

ONE TEAM
ONE MISSION
ONE EMSA

Operations Team Member Handbook

February 2021

“To serve our communities’ pre-hospital needs through value-driven, compassionate, and clinically superior care.”





EMSA Team Member,

Since 1977, the Emergency Medical Services Authority has been providing communities in Central and Northeast Oklahoma with high quality emergency medical services (EMS). For more than four decades we have weathered the everchanging landscape of the EMS industry and have transitioned from a public safety driven transport service to a community driven healthcare organization, proudly serving more than a million individuals each year.

The EMSA Team repeatedly exceeds industry standards in lifesaving interventions and EMS clinical quality, and continually adapts to the complex and dynamic rules and regulations that guide healthcare revenue services and business operations. Through the commitment of all Team Members, across every department, we proudly earn our place as a national leader in pre-hospital care.

Each decision at EMSA, both big and small, will support our mission; to serve our communities through value driven, compassionate, and clinically superior care. Each day in all your interactions, I encourage you to exemplify the principles of the Emergency Medical Services Authority by doing the right thing, the right way, for the right reasons. At the end of the day, we want to make sure we have taken care of our patients and you, our EMSA team members.

It is an honor to lead this organization and work alongside each of you every day, serving our beneficiaries, our partners, and our communities. Together as one team with one mission moving forward as one EMSA, we will continue to lead the way in EMS innovation, clinical care, and patient outcomes.

Ever Forward,

Jim Winham

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Code of Conduct



Amended and Approved: 02-27-2013 by Riggs/Abney, Legal Counsel
Amended and Approved: 04-26-2017 by the EMSA Board of Trustees
Amended and Approved: 01-23-2019 by EMSA Board of Trustees Legal Committee
Amended and Approved: 02-27-2019 by EMSA Board of Trustees

OUR MISSION

To serve our communities' pre-hospital needs through value-driven, compassionate, and clinically superior care.

Oklahoma residents can take comfort in knowing that a diverse team of dedicated healthcare providers – including paramedics, emergency medical technicians, specially-trained medical dispatchers, and others – stand ready to respond to your emergency medical needs.

VISION

We provide exceptional service through organizational teamwork to promote an innovative, responsive, and professional Authority that adapts within a changing environment. By utilizing collaborative working relationships, we are recognized as the standard of excellence in Emergency Medical Service. We are a fiscally responsible organization with the single purpose of serving the greater community good.

CORE VALUES

Compassion

We support the intentional affirmation that all human beings are gifted with life and uniqueness and deserve to be treated with respect and dignity.

Integrity

Do the right thing, the right way, for the right reasons.

Teamwork

*We promote and practice teamwork through communication and cooperation to achieve common goals.
If you see it, you own it.
Everyone goes home safe.*

Trust

We will create and maintain an atmosphere of trust, honesty, sincerity, and unwavering professional ethics.

Commitment

We are united in our mission, committed to the patient and our customers and recognize all members play a vital role to maintain the highest standard of excellence in patient care.

Vigilance

We accept the challenge and responsibility to maintain the highest standard of excellence in prehospital care and continually strive to determine and meet the needs of those we serve and measure our performance.

CODE OF CONDUCT OVERVIEW

Code of Conduct is a resource to look to when you wonder, “What’s the right thing to do?” As you read, ask questions, and use the Code of Conduct in your daily work, please know that these resources are here for you and your Team Members.

The Code of Conduct contains principles articulating the policies of EMSA and standards which are intended to provide additional guidance to all EMSA’s Representatives.

REPORTING A CONCERN OR ASKING A QUESTION

If you are not sure about where to go, here are good places to start: AlertLine (844) 490-1908 or via the website at <https://secure.ethicspoint.com/domain/media/en/gui/77043/index.html>, this guarantees anonymity. For direct questions, you can email to emsacompliance@emsa.net or contact the Compliance Officer, at (405) 297-7133.

Legal Compliance

Antitrust. All EMSA Team Members must comply with applicable antitrust and similar laws which regulate competition.

Environmental. It is the policy of EMSA to manage and operate its business in the manner which respects our environment and conserves natural resources.

Discrimination. EMSA believes that the fair and equitable treatment of all Team Member’s and other persons is critical to fulfilling its vision and goals.

(EMSA) does not exclude, deny benefits to, or otherwise discriminate against any person on the ground of race, color, gender, religion, national origin, disability, age, genetic information, gender identity, sexual orientation, veteran’s status or any other basis protected by applicable federal, state or local law in admission to, participation in, or receipt of the services and benefits under any of its programs, activities, and in staff assignments.

It is EMSA’s policy to recruit, hire, train, promote, assign, transfer, layoff, recall and terminate officers, directors, or Team Members based on their own ability, achievement, experience and conduct without regard to race, color, religion, sex, ethnic origin, age or disability, or any other classification prohibited by law.

No form of harassment or discrimination on the basis or sex, race, color, disability, age, religion or ethnic origin or disability or any other classification prohibited by law will be permitted.

Health and Safety. Policies have been developed to protect EMSA's Representatives from potential workplace hazards.

Fraud and Abuse

All EMSA Team Members must refrain from conduct which may violate the fraud and abuse laws.

Business Ethics

It is EMSA's commitment to maintain the highest standards of business ethics and integrity, Team Members will accurately and honestly represent EMSA and will not engage in any activity or scheme intended to defraud anyone of money, property, or honest services.

Political Activities

EMSA funds or resources are not contributed directly to individual political campaigns, political parties, or other organizations for political objectives, nor can a EMSA Team Member participate in or intervene in any political campaign on behalf of or in opposition to any candidate for public office, election, or ballot initiative on behalf of EMSA.

Charitable Contributions

In order, for EMSA or an EMSA Team Member on behalf of EMSA make a charitable donation, the organization which the donation is to be made must be to a wholesome and benevolent in its purpose and which provides a needed public benefit and must be approved by the EMSA Board of Trustees.

Confidentiality

Every EMSA representative has an obligation to actively protect and safeguard confidential and sensitive information in a manner designed to prevent the unauthorized use or disclosure of such information.

Conflicts of Interest

EMSA's Representatives owe a duty of undivided and unqualified loyalty to the organization. Team Members holding such positions may not use their positions to profit personally or to assist others in profiting in any way at the expense of the organization. Disclosure relates to not only the Team Members activity, but also the activities of the representative's household members.

Business Relationships

Business transactions with vendors, contractors and other third parties shall be transacted free from offers or solicitation of gifts and favors or other improper inducements in exchange for influence or assistance in a transaction.



Policy Title: Conditions for Employment

Policy # HR1

Policy Category: Human Resources

Policy Owner: Chief Compliance Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/10/2012
	Last Revision Date: 12/10/2012
	Date of Last Legal Review: 01/27/2021
Related Policies: EMSA Code of Conduct	
Additional Resources:	

1. Purpose

EMSA is committed to employing the most qualified individuals to ensure the highest quality of patient/customer service and clinical excellence. EMSA has adopted this policy to safeguard the public from individuals who, in practice as an EMS professional or as an EMS support/administrative professional as EMSA Team Members, might pose a danger to the public or other erode public trust in the EMSA system. As an EMSA Team Member you are placed in a position of the highest trust. For these reasons, EMSA has adopted this policy to ensure that EMSA Team Members are identified and appropriately evaluated as to whether they would pose a risk to public safety as an EMSA Team Member.

EMSA performs background checks on applicants and existing Team Members to the extent necessary to determine their eligibility for employment or ongoing employment. Background checks may include, but are not necessarily limited to, drivers' license checks, outstanding warrant checks, criminal history, prior employment, education, licenses and certifications, and credit reports. EMSA also performs ongoing checks to determine if an individual has been excluded from participation in federal or state healthcare programs.

2. Scope

This policy applies to initial and continuing employment of EMSA Team Members, contract Team Members, and Volunteers.

3. Definitions

Conviction – as used herein the term conviction shall include a conviction or other adjudication of guilt by trial, a plea of nolo contendere, a guilty plea, plea agreement, deferred sentence, deferred judgment, or any other plea agreement which does not result in a complete dismissal of charges or acquittal.

4. General Policy Parameters

- A. All prospective Team Members will have a background screening performed; the screening will consist a minimum of the following:
 1. OIG check of regarding excluded Individuals/entities.
 2. Criminal History Check (through state or local law enforcement agency or 3rd Party vendor, as appropriate)
 3. Previous employment
 4. Motor Vehicle Record (for applicable positions)



5. Licensure and/or certifications held (for applicable positions)

5. Procedures

A. Requirements for Employment

All prospective Team Members must meet the following requirements before employment commences:

1. Have completed an EMSA employment application.
2. Have completed a successful interview process.
3. Have reached the minimum age of 18 unless approval by Senior Leadership on an as needed basis for certain applicable positions.
4. United States Citizen or Legal Alien eligible for employment in the United States.
5. Can perform the duties set forth in the job description of the position applying for.
6. The Team Member must not be presently under exclusion from, nor have ever been excluded from participation in Medicare, Medicaid, or any other Federally funded health care program, pursuant to 42 U.S.C. 1320a-7. Nor have been found in violation of any Federal, State, or Local Government Statute or regulation causing exclusion from working with EMSA by any federally or state funded healthcare program.
7. Must have a successful Criminal Background Check without any Disqualifiers as detailed herein below in Disqualifiers - Criminal.
8. Successful passing of physical agility testing, for applicable to positions
9. Successful completion of drug screening following EMSA's Drug and Alcohol Policy.
 - a. Unsuccessful completion of a drug or alcohol screening prohibits eligibility for employment for 365 calendar days.
10. Oklahoma State Driver's License. (for applicable positions)
11. Any position requiring licensure, registration, or certification, must meet their respective requirements.
 - a. Candidates selected for employment must submit proof of licensure, registration, or certification prior to employment by EMSA.
 - b. Documented proof of licensure, registration or certification is maintained within the Team Member's departmental records.
12. Preferred but, not required.
 - a. Proof of receiving Hepatitis B series.
 - b. Proof of receiving Tuberculous Vaccination.

B. Disqualifiers-Criminal, Credentials, and Other incomplete or untruthful information intentionally provided by the applicant/Team Member may disqualify an individual for initial or continued employment with EMSA. EMSA may deny an applicant eligibility for employment or terminate a Team Member based on the following:

1. Conviction of a felony.
2. Conviction or a pending charge (whether felony or misdemeanor) involving physical assault; use of a dangerous weapon; sexual abuse or assault; abuse of children, elderly individual, or infirm individuals; crimes against property – including robbery, burglary, embezzlement, felony theft, financial exploitation, computer crimes, forgery, or identity theft; or other offenses involving fraud or deceptive practices.

3. Any conviction or pending charge (whether felony or misdemeanor) which involves the manufacturing, selling, possessing, distributing, diverting and/or stealing controlled substances.
4. Any conviction or pending charge (whether felony or misdemeanor) which would cause the applicant or Team Member to be ineligible for licensure with the State of Oklahoma, which would include without limitation any of the following offenses:
 - a. assault, battery, or assault and battery with a dangerous weapon; aggravated assault and battery.
 - b. murder, attempted murder, or manslaughter.
 - c. rape, incest, or sodomy.
 - d. indecent exposure and indecent exhibition.
 - e. pandering; child abuse; abuse, neglect, or financial exploitation of any person entrusted to his care or possession.
 - f. burglary in the first or second degree; robbery in the first or second degree; robbery or attempted robbery with a dangerous weapon, or imitation firearm.
 - g. arson.
 - h. substance abuse.
 - i. or any other matter identified in the State of Oklahoma regulations relating to licensure in the EMS profession which would make the individual ineligible for licensure or renewal.
5. Any conviction or arrest or pending (whether felony or misdemeanor) involving a dangerous weapon.
6. Any arrest for a felony while employed if such the charges are not resolved within thirty (30) days by way of dismissal or acquittal.
7. Failure to disclose a covered criminal conviction, withholding of any information regarding such conviction, or failure to self-disclose information relating to conviction or arrest covered by EMSA's policies shall be grounds for denial of initial employment or termination.
8. Any such other Conviction which in EMSA's sole discretion would render the applicant unfit for public service, is inconsistent with EMSA's mission, or otherwise might jeopardize public health and safety based on:
 - a. The seriousness of the crime.
 - b. Whether the crime relates to performance of the duties of an EMS professional or other job duties assigned by EMSA.
 - c. How much time has elapsed since the crime was committed;
 - d. Whether the crime involved violence to, or abuse of, another person.
 - e. Whether the crime involved a minor or a person of diminished capacity.
 - f. Whether the applicant's or Team Member's actions and conduct since the crime occurred are consistent with the holding of a position of public trust.
 - g. Whether the applicant or Team Member is a repeat offender or has a pattern of criminal conduct; and
 - h. Whether the applicant or Team Member has complied with all court orders and probationary or other requirements associated with the conviction.
9. Any denial, revocation, non-renewal of licensure, certification, or registration or other adverse decision or action by the Oklahoma State Department of Health, any other State Licensing Board or the National Registry of Emergency Medical Technicians.



10. Misrepresentation regarding education, certification, licensure, other credentials, or prior work experience.
11. Dishonorable discharge from the military.
12. Any violation of the terms or conditions of a deferred adjudication or sentence, work release, or other probation requirements.
13. Any exclusion from state or federal healthcare programs.
14. Any crime involving moral turpitude.

C. Background Disqualifiers-Driving

A Team Member will not be permitted to operate an EMSA vehicle in the performance of their job duties if the Team Member:

1. Is convicted, receives deferred adjudication, or pleads guilty or *nolo contendere* to DWI, DUI, or hit and run within the past 36 months, or more than once in the past ten years.
2. If the Team Member's driver's license and driving privileges have been suspended by the Department of Public Safety (DPS).
3. Does not have a current, valid Oklahoma driver's license. A restricted driver's license, a temporary driving permit, and a temporary occupational license do not qualify as a current, valid Oklahoma driver's license under this policy.
4. If the Team Member is under 21 and is required to drive an EMSA company vehicle, they must have a clear MVR.
5. If the Team Member is ages 21-24, and is required to drive an EMSA company vehicle, they must have no more than two moving violations within 24 months.
6. If the Team Member is over 25, and required to drive an EMSA company vehicle, they can have no more than 4 serious traffic violations in any 36-month period. Examples of serious traffic violations include reckless driving, driving more than 20 miles over the speed limit, speeding in a school zone, driving without a license; failing to stop for a school bus; leaving the scene of an accident, open container violation, and failing to stop at stopped RR crossing or for a train.
7. A Team Member, that is over 21, cannot have more than one vehicular accident within any 36-month period in which the Team Member is at fault: and/or
8. Has anything else in their driving record, including any combination of moving violations and/or accidents which EMSA deems unacceptable.

D. Self-Reporting Requirements.

1. Team Members must disclose any criminal conviction (whether a felony or misdemeanor) or arrest (whether a felony or misdemeanor) to their immediate supervisor and/or manager, as well as Human Resources, before the beginning of their next scheduled workday after the conviction.
2. If a Team Member is charged, arrested, or indicted for a crime listed above as a disqualifier for initial or continued employment (whether a felony or misdemeanor), the Team Member must disclose the charge, arrest, or indictment to their immediate supervisor and/or manager, as well as Human Resources, before the beginning of their next scheduled workday after the charge, arrest or indictment.
3. Any Team Member charged, arrested, or indicted for a crime listed above as a disqualifier for initial or continued employment (whether a felony or misdemeanor) will be suspended without pay for thirty (30).

- a. If a dismissal of the charges or an acquittal is not rendered within the thirty (30) days, the Team Member will be terminated.
 4. Any Team Member who operates company vehicles are likewise required to report all traffic citations or violations which might result in the revocation or loss of their driver's license to their immediate supervisor and/or manager, as well as Human Resources, before the beginning of their next scheduled workday after the citation.
 - a. Team Members who never operate a vehicle as part of their job duties are not required to report minor traffic violations/citations.
 5. Any Team Member holding a licensure, certification, or registration which was the subject of revocation, non-renewal or other adverse action is required to report such action to their immediate supervisor and/or manager, as well as Human Resources, before the beginning of their next scheduled workday after the revocation, non-renewal, or other adverse action.
 6. A Team Member's failure to self-disclose or timely disclose any of the matters addressed above or elsewhere in the EMSA Policies will result in corrective action, up to and including separation from employment.
- E. Requirements for Continuous Employment
1. EMSA will conduct routine and/or periodic background screenings against Local, State and Federal guidelines to ensure continued eligibility for employment.
 2. It is mandatory that clinical Team Members will provide proof of renewal for any position requiring licensure, registration, or certification in accordance with the Oklahoma State Department of Health.
 3. When licensure, registration or certification is obtained, it is the Clinical Team Members responsibility to present verification of licensure, registration, or certification to the Clinical Services Department.
 4. Expiration of Licensure, Registration & Certification.
 - a. Clinical Team Members whose licensure, registration or certification expire or is suspended or revoked and/or fail the testing standards set forth by the Office of the Medical Director, are given a written warning and placed on an immediate unpaid leave of absence not to exceed thirty (30) calendar days unless the licensing agency grants a specific grace period. Proof of renewal must be presented to the Clinical Services Department within 30 calendar days.
 - b. Clinical Team Members will not be allowed to use accrued leave while their services are suspended. Any time missed will be considered leave without pay / unscheduled occurrence.
 - c. If a Clinical Team Member is ineligible for licensure, registration or certification renewal or fails to renew his/her license, registration, or certification within thirty (30) calendar days, the Team Member will be terminated.
- F. In the event the background screening reveals findings or issues of concern regarding prospective Team Member/Team Members, the following procedures will commence:
1. The reporting agency will be contacted to confirm the identity of the prospective Team Member as the facts underlying the report.
 2. The prospective Team Member will be presented with the findings.
 3. If the questionable history is confirmed, the conditional offer of employment will be withdrawn, or if a current Team Member, this could result in corrective action, up to and including separation of employment.



Policy Title: Fair Labor Standards Act

Policy # HR2

Policy Category: Human Resources

Policy Owner: Chief Administrative Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 12/01/2020	Policy Origination Date: 07/31/2012
	Last Revision Date: 07/31/2013
	Date of Last Legal Review: 07/31/2013
Related Policies: Additional Resources:	

1. Purpose

It is the policy of EMSA to adopt and implement the provisions of the Fair Labor Standards Act as the basic compensation policy of the organization. Overtime work necessary for operational continuity should be managed in the most efficient and economical manner possible and EMSA pay practices will comply with the provision of equitable consideration for work performed.

2. Scope

This policy applies to all EMSA Team Members.

3. Terms/Definitions

- A. Regular hours: The FLSA requires that all covered, non-exempt Team Members be paid at least the minimum wage for all hours worked.
- B. Overtime hours: The FLSA defines overtime as the time that Team Members work over the threshold of 40 hours a week. Overtime is paid as one- and one-half times base hourly wage.
- C. Work week: EMSA’s workweek is defined as beginning on 0001 hour on Sunday. The workweek ends on the following Saturday at midnight. For those Team Members with work shifts that are scheduled through the midnight hour, i.e., any shift that starts before midnight and ends after the 0001 hour on the next day is considered a full shift from the day of clock in. Therefore, their full shift work hours and any applicable overtime hours will be calculated in the Sunday through Saturday workweek.

