooms on a daily basis, any individual or group using a meeting room should empty the garbage at the end of the meeting IF FOOD IS INVOLVED. This will prevent unwelcoming odors from being created in the room.

7. If a room set-up or any computer or audio visual equipment is needed in any of the meeting rooms, a [Conference Room Set-up Form \(Appendix H\)](#) should be completed and given directly to the Human Resource Specialist **at least one week in advance**. No computer or audio visual equipment set up or take down by the IT staff will be approved other than during regular working hours. Outside agencies will need to provide their own equipment after regular business hours.

The use of audio visual equipment in the conference rooms should involve a test of any devices and software prior to any scheduled activity. When guests use EIPH's facilities, district personnel filling the role of host will need to ensure that district property is used according to district policies.

PLEASE DO NOT ATTEMPT TO USE THE EQUIPMENT UNLESS YOU HAVE BEEN TRAINED.

8. EIPH **WILL NOT** provide copies, faxes, or catering of refreshments to outside agencies using conference or meeting rooms.
9. It is the policy of EIPH not to allow **any** outside organizations or agencies to use/rent or occupy any office space or clinic rooms during normal office hours or after hours except in the case of public health emergencies.

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CONFIDENTIALITY

EIPH personnel and client information will be regarded as confidential and will be available only to authorized users for approved purposes.

PERSONNEL CONFIDENTIALITY

Although some information about EIPH employees is a matter of public record, much of the information is not. The following is a breakdown of the type of information subject to disclosure and the circumstances under which such information may be disclosed. **All disclosures shall be coordinated through EIPH's Human Resources staff.**

Personal Information

The following information is of a personal nature and is **never** subject to dissemination to outside parties without authorization from the individual concerned:

- social security number
- date of birth
- home address
- home or cell phone number
- marital status
- spouse's name
- number of dependents
- any other information regarding the employee's personal life

Information Contained in an Employee's Personnel File

The contents of an employee's personnel file are the property of EIPH; therefore, any information dissemination from the file shall be on a strictly limited basis. Documents in the personnel file shall not be photocopied or disseminated without prior approval of EIPH Human Resources staff. Performance evaluations shall in no way be disseminated to outside agencies, public or private. "Outside agencies" **DO NOT** include the Division of Human Resources or State Controller's Office, where the official personnel records are maintained, nor does it include state agencies, since all state agencies are considered by law to be one employer.

Employment Verification

All requests for employment verification will be directed to the Human Resources office. Per Idaho [Code, 74-106](#), the following information can be disclosed of a current or former employee:

- Employment History
- Classification
- Pay Grade and Step
- Longevity
- Gross Salary and Salary History
- Status
- Workplace
- Employing Agency

All other information in an employee/applicant's personnel file is not available to the public without the written consent of the individual to whom the file pertains. All other personnel information relating to an employee includes, but is not limited to, information regarding: sex, race, marital status, birth date, home address, telephone number, applications, testing and scoring materials, grievances, correspondence, and performance evaluations.

CLIENT CONFIDENTIALITY

According to federal HIPAA regulations, confidential client information includes any information that directly or indirectly could lead to the identification of a person served by EIPH; any information that relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual.

Release of Information

All requests for release of confidential client information will be handled in accordance with HIPAA regulations. Court orders and subpoenas will be referred to the appropriate Division Director who will review the subpoena and take appropriate action to comply with the subpoena's instructions as well as notify EIPH's Director of such action.

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Protocol and Procedures

All EIPH employees, volunteers, interns and any others working on behalf of EIPH who may have access to EIPH offices will be provided with a copy of this policy and required to sign an acknowledgement of such which will be kept in the Human Resources office.

All client-specific records are strictly confidential and only personnel who have a “need to know” in the course of their job duties will have access to confidential records and information. All hardcopy client information is to be kept in a locked/secured area. File cabinets containing confidential information are to be locked when not in use. Confidential information should not be kept on removable electronic devices, such as a USB device.

Mail, Fax, and Telephone Protocol

Confidential information sent to EIPH by mail is to be addressed to a specific person, and marked “confidential” on the outside of the envelope. Only the person addressed on the envelope, or their representative with supervisory staff approval, will open the confidential mail.

All confidential information sent by fax must be addressed to a specific person and include a cover sheet stating that the information is confidential, and that disclosure, copying or distribution of the information by anyone other than the addressee is prohibited. Confidential information received at EIPH by fax is to be handled in a secure manner by placing the fax in an interoffice envelope and routing to the individual.

Confidential telephone discussions are to be completed with discretion, noting that conversations can be overheard by unintended audiences. Confidential information is never to be left on an answering machine. Confidential information relayed by cell phones or cordless phones is to be limited as much as possible, and avoided in public places.

Electronic Security

Information sent by e-mail is not secure. E-mail is not to be utilized to send confidential information unless it is encrypted.

All EIPH computers require a user name and password to access the network shared or mapped drives. Access to information stored on the network also requires system rights, which are set up by IT support staff.

Confidential information displayed on computer screens will be kept secure by viewing the information in a private area, using a screen saver, logging off, minimizing the program window, locking the workstation, or turning the monitor away when a person approaches the computer station. Refer to the Computer Use Access and Security policy for more details.

VIOLATIONS

Any violation of the EIPH confidentiality policy may result in disciplinary action, up to and including dismissal. Violations of federal HIPAA regulations can result in personal fines and imprisonment. Additionally, according to Idaho Code, it is a misdemeanor to willfully or maliciously disclose the content of any confidential public health record to a third party without the patient’s written authorization.

Examples of breaches of client confidentiality by EIPH employees could include, but are not limited to:

- Discussing client information in a public area.
- Leaving a copy of a client record in an unsecured or public area.
- Leaving a computer unattended in an accessible area with medical record unsecured.
- Looking up birthdates and/or address of family and friends.
- Reviewing a client record out of curiosity or concern for a client or reviewing a record of a public personality.
- Reviewing a record to use in a personal relationship.
- Using client information to compile a mailing list for personal use or to sell to others.

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CONTINUING EDUCATION

EIPH believes continuing education to be an important part of an employee's professional development.

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Training and travel requests must have prior approval by Division Director using the Travel/Education Request Form (included in this policy). Approval will be based on available funds. Training must relate to employee's job responsibilities.

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CUSTOMER SERVICE POLICY

Service to customers is of the highest priority to EIPH. As we continue to operate in an increasingly competitive environment, our ability to exist and provide services is closely tied to the quality of services. Initial training in the District's Customer Service Policy will occur by the Human Resources Specialist during at new employee orientation. Additional specific training will occur within the various departments and programs.

To ensure our customers receive the highest possible service quality, the following work priorities are to be observed.

- Customers will not be denied or receive delayed services because employees are busy with non-customer activities – **remember, our customers come first.**
- Customers arriving on time for a scheduled appointment are to be served first. Walk-in customers are to be given second priority as the schedule allows. Late arriving scheduled customers are to be treated as walk-in customers if their originally scheduled appointment time has already been given to another.
- Non-direct customer activities such as coding, typing, ordering and stocking supplies, preparing reports, preparing presentations, filing, etc. are an important part of the Health District workload and should be completed during regular business hours. These duties are to be completed as your work permits. In other words, customers will be served first and non-direct customer activities will be interrupted to provide prompt customer service. Non-direct customer services (billings, reports, etc.) are crucial and important to the successful operation of the District. It is important to plan ahead and manage time carefully to ensure all responsibilities are accomplished within established timelines.

COMMUNICATION EXPECTATIONS

In order to provide excellent customer service and promote positive interpersonal communications, the following expectations have been developed for communicating with others in person, by phone, or through e-mail. All EIPH employees are expected to follow these expectations. Failure to do so will result in a "Does Not Achieve" in the Customer Focus portion of the employee's performance evaluation.

In Person

- SMILE 😊
- Make eye contact and verbally acknowledge clients immediately upon their entrance into your work area. Suggested greetings include:
 - *"Hello. How may I help you?" or "Hello. I will be with you in just a moment."*
- If staff or clinics are running behind when a client arrives for an appointment, apologize for the delay and notify the client of approximately how long the wait is estimated to be, giving the client a choice up front to wait or reschedule. If clients have to wait for more than a few minutes or longer than expected, check in with them frequently.
- Be friendly and extend personal greetings to coworkers.

Telephone

- **Greeting:** When answering the telephone for outside calls (this includes main lines in the Idaho Falls office and all satellite offices, as well as all external calls to direct lines in the Idaho Falls office), all staff should use the following script. Please say it with a SMILE 😊:

Thank you for calling Eastern Idaho Public Health. This is (first name). How may I help you?

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EXCEPTIONS: The Environmental Health and WIC Divisions have modified greetings for the answering of their main phone lines.

- **Environmental Health:** *Thank you for calling Eastern Idaho Public Health's Environmental Health Division. This is (name). How may I help you?*
- **WIC:** *Thank you for calling Eastern Idaho Public Health's WIC program. This is (name). How may I help you?*

INTERNAL CALLS: For internal calls, you do not need to use this entire greeting, but you should identify yourself to the caller.

- **Transferring Calls:** Sometimes, calls are received from individuals who share details with the person initially answering the call, but who cannot assist them. When this happens and the call must be transferred to another employee, the person transferring the call should give the employee to whom the call is being transferred a brief explanation of the call prior to the transfer in order to prevent the caller from becoming frustrated by having to repeat his/her issue. To do this, tell the caller the name of the employee that his/her call will be transferred to and then press the "Transfer" button on the phone—**but do not hang up**. The call will ring at the other employee's desk. When he/she answers, provide him/her with the details of the call and then hang up. The caller will now be connected to the other employee, who should greet the caller by introducing himself/herself, summarize the issue and then provide assistance to the caller.
- **Voicemail:** All employees should record a personal greeting on his/her voice mailbox (if they have one). Employees can choose a generic greeting or can choose to record a daily message. At a minimum, the voicemail message should say something to the effect of:

Thank you for calling Eastern Idaho Public Health. You have reached the voice mail of (name). I am not available to take your call right now. Please leave your name, phone number, and a brief message and I will return your call within one business day.

However, if an employee is going to be away from the office for more than one business day, this should be shared in the voicemail message. The message should also include an alternate phone number the caller can use to get assistance from another health district employee if needed.

For example: *Thank you for calling Eastern Idaho Public Health. You have reached Jane Doe. I will be out the office until Tuesday, November 12. You are welcome to leave a message and I will return your call at that time. However, if you need immediate assistance, please dial *162 now and you will be transferred to Sally.*

- **Out of Office Phone Coverage:** For Idaho Falls staff, if you are out of the office for more than one business day, you can forward your phone to another staff member to be answered, but please get that person's permission before doing so. Instructions are available from IT for call forwarding upon request.
- **Returning Messages:** The expectation is that all voicemail messages be returned within one business day (unless you are out of the office and your message indicates this).

E-Mail

- **Response Time:** The expectation is that employees do their best to respond to e-mail messages within two business days.
- **Automatic Reply:** When an employee is going to be out of the office for more than one business day, the expectation is that the employee sets up a rule in Outlook that sends automatic replies to people who send e-mails during the employee's absence. Your automatic reply should give the e-mail sender an alternate e-mail or phone number to contact that can be used to get assistance from another health district employee if needed.

To set up an Automatic Reply, open Outlook, 1) click on the "File" tab, 2) then on "Automatic Replies." 3) Click on the option to "send automatic replies" and type your message in the box. Please note that you have the option of sending replies to e-mails from "Inside my Organization" and "Outside my Organization." Make sure you update the text for both responses. Click OK. *Make sure when you return from your leave, turn the automatic replies OFF.*

Written Correspondence

Written correspondence addressed to EIPH employees requires prompt attention and/or response. Typically, responses should occur as soon as possible, but no later than five business days. All written correspondence will be printed on EIPH's official letterhead.

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DISTRICT VEHICLES

EIPH maintains a fleet of vehicles for employees' business use. The vehicles are clearly identified with the district's logo, so employees are reminded to drive safely and responsibly in accordance with all State laws, while also being respectful of other drivers.

District vehicles are available in most offices and should be used rather than employees' personal vehicles whenever possible for both in-district and out-of-district travel. Employees will be required to provide the district's Human Resource Specialist with a copy of their current driver's license. Employees must carry liability insurance on their personal vehicle in the event it is used for business associated with EIPH. Acknowledgment of this coverage is obtained at hire and kept in the employee's personnel file. Employees who have their driver's license expire, suspended, or revoked are responsible to notify their immediate supervisor and will be prohibited from driving a district vehicle until driving privileges are reinstated.

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District vehicles are for OFFICIAL business use only. District vehicles may be used by employees and other persons (volunteers, students, interns, etc.) acting on behalf of the District, whether with or without compensation. Individuals not serving in an official capacity of EIPH may not operate or ride in an EIPH vehicle.

Satellite Offices

Staff in the satellite offices should check with the office's Customer Service Representative on how to check out a vehicle.

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IDAHO FALLS CAR POOL

In an effort to better manage the district's fleet of vehicles, a centralized car pool system has been implemented in the Idaho Falls office. This will allow EIPH management to more effectively monitor district vehicle usage and needs, as well as develop a more efficient vehicle replacement plan. The central car pool is located in the Receiving Area. This is where employees will check out and return vehicles, pick up vehicle books, and report any problems with vehicles.

Rules and Responsibilities of All Responsibility of Employees Using a District Vehicle:

1. When the use of a district vehicle is needed, the employee should "check out" a vehicle in the Receiving Area. Each vehicle will have its own sign-out sheet. Please complete the sign-out sheet prior to taking the vehicle. Please make sure all boxes are completed and that the writing is legible. Upon your return, note the return date and time on the sign-out sheet.
2. Use of vehicles is on a first-come, first-served basis. PLEASE DO NOT CHECK OUT A VEHICLE UNTIL YOU ARE READY TO LEAVE ON YOUR TRAVEL. If more than one person needs a vehicle at the same time, the individual traveling the farthest distance should use the district vehicle. If there is no district vehicle available for use, employees have the option of driving their personal vehicle. In this situation, employees will be reimbursed the full mileage rate. Please make note of this ("No District Vehicle Available") on your travel reimbursement form. If a specific vehicle is needed due to extenuating circumstances, there is a "Reservation Form" available that can be posted on the vehicle's clip board. Employees should make every effort to comply with the reservations.
3. When checking out a district car, employees should perform a routine inspection before they take the car. The inspection should note the following:
 - Any vehicle body damage
 - Condition of windows (cracked, etc.)
 - Tires (do they appear to have good treads, do they appear to have adequate air pressure)
 - Cleanliness of car (inside and out).

Deleted: If a vehicle is needed for out-of-town travel, or the four-wheel drive vehicle is needed due to weather conditions

In the front of the car binder is a list of "Previously Reported Damage and Vehicle Notes" form. If an item is already noted on this list, it is not necessary to report it again.

4. Seat belts must always be worn when operating or riding in an EIPH vehicle.
5. The use of cell phones while driving is prohibited. If you must make/receive a call, please pull off the road and stop in a safe location.
6. Idaho law prohibits texting while driving. EIPH employees will refrain from texting while driving a district vehicle.
7. Prior to returning the vehicle, if the gas tank is less than half full, fill the tank with gas. If a gas station does not accept the agency credit card, you can use a personal credit card or pay cash. Turn in the receipt with your travel reimbursement form in order to receive reimbursement. Write the car's license plate number on the receipt and sign it before turning it in.
8. Prior to returning the vehicle, employee is responsible to clean any spills, crumbs, etc.; remove all garbage from inside the vehicle; and make sure the vehicle is left clean. A package of wet wipes is available in each vehicle.
9. A monthly trip report sheet is included in each vehicle binder. This is to be completed by the driver following each trip.
10. Immediately upon your return, return the car book to the Receiving Area. DO NOT KEEP THE BOOK AT YOUR DESK OR LEAVE IT IN THE CAR. In the event an employee returns to the office after hours and does not have access to the building, the vehicle

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should be left in the parking lot with the keys and mileage book locked in the vehicle. It is the responsibility of the employee to return the keys and book to the Receiving area first thing the next morning.

11. Report any problems on a "District Vehicle Problem Report" form and place the form in the box located by the district vehicle book.

Note: *There is one unmarked district vehicle that can be used when anonymity is required (identified on the car list in the Receiving area).*

USE OF PRIVATELY OWNED VEHICLE

If an agency-owned vehicle is available to the traveler, but for personal convenience a privately owned conveyance is used, the reimbursement shall be limited to the District vehicle fleet average cost per mile for the prior fiscal year. This rate is noted on the Travel Reimbursement Form.

However, if there is already a district car going to a specific location and an employee chooses to drive a personal vehicle instead, the employee **will not** be reimbursed for mileage. In special circumstances, the EIPH Director may grant approval for mileage reimbursement in this case. If multiple employees take personal vehicles to the same location/event, one mileage reimbursement will be granted and shall be divided equally among the travelers.

VEHICLE MAINTENANCE AND REPAIRS

All employees are authorized to take a district vehicle to a car wash as needed. The individual making the purchase should sign the receipt, write license plate number on the invoice, and place it in the vehicle's binder.

The District's Maintenance and Custodial staff will oversee the maintenance schedules (regular oil change, tire rotation, etc.) of the district vehicles in the Idaho Falls office. If you experience any mechanical difficulties or other problems (cracked windshield, worn tires, worn wipers, unclean vehicle, etc.) with an agency vehicle, please complete a "District Vehicle Problem Report" form and give it to the Human Resource Specialist.

Satellite staff are responsible for coordinating vehicle maintenance and repairs. Minor car repairs and services like oil changes, car washes, windshield wiper replacement, and chip repairs can be completed by the employee. Each office will be notified (by the Fiscal Office, maintenance staff, or HR) when routine oil change or other preventive service is due. The individual making the purchase should sign the receipt/invoice, write license plate number on the invoice, and forward the receipt to the Fiscal Office.

Major car repairs over \$100 require pre-approval and a purchase order. Major is defined as any mechanical repair, tire replacement, glass replacement, body work, etc. Contact the Maintenance Foreman in writing, providing him with the nature of the problem, the estimated cost for repair, and the proposed service provider. Once the repair is approved, the Maintenance Foreman will initiate the purchasing process. Approval will be communicated back to the individual dealing with the auto service provider.

REPORTING OF MOTOR VEHICLE VIOLATIONS AND ACCIDENTS

If an employee is issued a motor vehicle violation/ticket **in a district vehicle**, the employee must complete an [Incident Report Form \(Appendix A\)](#) within one business day. Some examples include: speeding, failure to use turn signals, driving without wearing a seat belt, parking in handicapped space illegally, and driving with an invalid vehicle registration.

All accidents involving an employee in a district vehicle must be reported as soon as possible, but not later than the next business day following the accident. The employee must complete an [Incident Report Form \(Appendix A\)](#) and an Auto Accident Report Guide (located in the vehicle binder) and submit them to the Human Resource Specialist within one business day.

If the accident involves another vehicle, the employee should provide the other driver with a Citizen's Claim Procedure form (green sheet located in the vehicle binder) informing them how to file a claim should they wish to do so. Any liability complaint filed against an employee while performing within the scope of his or her employment shall be immediately directed to EIPH's Director.

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DRUG- AND ALCOHOL-FREE WORKPLACE

EIPH is committed to maintaining a working environment free from use of alcohol and illegal drug. Drug use and abuse (including alcohol) impacts morale, lowers productivity, and increases potential accidents and health care costs.

RESTRICTIONS

The unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance or alcohol is prohibited in the workplace, in EIPH vehicles, and while performing official business on behalf of EIPH. Consumption of alcoholic beverages or use of illegal drugs during work shift break times and lunch breaks is also prohibited.

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Legal use of prescribed medication is not subject to this policy. However, prescribed use of narcotics for pain, or following surgery, should be brought to the attention of the employee's immediate supervisor for safety reasons.

REPORTING

Appearing for work or performing any job duties or EIPH business while intoxicated or impaired by alcohol or drugs is prohibited. An employee who suspects a prohibited incident is taking place shall immediately report the matter to his or her supervisor, Division Director, or the EIPH Director. The matter should never be discussed with co-workers or persons not directly responsible for investigating the situation.

INVESTIGATION

EIPH shall investigate and take corrective action whenever there is a "reasonable suspicion" of the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance or alcohol. Based upon information used to determine "reasonable suspicion," EIPH's Director may authorize the inspection or search of an employee's clothing, purse, wallet, bag, desk, office, vehicle, or any other property located on EIPH premises. EIPH will clearly outline the place to be searched, the item searched for, and the rationale for any searching prior to conducting any inspections. Such search shall be conducted by at least two supervisors. Furthermore, the employee may be requested by EIPH's Director to undergo appropriate testing at a certified substance abuse testing facility. The employee may refuse testing; however, this refusal may result in disciplinary action, up to an including dismissal, in accordance with IDAPA rule 15.04.01.190.

An employee who pleads guilty to or is found guilty of any criminal drug violation or driving under the influence of alcohol or controlled substances, must notify his or her supervisor within five (5) days after the conviction. EIPH may be required to report such information to governmental agencies with whom it contracts.

DRUG AND ALCOHOL TESTING

Policy

EIPH may require any employee or job applicant to submit to a blood, breath, and/or urine test for drugs or alcohol, in the following circumstances:

1. Pre-employment: Pre-employment testing is required for all new hires, with job offers being contingent on the individual successfully passing the testing. Applicants who fail to pass a pre-employment drug or alcohol test will be ineligible for employment for a minimum of one (1) year.
2. Post Accident Testing: Employees involved in on-the-job accidents may be subject to testing. Based on the circumstances of the accident, the EIPH Director or his/her designee may initiate the testing process. An employee subject to post-accident testing shall not consume alcohol or controlled substances prior to testing. Exceptions will be made for prescribed maintenance medications and/or medications administered to treat an injury related to the accident.
3. Reasonable Suspicion: EIPH will require any employee to be tested for the presence of drugs or alcohol based on reasonable suspicion. Reasonable suspicion shall be defined as a reasonable suspicion, by a supervisor or above, concurred by the EIPH Director or his/her designee, that an employee is or has been impaired on the job. This determination of a reasonable suspicion may be based on a variety of factors, including but not limited to:
 - a. Direct observation or reliable reports from co-workers or others.
 - b. Possession of drugs or alcohol on the premises, or use of drugs or alcohol at work, prior to work, or on break.
 - c. Behavior, speech, or other physical signs consistent with impairment.

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- d. A pattern of abnormal conduct or erratic behavior which is not otherwise satisfactorily explained.
- e. Unexplained accidents, on the job injuries, or property damage.
- f. A combination of some of the above factors and/or other factors in the judgment of management.

Management’s determination of whether reasonable suspicion exists shall be final.

Process

1. **Scope:** Drug and alcohol testing of applicants or employees may include a urinalysis, breath analysis, and/or blood sample testing as determined by EIPH and the testing service provider/laboratory. Testing may include, but not be limited to, detecting the presence of alcohol, marijuana, cocaine, opiates, amphetamines, and phencyclidine (PCP). EIPH may increase or decrease the list of substances for which testing is conducted at any time, with or without notice. In addition, EIPH may require that separate samples of multiple tests are conducted. Test levels and standards will be established by EIPH and the testing service provider/laboratory. A positive result for alcohol at a level of .02 or greater will be considered in violation of this policy.
2. **Confirmation:** Initial positive tests shall be confirmed using a second test in accordance with applicable law.
3. **Specimen for Testing:** Job applicants and employees selected for testing shall appear at the designated time and place and provide the necessary sample for testing. If the test sample is drawn off-site, employees tested based on a suspicion that the employee may be impaired shall be transported to the site by a supervisor or another person designated by EIPH. The applicant and/or employee must sign any consent requested and provide any other information. Failure or refusal to do so may result in disciplinary action up to and including termination or denial of employment.
4. **Testing an Injured Employee:** An employee who is seriously injured and cannot provide a specimen at the time of the accident shall provide the necessary authorization to obtain hospital reports and other documents that may indicate whether there were any controlled substances or alcohol in his/her system.
5. **Notification of Results:** Employees and applicants will receive notification of positive test results and will be given an opportunity to explain such results. Failure to submit to a test in a timely manner may result in discipline up to and including termination.

REHABILITATION

1. **Purpose and Responsibility:** EIPH recognizes that drug dependency and alcoholism are health problems and will attempt to work with and assist an employee who becomes dependent on controlled substances and/or is abusing alcohol. Employees will be assisted in identifying rehabilitation services, referral agencies, or other resources to help the employee in dealing with his or her problem. It is the employee’s responsibility, however, to see that such problems do not interfere with proper job performance or expose others to the risk of harm. All employees are urged to obtain any necessary help before a personal problem becomes an employment problem.
2. **Evaluation and Treatment:** An employee may be required, in addition to discipline or as an alternative to discharge for violation of this policy, to undergo an evaluation for alcohol or chemical dependency should the employer so elect. This alternative may be offered on a case-by-case basis at the sole discretion of EIPH management. If recommended by an evaluation, enrollment in and successful completion of chemical dependency treatment may, at the sole discretion of EIPH management, be accepted once as an alternative to disciplinary action of an employee (not applicable to job applicants), and as a condition of continuing employment. Eligibility to return to work and any special conditions on the employee’s work shall be determined on a case-by-case basis considering all relevant circumstances, including EIPH’s interest in client safety and operational efficiency.

RECORDS

EIPH shall not release the individual test results of any employee or applicant to any person outside EIPH without first obtaining written authorization from the tested employee or applicants unless otherwise directed by law. Information will be released within EIPH only to those employees and agents who have a legitimate need to know the information for EIPH business purposes.

COSTS

Mandatory drug/alcohol testing costs shall be paid by EIPH. Treatment costs shall be the responsibility of the employee to the extent not covered by the employee’s health insurance.

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DOMESTIC VIOLENCE

This is Idaho Division of Human Resources Policy (IDHR) that is applicable to all State of Idaho executive branch agencies, including EIPH. To access the policy, click here: [SECTION 8 – DOMESTIC VIOLENCE](#).

General Information

EIPH does not tolerate domestic violence. Domestic violence is a major public health issue. EIPH's health care professionals as well as our other front-line staff may be the first individuals to which abused victims turn for help. It is important that all district staff members are aware of accurate information and resources to provide appropriate assistance. EIPH offers support and referrals for assistance to employees who are victims and disclose concerns or request help.

Disclosures

Disclosures may be made to EIPH supervisors, Administration, or HR staff. When an incident involves employees from more than one state agency, agency heads will ensure that appropriate responses to the situation are coordinated.

Confidentiality

EIPH recognizes and respects the employee's right to privacy. The employee's disclosure will remain confidential unless there is a threat to the safety of the individual or other employees in the workplace. Whenever possible, the employee will be given notice of necessary disclosures.

Resources

Referral information will be provided to employees, and may include:

- local and state resources for domestic violence victims;
- advocacy and legal services;
- medical and counseling services;
- building security or local law enforcement agencies; and
- Employee Assistance Program information.

In addition, employees are encouraged to visit the Idaho Council on Domestic Violence and Victim Assistance website at <http://www.icdv.idaho.gov/>

Safety

EIPH will work with the employee to develop an individualized workplace safety plan when necessary. The safety plan may include, but is not limited to, the following measures:

- screening telephone calls;
- setting an alternate work schedule;
- arranging an escort to and from parking areas;
- working with building security or other law enforcement to enforce restraining orders or orders of protection on EIPH property;
- relocating an employee's workplace to a more secure area; and
- saving any threatening emails or voice mails.

Time Off

Time off will be in compliance with Idaho Code, Division of Human Resources rules, and statewide and EIPH policies. An employee may be asked to present court orders before leave is granted. Leave may include, as applicable:

- accrued compensatory time
- sick or vacation leave
- FMLA leave
- unpaid leave

Court Orders

Employees are encouraged to disclose the existence of court orders for protection from abuse or harassment to their supervisor or HR staff. Under no circumstances will these orders be placed in an employee's personnel file. Any information regarding an employee's involvement in a domestic violence situation will be kept separately from the employee's personnel records, in a secure location.

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Any individual who applies for and obtains a protective or restraining order which lists EIPH locations as being protected areas must provide a copy of the order to the EIPH [Director](#).

Work Performance

When an employee has performance problems as a result of domestic violence, EIPH will offer support and an opportunity to correct the problems. Supervisors may develop a work plan with the employee to assist them in meeting performance expectations. Nothing in this guideline alters the authority of EIPH to establish performance expectations, counsel employees, impose discipline, reassign duties, place an employee on leave, or take other action as necessary.

In addition, any employee who uses any EIPH resources including, but not limited to, telephones, cell phones, pagers, facsimile machines, mail, electronic mail, vehicles, or credit cards, at any time or place to commit domestic violence will be subject to corrective or disciplinary action, up to and including termination.

Retaliation

There will be no retaliation resulting from an employee making a complaint, reporting an incident of domestic violence, or otherwise asserting rights or responsibilities under this policy or relevant laws.

EIPH Responsibility

In response to an employee's notification of a domestic violence situation, management will be responsible for coordinating discussions with legal counsel and building security or local law enforcement.

Responding to Reports of Domestic Violence from EIPH Clients

If a victim of domestic violence or sexual assault calls or walks into the Health District stating they have been assaulted, referral can be made to the following staff:

- Reproductive Health Clinical Staff
- Public Health Nursing Staff
- [Clinical Services Division Supervisors](#)

Deleted: Family and Community Health

District staff members are required to complete an [Abuse/Neglect/Policy/EMS Report Form \(Appendix G\)](#) outlining the details of the complaint and the resulting referrals and reports made. It is important that Division Directors be informed of and review such incidents.

Additional resources for Victims of Domestic Violence and/or Sexual Assault

- Local police (911)
- Family Violence and Sexual Assault Intervention Center:
 Crisis Line: (208) 235-2412 / Office (toll free): 1-866-322-4352 or (208) 529-4352
 1050 Memorial Drive, Idaho Falls, Idaho 83402
- National Domestic Violence Hotline: 1-800-799-7233 or 1-800-799-SAFE
- Sexual Assault Hotline: 1-800-656-4673
- Blackfoot - Bingham Crisis Center: (208) 785-1047
- Driggs – Family Safety Network: (208) 354-8057
- Rexburg - Family Crisis Center: (208) 356-0065
- Salmon – Mahoney House: (208) 756-3146

According to Idaho Code Title 16, Chapter 16 (Child Protective Act), known or suspected child abuse must be reported. For anyone under 18 years of age who is a victim of abuse, Child Protective Services must be called.

- Idaho Falls: (208) 528-5900
- Blackfoot: (208) 782-2600 or 1-855-552-5437 (24-hour hotline)
- Rexburg: (208) 359-4750
- Salmon/Challis: (208) 756-2985

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DUE PROCESS

In accordance with [IDAPA 15.04.01 – Rules of the Division of Human Resources and Idaho Personnel Commission](#), Rule 200, each agency must maintain written employee due process procedures. These procedures apply to classified employees only.

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Purpose

Classified employees who have attained permanent status (satisfactory completion of the probationary period) are entitled to due process before EIPH makes any decisions to dismiss, demote, suspend, or involuntarily transfer an employee. Due process requires EIPH to provide the employee with notice and an opportunity to be heard before such a decision is made.

Procedure

The following steps must be strictly adhered to before EIPH takes any disciplinary action listed in [IDAPA 15.04.01.190](#).

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Step 1: Notice

EIPH will provide notice to a permanent classified employee of the proposed disciplinary action, which will include the following information:

1. [Notice of the contemplated action](#), for example, dismissal. It may also set forth alternative forms of discipline, such as demotion or suspension.
2. [Notice of the basis for the contemplated action](#), which is the for-cause reason and corresponding legal citation which supports the action against a permanent classified employee. For-cause reasons are listed in IC 67-5309(m) and in DHR Rule 190.01.
3. [Explanation of the evidence](#) pertinent to the contemplated action. This could include an explanation of statements made by other employees, an explanation of documents, and/or an explanation of events leading to the notice.
4. [A time period within which the employee may respond to the notice](#). EIPH will set the time limit which will not exceed ten (10) working days after the employee has received notice, unless both EIPH and the employee agree otherwise in writing.

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The Notice of Contemplated Action (NOCA) will be sent or hand-delivered to the employee. EIPH will not maintain the NOCA in the employee's service record. It will be placed in a file reserved for such notices and not made public. The final decision information will be placed in the employee's personnel file.

Step 2: Opportunity to Respond

An employee who receives a Notice of Contemplated Action (NOCA) is entitled to an opportunity to respond in person or in writing. This is the employee's opportunity to present his or her reason(s) why the contemplated action should not be taken. The employee may accept the opportunity and respond within the stated time period, reject the opportunity by failing to respond within the time period, or waive the opportunity in writing. The law provides an employee with the right to be represented by a person of his or her choosing during the opportunity to respond.

Step 3: Director's Decision

The Director will notify the employee of the final decision no later than ten (10) working days after the employee has responded, failed to respond, or otherwise waived his or her right to respond. If a disciplinary action is imposed, the employee may have the right to appeal EIPH's decision to the Idaho Personnel Commission within thirty-five (35) calendar days. Information regarding appeals may be found in [DHR Rule 201](#). Any such appeal does not stay the action. The Director's final decision will be sent or hand-delivered to the employee and the Administrator of DHR concurrently. The Due Process procedure ends when the Director notifies the employee of EIPH's decision.

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ELECTRONIC CIGARETTES (combined with Nicotine-Free Policy)

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The American Cancer Society, American Heart Association, The Campaign for Tobacco-free Kids, and the American Lung Association strongly support smoke-free laws that prohibit the use of electronic cigarettes. Currently, electronic cigarettes are not approved by the Food and Drug Administration (FDA) as nicotine delivery devices. According to the FDA, electronic cigarettes have been classified in the same category as regular cigarettes. Electronic cigarettes emit secondhand vapor (not smoke) that can be seen and smelled, but it has not been studied, so claims of safety are premature. It is likely that electronic cigarettes emit nicotine, propylene glycol, carcinogens, and other substances. Nicotine deposits react with an element in the air to form potent carcinogens. People are then exposed to “thirdhand smoke” by inhalation, skin exposure, and ingestion. Not only do electronic cigarettes cause confusion when enforcing smoke-free policies, electronic cigarettes model “smoking” for youth. As a courtesy to our employees and customers, and in order to act as a role model for promoting a healthy lifestyle, electronic cigarettes are not permitted inside EIPH facilities, nor any place on EIPH grounds (owned or leased), in EIPH vehicles, or in any vehicles parked on EIPH property.¶
¶
As a reminder, signs prohibiting electronic cigarettes will be visibly posted. Enforcement of this policy is the shared responsibility of all EIPH personnel. The EIPH electronic cigarette policy applies to all employees, volunteers, clients, visitors, contractors, and vendors.¶
¶
Violation of this policy by any employee will result in corrective action. Depending on the circumstances, this action may include disciplinary action, up to and including termination of employment.¶

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ELECTRONIC RESOURCES USAGE

POLICY

The internet, e-mail, computers, printers, scanners, fax machines and the like are property of the health district. These are powerful research, communication, commerce, and time-saving tools that are provided for the use of EIPH employees to further the mission of the district through the conduct of official business. Perceptions and actions are important and EIPH employees must be constantly aware of how their actions are perceived by the public. Use of the district's electronic resources by employees should reflect the level of quality and professionalism expected by the district administration.

Only employees of EIPH or others serving in an official capacity on behalf of the district (students, interns, contractors, etc.) are authorized to access and use district property and resources to fulfill their duties and responsibilities associated with the district. Any device that is donated to the district is considered district property. Additionally, any information that is stored, created, produced, or otherwise communicated by anyone employed by the district is considered the intellectual property of the district and may be subject to state document retention and public records policies. Users should not have any expectation of privacy as to the use of EIPH electronic resources. EIPH has a right to access, monitor, audit, record, restrict, or disclose any information on any district device at any time and without notice.

New hardware or software purchases should follow the district's purchasing procedures. An impact analysis may need to be completed prior to completing any purchase.

EIPH property is not to be taken or used for personal use. Engaging in any activities with the intent and/or for the express purpose of personal gain during scheduled work-time hours is strictly prohibited. In addition, EIPH reserves the right to assign financial responsibility to any person or entity that damages equipment through negligence or conscience act with intent to do harm.

Violation of any part of this Electronic Resources Usage Policy, and any other State or Federal laws/policies may result in revocation of employee privileges, disciplinary action, or possible legal action. **Any exceptions to this policy must be obtained in writing from the EIPH Director.**

INTERNET, E-MAIL, AND NETWORK USE & ACCESS

1. Access to the Internet and e-mail offers a variety of benefits to EIPH; however, it can also expose the District and the State of Idaho, to significant risks to their data and system if appropriate security measures are not employed. Excessive, unnecessary Internet usage causes network and server congestion and reduces employee productivity. Unlawful Internet usage may also expose EIPH, the State of Idaho, and/or the individual user to legal liability. EIPH reserves the right and authority to dictate which Internet or network resources may or may not be available to personnel at any given time. Personnel who are authorized to use the Internet will be held accountable for any breaches of policy, security, or confidentiality resulting from their use of it.
2. Users should identify themselves properly when using the Internet and e-mail, conduct themselves professionally, as representatives of EIPH and Idaho State Government, and be aware that their activities reflect on the reputation and integrity of all state employees.
3. Users may access any web site owned or operated by the State of Idaho for the purpose of conducting business as authorized by the district, such as the online payroll system, providing they have the proper credentials to do so.
4. Users will be provided accesses to legitimate, reputable websites needed to perform their jobs. If a website is blocked but access is needed by an employee to perform their job, a request should be made through the employee's Division Director to the IT staff to unblock the site, which will be granted as long as the site is deemed safe.
5. Social media websites may be made available for use only for authorized personnel, and may only be used to access information that pertains to the district, its services, functions, and activities.
6. If for any reason, anyone using the district network encounters inappropriate content on any website, without actual intent of finding such content, they must immediately exit that site and report the incident to their immediate supervisor. If such material is viewed with actual intent, appropriate disciplinary action will be instated.
7. Any e-mail containing Protected Health Information (PHI) **MUST BE ENCRYPTED** prior to sending it in order to comply with federally mandated regulations. Refer to the EIPH's HIPAA policies for guidelines with identifying what constitutes PHI.
8. When staff is not able to use any district networks to access e-mail, EIPH currently does have a web portal to the e-mail system, and it is encouraged to use this portal on personal devices - mobile or otherwise. (<https://164.165.189.70/owa>)
9. Network storage (for example, H and P drives) is provided for any of the electronic archival needs of the district personnel, but only for district-related information. Employees are expected to store their electronic work at these locations. DO NOT save work on a computer's desktop or hard drive (C drive).

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Unacceptable Uses of Internet/E-mail/Network

1. Personal use of the Internet is prohibited and includes, but is not limited to: working for a third party, streaming media, social media sites, shopping, playing games, surfing the web, soliciting co-workers for personal gain, etc. *Note: Internet access to personal banking, educational, or child care resources may be allowed if deemed appropriate by the district administration. Exemptions for Internet resources will be approved by the EIPH Director after a genuine need has been identified. Any exemptions will be documented with their allowed time frames of access and applied scope of effect. Access to such sites by an employee must be done on personal time and must not interfere with EIPH business.*
2. Users may not:
 - a. Download, store, transmit, or display any kind of material on any district device that violates federal, state, or local laws and regulations, executive orders, or that violate any district adopted policies, procedures, standards, or guidelines.
 - b. Download or distribute pirated materials from any source.
 - c. View or distribute obscene, pornographic, profane, or sexually oriented material.
 - d. Violate laws, rules, and regulations prohibiting sexual harassment.
 - e. Encourage the use of controlled substances for criminal or illegal purposes.
 - f. Engage in any activities for personal gain.
 - g. Obtain or distribute copyrighted information without permission.
 - h. Obtain or distribute advertisements for commercial enterprises, including, but not limited to, goods, services, or property.
 - i. Violate or infringe upon the rights of others.
 - j. Conduct business unauthorized by the district.
 - k. Obtain or distribute incendiary statements which might incite violence or describe or promote the use of weapons.
 - l. Obtain or exchange proprietary information, trade secrets, or any other privileged, confidential, or sensitive information that is not authorized.
 - m. Engage in any political activity prohibited by law.
 - n. Use the system for any illegal purpose.
 - o. Knowingly or willfully create or propagate any malicious software or other destructive program code.
3. Any of an employee's personal files, including, but not limited to: music files, photos, videos, scholastic projects, extra-curricular activities, personal business materials, and the like, are not to be stored on the district computers, network, or other associated devices. Such files are subject to removal at the discretion of the IT Staff or EIPH Director without notice to the offending party.