4. General Policy Parameters

- A. Fair Labor Standards Act Job Categories
The FLSA recognizes two basic categories of jobs:
 - 1. Exempt Team Members – Team Members Not covered by the act.
 - 2. Nonexempt Team Members – Team Members covered by the act.
- B. Overtime is not provided to exempt Team Members. It is recognized that such Team Members normally will devote more than forty (40) hours per week to their jobs, and that their effectiveness is measured by attainment of established goals and objectives rather than expenditure of time and effort. Due to



this, necessary time off may be granted for personal business as the work situation permits and upon consideration of the employee's effectiveness in carrying out assigned responsibility.

- C. Team Members who are non-exempt based on the FLSA definition shall be paid overtime for all hours worked in excess of forty hours in one (1) work week.
 - 1. For purposes of overtime, only actual hours worked are calculated i.e., paid vacation, paid holidays, PTO or other paid time off does not count as actual time worked during the 40-hour workweek.

5. Procedures

- A. Overtime shall be computed to the nearest quarter hour.
- B. Overtime and any time worked outside of Team Members' regular work schedule must be approved in advance by the Team Member supervisor except in an emergency situation when advance approval would not be possible.
- C. Submitting or allowing the submission of incorrect timecards or otherwise falsifying time records will be deemed to be misconduct and subject such employees to disciplinary action, up to and including termination of employment.



Policy Title: Status Designation &
Status Changes

Policy #HR3

Policy Category: Human Resources

Policy Owner: Chief Administrative Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 10/08/2012
	Last Revision Date: 10/08/2012
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

This policy defines the categories of Team Member positions and status changes throughout employment with EMSA.

2. Scope

This policy applies to all EMSA Team Members.

3. Terms/Definitions

- A. Executive Leadership: The following members constitute Executive Leadership at EMSA: President/CEO and designated Chiefs.
- B. Operations Team Members: Those members in departments that are responsible for or support direct patient care. Those departments include (but are not limited to), field operations (including supervisors), communications, clinical education and training, materials and logistics, fleet management, deployment planning and scheduling and others as determined from time to time.
- C. Business Services Team Members: Those members in departments that are not responsible for or that do not support direct patient care. Those departments include (but are not limited to), senior leadership under direct supervision of the President and CEO or a member of Executive leadership, patient business services, accounting, information technology, compliance, grant funded departments and others as determined from time to time.

4. General Policy Parameters

- A. All Team Members shall be assigned an employment status designation in one of the following categories:
 - 1. Full Time: Team Members are usually scheduled to work a minimum of 40 hours per week and are eligible for all benefits. Full time status will be determined by the team member's designated department head.



2. Part Time: Team Members may or may not have a regular schedule and usually work less than 30 hours per week; however, there is not a set maximum number of hours that a part-time team member may work per week.
 - a. Part Time Operations Team Members working in the Field or the Communications Center are required to work a minimum of 3 shifts and no less than 30 hours per month and special events shall not be included in the monthly minimum.
 - b. Part Time Operations Team Members should work with the scheduling department to ensure that the minimum monthly shift schedule requirements have been met. Team members not working required minimum shift schedules are subject to termination.
 - c. Part Time team members shall not establish full time employment status by virtue of adding hours to their work schedule.
 - d. Part Time Team Members do not qualify for FMLA or medical leaves of absences.
 3. PRN, as needed: Team members working PRN work less than 40 hours per week and are not regularly scheduled.
 4. In accordance with the Office of the Medical Director's credentialing standards, credentialed Operations Team Members are required to work at least one (1) shift per month and six (6) per quarter to maintain clinical privileges in the EMSA system.
 - a. If a PRN team member with at least one (1) year of service with the employer cannot work the number of shifts reflected above, the PRN team member may request a status change to "Inactive" status in writing to the Human Resources Department for no longer than six (6) months.
- B. Probationary Period for All New Team Members**
1. New full-time Team Members will serve a probationary period of up to six (6) months from their date of hire. This period is used to determine whether the employment relationship should continue.
 2. During this probationary period, frequent informal and formal performance evaluations may be held. If EMSA determines, at its sole discretion, that a satisfactory performance level cannot be achieved through a reasonable amount of training and coaching, probationary Team Members will be released from employment.
 3. A Team Member's probationary period may be extended by request of the Supervisor and approval from a member of Senior or Executive Leadership.
- C. Status Change Requests from Department to Department & Within Department**
1. Request for status changes should be submitted in writing, with two-weeks' notice to the department Supervisor. Management reserves the right to approve, deny and/or change requests based on operational needs.
 - a. Upon approval, Team Member must work in the new position or status for at least six (6) months effective with the start date of the approved change.
 - b. Requests for status change from department to department must be approved by both department Supervisor and by a member of Senior or Executive Leadership.



Policy Title: At Will Employment

Policy # HR4

Policy Category: Human Resources

Policy Owner: Chief Compliance Officer

Approval Authority: Compliance Committee and CEO

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

Notice to all Team Members that you are an at-will Team Member.

2. Scope

This policy applies to all EMSA Team Members regardless of their classification as full-time, part-time, or temporary.

3. General Policy Parameters

- A. Regardless of full-time, part time, or temporary employment status all EMSA team members are employed "at will".
- B. Nothing in this policy or any other EMSA policy, including without limitation the EMSA Team Member handbook and Code of Conduct or any other document, constitutes a promise or contract establishing or guaranteeing employment, benefits, assignments, position, or compensation for any specific period of time.
- C. It is a condition of initial and continued EMSA employment that every Team Member agrees to become familiar with and be bound by the terms and conditions established by EMSA's policies, including without limitation the Team Member handbook and Code of Conduct, and that every EMSA Team Member acknowledge his or her at-will employment status and agrees to be employed at-will continuously until separation.
- D. As an at-will Team Member, you have the right to terminate your employment at any time, with or without cause, reason, or advance notice.
- E. As an at-will employer, EMSA has the right to terminate your employment at any time, with or without cause, reason, or advance notice.
- F. Nothing contained in EMSA's policies, including without limitation the Team Member handbook and Code of Conduct, nothing in any workplace policy or rule of EMSA, and no oral or written representation, statement or promise made by any chief, officer, director, trustee, manager, supervisor, Team Member or agent of EMSA shall alter the at-will employment between you and EMSA or restrict the option of you or EMSA to terminate the employment relationship without incurring liability to the other for the



termination, regardless of whether the termination is for cause and regardless of whether advance notice of termination is given.

- G. Although other terms or conditions of employment may change, such changes do not alter the “at will” relationship which will remain in effect throughout employment.
- H. No chief, officer, director, trustee, manager, supervisor, team member, or agent, including any team member or agent with hiring authority, has the authority to enter into any agreement or contract (express or implied) for employment for any specified duration or to make any agreement, promise, contract, guarantee, or commitment that contradicts or alters the at-will employment relationship.



Policy Title: Employment of Team Members Relative

Policy # A022021

Policy Category: Administrative

Policy Owner: Chief Compliance Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 01/27/2021
	Last Revision Date: NA
	Date of Last Legal Review: 01/27/2021
Related Policies: Additional Resources:	

1. PURPOSE

The EMSA desires to give any qualified relative of a current Team Member the opportunity for employment, so long as employment does not, in the opinion of the President/CEO, create actual or potential conflicts of interest.

The purpose of this policy is to establish a procedure as to how Team Members should conduct themselves within the workplace, which includes during working hours and within the working environment.

2. SCOPE

All EMSA Team Members.

3. DEFINITION

Relative is defined as any person related by blood or marriage within the third degree and includes without limitation to spouse, child, step-child, child in law, step child in law, grandchildren, step-grandchild, parent, step-parent, parent-in-law, sibling, step-sibling, sibling-in-law, sibling, grandparent, grandparent-in-law, step-grandparent, aunt, uncle, niece, nephew, domestic partner, or first cousin as well as any corresponding in-law or 'step' relation.

4. POLICY

- A. Qualified applicants who are Relatives of current Team Members may be hired subject to the following guidelines:
 - 1. No Team Member should be supervised within the span of control of a Relative or be transferred into such a reporting or supervisory position.
 - 2. No Team Member should discipline or evaluate the performance of a Relative.
 - 3. No Team Member should be in a position that audits, verifies, receives, or is entrusted with monies received or handled by a Relative.
 - 4. No Team Member should occupy a position in which a they can initiate or participate in decisions involving a direct benefit to the Relative. Such decisions include hiring, retention, transfer,



Employment of Team Members Relative

- promotion, wages and leave requests, or other circumstances which would place the Team Member in an actual or reasonably foreseeable conflict of interest.
5. No Team Member should access or make changes to a Relative's wages, benefits, or other employment related information, which includes without limitation the Relative's human resources file, education file, or credentialing file.
 6. No Team Member should be regularly scheduled to work on the same shift as his/her Relative or be transferred into such a position; and
 7. When an applicant seeks employment with EMSA, the Applicant shall notify Human Resources of any Relative employed with EMSA.
- B. In most cases, EMSA discourages employment of a Relative unless these guidelines are followed. However, if approved by the CEO/President, the Board of Trustees shall have final approval authority.
- C. In no case shall any Team Member or dependent have double coverage under EMSA's benefit plans.
- D. The fact that a Team Member is a Relative of a member of the EMSA's Board of Trustees does not make such person ineligible for employment or receipt of a compensation, so long as the Relative Trustee abstains from any vote or action by the Board of Trustees in relation to the appointment or promotion of such Relative Team Member or any vote or action in relation to the specific compensation involving said Relative Team Member. However, such prohibition shall not apply where blanket raises are given by the Board of Trustees to all EMSA Team Members similarly situated on an equal basis.
- E. Any grievance, claim or complaint asserted against the EMSA or a Team Member of the EMSA, wherein the complainant or aggrieved individual is a Relative of either the President/CEO, a Trustee, Officer, Director, Manager or Supervisor, or where the person to whom the grievance, claim, or complaint is directed is a Relative of the President/CEO, a Trustee, Officer, Director, Manager or Supervisor, such matters should not be acted upon by either the President/CEO, Trustee, Officer, Director, Manager or Supervisor, as the same presents either an actual or perceived conflict of interests.
- F. In situations where a conflict, actual or perceived, arises, even if there is no supervisory relationship involved, the Team Members may be separated by reassignment or terminated from employment at the sole discretion of EMSA.
- G. Team Member Relationships:
1. EMSA strongly believes that a work environment where Team Members maintain clear boundaries between Team Member personal and business interactions is the most effective manner to allow the EMSA to fulfill its duties and responsibilities to the citizens and communities served by the EMSA.
 2. Although this policy does not prevent the development of friendships and romantic relationships between EMSA Team Members, it does establish boundaries as to how relationships are conducted



Employment of Team Members Relative

- during work hours and while within the working environment, which includes any event or activity sponsored by the EMSA.
3. Any relationship must not interfere or cause an adverse impact to the operation of the EMSA, nor with the image of the EMSA to the public. Team Members who have entered a romantic relationship are strictly prohibited from engaging in physical contact that is inappropriate while anywhere on EMSA premises, whether during working hours or not regardless of whether the Team Member is on the clock or not, or within the working environment.
 - a. This policy would likewise apply to any event or activity sponsored by EMSA regardless of the location.
- H. Team Members are prohibited from allowing personal relationships with co-workers, romantic or otherwise, from adversely affecting the work environment.
- I. Team Members conduct while off-duty is generally regarded as private, if such conduct does not create problems within the workplace or work environment and is not considered harassment as defined elsewhere in the EMSA's Policies.
- J. Any management, supervisory, or other team member who have influence or supervisory responsibilities over other Team Members are subject to more stringent requirements due to the nature of their positions, their access to sensitive information, and ability to affect the terms and conditions of employment of individuals in subordinate positions.
 1. Anyone who has Team Members reporting to him/her is prohibited from the development of a romantic relationship with a subordinate and may be subject to corrective action for such, up to and including termination.
- K. Failure to cooperate with the EMSA to resolve any conflict or problem caused by a romantic or other relationship between co-workers in a mutually agreeable fashion may be deemed to be insubordination and cause for immediate termination.
- L. If such Team Member relationship leads to the establishment of a familial relationship to where such Team Members become relatives as defined in this Policy, the individual Team Members will jointly decide who is to be transferred. If that decision is not made timely, the President/CEO will make such decision for the Team Members.
- M. When a conflict of interest or potential for a conflict of interest arises because of a personal or family relationship between Team Members, even if there is not a direct line of reporting involved, the President/CEO, in the best interest of EMSA, may relieve one or both Team Members of their duties/employment.
- N. Management or anyone else in sensitive or influential positions must disclose the existence of any relationship with a coworker that has progressed beyond a plutonic friendship as well as disclose any familial relations. This disclosure should be made to their direct supervisor in writing signed by both



Team Members and provided to the CEO and to the Chief Compliance Officer. This will enable the EMSA to determine whether any conflict of interest exists.

- O. Additionally, the following relationships and transactions are forbidden as Team Member of EMSA:
 1. External business relationships between management and subordinate Team Members are strictly forbidden.
 2. Supervisory Team Members are forbidden from living with subordinates unless those Team Members are Relatives, which includes those who are formally married or have a civil union recognized by the State of Oklahoma.
 3. The EMSA reserves the right to issue corrective action, up to and including termination, for Team Members who engage in the actions.



Policy Title: Drug and Alcohol Use

Policy # HR5

Policy Category: Human Resources

Policy Owner: Chief Compliance Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 07/31/2012
	Last Revision Date: 07/31/2013
	Date of Last Legal Review: 01/2021
Related Policies: EMSA Conditions for Employment, EMSA Code of Conduct	
Additional Resources: Federal Drug Free Workplace Act	

1. Purpose

EMSA is committed to providing a drug- and alcohol-free workplace that protects the health and safety of all Team Members as well as the public EMSA serves. Drug and alcohol use and abuse have a detrimental effect upon high standards of performance and conduct, as well as, the safety of all team members, our patients, and the public we serve. Alcohol and drugs are not allowed on company property at any time.

2. Scope

This policy applies to all EMSA Team Members, regardless of their position or assignment, whether temporary or otherwise. All applicants/candidates for employment are required to successfully pass a drug screen prior to being employed in order to work at EMSA.

3. Policy

EMSA is a federal contractor or grantee, and as such, must comply with the Drug Free Workplace Act of 1988, which means EMSA is required to maintain a drug free workplace. This means that all employees must be free from the influence of drugs or alcohol to work at EMSA. EMSA may test an employee, or potential employee, for illegal inappropriate drug or alcohol use during the pre-employment process, for reasonable suspicion, fitness for duty, follow-up, or post-accident. Refusal to submit to testing will be deemed insubordination and may result in immediate termination.

The Authority does not desire to intrude into the private lives of its employees but recognizes that an employees' involvement with drugs and alcohol is detrimental to workplace and undermines the public's confidence in EMSA and its employees. Therefore, EMSA reserves the right to take appropriate disciplinary action for drug use, diversion, sale or distribution while on or off company premises.

EMSA will immediately terminate a Team Member who is convicted of manufacturing, selling, possessing, distributing, diverting and/or stealing controlled substances. If a Team Member is charged with manufacturing, selling, possessing, distributing, diverting and/or stealing controlled substances or any charge related to controlled substances, the employee will be suspended without pay for thirty (30). If a dismissal of the charges or an acquittal is not rendered within the thirty (30) days, the employee will be terminated. Team Members must disclose any arrest, charge, criminal conviction, deferral agreement/judgment, deferred sentence, or plea bargain involving a felony or misdemeanor to Human Resources and their direct supervisor no later than twenty-four hours of any of the aforementioned action(s).



Any Team Member taking a legal drug, other prescribed medication, or supplement that is known to affect or impair judgment or work performance must notify his/her supervisor or manager prior to reporting to work. The Team Member will be asked to provide a physician's authorization to return to work once the medication dosage has been exhausted.

All information, including drug-testing collection, medical records, and test results, will remain confidential and kept separately in a medical file. The release of any drug-testing information will be on a strict need-to-know basis. Release of records will occur only if required by law or with the written consent of the Team Member, or if permitted under other company policies.

4. Procedural Guidelines for Policy

Under this policy, the following conduct is prohibited:

- A. Having a detectable trace of a prohibited substance in his/her system while on EMSA property, while conducting business for EMSA, or while taking care of patients. For purposes of this policy, a prohibited substance is any substance that has known effects which can alter or impair a function of the mind or body, specifically including, but not limited to:
 1. Illegal drugs
 2. Controlled substances
 3. Prescribed medication, which is not used as prescribed or which, even when used properly, can alter, or impair a function of the mind or body to the extent that the patient cannot safely perform the essential functions of his or her EMSA position or assignment, whether temporary or otherwise.
 4. Prescribed or non-prescribed medication not properly or adequately identified.
- B. A Team Member found to have a detectable trace of a prohibited substance while on EMSA property while on-duty, during the performance of their duties at EMSA, or while taking care of patients is in violation of this policy and is subject to discipline, including termination of employment, even for a first violation.
 1. Use, possession, sale, purchase, or transfer of illegal drugs by Team Members while on duty or while on EMSA property.
 2. Use or possession of alcohol or illegal drugs while on duty or while on EMSA property.
 3. Consumption, possession, or transfer of alcoholic beverages while on duty or on EMSA property.
 4. Being on duty or on EMSA premises while impaired by or under the influence of a legal drug if safety is compromised or if job performance is affected. No prescription drug will be brought on EMSA premises by any person other than the person for whom it is prescribed. Such prescription drug shall be used or consumed only in the frequency, manner, combination, and quantity prescribed. A prescription drug is any substance prescribed for individual consumption by a licensed medical practitioner. Any Team Member taking, or under the influence of, a prescription drug while on EMSA premises or while on duty shall notify his or her supervisor of any known effects or side effects of said prescription which has affected or may impact the team member's mental, emotional, or physical condition. If a Team Member is taking a prescribed medication that may impact performance, EMSA recommends that Team Member contact Human Resources to determine if there is a reasonable accommodation that would permit the Team Member to perform the essential functions of their position or assignment, whether temporary or otherwise.