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HARDWARE

1. Computers, laptops, tablets, printers, copy machines, fax machines, scanners, etc., are to be used for the general purposes of conducting official business of EIPH. Such equipment is not to be used for personal purposes of the employee, with the following exceptions:
 - A. Copy Machines: Employees are allowed to make personal copies (when less than 50 are needed) as long as the copies are paid for by the employee. Payment for personal copies should be made to the Human Resource Specialist in Idaho Falls or the Office Specialist in the satellite offices. The charges are calculated per printed face, i.e. per page. A sheet of paper has two faces: a front and a back. A page is defined as a printed face of a sheet of paper.
 - The price per page of black, printed material is \$0.05 each.
 - The price per page of color, printed material is \$0.10 each.
 - B. Fax Machines: Employees may use the fax machine for sending local personal faxes. Personal use should be kept to a minimum and should not interfere with District use.
2. Data storage devices must be authorized for use by an employee's supervisor and the IT department. At the district's discretion, other policies concerning the use of data storage devices may be applied.
3. The district may enforce policies that restrict any device's access to network resources unless specific security features are present and up-to-date.
4. As a need is identified, some employees may be issued equipment (cell phone, laptop, tablet, etc.) to assist them in performing their jobs. Before district-purchased equipment is issued to an employee, the employee will be required to sign an Equipment Use Agreement.
5. Personal mobile devices may be used to access the district e-mail system directly, but are subject to the district policy of being able to remotely wipe and/or otherwise control the device. This privilege may be revoked or modified by the district administration to affect the whole district, groups of individuals, or specific individuals.

Deleted: Personal long distance faxes are allowed with the use of a personal calling card.

Unacceptable Uses of Hardware

1. Personal devices or media for data storage of any type are prohibited for use with any district devices. The exception to this provision is that of personal media players which connect directly to audio speakers, and never connect to any other district devices in any other manner, especially by way of USB ports.

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2. All foreign devices are prohibited from connecting to any of the district devices, in particular, any network or computer owned or operated by EIPH. The exception to this provision is USB thumb drives or optical media, which guests may use to store presentations for use while at EIPH. This exception applies expressly to conference room presentations. Such devices should be scanned for any malicious software prior to use.
3. Personal devices capable of providing wireless network or internet access are prohibited from doing so for use with any district devices. Exceptions may present themselves in extenuating circumstances, and need to be communicated to IT staff as soon as possible.

SOFTWARE

EIPH provides employees with the Microsoft Office suite (Outlook, Word, Excel, Publisher, PowerPoint, Access) to enable them to conduct official business of the district. Program-specific software or web-based programs are made accessible to employees as deemed appropriate (Greenway/SuccessEHS, CDP, Paragon, WISPr, Care Ware, SDWIS, TRIM, etc.) The uses of such software/programs for purposes that are not related to the district are prohibited.

Unacceptable Uses of Software

1. External or third-party data storage systems are prohibited from use and include, but are not limited to: Google Drive, Dropbox, SkyDrive, and the like.
2. Entertainment/Recreational software of any type or genre is prohibited for use on any district device. In respect to personal devices, any such software may not otherwise be used during regular work time hours.
3. Any form of software of malicious intent or design is prohibited.
4. Any unauthorized software used with district devices is subject to forfeiture without compensation. Regardless if the software has been provided by an individual using personal funds, or not. Corrective or disciplinary actions may be instated as a result.

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EMERGENCIES

EMPLOYEE RESPONSE ROLES

EIPH has statutory obligations to preserve and protect the health of the public. A condition of employment is a willingness and to assist during public health emergencies as assigned and participation in preparedness training and exercises as requested.

Employee Responsibilities

All health district staff members have an emergency response role and may be expected to respond to threats of a public health emergency in accordance with the [EIPH's Public Health Preparedness Plan](#). This may include requirements to work longer shifts, nights, or weekends and to perform duties different than their daily routine. No one will be asked, expected, or allowed to perform duties for which they are not trained or qualified.

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Condition of Employment

- New employees (unless otherwise approved by the Division Director) are required to complete Incident Command System (ICS) 100 and 200 as well as National Incident Management System (NIMS) ICS 700 within 90 days of employment.
- In addition to completing the ICS training, new employees shall also meet with the District's trainer or designee and complete any other emergency training. This could include reading the Point of Dispensing (POD) and other manuals such as: "Your responsibilities in a Public Health Emergency."
- All staff will be required to participate in emergency response training and exercises as appropriate to sustain a satisfactory skill level in their emergency response roles and core competencies.
- Performance Appraisals: Response roles will be included in the "Key Responsibilities" section for all staff and commented on in the performance section.
- Emergency Contact Information: EIPH employees will keep their after-hours contact information updated with their Division Director. The Division Director will inform Human Resources of changes to employees' contact information.

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OFFICE RESPONSE PLAN

Everyone at EIPH must take appropriate and deliberate action when an emergency strikes the office. Careful planning, with an emphasis on safety, can help handle office crises and emergencies with suitable responses, and may save lives. Each EIPH office has an Office Response Plan in place that is specific to the office that outline procedures for:

- Reporting an Emergency
- Office Evacuation
- Fire Evacuation
- Active Shooter or Hostage
- Assistance Needed – “Dr. Armstrong”
- Medical Assistance Needed, Including Automatic External Defibrillator (AED)
- Responding to Criminal Activity
- Hazardous Materials
- Bomb Threat
- Suspicious Packages and Letters

In Idaho Falls, each Division Director will have a copy of the building’s Office Response Plan and will be responsible for ensuring their staff members are familiar with the plan. The plan is also available on the health district’s intranet. The clerical staff in each of the district’s satellite offices will be responsible for maintaining a copy of the plan and ensuring it is reviewed with the respective office staff on an annual basis. Periodically, training and drills will be conducted to ensure employees’ familiarity with the Office Response Plans.

[Click here to link to the plans.](#)

CLOSURES OF OFFICES

When a Health District office is closed or declared inaccessible because of severe weather, loss of utilities, or other disruptions, affected employees shall be authorized administrative leave with pay to cover their scheduled hours of work during the closure or inaccessibility. The decision to close or declare it inaccessible shall be the decision of the EIPH Director or designated representative.

If an employee is unable to report to work because of severe weather, road, or other related emergency conditions, and the work facility HAS NOT been declared closed or inaccessible by the EIPH Director, the employee shall be permitted to use accrued vacation leave to cover the period of absence from work. Notification of the employee’s supervisor is required.

When a severe storm occurs during the day, the EIPH Director or designated representative may authorize early release of employees. Such early release shall be treated as administrative leave with pay.

In the event of a power outage, the decision to close shall be the decision of the EIPH Director or designated representative.

If a Health District office is closed due to a power outage or other reason, the safety of staff and clients/public is our top priority. Therefore, the following procedures will be followed:

- A supervisory staff or designee should check his/her work area to make sure that all clients have been taken to a safe location where there is natural light available. Do not continue client services unless you can maintain confidentiality and safety. DO NOT TAKE A CLIENT OR ALLOW THE PUBLIC TO BE ANYWHERE IN THE BUILDING WHERE THERE IS NO LIGHTING.
- Each division is responsible to have areas where they keep a working flashlight(s).
- Put away money, checks, client files, and lock up files.
- It is not necessary to turn off your computers, just leave them alone.
- Limit phone usage to important calls only in order to prolong the phone system battery.
- If necessary and deemed safe, each division will have a person who will remain at the office to assist clients that may come to the office or call.

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EMPLOYEE COMMUTING

Generally, commuting is travel between an employee's home and a work location. Travel from home before the regular workday and return to home at the end of the workday is ordinary home-to-work travel and is a normal incident of employment. This is true whether an employee works at a fixed location or at different job sites. Normal travel from home to work is not work time. Costs of the transportation between home and workplace are not reimbursable.

Exceptions:

Employee is assigned on a temporary basis to report outside the area defined as his/her primary work area for full day of work.

1. Primary work area is defined as the area within a 20 mile circle around the location where the employee reports the most days of the week.
2. When an employee is assigned to work at a location outside of his/her 20-mile work area, he/she is authorized to report to the main work location to check out a district vehicle to use for transport to the temporary work location. The employee may also operate his/her own personal vehicle to complete the transportation to the temporary location according to the district's travel policy. Travel time and mileage will be based on map calculations from the office within the 20-mile work area that is closest to the temporary work location.

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EMPLOYEE CONDUCT

ORGANIZATIONAL VALUES

EIPH is a governmental agency established to serve the public. As public servants, it is important that we act with the utmost integrity and professionalism in all we do. Organizational values—enduring beliefs about the way things should be done and underlying principles that guide our decisions—are critical to our success as an agency. Collectively, we at EIPH agreed to embrace the following values—values we want to be known for as we work together to serve the residents of Eastern Idaho.

Honesty	Integrity	Dependability	Respect	Communication
Trust	Teamwork	Happiness	Accountability	Quality

EMPLOYEE CONDUCT/WORK ETHICS

At EIPH, our goal is excellence in public service for our customers and the public. Each of our employees is responsible for both the integrity and consequences of his/her own actions. Every employee is expected to follow the highest standards of honesty, integrity, and fairness when engaging in any activity concerning our agency. Employees are expected to be aware of standards of conduct and ensure they follow them, using good judgment at all times and in all situations. If employees have questions, they should ask their supervisor, Division Director, Human Resource Specialist, or EIPH Director.

EIPH's Board, Administration, and the public expects you to be accountable for the work accomplished, which is reported in honest coding of time and work performed. You are expected to be to work on time and do an honest eight (8) hours of work for your eight (8) hours of pay. You are expected to use sick, vacation, and compensatory time properly. Your personal appearance and office is expected to be kept neat and professional. You are expected to be organized so you can carry out the workload assigned you, which means you should plan your day's activities, set goals, and then prioritize the activities in order to accomplish those jobs and tasks assigned you. It is expected that any written reports be accurate, complete, neat, and understandable. It is not appropriate to have sloppy workmanship and do substandard work.

You should be up-to-date in your specific job knowledge. You are expected to be professional and knowledgeable. You are expected to study your job responsibilities, any applicable laws, rules, regulations, and/or other scientific information necessary to know and do your job as a professional. Your work performed is expected to be of the highest quality.

EIPH employees should be aware of and comply with the "Client Bill of Rights" policy included in this manual, which explains what clients and their families can expect from Health District employees.

PERSONAL CONDUCT

Dress and Personal Hygiene

Health District dress standards for employees are necessary to convey a professional image and inspire feelings of professional confidence in our customers. All employees are expected to present a neat, clean, and professional appearance. Personal cleanliness and appropriate, well-cared-for clothing is required. Employees are also expected to dress in a professional manner, in accordance with his/her job responsibilities. Supervisors have discretionary power and authority to send employees home if personal appearance and dress does not meet Health District standards.

If you have a question about whether or not your clothing is appropriate, check it out with your supervisor BEFORE you wear it to work.

- Lab coats or uniforms are to be worn by Clinical Services staff and Epidemiology staff when functioning in the capacity of clinical activities, e.g. physical assessments or evaluation, administration of medication/immunizations, collection of laboratory specimens or other performance of treatment or general nursing care.
- Closed-toed shoes are required for the following: clinics, septic inspections, food establishment inspections, sewage activities, and landfill inspections. In all other programs, dressier sandal-like shoes are allowed. Flip flops are not allowed at any time.
- Colored denim jeans may be worn. Each Friday is designated as "Casual Dress Day." On this day, clean denim blue jeans may be worn as long as they are worn with a designated District shirt. Low-rider, holey, and extreme styles of jeans will not be allowed.
- Shorts of any kind are not allowed. Capris that are at or near mid-calf length may be worn.
- Casual T-shirts and sweatshirts or those bearing advertising logos are not appropriate. Tank tops or camisoles of any kind worn alone are not allowed. Special t-shirts, such as immunizations, breast cancer awareness, or EIPH-program related t-shirts are appropriate on Fridays or other days designated by EIPH's Administration.
- Leggings are only allowed if worn with a top that is at least fingertip-length.

Deleted: Family and Community Health

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- Excessive piercing of the body that is visual to the public is not allowed. Body art that may be considered vulgar or offensive by clients or coworkers must be covered when working. Determination of excessive or offensive piercings or body art will be made on a case-by-case basis by the employee's supervisor and EIPH Director.
- Identification name tags provided by the District should be worn at all times. Name tags of staff working in the Idaho Falls office will also be a Prox key, allowing electronic access to the building. If a Prox key is lost, it should be reported immediately to the Human Resource Specialist for disabling of the Prox key. Employees who lose a Prox key will be charged the replacement cost of the key (currently \$5.00).

Work Area

The work areas of each employee should be properly maintained and provide a pleasant, orderly, and professional appearance. Any material considered offensive or discriminatory to other employees or the general public is prohibited. Employees must maintain a clean workspace which includes regular vacuuming and dusting.

Religious Expression

Employees may freely exercise their religious beliefs as long as doing so does not infringe on workplace efficiency and the requirements of the Civil Rights Act of 1964 as amended concerning nondiscrimination on the basis of religion. No employment decision shall be made on the basis of religion.

Employees should respect the individuality of each person, and although they may share their belief that religion is important in a person's life, they must refrain from attempting to influence the religious beliefs of clients, colleagues, coworkers, or subordinates while acting in any capacity as an employee of the district.

Solicitation

Employee and non-employee solicitations or the distribution of non-state sponsored or for-profit, non-public health/social service/community resource related material is prohibited. Posting of resources must be approved by the agency's Human Resource Specialist, Division Director, or EIPH Director. Such materials should also be shared with the agency's Leadership Team.

State-endorsed solicitations and corresponding time for meetings during working hours shall be limited to only those sponsored by the State of Idaho such as: Public Employee Retirement System, State-sponsored insurance programs, United Way campaigns, Red Cross blood drawings, etc. Any other type of solicitations which require employee time or use of facilities must receive prior approval from the EIPH Director.

Solicitation to other district employees for funds to purchase gifts for employee hospitalizations, weddings, etc., are discouraged and should only be requested on a very limited basis through the Human Resource Specialist, Division Director, or EIPH Director.

Family Members at Job Site

Friends and members of employees' family may occasionally visit; however, their stay should be brief and restricted to a minimum so as to prevent interference with the employee's work, and/or cause an adverse effect on other employees and/or the District.

Personal Use of District Resources

Employees shall not use the district facilities, equipment, materials, mail, supplies, and/or electronic communications systems for any personal use or outside employment purposes without the Director's approval. Exceptions to this include photocopies and faxes, the guidelines for which are outlined in the Electronic Resources Usage policy included in this handbook.

Employees or their agents or relatives shall not accept, lease, rent, sell, or purchase any district equipment or material.

Telephone Usage

Brief personal local calls may be made from the district's telephones. Personal long-distance calls, other than emergency calls, are allowed only when charged to personal credit cards or collect. An employee may make a personal emergency long distance call on the district's telephone if it truly is an emergency. If a person must make an emergency call, he/she must report the call to our fiscal staff as soon as possible.

Employees should comply with the following guidelines:

- Keep personal calls to a minimum during work time.
- Personal cell phone usage is prohibited when working with the public.

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CONFLICT OF INTEREST

The maintenance of a high standard of honesty, ethics, impartiality, and conduct by district employees is essential to ensure proper performance of district business and strengthen the faith and confidence of the people of Idaho in the integrity of government’s role in public health and of our employees.

Employees should not engage in conduct which might reasonably be interpreted by the people of Idaho as tending to influence or adversely affect the performance of their official duties.

Employees should not become involved in activities outside of their hours of employment, on either a paid or voluntary basis, which could represent either actual or a potential conflict of interest with their employment. Employees must use sound judgment in considering outside activities which would be or could be in conflict with their employment of mission of the District.

Disclosure Requirements

Any time a real or potential conflict exists between an employee’s public duty and his/her private interest, outside activities, or employment, the employee shall disclose it in writing to the EIPH Director at the earliest opportunity, but prior to acting upon the conflict or potential conflict. Failure to disclose a conflict or potential conflict of interest when an employee knows or could reasonably have known of such conflict may result in disciplinary action, up to and including dismissal.

Limitation of Political Activities

District employees shall follow [Idaho Code 67-5311](#) when engaging in any political activities.

Click here to link to the Idaho Code:

<https://legislature.idaho.gov/statutesrules/idstat/title67/t67ch53/sect67-5311/>

Private Interests

Any activity performed in the course of employment which might have the appearance of impropriety or preferential treatment of family or relatives, significant others, etc., is prohibited.

Employees shall not profit, directly or indirectly, from public funds under their control. Employees shall not have a private interest in any contract, grant, or other written agreement made by them in their official capacity.

Cohabitation and Romantic Relationships

Supervisor and employee relationship should remain professional.

Cohabitation of and/or relationships between employees and their supervisors and others holding a position of authority over them should be conducted in a manner that avoids potential conflicts of interest, exploitation, or personal bias. The district recognizes that it is not uncommon for married couples to be employed by the district; however they should take steps to manage or eliminate any potential conflicts.

Gratuities and Other Benefits

Employees may not accept compensation from outside sources for doing their district job.

In accordance with Idaho Code 18-1356, EIPH employees shall not accept personal gratuities or other personal benefits from any person who is subject to their legal jurisdiction or who is likely to become interested in any contract or transaction over which they exercise any discretionary function.

Personal honorariums shall not be accepted by District employees from Idaho citizens, associations, corporations, or governmental entities for appearances or services given in the course of their official duties.

Nepotism

No employee shall work under the immediate supervision of a supervisor who is a spouse, child, parent, brother, sister or the same relation by marriage.

Serving on Boards and Committees

Assignments to serve on committees and boards are subject to the approval of the supervisor and EIPH Director. No employee of the District may accept or serve in any policy-making position or office of an organization, board, or commission in which an opportunity for conflict of interest might arise between the activity and the District employment, except upon written approval of the EIPH Director.

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Volunteering

Employees are prohibited under the Fair Labor Standards Act (FLSA) from volunteering (without expectation of compensation) to perform for this or other state agencies the same type of services they are employed by EIPH.

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EMPLOYEE ILLNESS

DEFINITION

A communicable disease is a disease which may be transmitted from one person or an animal to another person either by direct contact or through an intermediate host, vector, inanimate object, or other means which may result in infection, illness, disability, or death.

POLICY

An employee who has a communicable disease, is exposed to a communicable disease, or who experiences signs or symptoms of illness can put themselves, co-workers, and clients at risk. EIPH wants employees to stay home when they are sick. It is the responsibility of the employee to be aware of their health and to be proactive to ensure the safety of those around them while at work.

Furthermore, should an employee contract a communicable disease, the employee may be assigned alternative work duties or be required to excuse himself/herself until he/she no longer poses a threat of spreading the disease to co-workers and clients. This determination may be made by the employee's healthcare provider, supervisor, EIPH's Employee Health Nurse (Primary: Amy Gamett; Back-up: Nikki Sayer), or EIPH's epidemiologist.

Symptoms

The following symptoms could indicate the presence of a communicable disease:

- fever of 100 degrees or more
- sore throat with white patches
- sore throat along with runny nose, fever, etc.
- vomiting
- sudden onset of diarrhea or diarrhea of more than 24 hours duration
- jaundice (yellow skin or eyes)
- productive or unexplained chronic cough
- cold/flu-like illness, including large lymph nodes, body aches, fever, sore throat, weakness
- undiagnosed rashes/skin eruptions

Presence of these symptoms may or may not require an employee to stay home from work. As an employee, if you are uncertain if you should come to work, you can consult with your healthcare provider or EIPH's Employee Health Nurse. If you begin experiencing these symptoms while at work, you may consider excusing yourself from work after consultation with your supervisor and/or the Employee Health Nurse.

PROCEDURE

Employee's Responsibility for Reporting Illness

In Idaho, there are over 70 communicable diseases identified in [IDAPA 16.02.10](#). As an EIPH employee, some of these diseases may impact an employee's ability to perform his/her work duties. ***If you are exposed to or potentially infected with any of the following diseases, it is your responsibility to report immediately to EIPH's epidemiologist.*** Confidentiality will be strictly maintained.

Amebiasis	Listeriosis	SARS
Campylobacteriosis (Campy)	Meningitis, viral or aseptic	Shigellosis
Cholera	Mumps	Smallpox
Cryptosporidiosis (Cryptosporidium)	Norovirus	Staphylococcus aureus, methicillin-resistant (MRSA)
E Coli 0157:H7	Pertussis (Whooping Cough)	Streptococcus pyogenes (group A Strep) invasive
Encephalitis viral or aseptic	Pneumocystis pneumonia	Trichinellosis (Trichinosis)
Foodborne illness/food poisoning	Poliomyelitis (Polio)	Tuberculosis
Giardiasis (Giardia)	Respiratory syncytial virus (RSV)	Tularemia
Haemophilus influenzae (H influenza)	Rheumatic Fever	Waterborne illness (with swimming, drinking water, watercress)
Hepatitis A	Rubella (German Measles)	Yersiniosis (all species)
Legionellosis/Legionnaire's diseases	Rubeola (Measles)	
Leprosy	Salmonellosis (Salmonella)	

The following diseases are not included in Idaho's Reportable Disease list, but must be reported to the epidemiologist:

- Influenza (A and B)
- Pneumonia (bacterial or viral)
- Varicella (Chicken Pox)

Epidemiological Evaluation

The employee who reports he/she is infected or potentially infected with a communicable disease (IDAPA 16.02.10) will have his/her work duties evaluated by EIPH's epidemiologist.

The goals for the epidemiological evaluation are:

- to provide confidential counseling to the affected employee and his/her significant other(s) as needed;
- to provide a safe work environment for the affected employee;
- to provide a safe work environment for clients and fellow employees;
- consistent with client safety considerations, to attempt to maintain the employee in his/her work place and position; and
- to make a recommendation to the employee's supervisor as to the appropriate functions the employee may continue to perform

Upon completion of an epidemiological evaluation, the affected employee will be notified in writing of the epidemiological recommendations, including possible work restrictions.

If work restrictions are recommended by the epidemiological evaluation, after seeking medical consultation (if needed) and administrative approval, the epidemiologist will consult with the employee's supervisor to assist with any job modification and/or monitoring of the work environment. If the affected individual is unable to perform his/her duties, alternatives will be discussed with the individual. Such alternatives may include, but are not limited to: changes in job duties or position; disability benefits; retirement benefits, if eligible; or release.

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EMPLOYEE IMMUNIZATIONS

The Advisory Committee on Immunization Practices (ACIP) and the Hospital Infection Control Practices Advisory Committee strongly recommend that all health care workers be vaccinated against (or have documented immunity to) vaccine-preventable diseases. Health care workers are at risk for exposure to and may possibly transmit vaccine-preventable diseases. Maintenance of immunity is an essential part of prevention and infection control for health care workers.

Upon Hire

- A new EIPH employee will have 10 working days to receive the recommendation vaccination and/or screening or provide proof of immunity.
- The Immunization Coordinator will meet with the employee to review his/her vaccine history and provide the employee with any vaccine recommendations.
- Employees will be required to sign a vaccination declination statement if he/she refuses immunizations.
- An employee's immunization record, titers, and/or declinations will be kept in an electronic medical record.

Mandatory Vaccines or Immunity

The following vaccines are required and free to the employee (insurance will be billed any and uncovered cost will be waived):

- Influenza (annually by October 31)
- Tdap
- MMR
- Varicella

At-Risk Employees Only:

- **Hepatitis A**
 - At risk employees: any EIPH employee with direct exposure to sewage or fecal matter
- **Hepatitis B**
 - At risk employees: any EIPH employee with direct exposure to blood as outlined in EIPH's Exposure Control Plan. Health care workers are required to document immunity to Hepatitis B by a HBs positive titer report (with a negative titer current follow-up guidelines and recommendations will be utilized).

Mandatory Screening

Mandatory screenings will be provided free to the employee.

Non-Mandatory Vaccines

EIPH endorses the ACIP recommendations for all other vaccines and will provide them to employees and their dependents with the administration fee free (insurance will be billed any and uncovered cost will be waived). It is the responsibility of the employee to bring their Explanation of Benefits (EOB) to the billing office to have uncovered administration charges waived. The cost of vaccine is the responsibility of the employee and they will be billed for any remaining amount that insurance does not cover.

TB Screening (PPD)

- All new employees will be tested with the two-step protocol, which consists of:
 - Day 1 - Place PPD: If there is a positive reaction at any time between 48 hours and 72 hours after placing the PPD, record (in mm) and do not repeat test.
 - Between Days 7-14: If there has been no reaction, or a reaction less than 10 mm, place another PPD test. Read second PPD 48 – 72 hours after placement and record in mm.
- If both tests are negative, subsequent yearly or every two year tests will be one-step only.
- Employees with routine direct client contact will be tested annually in October.
- Employees that do not have routine direct client contact will be tested every two years in October.
- If employee has a history of a positive PPD, a positive PPD test on either the first or second PPD test of a two-step procedure, or on any subsequent tests, refer employee to EIPH's TB Program Coordinator.

Deleted: (All EIPH healthcare workers* must have documentation of two vaccines or positive titers for all three antigens.)

Deleted: (All EIPH healthcare workers* must have documentation of two vaccines or documentation of disease by a healthcare provider or a positive titer.

Deleted: *For the purpose of this policy, EIPH's healthcare workers include:
All FAHCS employees . . . Dental Hygienists . . . Epidemiologists, including back-ups
Any employee who routinely works with children . All WIC staff

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EMPLOYEE USE OF HEALTH DISTRICT SERVICES

PURPOSE

EIPH provides valuable services to the public. District employees are allowed to utilize health district services as long as they meet the qualifications/requirements of the program just like any other individual or client.

This policy outlines the procedure employees must follow when seeking health district services to avoid any perceptions of preferential treatment and to ensure compliance with all local, state, and federal guidelines.

POLICY

Any District employee seeking services provided by our agency must have their initial paperwork/application reviewed and approved by the Division Director where services are requested. Review and approval will take place prior to or at the time of service.

For services within the Clinical Services, Community Health, and Nutrition Divisions (excluding the Immunization Program which has a separate process and policy), the following information will be reviewed for accuracy and to determine if the employee qualifies for the service:

- Income
- Family Size
- Age
- Insurance status

Employees are expected to pay for services rendered. Any non-immunization fee waivers will only be authorized by the Division Director.

IMPORTANT: No employee will review or approve a request for service or application of another employee, family member, or personal friend. Employee requests must be handled as outlined above. Requests for services, applications, and encounters of an employee's family member or friend should be referred to another staff member for processing.

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FAMILY & MEDICAL LEAVE ACT (FMLA)

This is Idaho Division of Human Resources Policy (IDHR) that is applicable to all State of Idaho executive branch agencies, including EIPH. To access the policy, click here: [Section 4: FAMILY & MEDICAL LEAVE ACT \(FMLA\)](#).

General Information

The Family and Medical Leave Act (FMLA) is a federal law which entitles eligible employees to unpaid, job protected leave, under qualifying circumstances, as follows: (1) for a qualifying health condition of the employee or a family member; (2) for the birth or adoption of a child; and (3) for specific purposes to family members of qualifying military service members. Employees may, at their discretion, elect to use accrued vacation leave, sick leave, and/or compensatory balances concurrently while on FMLA leave (as appropriate).

To qualify for FMLA leave, the employee must meet eligibility criteria, must submit a written request, and upon return to work must provide a medical release (as appropriate). The employee must provide 30 days advance notice when the leave is "foreseeable."

Each agency must notify employees of their rights under the FMLA. To meet this requirement, each agency must post in a prominent place in the workplace the [Family and Medical Leave Act Poster](#) (posted in the Employee Lounge in the Idaho Falls office). In addition, each agency must either: (1) include the information contained in the Family and Medical Leave Act Poster in its employee handbook; or (2) provide a copy of the information contained in the Family and Medical Leave Act Poster to each new hire.

This policy is not intended to be all-inclusive. The exceptions and unique situations regarding FMLA benefits are too numerous and complex to address in a single policy. EIPH employees should contact the Human Resource Specialist to discuss their situation, which will determine the appropriate FMLA form(s) that need to be completed.

IDHR FMLA Policy - Table of Contents

- General Information*
- Employee Eligibility*
- Quantity of and Allowable Purposes for FMLA Leave*
- Definition of "Serious Health Condition"*
- Use of Paid Leave*
- Types of FMLA Leave*
- Calculating Eligibility*
- FMLA and Worker's Compensation*
- FMLA Procedures*
- Benefits and Employee Rights*

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Deleted: In the event an employee does not request FMLA leave for time off work for a qualifying health condition, EIPH will designate the employee's absence as FMLA leave (as appropriate). ¶

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HUMAN RESOURCE RULES & POLICIES

RULES OF THE DIVISION OF HUMAN RESOURCES AND IDAHO PERSONNEL COMMISSION

The Rules of the Division of Human Resources and Idaho Personnel Commission are adopted pursuant to Section 67-5309, Idaho Code. The Division of Human Resources and Idaho Personnel Commission shall perform such duties and exercise such authority as has been or may be conferred upon them by law. The Division shall determine the policies of the Idaho Personnel System and make such rules as are necessary for the administration of the Personnel System. These rules shall be cited as IDAPA 15.04.01 and are accessible at https://dhr.idaho.gov/StatutesRulesPolicies/IDHRRules_Statutes.html.

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IDAPA 15.04.01.008 states, "These rules apply to Public Health Districts even though specific references are to state employees." Therefore, all district employees will conform and comply with these rules.

Examples of items addressed in the rules:

- **Basic Merit Requirements**
- **Discrimination Prohibited**
- **Conflict of Interest and Personal Conduct**
- **Nepotism**
- **Classification System**
- **Reduction in Force**
- **Probation**
- **Disciplinary Actions**
- **Appeal Procedures**
- **Performance Evaluations**
- **Leaves**

The following human resource policies are applicable to all State of Idaho executive branch agencies, which includes EIPH and can be found at <https://dhr.idaho.gov/StatutesRulesPolicies/Policies.html>. EIPH has adopted the State's HR policies; however, in some circumstances, EIPH has expanded the policy to be more specific to our agency. Refer to the individual policies included in this handbook for more information.

- Compensation
- Vacation Leave
- Sick Leave
- Family & Medical Leave Act (FMLA)
- Special Leaves
- Leave Donations
- Telecommuting
- Domestic Violence

ON-CALL TIME

On-call time will be granted to employees who are designated by their supervisor or the EIPH Director to be on-call according to specific criteria for full or partial on-call shifts. The rate at which time off with pay will accumulate is one hour of On Call Time Earned (OCE) will be earned for each weekday during which an individual is required to be on-call; for each weekend day or holiday, two hours OCE will be earned, up to a total of no more than 10 hours per week. Any time actually worked while in on-call status will be coded as actual time and will be added to the time earned for being in on-call status.

OVERTIME

The Division Director or EIPH Director will determine the necessity for overtime work. All overtime must be approved in advance. All overtime worked will be documented on the employee's time sheet and approved by the supervisor before being compensated in cash or by compensatory time off.

No employee will accrue more than forty (40) hours of compensatory time without the prior written approval of their supervisor and Division Director. Supervisors will be held accountable for managing these accruals. Division Directors, Administrators, and employees should work cooperatively to select dates to discharge accrued compensatory time which will least interfere with normal District services. Employee preference should be supported if possible.

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PERFORMANCE EVALUATIONS

Idaho law mandates that performance evaluations be completed at certain times during a person’s employment. In special circumstance probation evaluations (longer than 1,040 hours) may be extended for an additional time period as approved by the EIPH Director. A performance evaluation is to be completed at the conclusion of approximately 520 hours for full time employees or 3 months of service for part-time employees, informing employees of areas of his/her performance that may need improvement and then again prior to the completion of 1,040 hours (full-time employees) or 6 months of service (part-time). After attaining permanent status (the successful completion of 1,040 hours), a performance evaluation shall be done at least annually, or as often as deemed necessary by the immediate supervisor. Employees should have a current evaluation on file at the time of separation of employment.

A Health District performance evaluation form will be required to substantiate any advancement or change in an employee’s status or salary. The performance evaluation form must bear an overall rating factor of no less than “Achieves” performance standards in order to be awarded a merit increase. The evaluation form submitted previously may be used if it is no more than twelve (12) months old and is certified as being current by the Director.

PROFESSIONAL DUES

The District is not responsible for payment of professional dues. Employees may attend professional association meetings, but may be expected to pay applicable membership dues.

REPORTING CONCERNS

The Division of Human Resources follows the FLSA and all applicable federal and state laws and rules regarding employee compensation. Any employee who believes that a problem exists in regard to hours of work, whether a position is covered or exempt, or any issue related to hours of work and overtime compensation is encouraged to report the issue to their supervisor or Division Director as soon as possible. The Division Director will take prompt action to correct problems identified and communicate the action to the employee. No employee will be subject to retaliation for reporting a wage and hour concern.

TIME WORKED FOR MORE THAN ONE STATE DEPARTMENT

The state is considered a single employer for determining the number of hours worked. If an employee works for more than one state department, the employee’s combined service will be subject to applicable laws and DHR rules governing overtime.

WORKING “OFF THE CLOCK” PROHIBITED

Great care must be taken to ensure employees do not eat lunch at their desks and continue to work or be interrupted by work requests, phone calls, etc. If such work is expected or permitted by the supervisor, the entire lunch or break must be considered work time. Employees and their supervisors who permit or engage in working without reporting such time may be subject to discipline, up to and including dismissal.

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LEAVE DONATIONS

This is Idaho Division of Human Resources Policy (IDHR) that is applicable to all State of Idaho executive branch agencies, including EIPH. To access the policy, click here: [Section 6: LEAVE DONATIONS](#).

General Information

With appointing authority approval, state employees may donate accrued vacation leave to an eligible State employee for use as paid sick leave. [Ref. Idaho Code § 67-5334(g)] All donated leave must be given voluntarily. No employee shall be coerced, threatened, intimidated, or financially induced into donating vacation leave. Misuse of donated leave will be grounds for disciplinary action.

Receiving Donated Leave

To receive donated leave, an employee must:

- be eligible to accrue sick and vacation leave; and
- have exhausted all of their accrued compensatory time, sick, and vacation leave; and
- be suffering from a serious illness or disability, or have a family member with a serious illness, disability or death and funeral in the family necessitating the employee's absence from work. (Ref. [Statewide Policies Section 3D](#) for definition of family member); and
- not exceed the maximum of one-hundred and sixty (160) hours of donated leave per fiscal year.

EIPH employees who need to request leave donation should contact EIPH's Human Resource Specialist for assistance.

Donating Leave

To donate leave, an employee must:

- donate a minimum of four (4) hours;
- have at least a one normal pay period number of hours of accrued vacation after the donated leave is deducted; (example: if you are set up as 80 hours for a normal pay period, you would need to have 80 hours of accrued vacation; if you are set up as 105 hours for a normal pay period, you would need to have 105 hours of accrued vacation).
- Not exceed the maximum of eighty (80) hours accrued vacation leave per fiscal year.

Conversion Details

Donated vacation leave will be converted to sick leave on a one-hour to one-hour basis, and will be paid out at the receiving employee's current salary. Any unused leave that has been donated to an employee will remain in their sick leave accrual balance until used. Any unused leave cannot be returned to the employee who made the donation.

Fiscal Obligation

The organizational unit of the receiving employee will assume the financial responsibility for all donated leave used by the receiving employee.

Confidentiality

The names of employees' donating time will be kept private and in most cases, will not be provided to the employee who receives the donated leave. This confidentiality is intended to preclude any repercussions for employees who do not donate leave as well as for those who do donate.

The nature of the "serious illness or injury" causing the employee to request and receive donated leave will also be kept private; this information will not be shared with other employees who are being asked to donate leave without the express written permission of the employee requesting donating leave.

Leave Transfer/Receipt Form

Forms for Leave Transfer/Receipt are required. EIPH employees requesting a leave transfer should contact EIPH's Human Resource Specialist for assistance.

LIMITED ENGLISH PROFICIENCY

BACKGROUND

Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color or national origin by any entity that receives federal financial assistance. Under Title VI of the law, entities that receive federal financial assistance from Health and Human Services

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are required to take the steps necessary to ensure that individuals with limited English proficiency (LEP) can meaningfully access the programs and services. LEP persons are entitled to receive free interpreter services. Services to LEP persons are to be provided as effectively as those provided to persons proficient in English. LEP persons should not be subjected to unreasonable delays, nor should they be limited to participating in a program or activity on the basis of English proficiency.

POLICY

It is the policy of the EIPH to provide LEP persons with interpreters as needed. Client language needs are met through "on-staff" translators. A list of EIPH's "on-staff" translators is maintained on the District's intranet site. Whenever the need arises for a translator, EIPH's bilingual staff will be the first resource utilized by district personnel.

If EIPH employees are not available for interpretation services, utilize World Wide Interpreters by dialing **1-866-278-8643**. **State of Idaho/EIPDH PIN: 52200**. Press 1 for Spanish and press 2 for all other languages. World Wide Interpreters provides access to interpreters who speak more than 150 languages. Demographic studies indicate non-Spanish speaking LEP individuals constitute less than 1% of all individuals served by the EIPH.

Any employee who uses the World Wide Interpreters service is required to notify the Fiscal office of:

1. the date the service was used,
2. the language translated, and
3. the district program [\(PCA\)](#) using the translation service.

Printed Materials

EIPH's essential printed forms are also made available in Spanish for those clientele utilizing the District's services and programs.

PROCEDURES

Language Identification

On-site: A chart of various languages is located at the front desk of each office to enable LEP persons to point to their language.

1. If the client is able to read, identify the language using the chart.
2. If the client is unable to read and the language cannot be identified, use the World Wide Interpreters service to help identify the language. Once the language is identified, use in-house bilingual staff, if available, to assist with the client request.
3. If there is no bilingual staff for the identified language, a staff member will use the World Wide Interpreters service to determine needs and schedule an appointment for service if necessary.
4. Inform the client that arrangements will be made to have an interpreter present at no cost to him/her.
5. Schedule an appointment and secure an interpreter.

Telephone Calls

1. If an individual calls seeking services and he/she speaks little or no English or Spanish, the World Wide Interpreters service may be used to determine the client needs.
2. Determine the client's need, gather necessary information, and convey to the client what the next step will be.

Interpreter Services

- Whenever possible, prior scheduling will be made to use bilingual staff so that their other duties may be adequately covered.
- Bilingual staff will charge their time spent interpreting directly to the program for which they are providing the service.
- When a client is scheduled, it is the responsibility of the program providing the service to schedule an interpreter and provide the client a written reminder (in person or via mail) of the appointment.
- Whenever possible, trained interpreters will be used.
- If the client has a Medicaid card, non-staff interpretive services will be charged against the card.
- If a client refuses interpreter services or prefers to use family or friends to interpret, documentation must be made in the client record that interpreter services were offered at no cost to the client and they refused.

Translation

- When possible, EIPH will use trained translators. Since there is no professional organization and very few trained translators in the area, bilingual staff and trained interpreters may also be used to translate documents. Any EIPH employee who will be translating (verbal or written) must complete a training provided by EIPH before any translation occurs. A list of employees able to translate is available on EIPH's intranet.

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- EIPH will request that vital documents provided by the State or other sources also be provided in Spanish.
- Reputable Internet sites (CDC, etc.) are used for specific disease and health information in Spanish and other languages.

Filing a Complaint

Despite the best intentions of EIPH, if an individual believes she/he has been discriminated against, she/he should contact the EIPH's Director at (208) 522-3163, or the Idaho Human Rights Commission at (208) 334-2873.

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MEDIA RELATIONSHIPS

Media Relationships

The media is an important means of maintaining a strong public image related to EIPH's mission, role, programs, services, and staff. EIPH will respond professionally, accurately, and quickly to media requests.

Media requests will be coordinated by the Public Information Officer (PIO) or designee. In the absence of the PIO or back-up PIO, media requests will be directed to the appropriate Division Director.

In the event of a public health emergency, refer to the Annex B (Risk Communication) of the District's Public Health Preparedness Plan for media response protocol.

District employees have the right as private citizens to voice their opinions. It is important, however, for employees to point out to the media whether they are representing EIPH or they are simply sharing their personal opinions.

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PAYROLL

EIPH's payroll is processed through the Idaho State Controller's Office, and therefore is subject to state policies and procedures.

For payroll purposes, a workweek is defined as Sunday through Saturday. There is a lag time of two (2) weeks between submittal of timesheets and actual payment for those hours. Employees are paid every other Friday for services rendered in the previous pay period.

Direct deposit of an employee's pay is mandatory. Paychecks bear the date of the Friday pay date - checks are deposited into an employee's account at the financial institution of their choosing, in time to be available at the opening of business that day. The only exception to this rule is if the regular payday falls on a paid holiday, the paychecks will be deposited on the date of the preceding Thursday and be available to employees on that day. The state will not issue advance payment for wages for any reason.

Employees' Responsibility

- Each employee is responsible for entering his/her own time and corresponding coding into I-Time by the end of the day on the last day worked in the pay period (typically payday Friday), but in all cases, no later than 12:00 p.m. on the Monday following payday. If an employee is going to be out of the office at the time it is due, the time entry should be completed prior to leaving. Employees who do not submit a time sheet in the appropriate time frame will not receive a paycheck for that pay period. Their unpaid time will be added to the next payroll period.
- Supervisors and Division Directors will have until Tuesday at 12:00 p.m. to review and approval all employee time sheets. Prior to approving the time sheet, the supervisor will check for errors and return the time sheet to the employee for corrections. If an error is found, and the employee is unavailable to make corrections, a supervisor may change incorrect time codes or coding, but may not change an employee's actual time.