C. Drug & Alcohol Testing



To enforce this policy against drugs and alcohol, EMSA will require a job-applicant or a Team Member to undergo a test for drugs and/or alcohol under the following circumstances:

1. Testing for Applicants: Applicants for all job positions, or for new positions or new assignments, including promotion or demotion, will be required to undergo testing for drugs and alcohol upon a conditional offer, or prior to or promptly upon a change of duties or new assignment. Job applicants will be provided a copy of this policy on or before acceptance of a conditional offer. A refusal or neglect to take the test or a positive test will result in the withdrawal of the conditional offer or, if the refusing person is a Team Member, the withdrawal (in EMSA's sole discretion) of the promotion or new assignment, and will also result in discipline, including termination of employment.
2. Other Testing: Current Team Members may be required to undergo testing for drugs and/or alcohol in the following circumstances, each of which constitutes cause for requiring a test:
 - a. For Cause Testing: Testing for drugs and alcohol at any time EMSA reasonably believes that a Team Member may be under the influence of or impaired by drugs or alcohol, including, but not limited to the following circumstances, each of which constitutes cause for requiring a test:
 - i. Drugs or alcohol on or about the person or in the apparel of a Team Member or in the vicinity of a Team Member.
 - ii. Physical symptoms of influence, impairment, or intoxication, observation of illegal drug use or attempted use or possession, a performance pattern of abnormal, unusual, or erratic behavior, or EMSA's receipt of other credible information of use or possession.
 - iii. A credible report of drug or alcohol use or possession by the Team Member.
 - iv. Credible Information that the Team Member has tampered or attempted to tamper with any aspect of drug and/or alcohol testing at any time.
 - v. Excessive or unexplained absence or tardiness of the Team Member.
 - b. Post-Accident Testing: Testing for drugs or alcohol if the Team Member or another person has sustained an injury while on duty or on EMSA's premises, or if EMSA's real or personal property has been impaired or damaged, including damage to equipment, if the personal injury is of a type which could be the caused by or result from drug or alcohol use.
 - c. Random Testing: Testing at random for drugs and alcohol of a Team Member or all members of an employment classification or group. Random testing may be limited to a particular employment classifications or groups. Team members who do not work in safety-sensitive positions or assignments will not be subject to random testing but will be required to undergo testing as otherwise provided in this policy or if there is reasonable suspicion that such Team Member has violated or is violating any requirement of this policy.
 - d. Scheduled, Periodic Testing: Testing for drugs or alcohol if the test is conducted as part of a routinely scheduled Team Member fitness-for-duty medical examination or is scheduled routinely as part of EMSA's written policy. One example of routinely scheduled testing is the test required after a Team Member has been absent with approval for all or part of seven (7) consecutive shifts, each of which the Team Member would have been scheduled to work if leave had not been approved.
 - e. Post-Rehabilitation Testing: Random testing for drugs and alcohol for a period of up to two (2) years commencing with the return to work of a Team Member following a positive test or following participation in a drug or alcohol treatment program or similar group, plan, or facility.



D. Substances That May be Tested

The substances which may be tested under this policy are drugs and their metabolites and alcohol. Drugs are considered “illegal drugs” under this policy if made illegal by law and, even if legal by law, are deemed to be “illegal” for a Team Member unless they have been legally prescribed to the Team Member or are over the counter medicines, which drugs are being used or consumed in the recommended dosage and with the prescribed frequency and for the purposes for which they are prescribed or manufactured. If the drug has been legally prescribed or is an over-the-counter medicine, and the drug is being used in the recommended dosage, in the recommended frequency, and for the purposes for which it was prescribed or manufactured, such drugs are not prohibited by this policy unless they impair or have the potential to impair the individual’s ability to safely perform the essential function of their position or assignment, temporary or otherwise.

E. Marijuana Use:

Many states have legalized the use of marijuana for either recreational or medical use. Team Members should be aware that marijuana is still illegal under federal law. EMSA is a Federal Contractor/Grantee and must maintain a Drug Free Workplace and comply with the Drug Free Workplace Act of 1988. Many Team Members are in “safety-sensitive” positions and are not permitted to use marijuana. Team Members should be aware that EMSA is not required to accommodate any use of marijuana at the workplace for employees who perform safety-sensitive positions. In addition, Team Members may not be under the influence of any intoxicating substance, including marijuana while working.

“Marijuana” as used in this policy includes all parts of the plant Cannabis Sativa L., whether growing or not, in any form, whether usable or not, including plants, seeds, roots, stems, resin, salt, derivative, mixture, preparation, cakes, stalks, and leaves. “Marijuana” as used in this policy includes the definitions thereof found in federal law, and includes any cannabinoid, any metabolite of marijuana or of any of its constituents, any substance containing cannabis in any form or formula, and any compound that is an active chemical, principle, or component of marijuana. EMSA Team Members are not permitted to use or possess marijuana for any purpose. In addition, Team Members may not be under the influence of or test positive for any illegal substance, including marijuana, while on duty or while on EMSA premises.

Cannabidiol (CBD) and other Marijuana based products are not regulated by the Food & Drug Administration (FDA). These products may contain tetrahydrocannabinol (THC), which is the psychoactive ingredient found in Marijuana. Because these products are not regulated by the FDA, the labelling on these products may not be accurate and may contain levels of THC that can cause impairment. Team Members must be aware that their use of these products may impact their performance and safety. Additionally, Team Members in safety-sensitive positions, who test positive for the presence of THC due to their use of CBD products will be disciplined and/or terminated consistent with this policy.

F. Team Members Subject to Policy

All Team Members of EMSA are covered in this policy. The term “Team Member” means a person who is employed by EMSA on a regular or temporary basis in a full time or part time.

G. Collection Procedures and Testing Methods

Testing of current Team Members currently providing services to EMSA will be treated as work time for purposes of compensation and, if applicable, benefits. EMSA will pay the cost of initial testing, but not of subsequent or confirmation testing requested by the Team Member.



Samples for testing for drugs or alcohol will be conducted on a Team Member's tissue, fluid, or body product capable of revealing the presence of drugs and alcohol. EMSA may have an outside entity obtain the sample and perform the test. The company may also utilize other methods which are reasonably calculated to detect the presence of drugs and alcohol, including, but not limited to, a breathalyzer test, or testing by use of a single-use test device, known as an on-site or quick testing device. However, a breathalyzer test will not be grounds for immediate termination of employment absent a confirmation test. Each Team Member consents to a follow-up test for that purpose.

H. Positive Test Result and Challenging Test Result

A positive test result is a violation of EMSA policies. The Team Member may explain the test results to Human Resources or a designated representative of EMSA. An applicant and/or Team Member may challenge the results of a positive test by requesting a confirmation test of a sample within twenty-four (24) hours of receiving notice of a positive test. The applicant or Team Member challenging the results of positive test must pay all costs of the confirmation test unless the confirmation test reverses the findings of the challenged positive test. In such cases, EMSA will reimburse the applicant or Team Member for the costs of the confirmation test.

I. Information and Records

Team Members tested may inspect and request copies of records of all drug and alcohol test results and related information maintained by EMSA. EMSA will not release such records to anyone other than the person tested, or the review officer, unless (1) the individual tested, in writing following the receipt of the test results, has expressly granted permission for EMSA to release the records or (2) in order to comply with a valid judicial, or arbitral, or administrative order or subpoena, or (3) in response to a claim or lawsuit asserted or filed by the Team Member against EMSA or against any past or current Trustee or Team Member of EMSA.

J. Disciplinary Action

If a Team Member has a positive test result or has violated any other provision of this policy, EMSA may take any disciplinary action against the individual, up to and including termination of employment, even for a first violation. However, if the test was done utilizing a breathalyzer, the positive test must be confirmed by a subsequent test prior to termination of employment. EMSA may take disciplinary action, including termination, against a Team Member who acts in a manner intended to avoid or evade a test or valid test result or who refuses or neglects to undergo a required drug or alcohol test. The concealment, adulteration, or attempted adulteration of a specimen or of a drug or alcohol test sample or result is considered a refusal to test.

Refusal or neglect to submit to required testing will be deemed insubordination and may result in discipline, including termination of employment.

EMSA may terminate a Team Member who is placed on a deferred prosecution or deferred sentencing for or who is convicted of manufacturing, selling, using possessing, distributing and/or taking a controlled substance, or being under the influence thereof, even if the conviction is on appeal.

K. Medication Monitoring

EMSA will actively monitor and audit the use of all medications related to patient care. This audit will include monitoring of medications to ensure that the provision of medications and use are consistent with all statewide patient treatment protocols. This will include all medication (both prescription and non-prescription medications) and controlled substances.



Any medication use, or patterns of medication use, that are suspect, will be investigated. Should there be any misappropriation or diversion of medications by personnel, the Team Member will be subject to discipline, up to, and including termination from employment. Additionally, EMSA will cooperate with all local, state, and federal authorities and their efforts to criminally and civilly investigate medication related crimes.



Policy Title: Smoking and Use of Tobacco/Tobacco Like Products

Policy #HR6

Policy Category: Human Resources

Policy Owner: Chief Compliance Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 11/01/2013
	Last Revision Date: 04/15/2014
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

This policy establishes the guidelines for a tobacco free workplace.

2. Scope

This policy applies to all EMSA Team Members, vendors, visitors, and guests on or in EMSA property.

3. General Policy Parameters

- A. Smoking, vaping, or the use of smokeless tobacco products while on/in EMSA property is prohibited.
 - 1. Electronic Cigarettes (e-cigarettes) and “vapes”, or any other smoking like devices are prohibited regardless of whether or not they contain nicotine.
 - 2. EMSA Property includes all EMSA facilities, parking lots, and EMS vehicles.
- B. Smoking, vaping, or the use of smokeless tobacco products at any scene or dispatched destination is prohibited.
 - 1. This includes the grounds of hospitals, medical clinics, senior living facilities, nursing homes, and other healthcare or elderly care facilities.
 - 2. This applies regardless of whether the specific facility has a prohibition of tobacco use or whether the crew is actively assigned to a call.
- C. Smoking in public view while in uniform, or while out of uniform but representing EMSA in any official capacity is prohibited.
 - 1. Team members are ambassadors for and representatives of the EMSA system. Presenting with an odor of tobacco may undermine a Team Members credibility and efficacy in communicating with patients, colleagues, and key stakeholders.
- D. Smoking cessation such as nicotine patches, and nicotine gum are permitted.
 - 1. Gum may not be chewed during the provision of patient care or during transfer of care activities.



Smoking and Use of Tobacco/Tobacco Like Products

- E. Although this policy does not require Team Members to cease all use of tobacco, tobacco related products, if any Team Member voluntarily wishes to quit smoking or using tobacco related products, EMSA will support your decision and may have assistance available to help in your efforts.

- F. Any team member found to be in violation of this policy will be subject to disciplinary actions, up to and including termination of employment.



Policy Title: No Solicitation/No Distribution

Policy# HR7

Policy Category: Human Resources

Policy Owner: Chief Compliance Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 07/31/2012
	Last Revision Date: 07/31/2012
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

The No Solicitation No Distribution policy prohibits soliciting for any cause and the distribution of material for the purpose of solicitation on company property during working time.

2. Scope

This policy applies to all EMSA Team Members.

3. Terms/Definitions

- A. Solicitation – The act of offering, or attempting to purchase, goods or services.
- B. Distribution – The act of disseminating any printed or electronic materials during working time.
- C. Working time - Includes all time during which a Team Member is assigned to or engaged in the performance of job duties.

4. General Policy Parameters

- A. Team Members will not be permitted to solicit other employees in any working area during the working time of either Team Members (excluding authorized breaks such as lunch).
- B. Team Members will not be permitted to distribute circulars, handbills, or literature of any other type during the working time of either Team Member or on Company property.
- C. Team Members also may not use the Company’s intranet or other Company property to advertise or solicit other Team Members at any time.



Policy Title: Nondiscrimination/Anti-Harassment Policy and Reporting

Policy # HR8

Policy Category: Human Resources
Approval Authority: CEO and Board of Trustees

Policy Owner: Chief Compliance Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 10/08/2012
	Last Revision Date: 10/08/2012
	Date of Last Legal Review: 01/2021
Related Policies: EMSA Code of Conduct Additional Resources: OCR Title VII Civil Rights Act of 1964, Age Discrimination Act of 1967, American with Disabilities Act of 1990	

1. Purpose

This policy has been developed to ensure that all Team Members can work in an environment free from unlawful harassment, discrimination, and retaliation.

2. Scope

This policy applies to all applicants and Team Members, whether related to conduct engaged in by fellow employees or by someone not directly connected to EMSA (e.g., an outside vendor, consultant, or customer).

3. Terms/Definitions

- A. Equal employment opportunity (EEO) – Equal employment opportunity (EEO) means freedom from discrimination on the basis of protected classes such as race, color, sex, national origin, religion, age, disability or genetic information.
- B. Sexual Harassment - For the purposes of this policy, “sexual harassment” is defined, as it is in the Equal Employment Opportunity Commission (EEOC) Guidelines, as unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature when, for example:
 - 1. Submission to such conduct is made either explicitly or implicitly a term or condition of an individual’s employment.
 - 2. Submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual, or
 - 3. Such conduct has the purpose or effect of unreasonably interfering with an individual’s work performance or creating an intimidating, hostile or offensive working environment.
- C. Harassment - Under this policy, harassment is verbal, written, or physical conduct that denigrates or shows hostility or aversion toward an individual because of his or her race, color, religion, sex, sexual orientation, gender identity or expression, national origin, age, disability, marital status, citizenship, genetic information, or any other characteristic protected by law, or that of his or her relatives, friends, or associates, and that:
 - 1. Has the purpose or effect of creating an intimidating, hostile or offensive work environment.



2. Has the purpose or effect of unreasonably interfering with an individual's work performance, or otherwise adversely affects an individual's employment opportunities.

4. General Policy Parameters

- A. Team Members have the right to work in a professional atmosphere that promotes equal employment opportunities and prohibits unlawful discriminatory practices, including harassment.
- B. It is expected that all relationships among persons in the workplace will be business-like and free of explicit bias, prejudice, and harassment.
- C. EMSA encourages reporting of all perceived incidents of discrimination or harassment and will promptly and thoroughly investigate such reports. Retaliation against any individual who reports discrimination or harassment or participates in an investigation of such reports is prohibited.
- D. Conduct prohibited by these policies is unacceptable in the workplace and in any work-related setting outside the workplace, such as during business trips, business meetings and business-related social events.
- E. Sexual harassment may include a range of subtle and not-so-subtle behaviors and may involve individuals of the same or different gender. Depending on the circumstances, these behaviors may include unwanted sexual advances or requests for sexual favors; sexual jokes and innuendo; verbal abuse of a sexual nature; commentary about an individual's body, sexual prowess, or sexual deficiencies; leering, whistling, or touching; insulting or obscene comments or gestures; display in the workplace of sexually suggestive objects or pictures; and other physical, verbal, or visual conduct of a sexual nature.
- F. Harassing conduct includes epithets, slurs, or negative stereotyping; threatening, intimidating or hostile acts; denigrating jokes; and written or graphic material that denigrates or shows hostility or aversion toward an individual or group that is placed on walls or elsewhere on the employer's premises or circulated in the workplace, on company time or using company equipment by e-mail, phone (including voice messages), text messages, social networking sites or other means.

5. Reporting Procedures

- A. Individuals who believe they have been the victims of conduct prohibited by this policy or believe they have witnessed such conduct should discuss their concerns with their immediate supervisor, human resources representative, or any member of the EMSA Executive Team.
- B. If an individual is not comfortable reporting as outlined above, they may report concerns via EMSA's Compliance Alertline at (844) 490-1908 or via the website at <https://secure.ethicspoint.com/domain/media/en/gui/77043/index.html>, submission can also be made to emsacompliance@emsa.net.
- C. Supervisory Team Members or management Team Members that receive information about workplace discrimination, harassment, or retaliation activities, whether oral or written, must report it to their immediate supervisor or the Chief Compliance Officer promptly. Delay or failure to report such activity or complaint will result in disciplinary action or termination.



Policy Title: Job Opportunity Postings

Policy # HR9

Policy Category: Human Resources

Policy Owner: Chief Administrative Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 07/31/2012
	Last Revision Date: 07/31/2013
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

This policy defines the guidelines for posting EMSA job opportunities and ensuring that eligible Team Members have the opportunity to apply for open positions before and/or concurrently with external candidates.

2. Scope

This policy applies to all EMSA Team Members.

3. General Policy Parameters

- A. Open job opportunity postings will be communicated electronically to all Team Members.
 - 1. Posting will include the title, summary, essential duties, minimum qualifications, and instructions on how to apply.
 - 2. Posting will remain open for a minimum of three (3) business days.
- B. To be eligible to apply internal candidates must meet the following criteria:
 - 1. Team Member must have been employed with EMSA for a minimum of six (6) months;
 - 2. Team Member must be in good standing without any disciplinary counseling within the last six;(6) months, and
 - 3. have minimal attendance occurrences.



Policy Title: Dress Code Non-Uniformed

Policy # HR10A

Policy Category: Human Resources

Policy Owner: Chief Administrative Officer

Approval Authority: Compliance Committee and CEO

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 05/23/2012
	Last Revision Date: 05/23/2012
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

This policy established guidelines for appropriate and professional business casual attire for EMSA Team Members.

2. Scope

This policy applies to all non-uniformed EMSA Team Members conducting work in EMSA business offices, or remotely when visible to the public or partners.

3. General Policy Parameters

A. General Guidelines

1. Team Members photo ID Badge should be visible and properly displayed while on duty.
2. Personal hygiene and cleanliness is of primary importance. If a Team Member intends to let bare legs, feet or underarms be exposed, they must be clean, neat and properly groomed.
3. All clothing should be neat, fit in such a manner as not to appear overly tight or loose, must fully cover any undergarments and not expose private areas including chest and midriff.
4. Spaghetti strapped and low-cut tops or dresses and are not permitted unless fully covered with a dress jacket, cardigan or sweater. Strapless shirts are not permitted.
5. Clothing that is faded, stained, discolored, torn, patched, ripped, frayed, transparent or see through or with missing buttons is not permitted.
6. Hair is to be neatly groomed and of a natural color. Colors such as blue, pink, purple or green are not professional and therefore, are not permitted.
7. All jewelry should be professional and conservative in appearance. Body piercings, except ear piercings limited to two per ear, are not permitted.
8. Tattoos with slogans, graphics, sayings or offensive wording should be covered (e.g., long sleeve shirt, gloves, etc.). Supervisors have the discretion to require that a Team Member cover any tattoo(s) that could be considered offensive.
9. Shoes must fit and be appropriate to the clothing being worn. Tennis shoes, athletic shoes, thong shoes, flip flops, canvas shoes, house shoes, lounge shoes, and jogging shoes, are not permitted. Boots are acceptable if meant for fashion rather than outdoor use.



10. EMSA logo cardigan, professional jacket or sweater may be worn during cold temperatures in the office. Hoodies, pull over jackets and sweatshirts are not permitted.
11. Hats and hoods are not permitted.

B. Examples of Acceptable Dress Standards

- Polo shirt
- Dress shirt
- Sweater
- Slacks
- Jeans without distress
- Capri dress pant, not jean/denim
- Skirts or dresses of a professional length
- Leggings worn with an appropriate length sweater, dress or shirt
- EMSA t-shirts in good condition (when permitted for special occasions)

C. Enforcement:

1. Team Members are expected to comply with these guidelines while at work and non-compliance with this policy may result in Team Members being sent home without pay, counseling and/or disciplinary action.
2. Supervisors are responsible for enforcement of this policy.

D. Exceptions

Requests for exceptions to this policy for medical (e.g., foot surgery requiring a special shoe), religious reasons or other reasons should be submitted in writing to the Team Members direct Supervisor.



Policy Title: Dress Code – Uniformed

Policy # HR10B-Ops

Policy Category: Human Resources

Policy Owner: Chief of Operations

Approval Authority: Compliance Committee and CEO

CURRENT EFFECTIVE DATE: 2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review: XXX
Related Policies: Additional Resources:	

THIS POLICY IS CURRENTLY UNDER CONSTRUCTION



Policy Title: Inclement Weather/Special Circumstances

Policy # HR11

Policy Category: Human Resources
Approval Authority: CEO and Board of Trustees

Policy Owner: Chief of Operations

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 06/27/2012
	Last Revision Date: 06/27/2012
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

This policy will define the guidelines for notifications and compensation to Team Members when EMSA business offices is closed for inclement weather or other unusual circumstances.

2. Scope

This policy applies to all EMSA Authority Team Members. In some instances, this policy may be extended to non-essential EMSA Operations Team Members whose primary work location is affected.

3. General Policy Parameters

- A. In the event of a business office closure due to inclement weather or other unusual circumstances, Team Members will be paid their regular rate of pay for hours missed, up to an 8-hour day, with the regular office hours of 8am-5pm being used as the standard.
 - 1. If the office re-opens during event and the Team Member does not report to work, accrued time off must be used for any portion of the day missed.
- B. If a Team Member reports to work and is unable to fulfill work duties due to actions outside the scope of their control, they will be paid a minimum of four (4) hours.
- C. Team Members who work from home will be expected to work their regularly scheduled hours, provided their home offices are not also affected.
- D. EMSA will make every effort to notify Team Members, in the quickest fashion possible, once a determination to close the office has been made.



Policy Title: Time and Attendance
Policy Category: Human Resources
Approval Authority: Compliance Committee and CEO

Policy # HR12-Ops
Policy Owner: Chief of Operations

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

This policy establishes uniform time and attendance standards and outlines progressive disciplinary actions related to unacceptable time and attendance behaviors.

2. Scope

This policy applies to all EMSA Operations Team Members.

3. Terms/Definitions

- A. Tardy: Calling in or arriving for work after a scheduled start time or leaving prior to the end of the scheduled stop time or neglecting to clock in.
 - Team Member should make every effort to call at least one (1) hour prior to start of shift, if expecting to be late.
- B. Tardy Period: Time missed ranging from five (5) minutes to one (1) hour for each instance of arriving late, neglecting to clock in, leaving early, or extending breaks or meals within a scheduled shift.
- C. Absence: Any failure to work scheduled hours including personal illnesses, family member illnesses, personal emergencies, time off from work with or without pay, etc. Absences may be scheduled or unscheduled.
- D. Absence Period: Time missed more than one (1) hour within a scheduled shift.
 - A physician’s return to work authorization is required for absences greater than three (3) days.
- E. Continuous Absence Period: An absence that extends beyond one day/shift period and is not interrupted by a return to work day/shift. A continuous absence period counts as one (1) absence even though the actual absence may extend past one day.
- F. No Call/No Show: Failure to report to work for a scheduled day without notification or calling out for a scheduled shift greater than two (2) hours and one (1) minute into the shift.
- G. Job Abandonment



H. Floating Year: The one (1) year period immediately preceding the current date. For example: If the current date is November 1, 2020, the floating year is November 1, 2020 through November 1, 2021.

4. General Policy Parameters

All EMSA Operations Team Members are expected to be present and ready for duty at the beginning of their scheduled work shifts and remain until the end of their scheduled work shifts, without extending breaks or meals.

A. Team Member Communication

1. It is the Team Member’s responsibility to make personal contact with their supervisor, or designee, to report an absence/tardy as soon as possible.
2. Communication by voicemail or with anyone other than the supervisor, or designee is not appropriate notification.

B. Attendance Standards and Associated Disciplinary Actions

1. No Call/No Show
 - a. 1st occurrence will result in a Last & Final Warning.
 - b. 2nd occurrence within a floating year will result in immediate termination.
 - c. A No Call/No Show will also result in an absence.
2. Job Abandonment will result in immediate termination.
3. Absence and/or tardy standards for a floating year are as follows:

<u># of Tardy Periods</u>	<u># of Absence Periods</u>	<u>Action</u>
4	4	Note to File
5	5	Written Warning
6	6	Last & Final Warning
7	-	1 Week Tardy Suspension
8	7	Termination

C. Tardy Suspension

Team Members tardy for shift after having received a Last and Final Warning for tardiness will be placed on a one (1) week unpaid suspension prior to termination.

- The one (1) week unpaid suspension applies only once during employment.
- Any tardy exceeding five (5) following a tardy suspension period, will result in immediate termination, regardless of the time period between suspension and the 6th tardy.

D. Tardy and Absence Buyback Program



Every seventy-five (75) consecutive days with perfect attendance can absolve the Team Member's most recent tardy or absence, as selected by the Team Member. Team Members are required to verify eligibility with scheduling when they feel they have met buyback requirements.

E. Exceptions Due to Defined Mitigating Circumstances

Relative to mitigating circumstances, absence/tardy period resulting from one (1) of the following occurrences will be considered as an exception to this policy and may not count toward less than acceptable attendance:

1. Absences resulting from qualifying events under the provisions of the Family Medical Leave Act, the Americans with Disabilities Act, or other applicable laws
2. Absence/tardy periods caused by an on-the-job injury
3. Absence/tardy periods resulting from a death in the immediate family as defined in the Bereavement Policy.
4. Jury Duty/Court testimony on behalf of the company

F. Requests for Other Exemptions to Policy

Exemption to this policy may be considered when absence/tardy periods total less than seven (7) absences/tardies in a rolling twelve (12) month period. Requests for exemption to the Attendance Standards policy must be submitted in writing to and approved by the appropriate department manager or designee.



Policy Title: Holiday Leave - Operations

Policy # HR13-Ops

Policy Category: Human Resources

Policy Owner: Chief Financial Officer

Approval Authority: Compliance Committee and CEO

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review: 01/2021
Related Policies:	
Additional Resources:	

1. Purpose

This policy outlines observed holidays and establishes the guidelines for providing salaried Operations Team Members or identified/designated operations administrative support team members with paid time off, or appropriate compensation to hourly Operations Team Members working an observed holiday.

2. Scope

This policy applies to all eligible EMSA Operations Team Members.

3. General Policy Parameters

A. Observed Holidays

The following holidays are observed by EMSA Operations:

- New Year’s Eve *
- New Year’s Day
- Memorial Day
- Independence Day
- Labor Day
- Veterans Day
- Thanksgiving Day
- Christmas Eve *
- Christmas Day

B. Salaried Team Members

Salaried team member will be compensated as per their usual pay period rate of compensation for the above EMSA observed holidays. Salaried team members required to work on a holiday may have another day off in lieu of the observed holiday.

C. Hourly Team Members

1. Hourly Team Members who clock in for a scheduled shift starting on the recognized holiday (after 0001 hours), will be paid holiday pay hours based on the team members regular rate of pay for hours worked (not hours scheduled).

*On these recognized holidays, all scheduled shifts with a start time after noon shall be eligible to receive holiday pay for the full duration of the scheduled shift.

- a. If a Team Member fails to work on a scheduled workday the day before, day of and/or day following the recognized holiday, holiday pay will be forfeited and accrued paid time off may be used.



- The only exception to the forfeiture of holiday pay would be if the absence was covered under EMSA's HR Bereavement policy.

D. Identified/designated operations administrative support team members.

1. Administrative support team members may be hourly EMSA Operations Team Members identified by EMSA Administration, by nature of job position/responsibilities, that support EMSA business or management services. These team members will be compensated as per their usual hourly rate of compensation for the above EMSA observed holidays.
 - a. If a Team Member fails to work on a scheduled workday the day before, day of and/or day following the recognized holiday, holiday pay will be forfeited and accrued paid time off may be used.
 - The only exception to the forfeiture of holiday pay would be if the absence was covered under EMSA's HR Bereavement policy.



Policy Title: Paid Time Off (PTO)-Operations
Policy Category: Human Resources
Approval Authority: CEO and Board of Trustees

Policy # HR14-Ops
Policy Owner: Chief Financial Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

This policy establishes guidelines for the administration of EMSA’s PTO program and allows team members flexibility in using time off benefits to meet personal needs, including leaves of absences.

2. Scope

This policy applies to all EMSA Operations Team Members.

3. General Policy Parameters

A. Eligibility

Full time team members are eligible to use PTO after completing six (6) continuous months of employment. After completion of six (6) continuous months of employment, a team member may schedule and/or take accrued PTO time, subject to approval.

B. Accrual

- When a team member is on an inactive status, i.e., team member has resigned but may be receiving payment of accrued PTO, additional PTO will not accrue, effective the last day worked by the Team Member.
- Team members who change their work status will accrue PTO according to the number of months of full-time service. For example, if a team member is full time for one year, changes status to part time for one year, then returns to full time status. PTO accrual rate when team member returns to full time status would be the same accrual rate as a one-year team member.
- PTO is accrued as follows:

40 Hour Work Week

Years of Service	Hours Per Pay Period	Yearly Accrual	Maximum Accrual
0-12 months	3.08	80.08	200.20
13-48 months	5.23	135.98	339.95
49-120 months	6.77	176.02	440.05
121+	8.31	216.06	540.15



42 Hour Work Week (12-hr shifts 48/36)

Years of Service	Hours Per Pay Period	Yearly Accrual	Maximum Accrual
0-12 months	3.23	83.98	209.95
13-48 months	6.46	167.96	419.90
49-120 months	8.08	210.08	525.20
121+	9.69	251.94	629.85

45 Hour Work Week

Years of Service	Hours Per Pay Period	Yearly Accrual	Maximum Accrual
0-12 months	3.48	90.48	226.20
13-48 months	5.88	152.88	382.20
49-120 months	7.58	197.08	492.70
121+	9.24	240.24	600.60

48 Hour Work Week (12-hr shifts)

Years of Service	Hours Per Pay Period	Yearly Accrual	Maximum Accrual
0-12 months	3.70	96.20	240.50
13-48 months	6.92	179.92	449.80
49-120 months	8.77	228.02	570.05
121+	10.62	276.12	690.30

56 Hour Work Week (24)

Years of Service	Hours Per Pay Period	Yearly Accrual	Maximum Accrual
0-12 months	4.62	120.12	300.30
13-48 months	11.77	306.02	765.05
49-120 months	14.31	372.06	930.15
121+	16.85	438.10	1095.25

C. Maximum Accrual

The maximum PTO a team member can accumulate is two and one-half times their annual accrual. If a Team Member reaches the maximum, they will no longer earn PTO until the balance is reduced.

D. Scheduling and Utilization for Clinical Team Members

1. Beginning on November 1 and no later than November 30 of each year, team members interested in scheduling PTO for the following calendar year should submit their request per the established PTO Bid process. PTO requests submitted in November will be granted on seniority basis for the upcoming calendar year.
2. All PTO requests submitted after December 1 will be granted on a first come, first serve basis according to departmental needs.



3. The number of PTO requests granted for any specific time period will be determined by departmental scheduling and workload needs.
4. Requests for PTO outside of the annual PTO BID should be made at least two weeks in advance for consideration.
5. Team Members who have an unexpected illness or injury within their probationary period but post their 90th day of employment may use accrued PTO, with management approval.

E. Failure to Return from Scheduled Time Off

Failure to return to work on the designated date following PTO will be considered as failure to report for the Team Member's assigned shift (no call/no show) as detailed in the Discipline Policy.

F. Payout of PTO at Termination

1. Team member must have had at least six (6) months of continuous service to be eligible for payment of PTO at termination of employment.
2. Upon termination, a team member is eligible to receive payment for any unused PTO balance, based on the Team Members regular hourly base rate of pay assigned to the shift type normally scheduled at the time of termination notice.
3. Upon termination from employment, whether voluntary or involuntary, if the team member owes any outstanding monies to EMSA, the Team Member's PTO accrual balance will be paid out at minimum wage.

G. PTO Cash Out

EMSA encourages team members to utilize PTO hours. In the event that a team member wishes to cash out PTO hours in lieu of taking time off they may do so once (1) each calendar year, under the following conditions:

1. PTO cash out maximum is two weeks.
2. Team member must have a minimum PTO balance of two weeks remaining after cash out.
3. Cash out request must equal at least one week of team members regularly scheduled hours.



Policy Title: Leave Sharing

Policy # HR15

Policy Category: Human Resources

Policy Owner: Chief Financial Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 10/29/2015
	Last Revision Date: 10/29/2015
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

The policy establishes the guidelines by which Team members can donate annual or sick leave to fellow Team members.

2. Scope

This policy applies to all EMSA Team members.

3. Terms/Definitions

- A. Leave Sharing: Leave sharing is the practice of allowing team members to donate accrued annual or sick leave to fellow Team members who experience medical emergencies or who are affected by major disasters and have exhausted all paid leave available to them.
- B. Relative of the team member: Applicable to this policy relative of the team member shall be limited to the spouse, child, stepchild, grandchild, grandparent, stepparent, or parent of the employee.
- C. Severe or extraordinary: Applicable to this policy severe or extraordinary shall mean extreme or life threatening.
- D. Terminal: Applicable to this policy terminal means, likely to result in death within two (2) calendar years.

4. General Policy Parameters

- A. Team members are permitted to donate annual or sick leave to a fellow team member who has exhausted, or will exhaust, all types of paid leave and:
 - 1. Who is eligible for and requires family leave pursuant to the provisions of the Family and Medical Leave Act of 1993, 29 U.S.C., 2601 et seq.; or
 - 2. Who is suffering from or has a relative suffering from an extraordinary or severe illness, injury, impairment, or physical or mental condition which has caused or is likely to cause the tea member to take leave without pay or terminate employment; or
 - 3. Who has recently suffered the death of an immediate relative or household member provided that the total leave received for this purpose does not exceed five (5) days in any calendar year.
- B. All forms of paid leave available for use by the recipient must be used prior to using donated leave.
- C. Donated annual or sick leave is transferable between team members on an hour-to-hour basis irrespective of the hourly wage of the donating or receiving team member.
- D. Donated leave may only be used by the recipient for the purposes specified in this policy.



- E. Team members may not donate excess annual or sick leave that the donor would not be able to otherwise take.
- F. If leave is taken for medical reasons, the Chief Compliance Officer shall require a medical certificate from a licensed physician or health care practitioner verifying the need for the leave and expected duration of the illness, injury, impairment, or physical or mental condition for which the leave is donated.
- G. All donated leave must be given voluntarily. No team member shall be coerced, threatened, intimidated, or financially induced into donating annual or sick leave for purposes of the leave sharing program.
- H. A team member may donate annual or sick leave to another team member provided the donation does not cause the annual leave balance of the donating team member to fall below eighty (80) hours and provided the donation does not cause the sick leave balance of the team members to fall below eighty (80) hours.
- I. If there are multiple donors, any donated leave not used by the recipient during each eligible occurrence shall be returned to the donor.
 - 1. The donated leave remaining will be divided among the donors on a prorated basis based on the original donated value and returned at its original donor value and reinstated to the original leave balance of each donor.

5. Recipient Eligibility

- A. Team members may be eligible to receive shared leave pursuant to the following conditions:
 - 1. Human Resources determines that the Team member meets the criteria described in this section; and
 - a. The team member has abided by established policies regarding the use of leave.
 - b. Recipient is a full time Team member with one (1) year or more continuous service with EMSA.



Policy Title: Bereavement Leave
Policy Category: Human Resources
Approval Authority: CEO and Board of Trustees

Policy #HR16
Policy Owner: Chief Financial Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 10/26/2012
	Last Revision Date: 10/26/2012
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

This policy establishes the guidelines for Team Member paid time off related to the death of an immediate family member.

2. Scope

This policy applies to all EMSA Team Members.

3. Definition

A. Immediate Family Member – An immediate family member is defined as a; spouse, domestic partner, parent, child, sibling, grand-child, grand-parent, or “in-law” “step” and “foster” of the same relationships.

4. General Policy Parameters

- A. Full-time Team Members may be allowed up to three (3) scheduled days off with pay in the event of the death of an immediate family member.
 - 1. If the funeral arrangements take place more than 150 miles of the team member’s immediate work area, one more day may be allowed.
- B. EMSA has the right to require satisfactory proof of death and relationship to Team Member.



Policy Title: Court/ Jury Duty Leave

Policy #HR17

Policy Category: Human Resources

Policy Owner: Chief Administrative Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 05/23/2012
	Last Revision Date: 05/23/2012
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

This policy establishes the guidelines by which EMSA will compensate Team Members for company related court duty and jury duty.

2. Scope

The policy applies to all EMSA Team members.

3. Terms/Definitions

- A. Jury Duty: When citizens are called to serve on a legal panel in court. Team members called to jury duty have a responsibility to contribute to a legal verdict.
- B. Witness Testimony: A solemn declaration usually made orally by a witness under oath in response to interrogation by a lawyer or authorized public official.
- C. Subpoena: A subpoena is a demand for evidence. It goes to a person, to make them testify, or produce evidence for a pending court hearing.
- D. Summons: A summons is a legal document notifying you or your required appearance in a court of law.

4. General Policy Parameters

- A. Team Members will be paid their regular rate of pay for:
 - Hours of work missed to attend jury duty or any court related appearance representing EMSA.
 - Time spent on an unscheduled workday to attend any court related appearance representing EMSA.
- B. Subpoena or other official supporting documentation should be provided to the Team Members' Supervisor scheduling as soon as they are able. Following the conclusion of duty, EMSA may request Team Member to provide documentation from the court clerk or representing attorney as proof of attendance.
- C. Uniformed Team Members should wear their uniform when representing EMSA in official capacity in any court appearance.



Policy Title: Military Leave

Policy #HR18

Policy Category: Human Resources

Policy Owner: Chief Financial Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 12/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: 12/01/2020
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

To ensure that team members who serve, or attempt to serve, in the uniformed services are provided rights with respect to re-employment, health plan coverage, and retirement income plan benefits with EMSA in accordance with federal law and regulations.

2. Scope

This policy applies to team members All EMSA Team Members who serve in a branch of the United States Uniformed Services. Service covered under this policy includes active duty, active-duty training, initial active duty from training, inactive duty training, full-time National Guard duty, and the period of time absent from work for the purpose of an exam to determine fitness to perform any such duty.

3. Terms/Definitions

- A. Military Leave - Military leave is defined as a leave of absence from work granted to team members who participate in certain active or inactive duties related to their service in the Uniformed Services of the United States, Reserve of the Armed Forces, or National Guard.
- B. Active-Duty Status – Team members on active-duty status are committed to military duty full-time, 24 hours per day, 7 days a week, with the exclusion of paid accrued leave or pass (authorized time off). Active-duty members fall under the jurisdiction of the U.S. Department of Defense and can serve in the Army, Air Force, Navy, Marine Corps, and Coast Guard.