If a correction needs to be made to the actual time and the employee is not available, the supervisor should contact the Human Resources Specialist who will make the correction as appropriate. Written documentation of correction will be kept in Human Resources, with the employee signing the corrected time sheet as soon as they are available.

- The Human Resources Specialist (the Chief Payroll Officer or CPO) will review the time sheets and make appropriate corrections before submitting the final payroll at 11:00 a.m. on Wednesday.

On occasion, due to holidays or other extenuating circumstances, the above schedule may require adjustment. When this occurs, the Human Resource Specialist will be responsible for notifying all employees and supervisors of the revised payroll processing schedule.

Termination Pay

Per State of Idaho policy, terminating employees cannot receive early payoffs. An employee who terminates either voluntarily or involuntarily will receive normal wages for hours worked on the regularly scheduled pay dates. Any vacation balances will be paid off in a lump sum with the last pay check, along with any remaining comp time (for eligible employees).

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PROBLEM-SOLVING

In accordance with Division of Human Resources (DHR) Rule 200 (IDAPA 15.04.01.200), each agency must maintain written employee problem-solving process procedures. These procedures apply to classified employees only.

PURPOSE

Classified employees with permanent, provisional, or entrance probationary status are eligible to use a formal conflict resolution process called Problem Solving. This is a chain of command process that includes meeting with the immediate supervisor, filing for problem-solving, meeting with one or two additional levels of management, and receiving a final decision from EIPH's Director. The procedure is for any job-related matter EXCEPT the following:

1. Compensation, except as it applies to alleged inequities within a particular agency or department;
2. Termination during the entrance probationary period;
3. Items set forth in IC 67-5315(2) (dismissals, demotions, and suspensions); and
4. Involuntary transfers.

Employees and supervisors are strongly encouraged to engage in this informal problem solving meeting in order to identify the precise matter(s) at issues, discuss ways to resolve the matter(s), and hopefully resolve the matter(s) at the lowest possible level, consistent with the intent of the Problem-Solving Procedure.

Sexual Harassment and other Illegal Discrimination

Complaints alleging sexual harassment or other illegal discrimination based on race, color, sex, national origin, religion, age, or disability may be filed using the Problem-Solving procedure, but should be filed in accordance with the procedures outlined in the [Sexual Harassment and Other Prohibited Discrimination Practices](#) policy in this handbook.

Prohibitions

No employee shall be disciplined or otherwise prejudiced in his or her employment for exercising his or her rights under the problem solving procedure. No supervisor or any other official of EIPH may retaliate against an employee for:

- Filing under this problem solving procedure;
- Participating as a witness or an employee representative; or
- Assisting another employee in preparing a filing.

Representation

An employee has the right to be represented by anyone he or she chooses at each step of the procedure, except for the initial discussion with the immediate supervisor or during mediation. Employees are responsible for notifying representatives of the time and place for meetings. The schedule limitations of the employee's representative shall not unreasonably delay the process. The employee is responsible for compensating a representative and for paying the representative's expenses.

PROCEDURE

Step 1: Filing for Problem-Solving

Eligible employees are required to file for Problem-Solving in writing no later than ten (10) working days after being notified of, or becoming aware of the issue or problem, or when discussions with the immediate supervisor to resolve the issue have reached an impasse. A [Problem-Solving Request Form \(Appendix C\)](#) should be used to file for Problem Solving. If the filing alleges an ongoing pattern of harassment or illegal discrimination, the filing shall be considered timely if filed within then (10) working days after the last allegedly offensive action. The time limit for filing for problem-solving does not include days the employee is away from work due to illness or other approved leave. The ten (10) working day calculation does not include the day on which the problem occurred, but does include administrative leave. Problem-solving forms must be filed with the employee's immediate supervisor.

Step 2: Meeting with Division Director

The employee will meet with Division Director no later than five (5) working days after filing for problem-solving. The Division Director may consult with the employee's immediate supervisor to determine who may be best able to resolve the problem in this meeting with the employee. The Division Director will also take into account the employee's preference in deciding who should be present. Since the goal of this procedure is to resolve problems at the lowest level possible, this meeting may involve the immediate supervisor and any additional people who may be helpful in resolving the issue(s).

Step 3: Meeting with Human Resources

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The employee will meet Human Resources no later than five (5) working days after meeting with the Division Director. Human Resources will consult with other supervisors involved to determine who may be best able to resolve the problem in this meeting with the employee. Human Resources will also take into account the employee's preference in deciding who should be present. Since the goal of this procedure is to resolve problems at the lowest level possible, this meeting may involve the immediate supervisor and any additional people who may be helpful in resolving the issue(s).

Step 4: Final Decision from Director

EIPH's Director, or designee, may consult with the employee, immediate supervisor, Division Director, Human Resources and any others who participated in the problem-solving procedure in order to determine how best to resolve the issue(s). The employee will receive a final decision from the Director or designee no later than five (5) working days after meeting with Human Resources.

The problem-solving process ends with the decision of the Director or designee. Problem-solving decisions are not generally appealable to the Idaho Personnel Commission.

Waiver of Intermediate Steps and Time Period

The intermediate steps of the Problem-Solving procedure may be waived upon mutual agreement of the employee and the supervisor, Division Director, and/or Human Resources, depending on the issue. Internal time periods of the procedure may be extended when the employee, immediate supervisor, Division Director, Human Resources, or Director is not available due to illness or other approved leave, but in no case longer than ten (10) working days after that individual's return unless expressly agreed upon by both parties.

Time limits specified for requesting the next level of review cannot be extended except when the employee is absent from work due to illness or approved leave. If the next level of review is not requested within established time frames, or on the day the employee returns to work from an approved absence, the matter will be considered resolved or dropped.

Leave Issues

The employee and other staff involved, upon approval of their respective immediate supervisors, will be allowed regular work time to participate in problem-solving discussions.

Optional Mediation Step

Mediation is an optional method of dispute resolution. It may be requested at any time by the employee or by others involved in the problem-solving process. The employee and EIPH must both agree to mediation, and also agree to the mediator. Employee representatives are not allowed in the mediation process. Mediation will be scheduled within five (5) working days of the agreement, if possible, and all other time frames will be put on hold until the conclusion of the mediation process. If mediation is not successful, the employee must request to continue problem solving within five (5) days of the conclusion of the mediation or the matter is considered resolved.

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REASONABLE ACCOMMODATIONS

It is the policy of EIPH to provide reasonable accommodations for qualified individuals with disabilities who are employees or applicants for employment. EIPH will adhere to all applicable federal, state and local laws, regulations and guidelines with respect to providing reasonable accommodations as required affording equal employment opportunity to qualified individuals with disabilities. Reasonable accommodations shall be provided in a timely and cost-effective manner.

Employees are responsible to inform their Supervisor, Division Director, Human Resource Specialist, or EIPH Director that they need an accommodation. Whether the employee's request is communicated verbally or in writing, the [Request for Reasonable Accommodation Form \(Appendix D\)](#) should be used to document the request and to initiate dialogue about it.

The determination of "qualified individual with a disability" is a case-by-case process, depending on the circumstances of the particular employment situation. When a qualified individual with a disability requests an accommodation, the employee's supervisor, Division Director, Human Resources Specialist, and EIPH Director will meet and determine what accommodations can reasonable be provided that is effective for that individual.

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RECORDS DISCLOSURE (Idaho Public Records Law)

PUBLIC RECORDS

EIPH employees will comply with Idaho statute, Title 74, Chapter 1 dealing with Public Records and the right of citizens to examine our records. Specifically employees will comply with sections 74-103 on timeliness of information request replies.

"Public record" includes, but is not limited to, any writing containing information relating to the conduct or administration of the public's business prepared, owned, used or retained by any state agency, independent public body corporate and politic or local agency regardless of physical form or characteristics.

RECORD REQUESTS

Every person has a right to examine and take a copy of any public record of EIPH and there is a presumption that all public records in Idaho are open at all reasonable times for inspection except as otherwise expressly provided by statute.

Any employee who receives Public Records Request will accept the request from the requesting individual and forward it immediately to the Division Director (Custodian) who will determine the course of action to be taken in compliance with applicable laws. In cases where the Division Director is not available, the request can be given to a Division Supervisor or the EIPH Director.

An employee shall make no inquiry of any person who applies for a public record, except to verify the identity of a person requesting a record in accordance with section 74-102, Idaho Code, to ensure that the requested record or information will not be used for purposes of a mailing or telephone list prohibited by section 74-120, Idaho Code, or as otherwise provided by law. The person may be required to make a written request and provide their name, e-mail address, a mailing address and telephone number.

CLIENT RECORDS

Confidentiality of services and records maintained for clients of the District are protected by [Idaho Code](#). (Examples: 9-203; 37-2743; 37-3102; 39-606; 39-1392.e; 39-3801; 56-348). In addition, programs augmented by federal funds have specific rules and regulations to ensure patient confidentiality that must be observed.

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PUBLIC RECORDS GUIDELINES

Records maintained by EIPH are related to public Health operations in Public Health District Seven defined under Idaho Code Title 39, Chapter 4. The records custodians are the Division Directors, or if they are not available, EIPH's Director. Records are primarily stored in the main office at 1250 Hollipark Drive, Idaho Falls, ID 83401. Other offices in our eight county coverage area may store some records however all public records requests must be originated through the main office.

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RETENTION AND DISPOSAL OF RECORDS

Retention

- The District's various Divisions have division-specific retention schedules that will be followed and updated as needed.
- All records should be reviewed to assure that disposition is carried out in accordance with District retention schedule.
- Confidential records shall be safeguarded against unauthorized use and exposure during storage and use.
- One person in each department shall be responsible for management of records.
- Any financial records in the Satellite offices that are not sent to Idaho Falls must be retained until an audit has been performed and finalized on that fiscal year.

Destruction of Records

- Division Directors shall give final approval prior to the destruction of records.
- Confidential records shall be destroyed by methods that shall safeguard records against unauthorized use and exposure during their destruction.

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SERVICE ANIMALS

PURPOSE

EIPH provides reasonable accommodations and auxiliary aids to ensure that clients and staff members with disabilities have access to EIPH and its programs.

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POLICY

The American's with Disabilities Act (ADA) defines a service animal as "any guide dog, signal dog, or other animal individually trained to provide assistance to an individual with a disability." The ADA authorizes places of public accommodation to impose restrictions if it is a safety requirement. **Therapy or Companion Animals are not permitted in EIPH's facilities.**

The ADA contains no blanket policy mandating the places of public accommodation permitting service animals under all circumstances. With regard to the health department, there may be possible restrictions of service animals in clinical practices or laboratories that can pose a safety risk. These exceptions would need to be considered individually to determine whether the service animal poses a possible danger, and if other reasonable accommodations can be provided.

It is the handler's responsibility to ensure the safety of the animal, the individual, and other people participating. While legal access rights are afforded to users of assistance animals, with that comes the responsibility of ensuring that the animal behaves and responds appropriately at all times in public and that the partner/handler, as a team, are to adhere to the same socially acceptable standards as any individual in the community.

DEFINITIONS

- **Therapy or Companion Animal** – An animal who provides a sense of wellbeing, comfort, affection and/or motivation. They are not trained and not afforded the legal protections of service animals. These animals are not trained to assist an individual with a disability in the activities of daily living and are not specifically covered by this policy or under the Americans with Disabilities Act or Section 504 of the Rehabilitation Act.
- **Service Animal** – Any animal individually trained to do work or perform tasks for the benefit of an individual with a disability. The ADA defines a service animal as any guide dog, signal dog, or other animal individually trained to provide assistance to an individual with a disability. If they meet this definition, animals are considered service animals under the ADA regardless of whether they have been licensed or certified by a state or local government. Service animals perform some of the functions and tasks that the individual with a disability cannot perform for him or herself. "Seeing eye dogs" are one type of service animal, used by some individuals who are blind. This is the type of service animal with which most people are familiar. But there are service animals that assist persons with other kinds of disabilities in their day-to-day activities. Some examples are:
 - Alerting persons with hearing impairments to sounds.
 - Pulling wheelchairs or carrying and picking up things for persons with mobility impairments.
 - Assisting persons with mobility impairments with balance.

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PROCEDURES

Documentation Requirement

A client/staff with a disability may be required to provide EIPH with documentation from the client/staff member's service provider (e.g. Specialist, Psychologists, or Medical) that verifies the need for a service animal. A staff member with a disability shall provide the Human Resources office with documentation for the staff member's appropriate service provider. This documentation need not disclose the details of the disability, nor provide a detailed medical history, if the sole purpose for the request is for use of a service animal.

The client or staff member is responsible for maintaining the following:

- **Service animal health:** The animal must be up to date on all required vaccinations and evidence of such shall be provided by the client/staff member if requested. The animal shall be well groomed including appropriate flea and odor control.
- **Service animal licensing:** All service animals must wear tags appropriate to the municipality in which the client/staff member holds a permanent address.
- **Training requirement:** Written confirmation may be requested to demonstrate that the animal has been trained to work or perform tasks for the benefit of a person with a disability.

Responsibilities

The individual with a disability, the handler, is responsible for the care and supervision of his or her service animal and must maintain full control of the animal at all times. This may include controlling the animals grooming, feeding, and toilet behavior within appropriate and healthy guidelines. Service animals are trained to remain in close proximity to their handler and not to display disruptive behaviors or noises (barking, growling, or whining) and should remain on a harness or leash at all times. The handler is financially responsible for property damage caused by his or her service animal.

SERVICE ANIMALS FREQUENTLY ASKED QUESTIONS

What is a service animal?

No matter whether they are called "Service Animals," "Assistance Animals," or by another name, these are animals that have been individually trained to do work or perform tasks for the benefit of an individual with a disability. Under the ADA it is the training that distinguishes a service animal from other animals.

Starting March 15, 2011, only dogs will be considered service animals under the ADA. Business and state and local government entities may also allow miniature horses as a reasonable modification, subject to certain limitations.

What is the difference between a service animal and a comfort/emotional/therapy support animal?

Service animals are individually trained to do work or perform tasks for an individual with a disability who, if asked, must be able to describe the specific tasks performed or work done. The work done or tasks performed by a service animal must be directly related to the handler's disability.

Some service animals may be owned by individuals who have a non-apparent disability, such as a seizure disorder. Their disability may not be visible.

A "comfort," "emotional support," or "therapy animal" that provides support simply by being itself does not meet the definition of service animal. If the animal is not individually trained to do work or perform a task, it is a pet under the ADA. Obedience training, by itself, is not a sufficient qualification.

Regardless of the term used to describe the animal, it is the training to do work or perform a specific task that makes it a service animal. Thus someone might mistakenly call their dog a "comfort animal" but if it actually functions as a service dog, it is protected under the ADA.

Does the animal need to have any certification or documentation, or wear a vest or tag, to identify it as a service animal?

No, there is no ADA requirement that the owner carry any certification papers showing that the animal is a service animal.

If the service animal doesn't need to have a special tag, certification papers, or other identification, how can we determine if it is a legitimate service animal?

There are two questions that may be asked:

1. Is the animal required because of a disability?
2. What task or service has this animal been trained to do?

One *cannot* ask: What *is* your disability? This is confidential information.

Even if the service animal will not perform its task or service on the premises, it is entitled to enter.

When can a service animal owner be asked to remove their animal from the premises?

A service animal's professional behavior and good grooming are necessary for it to be protected under the ADA. An individual may be asked to remove his or her service animal if it:

- Makes a mess on the floor
- Bites or jumps on another client/staff member
- Wanders around, away from its owner

A service animal may be removed if it continuously disturbs patrons; for example, if it is repeatedly barking. However, it should first be made clear that the service animal is not just doing its job. Barking may be how the dog performs its job. Find out first!

A service animal may also be excluded from certain areas of a building, though access to the building itself should be allowed.

Example: A service animal should be allowed access to a trendy downtown restaurant, but shouldn't be allowed into a kitchen.

Do service animals have to obey leash laws?

Yes, service animals must obey local leash laws. The exceptions are when the service animal cannot perform its task while on leash, or if the handler cannot use a leash, harness, or tether due to disability.

In any case, the service animal must be under control at all times; if not by leash, then by voice control, signals, or other effective means.

ETIQUETTE FOR INTERACTING WITH PEOPLE USING SERVICE ANIMALS

- Speak to the person, not the animal.
- Do not touch the service animal without asking for, and receiving, permission.
- Do not offer food to the service animal.
- Do not ask questions about the handler's disability, or otherwise intrude on his or her privacy.
- Do not be offended if the owner does not wish to chat about the service animal.

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SERVICE REQUEST POLICY

PURPOSE

In order to more efficiently and effectively coordinate all requests for service, EIPH has implemented a centralized service request procedure for use by employees. This will ensure that requests for service are routed to the appropriate individual for follow-up.

POLICY

- When any type of service (building/office maintenance, vehicle maintenance or repair, computer/phone issue, etc.) is needed by an employee, a [Service Request Form \(Appendix H\)](#) should be completed.
- The form is available on the district's intranet or from the Human Resource Specialist in the Idaho Falls office.
- Completed forms should be submitted to the Human Resource Specialist.
- Completed forms will be routed to the appropriate party for follow-up.

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SEXUAL HARASSMENT AND OTHER PROHIBITED DISCRIMINATION PRACTICES

General Information/Affirmative Action

EIPH is committed to providing a safe and congenial work environment for its employees. The definition of work environment shall include anywhere that employees are performing work duties such as the office, any work site, or travel time to and from a work site. Sexual harassment or discrimination of an employee based on race, sex, national origin, age, color, religion, or disability is forbidden in any manner. These types of behaviors are destructive in nature and will not be tolerated.

Any form of sexual harassment or other illegal or discriminatory practice of any employee is strictly prohibited by law and by this policy. Employees are expected to refrain from conduct that may be reasonably considered offensive to others. Offensive conduct may be written or verbal. Offensive conduct includes, but is not limited to, the use of profanity, sexual comments or images, racial slurs, gender specific comments, or any comments that would reasonable offend someone on the basis of his or her age, race, religious beliefs, national origin, or disability. All employees are expected to treat their co-workers with courtesy, respect and dignity. No employee shall use the authority of their position or the circumstances of work place to sexually harass others.

Any employee, supervisor, or Director who is made aware of an alleged incident shall bring the matter to proper resolution by taking action in accordance with the procedures in this policy. Retaliating or discriminating against an employee for complaining about sexual harassment or other illegal discrimination is prohibited.

Filing, Investigation and Resolution

Employees who believe they are being subjected to illegal, prohibited sexual harassment or any other forms of discrimination based on race, color, sex, national origin, age, religion, or disability are encouraged to file a complaint with their immediate supervisor, Division Director, or the District's Human Resource Specialist. If they so desire, they may file a claim of illegal sexual harassment directly with Idaho Human Rights Commission and/or the Equal Employment Opportunity Commission (EEOC).

Any employee aware of or suspecting the occurrence of sexual harassment is expected to report the matter through the most confidential and direct means possible to preserve morale and discipline in the work unit. The employee will not discuss the matter with co-workers and persons not directly responsible for investigating the matter.

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SICK LEAVE

This is Idaho Division of Human Resources Policy (IDHR) that is applicable to all State of Idaho executive branch agencies, including EIPH. To access the policy, click here: [Section 3: SICK LEAVE](#).

Employees shall earn sick leave and be eligible to take sick leave in accordance with Idaho Code § [67-5333](#), [59-1603](#), [59-1605](#), and [IDHR Rule 240 \(IDAPA 15.04.01.240\)](#). Sick leave is for illness and should not be abused.

ELIGIBILITY

Employees must meet the criteria to qualify as eligible for benefits in order to accrue sick leave. Some employees are ineligible for sick leave, such as:

- Employees who regularly work less than 20 hours per week; or
- Employees who are in non-pay status (i.e. on unpaid leave of absence); or
- Temporary employees who are hired to work less than five months, regardless of number of hours worked per week.

An employee who is originally not expected to work five months but who does so is entitled to receive sick leave benefits retroactively in accordance with the above accrual rates.

ACCRUAL

Sick leave shall accrue at the rate of .04615 hours per hour worked or paid (with the exception of paid compensatory leave). To calculate your sick leave accrual in any one pay period, take the number of hours paid to you (excluding compensatory time taken) and multiply it by 0.04615. For example, an employee who works 80 hours (ACT) in a pay period earns 3.7 hours of sick leave (calculated by multiplying 80 by 0.04615).