4. General Policy Parameters

- A. Classified team members will be granted military leave regardless of length of employment with EMSA.
- B. Team members who temporarily vacate their position as a result of voluntary or involuntary service in the United States Uniformed Services are guaranteed certain reemployment rights and other job protections under the Uniformed Services Employment and Reemployment Rights Act (USERRA) and state law. This includes reinstatement of their former or a comparable position, with comparable compensation and benefits upon returning from duty.



C. Leave for Military Physical Examination, Training or Active Duty in a Reserve Unit or National Guard

1. Classified Team members officially ordered will be granted military leave.
 - a. In order to be granted such leave, the Team Member will provide official orders to report for physical examination to Human Resources.
 - b. Leave for this purpose will be classified as Military Leave, a copy of the orders will remain in the Team Member's electronic personnel file.
2. Based on this policy, department Supervisors will discuss with Human Resources the appropriateness of filling temporary vacancies caused by Military Leave.

D. Benefit Provisions Regarding Military Leave

1. Team Member Elected Health Benefits - Classified Team Member may elect to continue their elected health benefit coverages while on Military Leave.
 - a. Election cost will be deducted from accrued leave through the normal payroll process.
 - b. Once all accrued leave is exhausted, Team Member will be responsible for setting up reasonable methods of repayment to the company for elected health benefit cost.
2. Employer Provided Health Benefit Coverages will continue if the Team Member remains on active status.
3. Paid Time Off Accruals- A Team Member on military leave will continue to accrue leave in compliance with applicable laws. Accrued leave may be used to cover the cost of Elected Health Benefits while on Military Leave.

E. Return from Military Leave for Active Duty

1. Team Member returning from Military Leave should communicate expected return and orders (when necessary) to Human Resources and report for duty per the following guidelines:
 - a. **Service less than 31 days**- Team Member must report at the beginning of the first regularly scheduled workday after release from service, allowing eight (8) hours for travel or rest.
 - b. **Service from 31-180 Days**- Team Member must report no later than fourteen (14) days following completion of service.
2. Any Team Member returning from Military Leave from the uniformed services with a dishonorable or bad conduct discharge may not be eligible for reemployment.
3. Any Team Member returning from Military Leave will be reemployed in his/her former position or classification, if still qualified to perform the duties of the position or classification, at the step or the rate in the pay range the Team Member would have occupied without the Military Leave, and with full seniority. If the Team Member is not qualified to perform the duties of the former position or classification by reason of disability, the Team Member will be restored to a position of like seniority, status and pay or to its nearest approximation for which the Team Member is qualified.



Policy Title: Administrative Leave

Policy # HR19

Policy Category: Human Resources

Policy Owner: Chief Administrative Officer

Approval Authority: Compliance Committee and CEO

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 10/15/2018
	Last Revision Date: 10/15/2018
	Date of Last Legal Review: 01/27/2021
Related Policies: Additional Resources:	

1. Purpose

This policy establishes guidelines for the use of Administrative Leave by the organization and outlines the procedures to be followed when an EMSA Team Member is placed on Administrative Leave.

2. Scope

This policy applies to all EMSA Team Members.

3. Terms/Definitions

- A. Administrative Leave: Is organization initiated temporary relief of work-related responsibilities and duties as a result of a pending investigation or disciplinary action.
- B. Internal Investigation: A formal process or review conducted to determine whether workplace policies of regulatory practices have been violated.
- C. Some examples of appropriate circumstances for Administrative Leave are but are not limited to:
 - 1. To investigate and/or evaluate the circumstances of an internal action or issue.
 - 2. During an investigation of an alleged improper act by a Team Member.
 - 3. To evaluate continued employment if ever a Team Member has been involved in a potential criminal offense.
 - 4. When necessary to immediately remove a Team Member from the work site, when there is a concern for the safety of the Team Member and/or co-workers.

4. General Policy Parameters

- A. A Team Member may be placed on Administrative Leave, with or without pay, by their Department Manager or designee, whenever it is in the best interest of the Team Member themselves, EMSA, co-workers and/or the public.
- B. Placement on Administrative Leave does not constitute an adverse employment action or disciplinary action against the Team Member but simply denotes the work status of the Team Member.
- C. The timeframes for investigation and the pay status determination related to Administrative Leave are determined on a case-by-case basis at management's discretion.
- D. If it is determined that the Administrative Leave is unpaid, Team Members may use accrued hours to cover hours missed.



- E. If it is determined that the Administrative Leave be paid, retroactive pay will be processed within a reasonable timeframe.
- F. Team Members must continue to pay for any elected benefits through payroll deduction using accrued vacation hours or other necessary means to ensure continuation of benefits.

5. Procedures

During any period of paid or unpaid Administrative Leave the Team Member should adhere to the following:

- A. Refrain from entering any non-public areas of any EMSA property and attending EMSA functions or meetings.
 - a. Should the Team Member need to return to any EMSA facility in a nonpublic area, permission should be obtained in advance from the Department head or the Human Resources Director.
- B. Notify the Department head and Human Resources Director if any personal contact information changes.
- C. Be ready, willing and available to be contacted and report to work within normal business hours in order to provide information or respond to the investigation.



Policy Title: Family Medical Leave

Policy # HR20

Policy Category: Human Resources

Policy Owner: Chief Administrative Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 12/01/2020	Policy Origination Date: 10/08/2012
	Last Revision Date: 10/08/2012
	Date of Last Legal Review: 05/27/2015
Related Policies: Additional Resources: Pregnancy Discrimination Act of 1978, Americans with Disabilities Act of 1990. FMLA of 1993, as amended.	

1. Purpose

This policy establishes the procedure for full time Team Members to apply for a leave of absence in certain situations which require continuous or intermittent absence from work for an extended period.

2. Scope

This policy applies to all EMSA Team Members

3. Terms/Definitions

FMLA: The FMLA entitles eligible Team Members of covered employers to take unpaid, job protected leave for specified family and medical reasons with continuation of group health insurance coverage under the same terms and conditions as if the Team Member had not taken leave.

4. General Policy Parameters

- A. Qualifying Event: A qualifying event under the FMLA allows eligible Team Members to take job-protected, unpaid leave (or concurrent paid leave if the Team Member has earned or accrued it within a 12-month period for one (1) or more of the following circumstances:
 - 1. The birth and care of the Team Member’s newborn child (within 12 months of the birth).
 - 2. The placement of a child with the Team Member for adoption or foster care (within 12 months of the placement).
 - 3. To care for the spouse, daughter, son, or parent of the Team Member, if such person has a serious health condition (this does not include in-laws).
 - 4. The Team Member’s own serious health condition, including certain workers compensation leaves.
 - 5. If the Team Member is the spouse, son, daughter, parent of next-of-kin of a covered service member, to care for that service member with a serious injury or illness incurred while on active duty in the Armed Forces (“caregiver leave”).
 - 6. Any qualifying exigency arising out of the fact that a Team Member’s spouse, son, daughter or parent in the National Guard, Reserves or regular Armed Services has been notified of an impending call or



order to active-duty status or deployment.

B. Definitions Under FMLA:

1. a “child” does not have to be a biological child. Also, a “parent” does not need to be biological parents as long as the person stands or stood “in loco parentis” (in the placement of the parent) to the Team Member when the Team Member was a “son” or “daughter,” but “parent” does not include father-in-law or mother-in-law. FMLA leave may be taken to care for adopted children, foster children, legal wards, or a niece or nephew, or grandchild whom the Team Member is actively raising. A “son” or “daughter” includes a child 18 years or over who is incapable of self-care because of a mental or physical disability. For purposes of caregiver or mother military-related leave, a “son” or “daughter” can be of any age.
2. A “spouse” is defined in accordance with applicable state law and may include common-law spouses in States where common-law marriages are recognized, Unmarried domestic partners generally do not qualify as a spouse under FMLA.
3. A “serious health condition” is an injury, impairment, condition, or illness affecting one’s health to the extent that inpatient care or continued treatment by a healthcare provider is needed. “Continued treatment” by a healthcare provider means:
 - a. Incapacity for more than three (3) consecutive days, plus two (2) or more doctor’s visits or one (1) visit plus treatment (such as prescribed medication or therapy)
 - b. Incapacity due to pregnancy or for prenatal care
 - c. Incapacity due to a chronic condition involving periodic medical visits for treatment of recurring or episodic conditions (such as asthma, diabetes, or epilepsy)
 - d. Permanent or long-term incapacity (such as Alzheimer’s, severe stroke, or terminal stages of a disease)
 - e. An absence to receive treatment of a condition that would result in incapacity if left untreated (such as chemotherapy for cancer, physical therapy for severe arthritis, or dialysis for kidney disease)
4. A “covered service member: is a member of the Armed Forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation or therapy, is otherwise in outpatient status, or is on the temporary retired list, for a serious injury or illness. A “serious injury or illness” for such service members is one that was incurred in the line of duty while on active duty and that may render the service member medically unfit to perform the duties of his or her office, grade, rank or rating.

“Qualifying exigencies” apply to covered service members and include:

- a. Military events and related activities, such as official ceremonies, programs or events sponsored by the military or promoted by military service organizations or the American Red Cross related to the active duty or call to active duty.
- b. Certain childcare and related activities arising from the active duty or call to active duty status of a covered service member, such as arranging for alternative childcare, enrolling, or transferring a child to a new school or day care facility.
- c. Making or updating financial and legal arrangements to address a covered service member’s



absence.

- d. Attending counseling provided by someone other than a healthcare provider for oneself, a covered service member, or the child of a covered service member, the need for which arises from the active duty or call to active duty status of a covered service member.
- e. Taking up to five (5) days of leave to spend time with a covered service member who is on short-term temporary, rest and recuperation leave (R&R) during deployment.
- f. Attending to certain post-deployment activities, including arrival ceremonies, reintegration briefings and events, and other official ceremonies or programs sponsored by the military for a period of 90 days following the termination of a covered service member's active duty status, or addressing issues from the death of a covered service member.

C. Leave Terms

1. A "12-month period" is measured backward from the date that the Team Member uses any FMLA leave (other than caregiver leave). Each time a Team Member uses FMLA leave, the remaining balance in his or her FMLA leave entitlement is equal to the portion of the 12-week leave entitlement that was not used in the immediately preceding 12-month period. In other words, it is a "rolling" 12-month period, and any FMLA leave that was taken by the Team Member during the 12 months immediately preceding the date on which the Team Member wants to begin taking additional FMLA leave will be counted to determine the amount of FMLA leave, if any, remaining. For purposes of military "caregiver" leave to care for a covered service member with a serious injury or illness, the single "12-month period" begins on the first day the Team Member takes leave for this reason and ends 12 months later, regardless of the 12-month period established for other types of FMLA leave. Although this alternative means of establishing the relevant 12-month period is triggered by the taking of "caregiver leave," all non-caregiver FMLA leave taken during this 12-month period will be counted against the total 26 workweek caregiver entitlement as stated elsewhere in this policy.
2. When both spouses work for EMSA, the combined total leave in any 12-month period for both spouses will be limited to 12 weeks if the leave is taken for any qualifying event other than caregiver leave; likewise, both spouses are limited to a combined total of 26 workweeks for "caregiver leave" in a single 12-month period if the leave is to care for a covered service member with a serious injury or illness.

D. Team Member Eligibility:

To be eligible for Family Medical Leave Act (FMLA) leave, a Team Member must meet the following criteria:

1. Have been employed by EMSA for at least a total of one (1) year, which need not be 12 consecutive months).
2. Worked for at least 1,250 hours during the preceding 12-month period of employment with EMSA.
3. Have not used all available FMLA leave in the defined "12-month period"
4. Have a qualifying event

E. Duration and Amount of Leave



1. Unless otherwise required by law or determined by EMSA, leave of absence will continue only for the period approved by EMSA and may not exceed twelve (12) months in total duration. However, in the case of an FMLA qualifying event, the Team Member's job position is protected under the Family Medical Leave Act for no longer than 26 weeks for FMLA caregiver leave and 12 weeks for all other FMLA leave. Should a Team Member not be able to return to full-duty status after 12 or 26 weeks, an additional leave may be approved up to the remaining 1-year balance, although not under the same FMLA job protected status, any additional leave granted by EMSA beyond full time limits set forth in the FMLA will not be subject to FMLA restrictions or parameters.
2. For FMLA job-protected leave, eligible Team Members may take up to 12 weeks of FMLA leave during a rolling 12-month period for all FMLA approved leave other than caregiver leave. A Team Member who takes FMLA "caregiver leave" may not take more than 26 weeks of leave in the 12-month period that begins on the first day when the Team Member takes caregiver leave, and is limited to a combined total of 26 workweeks of leave for caregiver leave and any other FMLA qualifying reason during this single 12-month period. Beginning caregiver leave and a new 12-month period for that purpose will not affect the amount of FMLA non-caregiver leave entitlement that is established under a rolling 12-month period. Only 12 of the 26 weeks total may be for an FMLA-qualifying reason other than to care for a covered service member. For example, if a Team Member takes 12 weeks of FMLA leave for the birth of the Team Member's child, the Team Member is limited to an additional 14 weeks for caregiver leave and has no remaining weeks for any non-caregiver FMLA leave.
3. FMLA caregiver leave is a 1-time entitlement applied on a per-covered service member and per-injury basis – no portion of caregiver leave taken to care for one (1) particular covered service member, or one (1) particular injury or illness of that service member, may be "carried over" and continued during a subsequent 12-month period; however, additional caregiver leave may be taken to care for a different service member or a different injury or illness to the same service member. If a Team Member is eligible for and takes both caregivers leave and FMLA non-caregiver leave, there may be two separate but overlapping 12-month periods that are applicable; in such cases, it will be essential,
4. For the Team Member to accurately report and communicate with the Human Resources on a regular basis to keep an accurate accounting of available FMLA leave.
5. For Team Members who are on approved leave longer than twelve (12) weeks, or if applicable, twenty-six (26) weeks under the FMLA, EMSA will endeavor to return the Team Member to his or her prior position. If the prior position is not available, the Team Member could be offered a vacant position for which the Team Member is qualified. If a Team Member refuses to accept said position upon return from a leave of absence, the Team Member will be deemed to have voluntarily resigned from employment with EMSA.
 1. A Team Member who is absent from work for a period of time in excess of an approved leave or prior to absence fails to apply for leave or an extension of leave in accordance with this policy, will be deemed to have abandoned his or her position, and employment with EMSA



will be terminated.

5. Procedures

- A. Team Members seeking to use FMLA leave are required to provide 30-day advance notice of the need to take FMLA leave when the need is foreseeable and such notice is practicable. If leave is foreseeable less than 30 days in advance, the Team Member must provide notice as soon as practicable – generally, either the same or next business day. When the need for leave is not foreseeable, the Team Member must provide notice to the employer as soon as practicable under the facts and circumstances of the case. Absent unusual circumstances, Team Members must give notice in accordance with procedural requirements for requesting leave.
 1. To trigger FMLA leave protections, Team Members must inform Human Resources of the need for FMLA-qualifying leave and the anticipated timing and duration of the leave, if known. Team Members may do this by either requesting FMLA leave specifically or explaining the reasons for leave sufficiently to allow EMSA to determine that the leave is FMLA qualifying.
 2. Calling in “sick” without providing the reasons for needed leave, will not be considered sufficient notice for FMLA leave under this policy. Team Members must respond to EMSA’s questions to determine if absences are potentially FMLA-qualifying. If Team Members fail to explain the reasons for FMLA leave, the leave may be denied.
 3. When Team Members seek leave due to FMLA-qualifying reasons for which EMSA has previously provided FMLA-protected leave, they must specifically reference the qualifying reason for the leave or the need for FMLA leave.
- B. Employer Notice of Eligibility and Designation of FMLA Leave.
 1. Team Member requesting FMLA leave are entitled to receive written notice from EMSA telling them whether they are eligible for FMLA leave, and, if not eligible, the reasons why they are not eligible. When eligible for FMLA leave, Team Members are entitled to receive written notice of.
 2. EMSA may retroactively designate leave as FMLA leave with appropriate written notice to Team Members.
- C. Team Member Cooperation in the Scheduling of Planned Medical Treatment (Including accepting transfers to alternative positions) and Intermittent Leave or Reduced Leave Schedules.
 1. When planning medical treatment, the Team Members must consult with the EMSA Human Resources and make a reasonable effort to schedule treatment to not unduly disrupt EMSA’s operations, subject to the approval of the Team Member’s healthcare provider. Team Members must consult with EMSA’s Human Resources prior to the scheduling of treatment to work out a treatment schedule that best suits the needs of both EMSA and the Team Member, subject to the approval of the Team Member’s healthcare provider.



2. If Team Members providing notice of the need to take FMLA leave on an intermittent basis for planned medical treatment neglect to fulfill this obligation, EMSA may require Team Members to attempt to make arrangements, subject to the approval of their healthcare provider.
3. When Team Member's take intermittent or reduced work schedule leave for foreseeable planned medical treatment for the Team Member or a family member, including during a period of recovery from a serious health condition or to care for a covered service member, EMSA may temporarily transfer Team Members, during the period that the intermittent or reduced leave schedules are required, to alternative positions with equivalent pay and benefits for which the Team Members are qualified and which better accommodate re-occurring periods of leave.
4. When Team Members seek intermittent leave or a reduced leave schedule for reasons unrelated to the planning of medical treatment, upon request, Team Members must advise EMSA Human Resources of the reason why such leave is medically necessary. In such instances, EMSA and the Team Member shall attempt to work out a leave schedule that meets the Team Member's needs without disrupting EMSA's operations, subject to the approval of the Team Member's healthcare provider.

D. Medical Certification Supporting Need for FMLA Leave

1. Certification issued by a healthcare provider is required to support a Team Member's request for FMLA leave due to a serious health condition. A form entitled "Certification of Health Care Provider" is available In Human Resources Depending upon the circumstances and duration of FMLA leave, EMSA may require Team Members to provide recertification of medical conditions giving rise to the need for leave. Forms are available in HR for this purpose, and EMSA will notify Team Members if such recertification is required.
2. EMSA may require the Team Member to obtain the opinion of a second healthcare provider designated and paid for by EMSA. In the event of a conflict between the first and second opinions, EMSA may, again at its own expense, obtain a third opinion from a healthcare provider approved jointly by EMSA and the Team Member. The third opinion will be final and binding.
3. Team Members who take leave for their own serious health conditions or to care for a covered family member will be required to report to EMSA on a regular basis. Continued Doctor's certification may be required if the situation warrants, but not more frequently than every thirty (30) days unless EMSA has a reason to believe the Team Member is able to return to work. Team Members are expected to provide EMSA with notice as soon as possible if the dates of leave change or are extended.
4. When a caregiver leave is taken to care for a covered service member with and injury or illness, EMSA may require a Team Member to obtain certification completed by an authorized healthcare provider of the covered service member. In addition, and in accordance with the FMLA regulations, EMSA may request that the certification submitted by the Team Member set forth additional



information provided the Team Member and/or covered service member confirming entitlement to such leave.