Employees earn sick leave while on paid leave except with compensatory time off. Sick leave accrues without limit.

USE OF SICK LEAVE

When possible, employees are expected to plan time away from work by notifying their supervisor in advance prior to the absence. For example, when scheduling a routine doctor's appointment or planned surgery an employee's supervisor should be consulted. Employees must use some type of paid leave for these circumstances (i.e. sick, vacation, or compensatory time).

Sick leave may only be used in cases of the employee's actual illness or disability or other health reasons necessitating the employee's absence from work or Employee Assistance Program (EAP) appointments. In addition, an employee may also use sick leave when needed to attend to a family member's medical appointments, serious illness, disability, or death and funeral in the family. Eligibility to use sick leave includes self, spouse, child, foster child, parent, brother, sister, grandparent, grandchild, or the same relation by marriage or legal guardian. ([IDAPA 15.04.01.240.03](#)).

If you are ill, you must notify your supervisor as soon as you can. You are also required to notify your supervisor each additional day of illness thereafter. If your term of illness is three (3) days or more, a written statement may be required from your doctor explaining the nature of the illness and when you will be able to return to work. Returning to work too early from a communicable disease or serious injury may jeopardize the health of our clients or yourself.

In the event an employee becomes ill while on vacation leave, it is the employee's responsibility to notify their supervisor as soon as possible and periodically thereafter so the supervisor will know when the employee will return to work.

Limitations on Sick Leave Use.

- Employees may not use sick leave for time off due to adoption or foster care placement unless the child has a medical condition requiring care.
- Sick leave cannot be used in lieu of vacation leave. If an employee exhausts accrued sick leave, the employee must use other accrued leave balances prior to the employee receiving leave without pay (unless the employee is on approved Family and Medical Leave or absent due to a work-related illness or injury).
- Sick leave cannot be taken in the same pay period in which it is earned.
- Sick leave may not be utilized if it will result in pay in excess of the employee's normally scheduled workweek. For example, if a full-time employee calls in sick on Monday, then works 9 hours per day on Tuesday through Friday, that employee's timesheet would reflect:

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	SUN	MON	TUE	WED	THUR	FRI	SAT	TOTAL
ACT			9	9	9	9		36
SIC		4						4
								40

Use Parameters for Executive Employees Only. Employees designated as Executive shall not use accrued sick leave in less than half day increments. For example, if an Executive employee works for 6 hours, and takes the remainder of that day off due to a qualifying illness, no accrued sick leave is used. Conversely, if an Executive employee works for 2 hours, and takes the remainder of the day off due to a qualifying illness, then 6 hours of accrued sick leave is used.

Managing Sick Leave. Patterns or excessive absences can negatively impact individual performance and EIPH's services. Therefore, a supervisor who suspects an employee is abusing sick leave may ~~(IDAPA 15.04.01.240.07):~~

- Require the employee to provide a doctor's note justifying the absence; or
- Investigate an employee's suspected sick leave abuse and address any misuse or abuse as necessary.

Any employee who is on approved sick leave and is found to be working at another job, or is otherwise misusing sick leave, shall be subject to disciplinary action up to and including dismissal.

Inability to Return from Medical Leave

Employees off work due to their own or a family member's illness or injury are required to keep EIPH informed as to their health status and intent to return. During that time period, sick leave or other accrued leaves may be used.

Required Physician Notes. During the employee's medical leave, EIPH may require updated physicians' statements regarding the employee's expected date of return to work.

Employee Unable to Return to Work. If an employee is unable to return to his regular work duties (with or without accommodation) after twelve (12) weeks or after exhausting accrued sick leave, whichever is longer, the employee will be medically laid off. ~~(IDAPA 15.04.01.240.02).~~ Employees may not use leave without pay or time spent in a light or alternate duty position, to extend the medical layoff date.

Effect of Transfers on Accrued Sick Leave

Accrued sick leave transfers with employees when they transfer from one State agency to another.

Effect of Separation on Accrued Sick Leave

When employees leave State service, all accrued and unused sick leave will be forfeited, except as provided in Idaho Code § 67-5333 (i.e., separation due to retirement).

Reinstatement of Sick Leave. If an employee returns to credited state service within three (3) years of separation, all sick leave forfeited at time of separation will be reinstated. [Ref. [Idaho Code § 67-5333\(1c\)](#)]

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SOCIAL MEDIA

EIPH recognizes the growing importance of technologically based platforms and online social media networks as communication tools. Examples are: Facebook, Twitter, Snapchat, Instagram, You Tube, Tumblr, Pinterest, LinkedIn, Google+, online group discussions, message boards, chat rooms, etc.

Employment-Related Use of Social Media

Some employees must access, review, create, publish, and/or disseminate information via social media outlets—primarily Facebook and Twitter—as a function of their jobs. Employees with such work-related requirements shall:

- Be granted authority for their specified access by their supervisor and the EIPH Director.
- Refrain from using an employee’s personal social media account (i.e., an employee’s personal Facebook page) when conducting official District business, unless otherwise authorized by EIPH’s director or PIO.
- Comply with all electronic and social media policies set forth. Failure to do so could result in loss of privileges and/or disciplinary action.

Social Media Guidelines

- All online communication must be consistent with EIPH’s agency values, mission, and policies.
- All online communication must be in accordance with all state and federal laws, including HIPAA and other privacy laws.
- All online communication must NOT contain EIPH confidential information or information that is obscene, defamatory, profane, libelous, threatening, harassing, abusive, hateful, or humiliating to another person or entity.
- Practice common sense and use your best judgment. Always keep in mind that anything you post that can potentially tarnish the reputation of our agency will ultimately be your responsibility. Think before you act.
- Once information is out there, there is NO taking it back. Even if you delete it, it is still there. Be conscientious about what you post.
- When communicating online about EIPH, disclose your relationship with EIPH.
- Be clear in all communication that your views are your own and not those of EIPH.
- If you see any negative content about EIPH, our programs, our employees, or online activity that could create problems for the agency, please report to the EIPH Director or PIO immediately (even during the weekend or a holiday) so corrective action, if determined necessary, may be taken.
- Employees are encouraged to post and share information from EIPH’s official FB page or website.
- Engage in factual and respectful dialogue when answering questions about EIPH, our programs, or public health issues.

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What NOT to do:

- Do not answer questions on social media that are out of your scope of work or expertise. Please refer to our website or talk to the EIPH director or PIO about a response.
- Other than your personal sites, do not **initiate** posts about EIPH without first speaking to the EIPH Director or PIO.
- Do not take it upon yourself to correct the problem or engage in negative, back and forth communication. Report any issues to the EIPH Director or PIO.
- Engage in personal social media use on health district time, even if you are using personal equipment (e.g. cell phone, tablet, laptop, etc.).
- Represent yourself as a spokesperson for the health district or post comments as a representative of the health district.
- Post information which could place the health district at a legal compliance risk.
- Discuss or display information which is confidential or proprietary to the health district, its clients, partners or suppliers.
- Discuss or display information that violates HIPAA.
- Post information or photos that show employee violating state and federal laws.
- Disseminate personal information (address, email, phone number) of clients and/or co-workers.
- Use their EIPH e-mail address when signing up for social media sites.
- If your job is direct patient care, it is strongly suggested that you be wary of accepting or initiating friend requests with clients except in unusual circumstances where an in person friendship pre-dates the treatment relationship. If you do interact with patients online, always maintain the appropriate boundaries of the patient-provider relationship in accordance with professional ethical guidelines.

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Personal Use of Social Media

EIPH takes no position on an employee’s decision to participate in the use of social media networks for personal purposes. However, employees who elect to identify themselves on their profile as health district employees must state in clear and conspicuous terms that the views expressed are the employee’s alone and do not reflect the views of EIPH when posting or responding to any public health-related topic.

Social Media Logo

EIPH has developed a specific logo (shown at right) for use on social media. This logo is NOT to be used for any other purposes without written permission of EIPH Director or PIO.

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SPECIAL LEAVES

This is Idaho Division of Human Resources Policy (IDHR) that is applicable to all State of Idaho executive branch agencies, including EIPH. To access the policy, click here: [Section 5: SPECIAL LEAVES](#).

In addition to sick and vacation leave benefits, other miscellaneous leave benefits may be available to employees.

LEAVE OF ABSENCE WITHOUT PAY (LWOP)

A leave without pay may be one day, or a fraction thereof, or an extended absence during which an employee is not paid. This policy includes applicable restrictions to use of LWOP.

Use and Approval of LWOP. All LWOP must be approved by a Division Director. In addition, any LWOP in excess of one week must be approved by EIPH's director. Unless prohibited by workers compensation, family medical leave, disability, or other statewide leave policies, EIPH's director has discretion on whether the employee is required to exhaust all other applicable types of accrued leave before commencing leave without pay.

LWOP and Worker's Compensation Absences. Division Director and/or EIPH Director approval are not required for employees absent from work due to a work-related illness or injury to be unpaid. The decision to use accrued sick and/or vacation balances in this situation is the employee's.

Credited State Service Hours. Employees on LWOP do not earn credited state service hours.

LWOP and Medical Insurance Coverage. Contact the Department of Administration, Group Insurance for further information

MILITARY LEAVE - (FEDERAL ACTIVE DUTY)

Employees who are members of the U.S. Armed Forces or the National Guard that receive federal military orders requiring them to be absent from work, shall be entitled each calendar year to one hundred twenty (120) hours of paid military leave (MLT). Military leave with pay will be authorized when the employee submits a copy of their federal orders from the appropriate military jurisdiction, which sets forth the dates of required military service. Each period of absence must be supported by orders or other documentation on file in the employee's military unit headquarters.

Any probationary, provisional, or permanent employee who voluntarily, or upon demand, leaves a position to enter upon prolonged federal active duty with the military will be returned to their same or similar position upon their return from such leave. A copy of the orders is required to take military leave, and a copy of the discharge papers is required upon returning from said leave.

Amount of Leave. Such employees, regardless of whether they work full-time or part-time, are entitled to one hundred twenty (120) hours of military leave with pay in one (1) calendar year.

Use of other accrued leave. During federal military deployment, the employee will be in a state employment status of 'Inactive With Pay'. Therefore, the employee may elect to use Vacation (VAC) and/or Compensatory Time (CPT) during the deployment period. The employee must provide a written request to their supervisor prior to the use of such time.

Benefits for Employees. Employees who are members of the U.S. Armed Forces or the National Guard who are called to federal active duty will receive regular employee benefits for thirty (30) calendar days after departure. The agency will pay for the State's portion of the health insurance premiums during those thirty (30) calendar days; the employees will be responsible for their portion. Employees called for federal active duty shall, upon their return to state employment, receive credited state service hours for their regularly-scheduled hours that they missed while on federal active duty.

Flexible Leave. Employees in reserve programs often have an option on dates for annual training exercises. Appointing Authority may request the employee to select dates which will least interfere with the agency's objectives. If the employee has a choice, it shall be the employee's responsibility to discuss it with his/her supervisor and the military unit and to accept such dates.

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MILITARY LEAVE - (STATE ACTIVE DUTY)

Any probationary, provisional, or permanent employee who voluntarily, or upon demand, leaves a position to enter state active duty with the Military Division will be granted military leave without pay, and will be returned to their same or similar position upon their return such leave. A copy of the orders is required to take military leave, and a copy of the discharge papers is required upon returning from said leave.

Inability to Use Accrued Leave. State employees that are called to state active duty will remain in a state employment status of 'Active'. No earnings will be reported for the employee during the deployment period. (Only time worked as state active duty will be coded via Idaho Military Division). Because the employee continues to be an active State of Idaho employee during the state active duty and the State of Idaho is the employer, the employee is not eligible to use any paid leave from the original employing agency during the state active duty deployment period.

Accrual of Credited State Service. Employees on state active duty will accrue credited state service for time worked with the Military Division.

ORGAN AND BONE MARROW DONATION LEAVE

Employees are not required to take sick leave when donating an organ or bone marrow. Employees may take a maximum of thirty (30) working days of paid leave if they are donating a body organ, and a maximum of five (5) working days of paid leave if they are donating bone marrow. (Ref. I-Time code "DNO")

To receive "DNO" leave, employees must provide a physician's note indicating whether the leave is for bone marrow or organ donation and the expected duration of the leave. (Ref. Idaho Code § [67-5343](#)) Supervisors are responsible for monitoring the total number of days of DNO leave taken by their respective employees.

ADMINISTRATIVE LEAVE WITH PAY

EIPH may grant administrative leave with pay under the following conditions:

1. When the employee is being investigated;
2. When the employee is in the due process procedure of a disciplinary action;
3. When EIPH's director or designee declare a facility closed or inaccessible because of severe weather, civil disturbances, loss of utilities, or other disruptions;
4. When EIPH's director deems it necessary due to an unusual situation, emergency, or critical incident that could jeopardize agency operations, the safety of others, or could create a liability situation for the agency; or
5. When approved in advance by the Governor.

COURT AND JURY SERVICES

Employees are permitted and encouraged to participate in the court process.

Connected with Official State Duty. When an employee is subpoenaed or required to appear as a witness in any judicial or administrative proceeding in any capacity connected with official state duty, he or she shall not be considered absent from duty. The employee shall not be entitled to receive compensation from the court. Expenses (mileage, lodging, meals, and miscellaneous expenses) incurred by the employee shall be reimbursed by his or her respective department in accordance with department travel regulations.

Private Proceedings. When an employee is required to appear as a witness or a party in any proceeding not connected with official state duty, the employee shall be permitted to attend. The employee may use accrued leave or leave without pay.

Jury Service. When an employee is summoned by proper judicial authority to serve on a jury, he or she shall be granted a leave of absence with pay (JUR) for the time which otherwise the employee would have worked. The employee shall be entitled to keep fees and mileage reimbursement paid by the court in addition to salary. Expenses in connection with this duty are not subject to reimbursement by the state.

MISCELLANEOUS LEAVE

An employee attending non-job related training, performing civic duties, or other similar activities can use earned leave time to cover the period of absence from work.

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Leave for Job Interviews: Internal. Time spent interviewing for other positions within the employee's Agency is considered time worked. Time spent traveling to and from interview appointments within their Agency is not considered time worked unless approved by the Appointing Authority.

Leave for Job Interviews: External. Time spent interviewing for positions outside the employee's Agency is not considered time worked and the employee is required to use appropriate accrued leave or leave without pay to cover the period of absence from work.

ELECTION LEAVE

Appointing authorities shall make reasonable accommodations to an employee's need for leave to vote. Such leave shall be charged to the employee's accrued vacation leave or compensatory time off.

RELIGIOUS LEAVE

Appointing authorities shall make reasonable accommodations to an employee's need for leave for religious observances. Such leave shall be charged to the employee's accrued vacation leave or compensatory time off.

RED CROSS DISASTER SERVICES LEAVE

Employees who have been certified by the American Red Cross as disaster service volunteers shall be granted up to one hundred twenty (120) hours of paid leave in any twelve month period to participate in relief services pursuant to Section 67-5338, Idaho Code. Such relief services must be in Idaho or a state bordering Idaho.

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TELECOMMUTING

This is Idaho Division of Human Resources Policy (IDHR) that is applicable to all State of Idaho executive branch agencies, including EIPH. To access the policy, click here: [Section 7: TELECOMMUTING](#).

Telecommuting is a work arrangement in which an employee is directed or permitted to perform their usual job duties away from the office. EIPH does not routinely allow telecommuting nor have guidelines been adopted for this practice at the present time.

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NICOTINE-FREE ENVIRONMENT

EIPH is a Nicotine-Free Workplace.

The health hazards of nicotine use, including being subjected to secondary passive smoke, are well recognized. As a courtesy to our employees and customers, and in order to act as a role model for promoting a healthy lifestyle, use of any nicotine-containing product (cigarettes, cigars, chewing tobacco, electronic nicotine delivery devices) is not permitted inside EIPH facilities, nor any place on EIPH grounds, in EIPH vehicles.

As a reminder, "Tobacco-Free Zone" signs are visibly posted. Enforcement of this policy is the shared responsibility of all EIPH personnel. EIPH's nicotine-free policy applies to all employees, volunteers, clients, visitors, contractors, and vendors.

Violation of this policy by any employee will result in corrective action. Depending on the circumstances, this action may include disciplinary action, up to and including termination of employment.

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TORT CLAIMS, SUMMONS, OR COMPLAINTS

Accepting a Claim

The law requires all claims be filed **only** with the EIPH Director in his/her capacity as Secretary to the District Board of Health. Should any claim, summons, or legal complaint be presented to any of the staff, it is to be **refused** and the person referred to the Director immediately. If the Director is unavailable, EIPH's Human Resource Specialist is the only one authorized to accept a claim on his/her behalf.

Time Frame for Filing a Claim

Section 6-906, *Idaho Code*, requires that you file a notice with the Health District involved, **within 180 days** from the day of the accident or damages. A **Notice of Claim Form (Appendix E)** must be used when filing a claim. The claim is to be filed with the EIPH Director in his/her capacity as Secretary of the District Board of Health. Copies of estimates, bids, or other information which an individual feels may be useful in the processing of a claim may be attached to the Notice of Claim Form.

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TRAVEL

EIPH has adopted the State's travel policies, which are governed by the State Board of Examiners; see their policy #442-50 (last amended 10.1.18) for more information at <http://www.sco.idaho.gov/web/sbe/sbweb.nsf/pages/trvpolicy.htm>

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1. Approval and Authorization
2. Office Travel Status, Payment Methods, Forms, Documentation
3. Mode and Route of Travel
4. Duration of Travel Status
5. Lodging
6. Per Diem Allowance
7. Incidental Expenses
8. Travel Premiums
9. Third Party Funded Travel
10. Other Items
11. Definitions
12. Idaho Code References to Travel

The following are policy additions or modifications to the State Travel Policy that have been adopted by EIPH's Board of Health.

Declared Emergencies

Should there be a Federal, State or County declared emergency and should there be a need for public health involvement, this travel policy or parts of this travel policy may be modified depending on action taken by EIPH's Board of Health.

Travel Authorization

Out-of-District travel **that requires an overnight stay** must be authorized in writing **by the Division Director**. In the event the Division Director is unavailable to authorize the travel, he/she can designate an individual to authorize the travel. An electronic Travel Requisition **must be completed prior** to expenses being incurred.

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Travel Vouchers

All travel expenses (mileage, meals, etc.) for reimbursement should be recorded electronically on the District's **Travel Expense Form (Appendix F)** along with the purchase order number approving out-of-district travel. The Travel Expense Form should be submitted to the employee's supervisor for approval and processing for payment as soon as possible following the travel, but in all situations, within two months of travel completion. Failure to comply with this expectation could result in disciplinary action.

When submitting travel vouchers for mileage reimbursement, **do not** record fractions of miles. Round mileage up to the nearest mile when .5 and over, and down when less than .5. Mileage is figured from employee's home office and until return to that home office.

Travel reimbursement vouchers must be turned in as soon as possible, but in all instances, within one month of the travel.

Compensatory Time for Travel

Compensatory time is allowed for travel outside of normal working hours of the employee. Travel time is defined as: from the time the employee leaves their home station (office) until they arrive at their destination (hotel), and from the time an employee leaves their destination (hotel) until they arrive back at their home station.

Meals While Traveling

There is no reimbursement for meals while traveling unless an overnight stay is involved or when the traveler is physically away from their official primary work station (location where the employee regularly performs his or her duties) by a distance of 200 miles or more. Actual cost of each meal need not be broken down on the travel expense voucher for each full day of an authorized trip.

Meal Expense Allowed

The Board of EIPH hereby allows home station meal reimbursement to be made when attendance is required for employees as part of their job duties to promote trade or commerce. An example is an assignment made by a Division Director or EIPH Director to attend a luncheon meeting such as the Chamber of Commerce which would promote commerce between the district and other business organizations.

Meals for Off-Site Extended Clinic Operations

EIPH's Board of Health has also approved the following policy for Meals for Offsite Extended Clinic Operations. All of the following criteria must be met:

1. The clinic is offsite and preplanned with approval of the EIPH Director.
2. Location or scheduling conflicts do not lend themselves to a meal break.
3. The District's mission is furthered by specialty clinic activities that would not normally occur on a daily basis.
4. The clinic has an intended duration of 6 hours or more and interrupts a meal time.
5. There is not adequate staff available to operate a continuous clinic with direct public contact and allow staff to leave for a meal break.
6. The per-attendee cost of the meal does not exceed the allowable partial day per diem reimbursement, pursuant to Appendix B of State Travel Policy.
7. Food and drink must be provided on-site.