5. For the leave due to qualifying exigencies arising out of the active duty or call to active-duty status of a covered military member, EMSA may require a Team Member to provide.
6. A copy of the covered military member's active-duty orders or other documentation issued by the military indicating the covered military member is on active duty or call to active-duty status and the dates of the covered military member's active-duty service; and a certification from the Team Member setting forth information concerning the nature of the qualifying exigency for which leave is requested. A Team Member shall provide a copy of the new active-duty orders or other documentation issued by the military for qualifying exigencies, if leave arises out of a different active duty or call to active-duty status of the same or different covered military member.

E. Key and Highly Compensated Team Member's

As defined under 29 C.F.R Section 825-216, FMLA provides an exemption for "Key Salaried Team Member's" and "highly compensated Team Members" EMSA may deny restoration to their job position if such restoration would cause substantial and grievous economic injury to EMSA's operations.

F. Concurrent Paid Leave

Team Members taking FMLA leave are required to use earned accrued leave concurrently with and as part of FMLA leave, except as follows:

1. Team Members who are on Worker's Compensation Temporary Total Disability ("TTD") status will also have TTD leave run concurrently with FMLA leave, but such TTD Team Members will not be required to use paid sick/emergency leave or vacation as part of FMLA leave while they remain on TTD status.
2. Under no circumstances will a Team Member be allowed to "tack on" paid leave to FMLA unpaid leave to gain more than 12 weeks FMLA leave (or 26 weeks caregiver leave) during the 12-month period.

G. Medical Benefits

1. While a Team Member is on FMLA leave, EMSA will continue to pay EMSA's share of insurance premiums or other payments for coverage under a Team Member benefit plan which become due during the leave, but not the Team Member's share.
2. Each Team Member is responsible to review periodically all provisions and requirements of any insurance or benefit plan in which the Team Member (or family member) participate.
3. Except as may be required by COBRA, EMSA's FMLA obligation to pay its share of premiums during leave (and to restore the Team Member to the same or equivalent employment) ceases when:
 - a. the employment relationship would have terminated if the Team Member had not taken FMLA leave.
 - b. a Team Member informs EMSA of his or her intent not to return from leave (and even before starting of leave if EMSA is so informed); or
 - c. the Team Member fails to return from leave continues leave after exhausting his or her FMLA leave entitlement in a 12-month period.



H. Accrued Leave

EMSA Team Members will continue to accrue leave for the unpaid portion of the Team Member's FMLA leave unless the Team Member does not return to work.

I. Return to Work and Reinstatement

1. A Team Member returning from a medical leave must provide Human Resources with a health care provider's statement which includes:
 - a. A statement that the Team Member is released to return to work.
 - b. The date on which the Team Member is medically able to return to work; and
 - c. Any applicable work restrictions.
2. The certification must be sufficient to permit EMSA to determine whether the Team Member can safely perform the essential functions of the position before the Team Member will be allowed to return to work. Absent receipt of such written release return to work will be delayed or denied. If a Team Member has been medically released to return to work and fails to report to work or call in with a satisfactory explanation, EMSA will treat this as voluntary resignation.

Note: Any clinical Team Member may be required to meet the standards of the Office of the Medical Director before returning to work.

3. A Team Member who fails to return to work for three (3) regularly schedule workdays after expiration of leave of absence may be deemed to have voluntarily resigned from employment with EMSA, except where an extension of leave has been requested and granted.
4. Team Members who were absent from work on FMLA approved leave and return to work within FMLA time limits and pursuant to requirements set forth in this policy, will be entitled to be restored to the position that they held when the leave commenced or to an equivalent position with equivalent benefits, pay and other terms and conditions of employment. If a Team Member on any other type of leave returns to work within the maximum 12-month leave of absence period, EMSA will endeavor to return the Team Member to his or her prior position or to a position of similar status and pay; however, return to work will be subject to the availability of a vacant position for which the Team Member is qualified at the time the leave expires. If a Team Member refuses to accept a position which is available and offered upon return from a leave of absence, the Team Member will be deemed to have voluntarily resigned from employment with EMSA.
5. Team Members are prohibited from engaging in other employment (including self-employment) at any time during a leave of absence. The taking of another job while on FMLA leave or any other authorized leave of absence is grounds for immediate termination, to the extent permitted by law.

J. Unapproved Family Leave of Absence

Team Members who are ineligible for FMLA and cannot return to full-time duty within thirty (30) days, employment will be terminated.



Americans With Disabilities Act Compliance

Notwithstanding the foregoing, it is the intent of EMSA not to apply this leave of absence policy in any manner that would violate the American's With Disabilities Act of 1990 or the disability provisions of the Oklahoma Commission on Human Rights Act.



Policy Title: Rest Breaks

Policy #HR21

Policy Category: Human Resources

Policy Owner: Chief Compliance Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 10/08/2012
	Last Revision Date: 10/08/2012
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

This policy establishes the guidelines and parameters for rest breaks.

2. Scope

This policy applies to all EMSA Team Members, not working in an Operational Field or Communication Center Position

3. Terms/Definitions

- A. Shift Break - Paid break from work duty wherein Team Members are to remain on EMSA premises.
- B. Lunch Break - Unpaid break from work duty wherein Team Members can leave EMSA premises.

4. General Policy Parameters

- A. Shift break of 15-minutes shall be given to Team Member’s working at least four (4) hours.
 - 1. Shift breaks should normally be taken as
 - one (1) during the first half of the shift and
 - one (1) during the second half of the shift
- B. A lunch break of at least 30-minutes but no more than 1- hour shall be given if a Team Member works at least eight (8) hours.
- C. Breaks may not be combined, made up on another workday, or voluntarily relinquished to enable a Team Member to leave early.
- D. Department Supervisors will outline the Team Members’ break schedule to assure department coverage.



Policy Title: Performance Evaluations
Policy Category: Human Resources
Approval Authority: CEO and Board of Trustees

Policy # HR22
Policy Owner: Chief Administrative Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 06/27/2012
	Last Revision Date: 06/27/2012
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

This policy defines the guidelines EMSA will follow to conduct Team Member performance evaluations and encourage open communication between Team Members and Supervisors.

2. Scope

This policy applies to all EMSA Operations team members.

3. Policy Parameters

- A. Team Members with three (3) months of service or more will receive an annual performance evaluation in July of each year.
 - 1. The Team Members direct supervisor will initiate the evaluation process and meet with Team Members individually to discuss performance.

- B. Team Members are given the opportunity to provide a written response to their performance evaluation as they may feel necessary.



Policy Title: Educational Expense Reimbursement

Policy# HR23

Policy Category: Human Resources
Approval Authority: CEO and Board of Trustees

Policy Owner: Chief Financial Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 06/27/2012
	Last Revision Date: 06/27/2012
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

EMSA believes it is important to provide an organizational climate where team members can develop professionally. This policy establishes the guidelines reimbursement of educational expenses.

2. Scope

This policy applies to all full time EMSA Team Members.

3. General Policy Parameters

- A. Full-time Team Members are eligible for educational reimbursement up to \$600 per calendar year for satisfactory completion (letter grade C or above) of approved coursework towards a certification or degree relative to their job duties at EMSA.
 - 1. Reimbursable expenses include tuition, required books, and equipment/lab fees.

- B. To be eligible for reimbursement, Team Members must submit a completed request for education reimbursement to Human Resources 30 days prior to the course start date.
 - 1. Request forms should be completed and signed by the Team Member and the Team Member's department manager.
 - 2. Request should be submitted to HR@EMSA.net.
 - 3. Final approval will be at the discretion of the EMSA Chief Financial Officer, the Team member should not consider the request approved until they receive approval confirmation.

- C. Upon Course completion, the Team Member must provide an itemized receipt of expenses to be reimbursed and proof of satisfactory course completion.



Policy Title: Length of Service Recognition

Policy# HR24

Policy Category: Human Resources

Policy Owner: Chief Compliance Officer

Approval Authority: EMSA Compliance Committee and CEO

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/14/2011
	Last Revision Date: 12/14/2011
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

In appreciation of the dedication, contributions, knowledge, and experience of long-term Team Members, EMSA will recognize milestone employment anniversaries and retirement and outlined in this policy.

2. Scope

This policy applies to all EMSA Team Members.

- A. Recognition Awards: A company may use bonuses to reward achievements, to show gratitude to Team Members who meet longevity milestones and retirement.

3. General Policy Parameters

- A. EMSA does not give cash bonuses, awards must be in the form of personal property.
 - a. IRS guidelines would require cash, check, gift certificates, or the value of such item(s) to be reported as additional taxable wages regardless of cost or value.
- B. Award Structure
 - a. Team Members who complete five years of employment with EMSA are awarded a certificate and lapel pin. At the end of each additional five years of service, the Team Member is awarded a new certificate and pin.
 - b. The President’s Award is presented to employees who have completed twenty-five (25) years of service with EMSA.
 - c. A Team Member who retires from the Authority will receive an award equaling \$20 per full year of service not less than \$100 or more than \$400.
- C. Awards will be presented as part of a special event or celebration that marks the occasion. The event will take place at the Authority’s offices in either Tulsa or Oklahoma City. These events must only occur on an occasional basis and costs of the event must be reasonable, such as the costs associated with providing cake and punch.



Policy Title: Emergency Change in Working
Conditions

Policy # HR25

Policy Category: Human Resources

Policy Owner: Chief Administrative Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 03/17/2020
	Last Revision Date: N/A
	Date of Last Legal Review: 03/17/2020
Related Policies: Additional Resources:	

1. Purpose

This policy established guidelines for adjusting working location or conditions, in the event of a public health threat or community emergency. EMSA will make decision based on recommendations made by local, city and/or state government agencies.

2. Scope

This policy applies to all EMSA Authority Team Members and may be extended to non-essential EMSA Operations Team Members whose primary work location is affected.

3. General Policy Parameters

In the event EMSA makes the determination for non-essential Team Members to work remotely, these additional policies/procedures may be enforced, altered, or suspended at that time.

- A. If applicable, the IT department will work to move Team Members to their designated remote location in the most orderly manner possible. Team Members will be provided with equipment essential to perform their job duties. Requests for other supplies or items needed should be submitted in writing to your Supervisor.
- B. If Team Members are relocating to their homes to work remotely, furniture for the temporary work reassignment is the responsibility of the Team Member. In the event a Team Member does not have necessary furniture, requests for temporary office furniture should be submitted in writing to your Supervisor.
- C. Team Members will be expected to perform their normal job duties, unless instructed by their Supervisor. During this time, some deviation from normal job duties may be necessary.
- D. Hours of work will be determined by immediate Supervisors. During this time, some deviation from normal work schedule may be necessary.
- E. Team Member's will continue to record time worked as normal.



- F. Team Members will continue to follow the EMSA HIPAA policies and maintain patient privacy, security and confidentiality while working remotely.
- G. Team Members are expected to report absences/tardiness in accordance with EMSA's Attendance Policy.
- H. Team Members are expected to email the IT helpdesk at helpdesk@emsa.net and their Supervisor if they experience any computer or equipment issues.
- I. Team Members will not be responsible to pay additional costs that may be associated with working remotely during this emergency. In the event additional costs are incurred, Team Members must provide receipts or documentation to their Supervisor for reimbursement.
- J. EMSA's Executive Team will update Team Members via email as the Emergency situation changes.
- K. Team Members are required to complete acknowledgement of this policy prior to removing any EMSA equipment from the business office. The acknowledgement will also serve as a check-in and check-out record for EMSA equipment and is available in the Human Resources Department.



Policy Title: Workplace Discipline

Policy# HR26

Policy Category: Human Resources

Policy Owner: Chief Compliance Officer

Approval Authority: EMSA CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/14/2011
	Last Revision Date: 12/14/2011
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources:	

1. Purpose

This policy established the progressive discipline process and the associated disciplinary or corrective actions utilized to address and/or correct performance, behavioral problems, and/or concerns, as well as to support Team Member success and productivity within the organization. Progressive discipline, disciplinary actions, and corrective actions detailed herein are merely a guide for possible consideration, and the use of such steps or actions is in the sole discretion of EMSA.

This policy does not change the EMSA Team Members’ employment “at-will” status as provided in the EMSA policies.

2. Scope

This policy applies to all EMSA Team Members.

3. Terms/Definitions

- A. Disciplinary Actions – Actions taken in response to misconduct, that may occur while at work, or could occur outside the workplace rule or policy violations, or poor performance.
- B. Progressive Discipline – Is a progression of disciplinary actions with escalating consequences for Team Members used to correct performance, behavioral problems, and/or concerns and to provide an opportunity to improve.
- C. Corrective Actions - Corrective actions are the steps taken to communicate and support Team Members in efforts to improve work related behavior or performance and assist in helping Team Members understand and meet performance standards.

4. General Policy Parameters

- A. All Team Members are expected to meet performance standards and conduct themselves professionally and appropriately or progressive discipline, corrective actions or immediate termination may occur.
- B. The decision to use progressive discipline, implement corrective actions, or immediately terminate a Team Member is the sole discretion of EMSA.



- C. In the way of example only and without limitation, actions that may result in discipline or termination include the following:
- Behaviors inconsistent with, in direct conflict of, or in violation with EMSA's Code of Conduct.
 - Failure to follow prescribed work procedures, company policies, or protocols.
 - Violation of EMSA's Conditions of Employment.
 - Refusal to comply with instructions from supervisors.
 - Conduct endangering the safety of the Team Member or co-workers.
 - Conduct endangering the safety of patients.
 - Falsification of records, reports, documentation, or other organizational data or information.
 - Illegal, unacceptable, or improper behavior.
 - Harassing or disruptive behavior.
 - Failure to meet performance standards.
 - Misuse or unauthorized use or disclosure of confidential information
 - Misuse of company property or unauthorized personal use of company property
- D. Team Members have a duty to report any violations of misconduct to their immediate supervisor, Human Resources, or as sited in the EMSA Code of Conduct.

5. Procedures

- A. Supervisors are responsible for providing an accurate and objective assessment of Team Member performance and/or behavior prior to issuing/implementing formal disciplinary and/or corrective actions with a Team Members.
- a. The assessment and documentation must be based on factual evidence and not assumptions. Documentation can include the supervisor's direct observations or direct observations of third parties reported to EMSA.
- B. Corrective actions will be issued to a Team Member as soon as possible after a prompt and thorough investigation or such other reasonable amount of time based on the circumstances from the date that the after a report is made to the Team Member's supervisor, Human Resources Director, or as provided in the EMSA Code of Conduct of the incident, action, or occurrence.
- C. The following disciplinary actions can be implemented at the discretion of EMSA Administration and/or designated supervisory/management positions, and need not be progressive:
1. Documented Counseling – Informal oral counseling a team member about a policy violation that, in the context of a first offense, is minor in nature.
 2. Written Warning - Formally counseling, in writing, a team member about a violation of policy that could result, if repeated, in a Last & Final Warning or Termination shall be placed in the Team Member's personnel file.
 3. Last & Final Warning - Formal counseling of a team member, in writing, about a serious violation of policy involving the safety of the team member, coworkers, patients, or the public; or the repeated violation policies or procedures and shall be placed in the Team Member's personnel file.



- D. Performance improvement plans issued to team members shall be placed in the Team Member's personnel file upon completion.

- E. Immediate Discharge and Termination
 - 1. In circumstances where it is deemed necessary or appropriate to immediately terminate a team member's employment, previous warnings need not have been given to the team member.

- F. Appeals Process
 - 1. Team Members may contest disciplinary action taken against them by submitting a written appeal to either EMSA's Chief of Operations or Chief Compliance Officer within 14 calendar days of the date the action was issued.
 - a. When disciplinary action involves the care, safety, and welfare of patients, the appeal must be submitted as above, as well as to the Office of the Medical Director in accordance with the published Medical Control Professional Review Action procedures.
 - 2. If the Team Member is not satisfied with the decision of the appeal, they may escalate the appeal, in writing, to EMSA's Chief Executive Officer.



Policy Title: Exit Interviews

Policy # HR27

Policy Category: Human Resources

Policy Owner: Chief Administrative Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/13/2012
	Last Revision Date: 12/13/2012
	Date of Last Legal Review: 01/2021
Related Policies: Additional Resources: Federal Register notice (65 FR 50204)	

1. Purpose

This policy outlines how exit interviews are done when Team Members terminate employment either voluntarily or involuntarily.

2. Scope

This policy applies to all EMSA Team Members exiting the organization.

3. General Policy Parameters

- A. Ideally exit interviews should take place in person as soon as the end of employment date has been received and confirmed by Human Resources. If the exiting Team Member is uncomfortable with an in-person interview, a phone/video interview can be conducted, or a questionnaire will be mailed or emailed.
- B. The information collected with the exit interview tool will be used to: identify factors that contributed to a Team Member’s decision to leave the organization, to identify opportunities for organizational improvement, to better develop recruitment and retention strategies, and to ensure the exiting Team Member has an opportunity to voice opinions or concerns related to their time with the organization.



Policy Title: Blogging and Social Media

Policy #A032021

Policy Category: Administration

Policy Owner: Chief Public Affairs Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 10/08/2012
	Last Revision Date: 10/08/2012
	Date of Last Legal Review: 01/2021
Related Policies:	
Additional Resources:	

1. Purpose

EMSA recognizes the growing importance of online social media networks as a communication tool. This policy addresses team members’ use of such networks, including; personal websites, Web logs (blogs), wikis, social networks, online forums, virtual worlds, and any other kind of social media. We respect the rights of employees to use these media during their personal time and for those purposes protected by law under the National Labor Relations Act (NLRA). Use of these media during company time or on company equipment, however, is prohibited.

EMSA takes no position on employees’ decisions to participate in the use of social media networks. In general, team members who participate in social media are free to publish personal information without censorship by EMSA.

2. Scope

This policy applies to all EMSA Team Members.

3. General Policy Parameters

- A. All If an employee chooses to identify him/herself as an EMSA Team Member on any social media network, he/she must adhere to the following:
 1. Team members are required to state in clear terms that the views expressed on any social media network are the employee’s own and do not necessarily reflect the views of EMSA.
 2. Postings relative to EMSA should be honest and accurate and should not include “maliciously” or “recklessly” false information.
 3. Team Members are prohibited from disclosing information on any social media network that is confidential or proprietary to EMSA or to a third party that has disclosed information to the company. This includes any patient-Protected Health Information (PHI) under the Health Insurance Portability and Accountability Act (HIPAA)
 4. Team members are prohibited from posting images of co-workers without the co-workers’ consent.
 5. Team Members are prohibited from making statements about EMSA, their co-workers, or company customers, competitors, agents or partners that could be considered as harassing, threatening, libelous or defamatory in any way.