Meetings Dealing with Non-Employees and Employees

Unless otherwise prohibited by state or federal subgrant language, this policy covers reimbursement for District sponsored meeting and trainings for official District business where attendees are both District employees and non-employees. Examples include medical review boards, public health preparedness training, meetings with elected officials, or other parties with which the District meets for official business. The meeting does not need to meet the mandatory attendance, duration, and requirement for number of attendees as required per section 11 of the state's Travel Policy and Procedures manual. For meals and or refreshments, the per-person cost should not exceed the State's policy for partial day meal rates. Understanding that the number of attendees can be affected by no-shows the purchaser should strive to keep the per person expectation as reasonable as possible.

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Registration Fees

Registration fees which are required for conferences require a receipt for reimbursement on your travel voucher. These should be paid ahead of time if at all possible. Your supervisor or Fiscal Office staff can instruct you on how to accomplish this.

Third-Party Reimbursement

When a third party is expected to reimburse a District employee for travel expenses, that information, along with the name and billing address of the third party must be included on the travel request. Travel expenses will be submitted to the District as usual on a travel voucher. The third-party reimbursement will then be made to the District, or endorsed in the District's favor. For instance, if the Department of Education intends to reimburse your travel expenses for attending a conference in Boise, you would complete the District travel expense voucher as you normally would. Then when the reimbursement check arrives from the Department of Education, it will be signed over to the District.

Board of Health Meeting Meals and Refreshments

Meals and/or refreshments are allowed for Board of Health meetings regardless of number of attendees or length of meeting.

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UNATTENDED CHILD/INFANT

POLICY

The purpose of this policy is to ensure the safety of children and infants whose caregivers are participating in services offered at EIPH; specifically, those who are in attendance with EIPH patrons. Leaving children and infants unattended inside or outside is

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unsafe and could be considered neglectful. Risks include drastic temperatures, unpredictable behavior of children, and others intending to cause harm to children and infants. It is the policy of EIPH to ensure children and infants are not left unattended on our premises.

PROCEDURE

If a staff member becomes aware of a child/children or infant left unattended, the staff member should take the following steps.

Unattended in Car

1. If the situation is dire, take whatever steps are necessary to remove the child/infant from danger. Once the child/infant is safe, call 911. Notify a supervisor.
2. If the situation is not dire and the child/infant is not in immediate danger, notify a supervisor of the situation.
3. In Idaho Falls, the supervisor will attempt to locate the caregiver. In Satellite Offices, the staff member finding the child/infant will attempt to locate the caregiver. Once located, the caregiver will be encouraged to bring the child/infant into the building where he/she can be attended to by the caregiver.
4. If the adult is not agreeable to bringing the child/infant into the building with them, offer to provide what services you can while the caregiver stays in the car. For example, take WIC checks to the car then reschedule appointments using a cell phone. Reschedule any appointment that requires the caregiver to be in the building.
5. If the caregiver is not agreeable to any of the above, please notify them of this policy, which is to call 911 when children/infants are left unattended in a car.
6. If the situation is not remedied call 911.
7. If unable to locate the caregiver the supervisor or staff member will immediately call 911.

Unattended on Premises

1. Remove child/infant from immediate danger then notify a supervisor.
2. In Idaho Falls, the supervisor will attempt to locate the caregiver and inform them of this policy. In Satellite Offices, the staff member finding the child/infant will attempt to locate the caregiver and inform them of this policy.
3. If the caregiver is not agreeable and children/infants remain unattended, call 911.
4. Remain with the children/infant until they are safely with the caregiver or authorities.

DEFINITIONS

Neglect ([Idaho Code § 16-1602](#))

'Neglected' means a child:

- Who is without proper parental care and control, subsistence, medical, or other care necessary for his or her well-being because of the conduct or omission of his or her parents, guardian, or other custodian, or their neglect or refusal to provide them
- Whose parents, guardian, or other custodian is unable to discharge his or her responsibilities to and for the child and, as a result of such inability, the child lacks the parental care necessary for his or her health, safety, or well-being
- Who has been placed for care or adoption in violation of the law
- Who is without proper education because of the failure to comply with §33-202

Source: Childwelfare.gov

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VACATION LEAVE

This is Idaho Division of Human Resources Policy (IDHR) that is applicable to all State of Idaho executive branch agencies, including EIPH. To access the policy, click here: [Section 2: VACATION LEAVE](#).

General Information

Eligible employees will earn vacation leave and be eligible to take vacation leave in accordance with Idaho Code §§ [67-5334](#), [59-1603](#) and [59-1606](#). Vacation is a period of exemption from hours worked. Vacation leave may be used only when requested by the employee and approved by his/her supervisor. It is necessary to schedule vacation when it will least interfere with the efficiency of the department. Employees should submit vacation requests as far in advance as possible to aid the supervisor in planning the schedule.

Eligibility

Employees must meet the criteria to qualify as eligible for benefits in order to accrue vacation time. Some employees are ineligible for vacation, such as:

- Employees who regularly work less than 20 hours per week; or
- Employees who are in non-pay status (i.e. on unpaid leave of absence); or
- Temporary employees who are hired to work less than five (5) months, regardless of number of hours worked per week.

An employee who is originally not expected to work five (5) months but who does so is entitled to receive vacation leave benefits retroactively in accordance with the accrual rates within this policy and Idaho Code.

Accrual

Employees earn vacation leave for every hour worked or paid (with the exception of paid compensatory leave). For example, employees earn vacation leave while on paid vacation or paid sick leave.

The Idaho Division of Human Resources designates job classifications as either Covered (by the Fair Labor Standards Act), Computer Worker, Professional, Administrative, or Executive.* The amount of vacation an employee accrues per qualifying paid hour depends on that designation.

Vacation Accrual Rates and Limits				
Employee Designation	Hours of Service	Accrual Rate Per Hour	Accrual Rate per Pay Period for Full-Time Employees*	Accrual Limit
Covered	0-10,400	0.04615	3.7 hours	192 hours
Covered	10,401 - 20,800	0.05769	4.6 hours	240 hours
Covered	20,801 - 31,200	0.06923	5.5 hours	288 hours
Covered	31,201 or more	0.08077	6.5 hours	336 hours
Administrative/Professional/Computer Worker	0-10,400	0.05769	4.6 hours	192 hours
Administrative/Professional/Computer Worker	10,401 - 20,800	0.06923	5.5 hours	240 hours
Administrative/Professional/Computer Worker	20,801 - 31,200	0.08077	6.5 hours	288 hours
Administrative/Professional/Computer Worker	31,201 or more	0.08077	6.5 hours	336 hours
Executive	0-10,400	0.09615	7.7 hours	200 hours
Executive	10,401 - 20,800	0.09615	7.7 hours	240 hours
Executive	20,801 - 31,200	0.09615	7.7 hours	288 hours
Executive	31,201 or more	0.09615	7.7 hours	336 hours

*amounts are rounded to the nearest tenth

*To determine your designation, refer to IDHR's website at <http://dhr.idaho.gov/stateJobs.html>. Select "Job Descriptions." Find and select your classification within the alphabetical list. At the bottom of the page for your job classification description, the "overtime code" will reflect either: C for "covered", A for "administrative", P for "professional", E for "executive", or I for "computer worker".

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Use of Vacation Leave

Employees are required to obtain approval from their supervisor prior to the use of vacation leave. Supervisors should approve vacation leave with reasonable consideration for the employee's needs and desires, on the basis of work requirements, and when it will least interfere with the efficient operation of the agency.

Use Prohibited for Accrual. Vacation leave cannot be taken in the same pay period in which it is earned. For example, an employee cannot use the 3.7 hours earned during the current pay period until a subsequent pay period.

Use Limitations. Vacation leave may not be utilized if it will result in pay in excess of the employee's normally scheduled workweek. For example, if a full-time employee plans Friday off, but works 9 hours per day on Monday through Thursday of that week, the employee's timesheet would reflect:

	SUN	MON	TUE	WED	THUR	FRI	SAT	TOTAL
ACT		9	9	9	9			36
VAC						4		4
								40

Use When Ill. Employees may elect to charge time off work due to illness to accrued vacation leave rather than to accrued sick leave. However, in the event an employee is ill and has no accrued sick leave, other accrued leave balances, including vacation leave, must be used prior to the employee receiving leave without pay (unless the employee is on approved Family and Medical Leave or is absent from work due to a work-related illness or injury).

Use for Emergency Conditions. If an employee is unable to report to work because of severe weather, road, or other related emergency conditions, and the work facility has not been declared closed or inaccessible by the Governor, EIPH Director or designee, the employee shall be permitted to use accrued vacation leave to cover the period of absence from work.

If an employee on approved vacation leave becomes ill, sick leave cannot be substituted. Employee may substitute sick leave if they provide a doctor's note.

Use in Conjunction with Other Leave Types. The sequence in which various leaves will be taken is (1) Compensatory Leave, (2) On-Call Leave, and (3) Vacation Leave. Supervisors may grant exceptions to this standard order if necessary to keep the employee from reaching maximum vacation accrual limits.

Use Parameters for Executive Employees Only. Employees designated as executive are not required to use accrued vacation in less than half day increments. For example, based on an eight hour day, if an Executive employee works for 6 hours, and takes the remainder of that day off, the decision to use vacation leave is at the employee's discretion. Conversely, if that executive employee works for 2 hours, and takes 6 hours of vacation that day, then 6 hours of accrued vacation leave is used.

Executive employees who work 40 hours in a workweek should record no leave taken, even if they take more than a half day off on a particular day. For example, an executive employee who works 10 hours per day Monday thru Thursday and then takes Friday off would record no leave taken, as 40 hours had been worked for that week.

Effect of Transfers on Accrued Vacation

An employee's accrued vacation leave transfers with the employee when transferring from one State agency to another with no break in service. (Saturday and Sunday are not considered to be a break.)

Effect of Separation on Accrued Vacation

When an employee leaves State service, all accrued and unused vacation leave will be paid to the employee in his final paycheck. Vacation payout is calculated based on the employee's permanent hourly rate of pay on the effective date of separation.

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WORKPLACE VIOLENCE

EIPH is committed to providing a work environment that is safe, secure, and free from harassment, threats, intimidation, and violence for its employees.

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POLICY

EIPH will not tolerate any form of violence in the workplace, whether it's implied or direct, including intimidation, coercion, harassment, and verbal, written, or physical threats. All property of EIPH, including vehicles, are weapon-free zones.

Deleted: including verbal or physical threats or intimidation.

It is the duty and responsibility of all EIPH employees to report any threat or act of violence an employee or non-employee makes toward them or another person to their immediate supervisor, Division Director, or EIPH Director. Violent threats or actions by a non-employee may be reported to law enforcement authorities.

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Duty to Report¶

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If an employee has filed a restraining order, temporary or permanent, against an individual due to a potential act of violence and the order applies to the worksite, the employee shall immediately inform his or her supervisor and provide a copy of the signed order to the EIPH Director.

DEFINITIONS

Violence in the workplace may include, but is not limited to the following examples of prohibited conduct:

- Physically aggressive acts (assault, battery, hitting, shoving, fighting, etc.)
- A serious, communicated or implied intent to harm another, or endanger their own safety, or destroy property (physical restraint, confinement, etc.)
- Actions that have a potential for violence (throwing objects, waving fists, destroying property, etc.)
- Obsessively directed behavior (harassing phone calls, stalking, intensely focusing on a grudge or aggravation, bullying, dangerous or threatening horseplay, etc.)
- Possession, use, or display of firearms, fireworks, explosives, knives, or similar objects with blades over four inches in length, and weapons or their replicas are prohibited in an EIPH facility and district vehicles and while engaged in EIPH-related activities or sponsored events unless approved in writing by the EIPH Director. Pocket knives or knives used solely for eating or food preparation are not considered weapons for purposes of this policy unless used to inflict bodily injury or damage to property.

EXCEPTIONS

Peace officers as defined in Idaho Code 19-5101 and law enforcement officials authorized to carry a firearm under state or federal statute are exempt from this weapons restriction.

RETALIATION

Retaliation against an employee who reports workplace violence or threats of violence in good faith or who participates in an investigation is strictly prohibited.

PROCEDURE

Any violence or threat of violence must be reported immediately to any supervisor, division director, Human Resources Specialist, or EIPH Director.

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Confidentiality

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After reporting the situation, employees shall not discuss the matter with co-workers or persons not directly responsible for investigating the matter, except in cases when there is risk of imminent physical danger. Care must be taken to keep the situation contained to prevent escalation of the violence or threat and prevent damage to the reputation of someone falsely accused.

Action

The Administrative Team will promptly convene to investigate any complaints filed and will also investigate any possible violation of this policy of which they are made aware. If evidence exists to support the allegation of violence or threats of violence, or the possession of a weapon in violation of this policy and the offender is an employee, disciplinary action may occur, up to and including immediate dismissal. If the offender is not an employee, other appropriate action will be taken by Administration.

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In all situations, if the violence appears to be imminent, take the precautions necessary to assure your own safety and the safety of others and then call 911.

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FORMS

The forms included in this handbook are for reference purposes only. All of the following forms are located on the District's intranet and can be printed for use. To access the forms, go to the intranet, click on Forms and Files and then click on Employee Handbook and Handbook Forms. Open the form you need and print it. The only exception is the Incident Report Form and the Medication Incident Report Form, which are triplicate forms. They can be obtained from your supervisor.

- Appendix A: Incident Report Form**
- Appendix B: Medication Incident Report Form**
- Appendix C: Problem-Solving Request Form**
- Appendix D: Request for Reasonable Accommodation Form**
- Appendix E: Notice of Claim Form**
- Appendix F: Travel Expense Form**
- Appendix G: Abuse-Neglect Police Report Form**
- Appendix H: Service Request Form**
- Appendix I: Conference Room Set-up Form**
- Appendix J: AED Incident Use Report Form**

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APPENDIX A: INCIDENT REPORT FORM

PERSONAL INFORMATION

<input type="checkbox"/> Client <input type="checkbox"/> Employee		In addition to this form the Workers Compensation – First Report of Injury or Illness form needs to be completed for an employee incident.	
Last Name	First Name	Middle Initial	Guardian Name (if Minor)
Address		City	State Zip
Phone			Date of Birth (mm/dd/yyyy)

INCIDENT DESCRIPTION

Time of Incident (AM/PM)	Date of Incident	Location of Incident (Include the County or Office)																				
Description of Incident (List body part affected, events leading up to incident and other contributing factors):																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">MEDICAL SERVICES</th> <th colspan="4" style="width: 75%;">DISPOSITION</th> </tr> </thead> <tbody> <tr> <td> <input type="checkbox"/> Bandaged <input type="checkbox"/> Ice Pack <input type="checkbox"/> Rest <input type="checkbox"/> Exam <input type="checkbox"/> CPR <input type="checkbox"/> None </td> <td style="text-align: center;"> <i>No Care Given</i> <i>Released</i> </td> <td> <input type="checkbox"/> Not Needed Client Refusal <input type="checkbox"/> To Parent <input type="checkbox"/> To Self </td> <td style="text-align: center;"> <i>Referral</i> <i>EMS / Ambulance</i> </td> <td> <input type="checkbox"/> To Doctor To Hospital / Clinic <input type="checkbox"/> Notified by EIPH Staff <input type="checkbox"/> Notified per Client Request <input type="checkbox"/> Transported Via Ambulance </td> </tr> <tr> <td>Other:</td> <td colspan="4">Other:</td> </tr> <tr> <td>Treated by:</td> <td colspan="4"></td> </tr> </tbody> </table>			MEDICAL SERVICES	DISPOSITION				<input type="checkbox"/> Bandaged <input type="checkbox"/> Ice Pack <input type="checkbox"/> Rest <input type="checkbox"/> Exam <input type="checkbox"/> CPR <input type="checkbox"/> None	<i>No Care Given</i> <i>Released</i>	<input type="checkbox"/> Not Needed Client Refusal <input type="checkbox"/> To Parent <input type="checkbox"/> To Self	<i>Referral</i> <i>EMS / Ambulance</i>	<input type="checkbox"/> To Doctor To Hospital / Clinic <input type="checkbox"/> Notified by EIPH Staff <input type="checkbox"/> Notified per Client Request <input type="checkbox"/> Transported Via Ambulance	Other:	Other:				Treated by:				
MEDICAL SERVICES	DISPOSITION																					
<input type="checkbox"/> Bandaged <input type="checkbox"/> Ice Pack <input type="checkbox"/> Rest <input type="checkbox"/> Exam <input type="checkbox"/> CPR <input type="checkbox"/> None	<i>No Care Given</i> <i>Released</i>	<input type="checkbox"/> Not Needed Client Refusal <input type="checkbox"/> To Parent <input type="checkbox"/> To Self	<i>Referral</i> <i>EMS / Ambulance</i>	<input type="checkbox"/> To Doctor To Hospital / Clinic <input type="checkbox"/> Notified by EIPH Staff <input type="checkbox"/> Notified per Client Request <input type="checkbox"/> Transported Via Ambulance																		
Other:	Other:																					
Treated by:																						
Corrective Action																						

SIGNATURES

	Printed Name	Signature	Phone
Client/Guardian			
Witness			
Witness			

EASTERN IDAHO PUBLIC HEALTH STAFF

	Printed Name	Signature	Date
Employee Completing Form			
Supervisor			
Division Director			
Director			

Completed forms are kept in Human Resources.

[Return to Workers Compensation Policy](#)

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APPENDIX B: MEDICATION ERROR REPORT FORM

CLIENT INFORMATION

Last Name	First Name	Middle Initial	Guardian Name (if Minor)
Address		City	State Zip
Phone		Date of Birth (mm/dd/yyyy)	

INCIDENT DESCRIPTION

Time of Incident (AM/PM)	Date	Location of Incident (Include County or Office)
Description of Incident (List events leading up to incident and other contributing factors)		
TYPE OF MEDICATION ERROR INVOLVED		
<input type="checkbox"/> Incorrect Client	<input type="checkbox"/> Incorrect Medication	
<input type="checkbox"/> Incorrect Dose	<input type="checkbox"/> Incorrect Time / Timing / Spacing	
<input type="checkbox"/> Incorrect Route	<input type="checkbox"/> Gave Expired Medication	
<input type="checkbox"/> Other		
Corrective Action:		

SIGNATURES

	Printed Name	Signature/Relationship	Phone
Client/Guardian, if Available			
Witness			
Witness			

EASTERN IDAHO PUBLIC HEALTH STAFF

	Printed Name	Signature	Date
Employee Completing Form			
Supervisor			
Division Director			
Director			

- Copies: Original – Human Resources
 Yellow – Nurse Manager
 Pink – Division Director

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APPENDIX C: PROBLEM-SOLVING REQUEST FORM

(Page 1 of 3)

TO: _____
Supervisor Accepting Problem-Solving Request

FROM: _____
Employee Requesting Problem-Solving

DATE: _____

The employee requesting problem-solving sets forth the following:

1. I seek resolution of the following job-related matter(s):

(Attach additional sheet if necessary)

2. My suggested solution(s) is/are:

(Attach additional sheet if necessary)

3. Please indicate who you wish to have attend the problem-solving meetings:

Employee's Signature

Date

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APPENDIX C: PROBLEM-SOLVING REQUEST FORM (continued)

(Page 2 of 3)

FOR DIVISION DIRECTOR:

The Division Director who met with the employee sets forth the following:

After attending the problem-solving meeting with the employee, my suggested solution(s) to the matter(s) is/are:

(Attach additional sheet if necessary)

Division Director's Signature

Date

The employee accepts/rejects (please circle) the suggested solution(s).

Employee's Signature

Date

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APPENDIX C: PROBLEM-SOLVING REQUEST FORM (continued)

(Page 3 of 3)

FOR HUMAN RESOURCES

Human Resources, who met with the employee sets forth the following:

After attending the problem-solving meeting with the employee, my suggested solution(s) to the matter(s) is/are:

(Attach additional sheet if necessary)

Human Resources Representative

Date

The employee accepts/rejects (please circle) the suggested solution(s).

Employee's Signature

Date

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APPENDIX D: REQUEST FOR REASONABLE ACCOMMODATION FORM

(Confidential)

Page 1 of 2

Date: _____

1. Name of Individual Requesting Accommodation: _____

2. Title: _____

3. Work Location: _____

4. Immediate Supervisor: _____

5. Nature of the **qualifying disability** (attach medical verification, if appropriate):

6. Requested or suggested accommodation to enable you to perform the essential functions of the job (please attach a job description, etc.):

Signature: _____ Date: _____

7. Supervisor's recommendation and comments:

Approximate cost of the requested accommodation: _____

_____ Recommend Approval _____ Recommend Disapproval

Comments: _____

Signature: _____ Date: _____

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APPENDIX D: REQUEST FOR REASONABLE ACCOMODATION FORM (continued)

(Confidential)

Page 2 of 2

8. Division Director's approval or referral:

Approved Referred

(Any requested accommodation for which disapproval is contemplated or which involves structural change, or any other unusual accommodation request, will be submitted to the EIPH Director for review before a decision is acted upon.)