6. Team Members are prohibited from sharing any communication that engages in personal or sexual harassment, unfounded accusations, or remarks that would contribute to a hostile work environment (racial, sexual, religious, etc.), as well as any behavior not in agreement with [Company Name]'s general corporate policies.
- B. Team Members who participate in social media may still decide to include information about their work at EMSA as part of their personal profile, as it would relate to a typical social conversation. This may include:
 - Truthful and accurate information
 - Work information included in a personal profile, to include company name, job title, and job duties.
 - Status updates regarding an employee's own job promotions.
 - Personal participation in EMSA sponsored events, including volunteer activities.
 - C. A team member that is responsible for a social media posting that fails to comply with the guidelines set forth in this policy or that otherwise causes harm to EMSA may be subject to discipline, up to and including termination.
 - D. Team members may be held responsible for the disclosure, whether purposeful or inadvertent, of confidential or proprietary company information, information that violates the privacy rights or other rights of a third party, or the content of anything posted on any social media.
 - E. Further, employees may be liable for monetary damages for such disclosure.
 - F. Nothing in this policy restricts the employee's right to on-line activity which is protected under Federal or State law



Policy Title: Release of PHI

Policy #A2

Policy Category: Human Resources

Policy Owner: Chief Administrative Officer

Approval Authority: CEO and Board of Trustees

CURRENT EFFECTIVE DATE: 06/27/2019	Policy Origination Date: 01/01/2016
	Last Revision Date: 06/27/2019
	Date of Last Legal Review: 04/25/2019
Related Policies: Additional Resources:	

I. Purpose

This policy recognizes the necessity to balance the news media’s need for information, respect for a patients’ privacy rights and EMSA’s interests and legal obligations under the HIPPA Privacy Rule. The limitations and boundaries for properly handling media inquiries and requests for information have been outlined within.

II. Scope

This policy applies organization wide and supersedes all other policies/procedures of the same subject.

III. Policies

- A. All media related releases of information or requests for interviews must be coordinated through the Chief of Public Affairs, or a designee.
- B. EMSA will cooperate when the release of information is required by law.
- C. No information will be released if the cause of the patient’s injuries are suspected to be self-inflicted.
- D. No information will be released if the treatment and/or transport occurred as a result of the commission of a crime; or if law enforcement or the patient/patient’s representative so request.
- E. EMSA reserves the right to deny requests determined to infringe upon the privacy rights and interests of the patients.
- F. EMSA will not release Protected Health Information (PHI) to the news media without signed patient authorization.
- G. Any requests for detailed patient information (i.e., non-de-identified information) including audio/video recordings, may only be released when a signed authorization from the patient/patient's representative is on file.
- H. Generic, operational, or non-health information, including de-identified information that in no way discloses or confirms the identity of a patient may be provided as outlined in the below procedure.

VI. Procedures



- A. The Chief of Public Affairs or a designee should accompany the news media at all times while they are on campus or interviewing an EMSA Team Member.
- B. EMSA will strive to respond to media requests within 24 hours, keeping in mind the requestors' news deadlines.
- C. EMSA may provide members of the news media with de-identified information about specific ambulance responses unless EMSA has knowledge that the information could be used alone or in combination with other information to identify an individual who is the subject of the request for information. Information is considered de-identified when it has been stripped of patient identifiers and the identity of individuals cannot be determined, and re-identification of individuals is not possible.
 - 1) No information will be released when a member of the news media makes an inquiry using:
 - A patient's name
 - The exact address of an emergency, or geographical proximity to an emergency
 - Or if EMSA otherwise believes that the inquiring party knows the patient's identity or could in connection with other information discover the identity of the patient.
- D. If EMSA approves a release of information/requests for interviews to the news media, the following de-identified information may be released at the discretion of EMSA administration:
 - 1) Number of patients involved in an incident or transported to a facility as long as EMSA personnel doesn't indicate which specific patients went to which particular facility.
 - 2) Name of hospital destination(s) to which patient(s) have been transported.
 - a. Hospital destination information may be withheld when it is believed that releasing hospital destination would not be in the best interest of the patient or others, or where such information might reveal the condition of the patient (i.e., patient being transported to a psychiatric hospital).
 - b. Hospital destination may be withheld if the patient is a victim of a crime and the suspect is believed by EMSA to still be at large.
 - c. Hospital destination may be withheld when any other factors cause EMSA to believe that releasing hospital destination would not be in the best interest of the patient or others, or where such information might reveal the condition of the patient (i.e., patient being transported to a psychiatric hospital).
 - 3) Designation of crew members/type of transport (i.e., two EMTs were treating patients involved in an emergency transport).
 - 4) Location of call when limited to metropolitan intersection or public road unless the location is a residential area, or it is believed by EMSA that such information could lead to the identification of that patient.
 - 5) Time EMSA received call.
 - 6) Time EMSA arrived on scene.
 - 7) Time EMSA arrived at hospital with patient.



- 8) Type of incident/accident, such as a motor vehicle accident, so long as the information is generic and does not provide information that could be used to identify a patient, nor could the information be used to identify the patient if used in conjunction with other information that might be available.
- 9) Other agencies who responded to the scene.

VII. Policy Violations

Violations of this policy should be reported immediately to the Deputy Chief of Public Affairs, the Director of Public Information (Western Division) or to a member of the EMSA Leadership Team, and to EMSA's Compliance Officer, for investigation and possible corrective action. Violations may be grounds for immediate suspension or termination depending on the nature of the violation.



Policy Title: Seniority

OP1

Policy Category: Operations

Policy Owner: Chief of Operations

Approval Authority: Chief Executive Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: Additional Resources:	

1. Purpose

This policy establishes the method in which team members accrue seniority. Seniority will be used to establish precedence for time off requests and shift selections.

2. Scope

This policy applies to all EMSA Operations team members. This policy does not alter or involve any benefits or compensations accrual periods.

3. General Policy Parameters

1. Accrual of Seniority

- a. Seniority will accrue from the first day of employment.
- b. Full time team members will receive one (1) seniority point for each month of full-time employment with EMSA.
- c. Part time team members will receive one-half (1/2) point for each month of part time employment with EMSA.

2. Discontinuance of Seniority

- a. team member's seniority will discontinue if one of the following occur:
 - i. Discharge for just cause.
 - ii. Voluntary quit, with exception to any team member who quits and then is rehired within 30 calendar days. The team member will maintain their seniority without the accrual for the period of time that the employee was in a quit status, up to thirty days.
 - iii. Leave of absence exceeding thirty (30) days.
 - iv. Layoff exceeding twelve (12) months.



Policy Title: Shift Start & End Requirements
Policy Category: Operations
Approval Authority: Chief Executive Officer

OP2
Policy Owner: Chief of Operations

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies:	
Additional Resources:	

1. Purpose

The following procedures establish the start of shift and end of shift duties required to ensure units and crews are available to respond to calls for service within the parameters of established shift schedules.

2. Scope

This policy applies to all EMSA Operations Team Members.

3. Start of Shift Procedures

- A. Team members will report to their designated work areas and clock in at the beginning of each shift.
- B. Team members are expected to report to work allowing enough time to ready the ambulance and equipment for deployment and be ready for assignment at the scheduled shift start time.
- C. Team members should not clock in earlier than 15 minutes prior to their start of shift unless prior approval is obtained. If a team member clocks in greater than 15 minutes prior to their start of shift, the clock in time will be adjusted to reflect a clock in time of 15 minutes prior to shift start time.
- D. Team members with issues clocking in should notify the scheduling department of the issue. Team members who have missed punches should attempt to correct the missed punch or if unable to, should notify the scheduling department for correction immediately.
 - a. Missed punches unrelated to a technical/timeclock issue will be assessed a tardy.
- E. Most team members working in field operations will report to the Materials Department to receive equipment and unit assignments. Team members are responsible for checking equipment and confirming proper stocking of the ambulance.
- F. Upon completion of unit and equipment check, crews will contact the Communications Center Supervisor to advise of their status, giving all required information for making the unit available.
- G. Team members will monitor the radio and be ready for assignment at the start of shift time.
 - a. Crews not response ready within 15 minutes of a scheduled start of shift time must contact the on-duty supervisor immediately. Those that do not make contact will be contacted by the on-duty supervisor directly.



4. End of Shift Procedures

- A. The communications center will perform post moves to bring units approaching scheduled end of shifts to the operations facility depending on the unit's location and time of day.
- B. A crew will be "clear for end of shift" 15 minutes prior to the "scheduled end of shift" in Tulsa and 45 minutes prior to "scheduled end of shift" in Oklahoma City.
- C. Crews are expected to maintain ambulance response readiness until they have been removed from the system.
- D. A unit enroute for fuel or to the operations facility prior to being cleared for end of shift, can be utilized for emergency calls if it is the closest most appropriate unit.
- E. All team members are expected to work until the end of their shift, regardless of the EOS time of their partner.
- F. To compensate team members for calls assigned at the End of Shift, additional pay is provided. If a call is received within 60 minutes of scheduled end of shift time and results in a patient transport, causing the crew to clock out after their scheduled end of shift time, the crew will receive late call pay.
 - a. Late call pay is paid at a defined dollar amount per occurrence, per team member.
- G. High Performance Crews are considered "cleared for end of shift" upon completion of their required transports.
 - a. HPCs can be used at the discretion of a Supervisor after completion of their required transports to handle emergency calls in extreme situations (holding emergency calls, MCIs, or closest most appropriate unit to a severe life-threatening call).
- H. Standby units are considered clear for end of shift when cleared from the standby.



Policy Title: Equipment Checking
Requirements

OP3

Policy Category: Operations

Policy Owner: Chief of Operations

Approval Authority: Chief Executive Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: Additional Resources:	

1. Purpose

This policy outlines the guidelines and defines responsibility for the issuance, maintenance, and replacement of equipment.

2. Scope

This policy applies to all EMSA Operations team members.

3. General Policy Parameters

A. Issued Equipment

1. Team members are responsible for all equipment issued to them at the beginning of shift and for return of the same equipment in like condition at the end of shift.
2. Field Crew members and VST's are responsible for ensuring that each piece of equipment is in clean, working condition prior to being the start of shift. Equipment not in working order will be returned to a VST and a replacement will be made available.
 - a. The cardiac monitor, suction, laryngoscope blades, ventilator and oxygen regulators must be checked prior to start of shift.
 - b. VSTs will send a 12-lead test transmission to ensure the modem is working properly.
3. Any issued equipment that becomes grossly contaminated, missing for any reason, fails to operate, or is damaged will be replaced in the field unless there is a need for the crew to return to the operations facility. The VST accepting the old equipment will change the information on the check in/out sheet held in the Materials Department.
 - a. Any equipment that needs to be replaced during the shift for any reason will be cleared through the Field Operations Supervisor.
 - b. Any damaged equipment will be reported immediately.
4. Crews will document the equipment damage or failure on Operative IQ.

B. Ambulance Inventory



Operational Policy OP3
Equipment Checking Requirements

1. It is the responsibility of the Materials Department to restock the ambulance inventory at the end of each shift and double check the unit for accuracy or “pre-flight” the unit before the start of each shift.



Policy Title: Station Based Units

OP4

Policy Category: Operations

Policy Owner: Chief of Operations

Approval Authority: Chief Executive Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies:	
Additional Resources:	

1. Purpose

This policy establishes the expectations for team members who work at a suburban 24-hour station.

2. Scope

This policy applies to all EMSA Operations team members.

3. General Policy Parameters

A. 24 Hour Station Team Member Selection

Station based units will be awarded based on company seniority. Failure to perform to company standards may result in removal from station-based assignment.

B. Shift Times

Unless otherwise noted, all station-based units will have a start time of 0700. This start time is subject to change and dependent upon the most current demand by analysis report for unit hour distribution. All teams will report for work at their respective stations for shifts and will be available to the system at the assigned start of shift time.

C. Station Based Unit Clock-In

1. All station-based team members are required to clock in. After clocking in, team members will call the System Status Control Supervisor (SSC) to advise of available status and report any delays.
2. If a team member has not arrived by Start of Shift, the team member that is present will make immediate contact with the SSC Supervisor and the Field Operations Supervisor. If both team members are not there, one of the off-going team members will notify the SSC Supervisor and the Field Operations Supervisor.
3. If the unit is out on a call, the team will advise the SSC Supervisor of its status as “waiting for the unit to return to the station”.

D. Shift Change



1. Station based EMS system units in quarters on a 24-hour shift must wait until relief has arrived to clock out and end the shift. The on-duty Field Operations Supervisor must be consulted if any adjustments need to be considered.
 2. Off-going teams will do a face-to-face shift change with the oncoming team to ensure proper stocking, cleaning, narcotics exchange, etc.
- E. Parking
1. The unit is to be parked in such a way as to allow for the quickest access to the unit from the station.
 - a. The unit is to be backed into a parking space and secured when at the station.
 - b. Proper unit electrical load management may require the team to leave the vehicle idling when parked during peak hours. However, the ambulance shall not be running for long periods of time.
 - Exception to this is Mustang Quarters, where the unit shall be parked where necessary as needed by the Mustang Fire Department.
 2. Team members are permitted to park at the station only when on duty.
 3. Team members assigned to the stations are encouraged to fully secure and park personal vehicles next to the building.
 - Do not park personal vehicles on the grass, the right of way, or any location on the premises other than the parking lot.
 - Inoperative or mechanically disabled vehicles shall not be stored in parking lots.
 - Repair of vehicles in station parking lots is not permitted.
- F. Appearance and Uniforms
1. Appearance and uniforms for the station-based teams will be as outlined in the Uniform policy.
 - a. The exception to this, is after 1900, teams may wear a t-shirt at the station. Full uniform must be worn when responding to a request for service.
- G. Paperwork
1. All run related documents such as face sheets, Certificated of Medical Necessity, etc., shall be turned in via Materials when supplies are delivered, or may be turned in the same as 12 hour shifts if the station-based team goes to the operations facility during their shift.
 2. It is necessary to submit all patient care reports to EMSA for billing the next business day. Therefore, the on-duty team is required to have all run reports completed and synced by the end of their shift.
 3. Under no circumstance will a team member leave without completing patient care reports.
 4. Any additional paperwork required to be submitted will be labeled with the run number and placed in an envelope and delivered to the operations facility before noon.
- H. Telephone
1. When answering the phone at the station, always answer with the name of the city you are assigned to and your name.
 2. Teams are restricted to local, non-toll calls on the station phone.
 3. Any company issued cell phones are to be used for business purposes. Personal calls should be placed from the station phone or person cell phones.



I. Vehicle Operations and Procedures

1. Ongoing team member will accept responsibility for the keys to the station and the unit, at the beginning of shift.
 - a. The same team members will keep the keys for the entire shift on his or her person.
2. Vehicles should not be left running for excessive periods of time.
3. The unit will be washed as needed.
4. Units are to be restocked by the off going team.
5. Units shall always be fueled at a minimum of $\frac{3}{4}$ of a tank.

J. Call Assignments for Station Based Teams

1. Calls may be assigned as needed at the discretion of the Channel A dispatcher and the SSC Supervisor.
 - a. Calls are assigned based on a unit's proximity to the ambulance need, rather than by with city the ambulance is assigned to.
2. The team may be assigned a non-emergency call as needed by the system, but efforts will be made to limit non-emergencies assigned after 2100.

K. Posting for Station Based Teams

1. The team may be assigned a post as needed during peak call periods for coverage. This will be at the discretion of the Channel A dispatcher and the SSC Supervisor.
2. The team will not be posted between 2100 and 0700 unless extreme circumstances are affecting the system.

L. Visitors

1. Teams may have visitors at the station until 2100 any day of the week.
2. No visitors will be allowed to stay in the station when team members are not present.
3. No visitors will be given access (keys, combinations, etc.) to the station.
4. Visitors are strictly prohibited in the sleeping quarters (bedrooms) of the station.
5. Visitors may be asked to leave the station premises at any time based on supervisor discretion.
6. A team member of a station-based unit reserves the right to request visitors to leave the station.
7. Problems with visitors are to be reported to the Field Supervisor.

M. Daily Station Duties

1. All team members will assure the neatness of the station and surrounding grounds.
2. Each station's team members will develop a method to assure station duties are distributed fairly.
3. All team members assigned (permanently or for the current shift) to clean the station before the end of each shift. Oncoming crews will receive the station in a neat and orderly fashion.
4. At the end of each shift:
 - o all floors will be swept or mopped.
 - o All trash will be collected and placed in the appropriate containers.
5. Beds will always be made in the station.
6. The interior of the unit will be wiped down and cleaned each shift.
7. Thoroughly clean the station. Move furniture to vacuum beneath furniture. Dust or wipe down all station surfaces with appropriate cleaner.
8. The on-duty team members are responsible for cleaning and straightening the bathroom.



9. All refrigerator contents should be labeled with owner/date and should be removed and disposed of if unlabeled or dated greater than three (3) days old. Wipe down interior and exterior of refrigerator.

N. Station Supplies and Stock Levels

1. Station supplies should be inventoried often and orders for re-supply placed as needed, adequate stock on hand is the shared responsibility of all team members assigned to the station. It is essential for all team members to be alert for potential shortages and to arrange for re-supply prior to the depletion of any item
2. When a potential shortage is discovered, team members will contact Materials or the Supervisor to arrange resupply.
3. Station supplies are provided for the treatment of patients only.
4. It is the joint responsibility of all team members assigned to the station to maintain the supplies in a neat and orderly manner.

O. Storage/Medications

1. Supplies are to be stored in the appropriate location at the station.
2. Received stock is to be placed on the shelf in such a way as to allow for the use of supplies with the nearest expiration date first.
 - a. In most situations this will require rotation of incoming supply to the rear of the shelf.
 - b. The paramedic is responsible for inventorying to assure proper equipment and drugs and expiration dates. Expiration dates are checked monthly (this may be referred to Materials).
 - c. Expired medications and supply are to be returned to the Materials Department, not discarded.

P. Unit Restocking

1. Equipment compartments and supply cabinets are to be restocked as soon as the unit returns to the station after each run.

Q. Equipment Bags

1. Equipment bags are to be maintained in working condition, torn and/or broken bags and boxes will be replaced through the Materials Department.
2. All team members assigned to this station share responsibility to assure that all equipment is functional.

R. Oxygen

1. The main onboard oxygen cylinder shall be replaced at or below 500psi.

S. Batteries

1. Batteries are to be kept charged appropriately.
2. Battery problems will be reported to the Materials Department.

T. Controlled Substances

For complete references, see the Pre-Hospital Operational Standards Protocol regarding controlled substances.



1. It is necessary to secure controlled substances in a locked cabinet in the station or in the unit. These substances shall include narcotics and any other items deemed necessary by Management.
2. Any breakage of controlled substance ampules, vials or pre-filled syringes must be immediately documented in an incident report and forwarded to the Supervisor.
3. The off-going and on-coming Paramedics are responsible for verifying the count of controlled substances upon the start of each shift.
 - a. Both paramedics must sign the narcotic log verifying the shift change inventory count.
 - b. Any discrepancies in inventory count from the prior day must be immediately documented in an incident report and forwarded to the Supervisor.
 - c. Entries in the narcotic log will also be done any time there is a change of custody of narcotics and nitrous.
4. Periodic audits of the controlled substance log and pharmaceuticals ordered/used shall be conducted by Supervision with the corrective action being taken, as necessary.
5. **Unscheduled Downtime**
Team members are expected to come to work well rested and prepared for their shifts.