Division Director's Signature: _____ Date: _____

Comments: _____

9. Reasonable Accommodation Review (only if required; see Step 8):

Concur Deny Modify

Comments: _____

Authorized Signature: _____

Date recommendation communicated to Director: _____

10. Appeal or Problem Solving Requested:

Yes No

11. Final Disposition:

Director's Decision

Concur Deny Modify

This form, when completed, is to be retained in a confidential file in Human Resources.

[Return to Reasonable Accommodations Policy](#)

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APPENDIX E: NOTICE OF CLAIM FORM

In compliance with Title 6, Chapter 9, Idaho Code, the undersigned hereby presents a claim against the State of Idaho for damages arising out of an occurrence which happened as follows:

Date and time of Claim: _____

Place or location: _____

Cause of damages (describe the details and circumstances of the accident or occurrence):

Witnesses:

<u>Name</u>	<u>Address</u>	<u>Phone #</u>
_____	_____	_____
_____	_____	_____

Amount of claim: \$ _____ (Attach all bills or other substantiating information as to the amount of the claim.)

Personal Injury (please describe the extent of your injury, your attending physician, the place of emergency treatment, etc.):

Property damage (describe the property damaged):

Dated this _____ day of _____, 20_____.

Name of Claimant: _____

Street Address: _____

City and State: _____

Phone Number: _____

[Return to Tort Claims, Summons, or Complaint Policy](#)

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APPENDIX G: ABUSE/NEGLECT/POLICE/EMS REPORT FORM

Abuse/Neglect/Police/EMS Report Form

PERSONAL INFORMATION

<input type="checkbox"/> Client				<input type="checkbox"/> Other:			
Last Name		First Name		Middle Initial		Guardian Name (if Minor)	
Address				City		State Zip	
Phone				Date of Birth (mm/dd/yyyy)			

EMPLOYEE REPORTING CHECKLIST

Employee:	Yes/When (include date & time)	No/Why	N/A
<input type="checkbox"/> Reported to Supervisor?			
<input type="checkbox"/> Copy Filed in Clients Chart?			

INCIDENT DESCRIPTION

Time of Incident (AM/PM)	Date of Incident	Location of Incident (Include the County or Office)
Description of Incident (circumstances resulting in report):		
Agency Notified: (list all agencies notified i.e. CPS, police)	Person(s) Spoke With:	Agency Response/Action:
Client Notified Yes <input type="checkbox"/> No <input type="checkbox"/>		
Follow-Up:		

EASTERN IDHAO PUBLIC HEALTH STAFF

	Printed Name	Signature	Date
Employee Completing Form			
Supervisor			
Division Director			
Director			

Copies: Original – Human Resources Yellow – Client Chart (if applicable) Pink – Division Director

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APPENDIX H: SERVICE REQUEST FORM

SERVICE REQUEST FORM

CLEANING MAINTENANCE SUPPLY

Office Location: _____ Date: _____

Person Making Request: _____

_____ Routine _____ Urgent

Request: _____

Additional Information: _____

Please send the request to Human Resources. Keep a copy for the Division.

++++
Office Use

Date completed: _____

Completed by: _____

Supplies needed: _____

Time required: _____

Additional Information: _____

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APPENDIX I: CONFERENCE ROOM SET-UP FORM

**EASTERN IDAHO PUBLIC HEALTH
CONFERENCE ROOM SET-UP FORM**

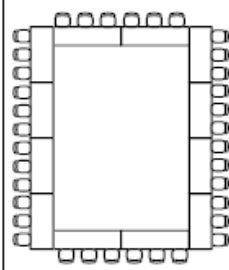
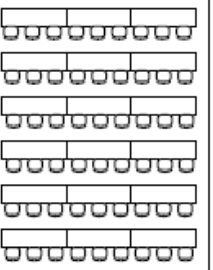
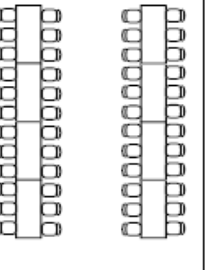
Name of Meeting: _____ Meeting Date(s): _____

Requested by: _____ Phone: _____ Today's Date: _____

Set-Up Time: _____ Start Time: _____ End Time: _____ # of Attendees: _____

Room Needed: Conference Room HECP Classroom FACHS Classroom
 Board Room
 WIC Classroom EH Classroom Other: _____

Set Up: Chairs Only Tables & Chairs (mark layout below) Head Table for Presenter
 Podium Table(s) for handouts # _____ Refreshment Tables # _____
 Circle: (Hot / Cold)

A: Rectangle or U-Shape	B: Classroom	C: Rows	D: Other
			Please draw how you would like the room set up

A/V Equipment Needed (mark all that apply):

- | | | | |
|-------------------------------------------|------------------------------------|-----------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Computer | <input type="checkbox"/> Projector | <input type="checkbox"/> Hand-held microphone | <input type="checkbox"/> DVD Player |
| <input type="checkbox"/> Audio System | <input type="checkbox"/> Screen | <input type="checkbox"/> Lapel Microphone | <input type="checkbox"/> Extension Cord |
| <input type="checkbox"/> Conference Phone | | | |

Other Needs/Special Requests:

Agency Information:

Agency Name: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

For Office Use Only:

Fee: Conference Room less than 50 participants Half Day - \$75 Full Day - \$125
 Conference Room 50 plus participants Half Day - \$125 Full Day - \$225 **Total**
 After Hours/Weekend Use: # Hours _____ x \$40 per hour **Cost:** _____

Approved by: _____ Room Usage/Fee Information Provided:

Notifications: Maintenance IT EH (if after hours/weekends) Other: _____

Developed: 11/07; Revised: 5/2016

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APPENDIX J: AUTOMATIC EXTERNAL DEFIBRILLATOR (AED) INCIDENT USE REPORT FORM

Date: _____ Time: _____

PATIENT INFORMATION

Name: _____

Address: _____

Age: _____ Gender: Male Female

Witnessed Arrest:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Breathing upon arrival of designated responders:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Pulse upon arrival of designated responders:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Bystander CPR:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Cardiac arrest after arrival:	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Number of defibrillation shocks: _____

Comments: _____

Rescuer Name: _____

Rescuer Signature: _____

Once this form is completed, give it to EIPH's AED Coordinator, Tammy Cox.

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Board Fiscal Notes

For the Seven months Ended January 31, 2019

Board Meeting February 21, 2019

Fiscal Year 2019 board summary report

General Notes

- 1 For the seven months ended January 31, 2019, EIPH's total expenditures for the year were 6.18% below the approved budget.

- 2 For the seven months ended January 31, 2019, EIPH's total revenues were 14.4% above original budget.

Month	Operating Account Balance	Operating Reserve Account Balance	Capital Reserve Account Balance	Total General Fund Cash Available	Millennium Fund Balance	Total Cash Available
Jul-18	481,826.49	3,631,809.03	720,195.93	4,833,831.45	99,120.47	4,932,951.92
Aug-18	556,387.69	3,639,173.99	720,195.93	4,915,757.61	93,896.77	5,009,654.38
Sep-18	268,441.78	3,747,210.64	720,195.93	4,735,848.35	90,116.06	4,825,964.41
Oct-18	480,631.94	2,891,577.47	1,408,904.00	4,781,113.41	82,927.84	4,864,041.25
Nov-18	348,926.44	2,900,264.14	1,408,904.00	4,658,094.58	73,573.08	4,731,667.66
Dec-18	232,724.03	3,408,456.06	1,408,904.00	5,050,084.09	64,621.02	5,114,705.11
Jan-19	378,452.52	3,917,213.25	1,408,904.00	5,704,569.77	61,778.94	5,766,348.71
Feb-19				-		-
Mar-19				-		-
Apr-19				-		-
May-19				-		-
Jun-19			-	-	-	-
Capital Reserve Detail						
	Restricted for Future Building Needs		787,022.93			
	Future Personnel Costs		107,173.00			
	Future 27th Payperiod		240,000.00			
	Future Operating Stabilization		274,708.07			
			1,408,904.00			
Designated and Authorized out of Operating Reserve						
	Future Vehicle Purchases		240,000.00			
	Public Health Emergency		500,000.00			
	Building Maintenance		250,000.00			
	Legal Defense		40,000.00			
			1,030,000.00			
Cash Restricted by Grant or Donor.						
	Restricted for Mammograms		8,941.83			
	Regional Behavior Health Board		56,753.35			
	EICAP Fit and Fall Funds		8,070.25			
	State Home Visit		102,662.91			
	Millennium Fund		59,682.55			
	Restricted for Medical Reserve Corp		3,514.10			
			239,624.99			

**Board Summary Report
Eastern Idaho Public Health
Expenditure Summary**

FY 2019

Last Updated 2/19/19 11:15 AM

DIVISION	Budget	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	YTD	Percent used	remaining
BOARD OF HEALTH	16,688	625.25	484.04	1,997.01	1,353.67	-	1,686.19	600.98	-	-	-	-	-	6,747.14	40.43%	59.57%
EMERGENCY RESPONSE	-	-	-	-	-	-	-	-	-	-	-	-	-	0.00		
HEALTH EDUCATION	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
EPIDEMIOLOGY & PREPAREDNESS	995,678	71,616.80	64,453.27	60,572.84	64,814.17	82,306.08	54,810.36	66,978.47	-	-	-	-	-	465,551.99	46.76%	53.24%
HEALTHCARE TRANSFORMATION	242,656	23,886.39	21,732.14	23,001.87	25,703.31	30,828.29	19,617.20	26,009.44	-	-	-	-	-	170,778.64	70.38%	29.62%
FAMILY COMMUNITY HEALTH	3,551,128	298,322.91	270,652.65	254,815.73	296,485.59	312,401.44	187,114.76	236,464.37	-	-	-	-	-	1,856,257.45	52.27%	47.73%
NUTRITION	1,097,538	106,801.40	116,448.07	93,966.98	90,198.98	96,434.88	66,043.89	82,766.58	-	-	-	-	-	652,660.78	59.47%	40.53%
ENVIRONMENTAL	1,068,138	92,373.47	76,940.92	87,322.97	84,143.19	92,456.64	63,421.63	77,545.22	-	-	-	-	-	574,204.04	53.76%	46.24%
GENERAL SUPPORT	1,183,670	69,139.98	74,981.34	67,726.47	77,920.60	83,910.19	83,177.87	69,871.15	-	-	-	-	-	526,727.60	44.50%	55.50%
SUBTOTAL	8,155,496	662,766.20	625,692.43	589,403.87	640,619.51	698,337.52	475,871.90	560,236.21	0.00	0.00	0.00	0.00	0.00	4,252,927.64	52.15%	47.85%
BUILDING PROJECT	-	-	-	-	-	-	-	-	-	-	-	-	-	-	N/A	N/A
COMMUNICATIONS EQUIP	-	-	-	-	-	-	-	-	-	-	-	-	-	0.00	N/A	N/A
COMPUTERS	-	-	-	-	-	-	-	-	-	-	-	-	-	0.00	N/A	N/A
VEHICLES	-	-	-	-	-	-	-	-	-	-	-	-	-	0.00	#DIV/0!	#DIV/0!
EQUIPMENT	-	-	-	-	-	-	-	-	-	-	-	-	-	0.00	#DIV/0!	N/A
LOAN PAYMENT	-	-	-	-	-	-	-	-	-	-	-	-	-	0.00	#DIV/0!	#DIV/0!
CAPITAL OUTLAY TOTAL	-	-	-	-	-	-	-	-	-	-	-	-	-	-	#DIV/0!	#DIV/0!
TOTAL	8,155,496	662,766.20	625,692.43	589,403.87	640,619.51	698,337.52	475,871.90	560,236.21	-	-	-	-	-	4,252,927.64	52.15%	47.85%

PERCENTAGE OF TIME ELAPSED AND TIME REMAINING 58.33% 41.67%

Operating Cash Inflow	1,402,470.14	684,577.32	428,944.24	669,478.89	577,139.41	852,600.33	1,211,567.39	-	-	-	-	-	-	5,826,777.72
Operating Cash Outflow	647,678.43	607,874.86	612,634.21	631,402.04	709,512.99	469,562.90	559,923.79	-	-	-	-	-	-	4,238,589.22
Cash Provided (Used) by Operations	754,791.71	76,702.46	(183,689.97)	38,076.85	(132,373.58)	383,037.43	651,643.60	-	-	-	-	-	-	1,588,188.50
Cash used for Capital Expenditures	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Cash to (from) Reserve	754,791.71	76,702.46	(183,689.97)	38,076.85	(132,373.58)	383,037.43	651,643.60	-	-	-	-	-	-	1,588,188.50
														1,588,188.50

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 120

BY EDUCATION COMMITTEE

AN ACT

RELATING TO SEX EDUCATION; AMENDING SECTION 33-1611, IDAHO CODE, TO REVISE
PROVISIONS REGARDING SEX EDUCATION.

Be It Enacted by the Legislature of the State of Idaho:

SECTION 1. That Section 33-1611, Idaho Code, be, and the same is hereby
amended to read as follows:

33-1611. ~~EXCUSING CHILDREN FROM INSTRUCTION PERMITTING CHILDREN
TO PARTICIPATE IN SEX EDUCATION OR INSTRUCTION -- COMPLIANCE WITH STATE
LAW. (1) Any parent or legal guardian who wishes to have his child excused
from participate in any planned instruction in sex education may do so upon
filing a or any instruction or presentation regarding sexuality shall file
written request to permission with the school district board of trustees.
and tThe board of trustees shall make available the appropriate forms for
such request permission within two (2) weeks preceding the instruction or
presentation. Prior to granting permission, a parent or guardian shall be
given a brief description of the content of the instruction or presentation
and shall, at the parent or guardian's option, be afforded the opportunity to
review any materials that will be used in the instruction or presentation.
Alternative educational endeavors shall be provided for those excused to
students who do not participate in or attend sex education or instruction or
a presentation regarding sexuality.~~

(2) Any instruction or presentation in sex education or sexuality, in-
cluding by a guest instructor, must comply with the provisions of sections
33-1608 through 33-1611, Idaho Code.

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 151

BY HEALTH AND WELFARE COMMITTEE

AN ACT

RELATING TO FOOD ESTABLISHMENTS; AMENDING SECTION 39-1607, IDAHO CODE, TO
REVISE PROVISIONS REGARDING CERTAIN FEES; AND DECLARING AN EMERGENCY.

Be It Enacted by the Legislature of the State of Idaho:

SECTION 1. That Section 39-1607, Idaho Code, be, and the same is hereby
amended to read as follows:

39-1607. LICENSE AND OTHER FEES -- PROHIBITION ON ADDITIONAL FEES. (1)
A fee may be charged by the department of health and welfare's regulatory au-
thority for licensing a food establishment.

~~(a) The fee per food establishment for licenses issued from July 1,
2009, through June 30, 2010, shall be:~~

~~(i) Sixty-five dollars (\$65.00) for temporary food establish-
ments, intermittent food establishments and mobile food estab-
lishments without a commissary;~~

~~(ii) Seventy-five dollars (\$75.00) for mobile food establish-
ments with a commissary;~~

~~(iii) Ninety-five dollars (\$95.00) for all other food establish-
ments, except for food establishments with more than two (2) li-
censes on one (1) premises under common ownership; and~~

~~(iv) One hundred seven dollars and fifty cents (\$107.50) for food
establishments with more than two (2) licenses on one (1) premises
under common ownership.~~

~~(b) The fee per food establishment per year for licenses issued on and
after July 1, 2010, shall be:~~

(a) Thirty-five dollars (\$35.00) for a temporary food establishment
operating for one (1) day, forty-five dollars (\$45.00) for a temporary
food establishment operating for two (2) or three (3) days, and sev-
enty-two dollars (\$72.00) for a temporary food establishment operating
for four (4) or more days or at multiple events;

~~(i**b**) Sixty-five dollars (\$65.00) for temporary food establishments,
intermittent food establishments and mobile food establishments with-
out a commissary;~~

~~(i**i**c) Eighty-five dollars (\$85.00) for mobile food establishments with
a commissary;~~

~~(i**i**i**d**) One hundred twenty-five dollars (\$125) for all other food es-
tablishments, except for food establishments with more than two (2) li-
censes on one (1) premises under common ownership; and~~

~~(i**v**e) One hundred fifty dollars (\$150) for food establishments with
more than two (2) licenses on one (1) premises under common ownership.~~

(2) ~~A license issued to a temporary or intermittent food establishment
by a regulatory authority shall be valid only for the celebration or event
for which the license was issued; however, no additional license fee will be~~

1 ~~charged by a regulatory authority to a temporary or intermittent food estab-~~
 2 ~~lishment for other celebrations or events within the same calendar year and~~
 3 ~~with the same menu. Effective January 1, 2020, the fee per food establish-~~
 4 ~~ment per year for licenses shall be:~~

5 (a) Thirty-five dollars (\$35.00) for a temporary food establishment
 6 operating for one (1) day, forty-five dollars (\$45.00) for a temporary
 7 food establishment operating for two (2) or three (3) days, and sev-
 8 enty-two dollars (\$72.00) for a temporary food establishment operating
 9 for four (4) or more days or at multiple events;

10 (b) Seventy-two dollars (\$72.00) for intermittent food establish-
 11 ments;

12 (c) Seventy-two dollars (\$72.00) for mobile food establishments with-
 13 out a commissary;

14 (d) Ninety-two dollars (\$92.00) for mobile food establishments with a
 15 commissary;

16 (e) One hundred sixty dollars (\$160) for all other food establishments,
 17 except for food establishments with more than two (2) licenses on one
 18 (1) premises under common ownership; and

19 (f) Two hundred dollars (\$200) for food establishments with more than
 20 two (2) licenses on one (1) premises under common ownership.

21 (3) Effective January 1, 2022, the fee per food establishment per year
 22 for licenses shall be:

23 (a) Thirty-five dollars (\$35.00) for a temporary food establishment
 24 operating for one (1) day, forty-five dollars (\$45.00) for a temporary
 25 food establishment operating for two (2) or three (3) days, and eighty
 26 dollars (\$80.00) for a temporary food establishment operating for four
 27 (4) or more days or at multiple events;

28 (b) Eighty dollars (\$80.00) for intermittent food establishments;

29 (c) Eighty dollars (\$80.00) for mobile food establishments without a
 30 commissary;

31 (d) One hundred dollars (\$100) for mobile food establishments with a
 32 commissary;

33 (e) Two hundred dollars (\$200) for all other food establishments, ex-
 34 cept for food establishments with more than two (2) licenses on one (1)
 35 premises under common ownership; and

36 (f) Two hundred fifty dollars (\$250) for food establishments with more
 37 than two (2) licenses on one (1) premises under common ownership.

38 (4) Effective July 1, 2019, in addition to other fees assessed by this
 39 section, the designated regulatory authority may assess:

40 (a) A plan review and preoperational inspection fee of one hundred dol-
 41 lars (\$100);

42 (b) A late fee for any fees paid past the applicable deadline;

43 (c) A license reinstatement fee of eighteen dollars (\$18.00);

44 (d) A request for variance fee of fifty dollars (\$50.00) per hour;

45 (e) A compliance conference fee of one hundred dollars (\$100) per hour;

46 (f) Enforcement and legal fees of one hundred fifty dollars (\$150) per
 47 hour; and

48 (g) Fees covering operational costs for inspections conducted pursuant
 49 to federal law or regulation.

1 (35) Fees collected for licensing a food establishment shall be used by
2 the designated regulatory authority for funding a portion of the food safety
3 inspection program. The designated regulatory authority may not impose
4 fees on food establishments in addition to those provided by this section or
5 specifically authorized by other applicable law.

6 (46) ~~On and after January 1, 2010, t~~The regulatory authority shall re-
7 view at three (3) year intervals the cost data associated with the operation
8 of the food safety inspection program as well as actions taken to increase
9 the efficiency of such program and provide a report on ~~same~~ such review to the
10 health and welfare committees of the Idaho legislature.

11 SECTION 2. An emergency existing therefor, which emergency is hereby
12 declared to exist, this act shall be in full force and effect on and after its
13 passage and approval.