Policy Title: Time Standards

OP5

Policy Category: Operations

Policy Owner: Chief of Operations

Approval Authority: Chief Executive Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies:	
Additional Resources:	

1. Purpose

This policy supports effective deployment of teams and utilization of resources by providing team members with time expectations as they relate to various stages of duties.

2. Scope

This policy applies to all EMSA Operations Team Members.

3. Terms/Definitions

- A. Day shift is defined as any shift starting before 1200 hours.
- B. Night shift is defined as any shift starting at 1200 hours or later.

4. General Policy Parameters

- A. Both team members are expected to monitor radios at all times during their shift. Timely notification of status changes are of utmost importance.
- B. Response time standards:
 - 1. Priority One Emergency (Beneficiary jurisdiction) – 10 minutes and 59 seconds or less.
 - 2. Priority One Emergency (Non-Beneficiaries) – 11 minutes and 59 seconds or less.
 - 3. Priority Two Emergency – 24 minutes and 59 seconds or less.
 - 4. Priority Three (unscheduled) Non-Emergency – 59 minutes and 59 seconds or less.
 - 5. Priority Four (scheduled) Non-Emergency – 14 minutes and 59 seconds or less.

5. Procedures

A. Start of Shift

All EMSA team members are expected to be available and ready for an assignment at their scheduled start of shift time. If a crew is not available 15 minutes after their scheduled start of shift time, the crew will must contact a Supervisor for notification and assistance.



B. Out of Chute

1. Chute times are calculated from the time the crew is alerted to the call until the time the crew advises that they are “responding” on the truck radio to MDT and the vehicle is in motion.
2. EMSA Crews are expected to begin responding to a call within 30 seconds, day or night.
3. Station units are expected to be responding to a call within 30 seconds.
4. If crews are not able to respond within the specified time frame, they are to notify the Communications Center of the delay immediately and expected duration of the delay.
5. Crews are expected to use this same chute time standard for post moves, unless authorized by the Communications Center.

C. En Route

1. A crew may be asked for a current location while responding to an emergency or non-emergency call, at the discretion of the system status controller.

D. Transporting

1. After the ambulance crew reports that they are transporting, it is the system status controller’s discretion to determine a reasonable length of time for the transport before requesting an estimated time of arrival.
2. If it is suspected that the transporting unit has arrived at its intended destination (lack of movement on the MDT system) the system status controller will attempt to contact the crew to obtain an updated status.

E. At Destination

1. It is expected that the standard time for a crew to transfer care and adequately prepare for the next assignment is twenty (20) minutes or less.
2. Exceptions may include bed delays, direct patient admissions to the floor, multiple patients to transfer and extensive clean up.
3. The crew shall notify the Field Operations Supervisor immediately if they will exceed the 20 minute standard.



Policy Title: Required Off-Duty Time

OP6

Policy Category: Operations

Policy Owner: Chief of Operations

Approval Authority: Chief Executive Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies:	
Additional Resources:	

1. Purpose

This policy establishes the shift length requirements are met with adequate rest time for team members between duty assignments.

2. Scope

This policy applies to all EMSA Operations team members.

3. Policy

- A. Team members working 9.5-hour and 12-hour “system units” shifts as designated by the System Status Plan, may not exceed more than 16 hours total on shift. There must be at least 8 hours of off shift time before their next shift.
- B. Team members working 24-hour suburb “station units” shifts must have an 8-hour rest period before working their next shift.
- C. Part time team members working 24 hours at a full-time job outside of EMSA must have an 8-hour break before reporting to shifts at EMSA.



Policy Title: Patients Personal Property
Policy Category: Operations
Approval Authority: Chief Executive Officer

OP7
Policy Owner: Chief of Operations

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: Additional Resources:	

1. Purpose

This policy will provide guidance to team members on how to properly record and secure patient belongings, along with providing a preferred chain of custody for patient belongings. This policy will also establish which patient belongings are prohibited from being in EMSA possession and any exclusions that may apply.

2. Scope

This policy applies to all EMSA Operations Team Members.

3. General Policy Parameters

- A. It is reasonable to expect that EMSA team members handle patient belongings in a manner that reduces the potential of loss or damage.
- B. Separation from belongings can add additional stress to an already stressful situation. As a result, all team members are required to approach these situations with sensitivity and apply this policy reasonably based on the individual circumstances presented.
- C. Patient belongings that can remain with the patient should remain with the patient.

4. Procedures

- A. Securing and Recording Patient Belongings
 - 1. Belongings that cannot be safely transported should be secured at the scene whenever possible.
 - 2. In some instances, family members, other first responders or police may have to accept responsibility for the belongings while the EMSA team members focus on patient care and transport.
 - a. Alert and oriented patients should identify individuals whom they wish to take their belongings.
 - b. Unidentified persons should not be allowed to take possession of patient belongings.
 - c. Document clearly in the PCR who accepted the belongings and a description of the belongings left with that person.
 - 3. Large but necessary belongings such as wheelchairs, or walkers shall be secured with seat belts and transported with the patient. In some instances, these items may be too large to secure in the unit with the patient on board. In these cases, contact the on-duty Supervisor for assistance.
 - 4. Patient belongings shall be secured within the unit or its compartments to avoid becoming a hazard.



5. Any cash presented should be counted out to the receiving person. The amount should be recorded on the PCR along with the receiving person.
 6. Items should not be removed from the patient unless clinically indicated. If items need to be removed during care, the items shall be returned to the patient when clinically convenient.
 7. Items removed from the patient during care shall, as clinically indicated should be returned to the patient when clinically convenient or transferred to the receiving facility following the Chain of Custody procedure.
- B. Chain of Custody for Patient Belongings
1. Patient belongings that must be secured out of the patient site shall be documented on the PCR.
 2. Upon arrival at the destination, all property shall be either returned to the patient or to the receiving facility staff.
 3. Identification by name of the person receiving and a description of the belongings shall be documented in the PCR.
 4. Upon completion of the transport, crew members must thoroughly inspect the ambulance for any patient belongings before departing the destination. Team members should check their pockets for licenses, insurance cards, etc.
 5. If personal belongings are found on the unit, notify the FOS immediately.
- C. Prohibited Patient Belongings
1. Guns, knives, or other weapons may not be transported in the EMSA ambulance.
 2. Prescription drugs.
 - a. Patients are better served with accurate documentation of prescription medications on the PCR.
 - b. Should a patient insist that they bring their medications to the hospital, the Paramedic shall document this in their PCR and a description of the medications and who the medications were left with at the time care is transferred.
 - c. If the patient is suspected of an overdose, medications may be transported with the patient to the ED at the discretion of the paramedic.
 - d. Specialized medications such as clotting factor, or investigations medications may be transported at the discretion of the treating paramedic.
 3. Chemicals shall not be transported.
 4. Illegal substances shall not be transported.
 5. Animals
 - a. Guide dogs, service dogs, or official Helper Animals may be transported with the patient when the patient is able to maintain control of the animal.
 - i. If the patient is not able to maintain control of the animal because of their health status, the animal should not be transported with the patient to the hospital.
 - b. All other pets are prohibited.
 - c. If a question arises, crew will contact the on-duty Supervisor for further guidance.



Policy Title: Encountering an Emergency
While on a Call

OP8

Policy Category: Operations

Policy Owner: Chief of Operations

Approval Authority: Chief Executive Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies:	
Additional Resources:	

1. Purpose

This policy establishes guidelines for handling an emergency encountered while responding to a call or transporting a patient.

2. Scope

This policy applies to all Operations team members.

3. Policy

- A. When a crew encounters an emergency while responding to another emergency call, the crew will fulfill the obligation to the original caller and continue response.
 - 1. No patient contact will be made.
 - 2. Dispatch will be notified of the location and nature of the emergency.
- B. There may be rare occurrences where a crew may come across an emergency (during post moves, etc.) and be presented with a critically ill or injured patient. In these situations, it is acceptable for the crew to stop, render care and advise dispatch.
- C. If a crew is transporting a patient and encounters an emergency situation, the crew will not delay transport of the patient that is on board.
 - 1. Dispatch will be advised of the nature and location of the incident and any persons at the scene will be advised that another unit is in route to assist them.
- D. There will be rare occurrences when a crew has a patient on board and comes across an emergency involving a critically ill or injured patient. In these situations, it is acceptable for the EMT to leave the unit to assess the situation or to notify dispatch while the paramedic remains with the patient. At no time should the patient be left alone in the ambulance.



Policy Title: Temperature Controlled
Medications and IV Fluids

OP9

Policy Category: Operations

Policy Owner: Chief of Operations

Approval Authority: Chief Executive Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: Additional Resources:	

1. Purpose

This policy establishes the parameters for storage of medications and IV fluids.

2. Scope

This policy applies to all EMSA Operations Team Members.

3. General Policy Parameters

- A. Ideal temperature range set forth by manufacturers of medications currently stocked is between 59- and 77-degrees Fahrenheit.
- B. The medication may be administered outside this temperature range but is required to be stored between those ranges.
- C. Efforts to reduce extreme temperature exposure should be taken for sensitive supplies.

4. Procedures

- A. Medications and IV fluids not on units will be stored in the temperature-controlled Materials Department.
- B. Vehicles in the field should remain running to maintain a controlled environment for the medications and IV fluids while maintaining the safety and security of the unit.
 - 1. Use of vehicle security features must be used.
- C. Any ambulance that is anticipated to be without air conditioning for an extended period will be stripped of all medications and IV fluids.
- D. Any ambulance placed out of service for maintenance or for an extended period or leaves the property for outsourced repaired will be stripped of all medications and IV fluids.
- E. Should a team member become aware that medications or fluids have been damaged due to exposure to extreme temperatures for extended periods of time, they must report it to the Supervisor and Materials Manager immediately.
- F. Supplied damaged by extreme temperatures will not be used in patient care and must be disposed of properly.



Policy Title: Disposable Equipment and Supplies

OP10

Policy Category: Operations

Policy Owner: Chief of Operations

Approval Authority: Chief Executive Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: Additional Resources:	

1. Purpose

This policy establishes the procedure for restocking, storing, transporting, and disposing of disposable equipment, supplies and medical waste.

2. Scope

This policy applies to all EMSA Operations team members.

3. Terms/Definitions

- A. Biomedical waste or biohazard waste is any solid or liquid waste which presents a threat of infection to humans, including non-liquid tissue, body parts, blood and body fluids from humans including dried blood and absorbent materials.

4. General Policy Parameters

A. Disposable Equipment

- 1. All items not considered durable medical equipment, or equipment or supplies marked as single patient use, are intended for single use only and shall be disposed of in a red bag, secured, and placed in a red bin for final disposal.
- 2. All disposable supplies will be stored and transported within the manufacturer’s temperature and storage specifications.

B. Restocking Disposable Items

- 1. The Materials Department will inspect, inventory, and resupply each ambulance at the end of each shift.
- 2. If the minimum stock level of a disposable item is reached at any time during the shift, a member of the Materials Department will attempt to meet the unit in the field for resupply. If this cannot be accomplished in a timely fashion the on-duty supervisor will be contacted and the unit will be placed out of service and brought down for resupply.

C. Disposal of Medical Waste and Disposable Items



1. Disposable linen that is soiled but not exposed to blood or other infectious agents will be disposed of in regular trash after every patient use. If the linen is bloody or has the possibility of carrying infectious agents, it must be disposed of in a biohazard bag.
2. Contaminated sharps shall be stored in closed puncture-resistant containers (sharps box) with appropriate biohazard markings and color-coding.
 - a. Once a sharps container is $\frac{3}{4}$ full it shall be closed, secured with tape, and placed in an appropriate biohazard disposal container.
3. Contaminated non-sharp materials shall be stored in labeled, leak-proof bags with appropriate biohazard markings and color-coding (red bags).
 - a. Biohazard bags will then be placed in designated biohazard waste containers.
 - b. If outside contamination of a disposal bag is a possibility, a second bag with identical markings shall be placed over the first.
4. Infectious waste generated during cleaning and decontamination operations shall be properly bagged and disposed of in infectious waste containers if saturated with blood or body fluids.
5. All final disposal of biohazard waste shall be in accordance with the EPA, local regulations and shall be performed by a locally approved, licensed contractor.



Policy Title: Securing ALS Supplies

OP11

Policy Category: Operations

Policy Owner: Chief of Operations

Approval Authority: Chief Executive Officer

CURRENT EFFECTIVE DATE: 01/27/2021	Policy Origination Date: 12/01/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies:	
Additional Resources:	

1. Purpose

This policy outlines the measures to be taken to provide security for the ambulance and ALS Supplies.

2. Scope

This policy applies to all EMSA Operations team members.

3. General Policy Parameters

A. Vehicle Security - Headquarters

1. All units will be locked, always secured in the bay or in the parking lot behind the shut and locked gate.
2. Narcotics will be removed from every unit, but left in the narcotic box, at the end of shift and placed in the large narcotic lock box. Narcotics will be "double locked" at all times.
3. All issued equipment, drug box, narcotics, fluids (weather dependent) will be removed from service at the end of each shift.
4. A unit being removed from service and send to an off-site facility for any reason will have all ALS supplied, medications, fluids and hard equipment removed prior to leaving.
5. Any team member leaving with a key (ambulance or narcotic) or fuel cards will be contacted and required to return the items immediately.

B. Vehicle Security – On Scene/In the Field

1. If the unit is outside the direct view of the crew, the unit will have the keys removed and doors locked.
2. If the unit is in direct view, the unit may be left unlocked, but the keys will be removed.

C. Vehicle Security – At Destination/On Post

1. While on scene of a non-emergency or dropping off at the hospital, the unit may be left running, but the keys will be removed.
2. While on post, the unit will be locked, and the keys removed when team members are out of the vehicle for any reason.



3. Some hospitals require all engines be turned off when parked at or near the hospital entrance due to vehicle fumes. In those instances;
 - a. When the patient is transported non-emergent, the unit should be turned off and the keys removed.
 - b. When they patient has been transported to the hospital in an emergency status, the crew may remove the keys and return to shut the unit down after the patient has been moved to the hospital.



Policy Title: General Security

IT01

Policy Category: Information Technology

Policy Owner: Chief Information Officer

Approval Authority: Board of Trustees and CEO

CURRENT EFFECTIVE DATE: 11/02/2020	Policy Origination Date: 08/26/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: Additional Resources: § 164.308(a)(3)	

I. Purpose

EMSA is committed to providing all aspects of our service and conducting our business operations in compliance with all applicable laws and regulations. This policy sets forth our commitment to compliance with those standards established by the Department of Health and Human Services under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") regarding the use and disclosure of Protected Health Information ("PHI") under the Privacy Regulations ("Privacy Rule") and the security of Electronic Protected Health Information ("e-PHI") under the Security Regulations (the "Security Rule").

This policy and our procedures as to the creation, use, disclosure, and security of PHI and e-PHI also applies to other essential patient information, billing and business information, and confidential information that is stored electronically or in any other manner, including paper or hard copy form.

The purpose of the set of IT policies and procedures is to outline the acceptable use of EMSA "devices", "data", and "technology services". These rules are in place to protect the team members and patients of EMSA and the information safeguarded by EMSA.

II. Scope

This Policy addresses our general approach to compliance with the Security Rule. As a covered entity under the Security Rule, EMSA is required to:

- (1) ensure the confidentiality, integrity and availability of all PHI and e-PHI EMSA creates, receives, maintains, or transmits.
- (2) protect against any reasonably anticipated threats or hazards to the security or integrity of such information.
- (3) protect against any reasonably anticipated uses or disclosures of such information that are not permitted or required; and
- (4) ensure compliance with the Privacy and Security Rule by our team member.



Compliance with the Privacy and Security Rules will require EMSA to implement:

- Administrative Safeguards--actions, policies and procedures to manage the selection, development, implementation and maintenance of security measures to protect PHI and e-PHI and to manage the conduct of our team member in relation to the protection of and authorized access to patient information.
- Physical Safeguards--physical measures, policies, and procedures to protect our electronic information systems, related buildings and equipment from natural and environmental hazards and unauthorized intrusion.
- Technical Safeguards--the technologies and the policies and procedures for its use that protect PHI and e-PHI and control access.

This policy applies to team members, volunteers, contractors, consultants, temporary team members, students, and others at EMSA who have access to “devices”, including all personnel affiliated with third parties who may be providing service in benefit of EMSA. This policy applies to all “devices” which are owned or leased by EMSA and all “technology services” provided by or contracted for by EMSA.

III. Policies

A. IMPLEMENTATION OF SECURITY MEASURES

EMSA will implement any security measure that allows it to comply with a specific security standard reasonably and appropriately in the Security Rule. In determining which security measures to implement, EMSA will take into account its size, complexity and capabilities; technical infrastructure; hardware and software security capabilities; the costs of the security measures; and the probability and criticality of potential risks to e-PHI.

EMSA will determine what security measures must be implemented and will determine those measures that we have discretion to implement. The determination will ensure compliance with the Security Rule.

B. CORE SECURITY PRINCIPLES

Security is everyone’s responsibility and requires active participation. Failure to prevent, resolve or report a violation means you share in the responsibility for that violation.

- Reasoning: If only one person is attentive to security, the risk of a breach is much higher than if everyone is keeping their eyes open, like a Neighborhood Watch.
- Examples of how you can help:
 - If a door is found propped open – close it
 - If you see a password written down – return and remind the owner
 - If you see a co-worker’s screen unlocked – lock it for them
 - If you think, there is a security concern – report it to your supervisor or the IT department

EMSA will in all matters relating to Security endeavor to adhere to the principle of Least Privilege where the minimum-security privileges necessary to perform the essential functions of a duty are authorized.

- Reasoning: By limiting access to those who only really need it, system stability and security are improved, and support costs are reduced.
- Examples of how you can help:
 - If you have access to a system you rarely if ever use – Let your supervisor know



Configuration or implementation of any new system is expected to adhere to existing policies upon deployment. Reconfiguration of any system or process in order to adhere to a new policy is expected to be completed within six (6) months of policy's publication.

C. SECURITY COMPLAINTS

EMSA's Privacy Officer shall be responsible for facilitating a process for individuals (including team members) to file a complaint regarding our Policies or the manner in which e-PHI and other confidential information is handled. The Privacy Officer is responsible for ensuring that the complaint and its disposition are appropriately documented and handled.

D. ENFORCEMENT

Failure to notify EMSA's Privacy Officer or at least one member of "Executive Leadership" or your manager in a timely and reasonable manner if you are aware of or suspect a breach of security by a team member, consultant, vendor, volunteer or intern has taken place may be subject to disciplinary action, up to and including suspension and/or termination.

E. CONSIDERATIONS

Data stored on any device is subject to loss, especially those used remotely. Non-adherence to Security policies may increase difficulty of recovering said data. It is strongly encouraged to back up your important EMSA related data to your Home ("U") Drive frequently to take advantage of EMSA's automated data backup process.

F. SUB POLICIES

The following sub policies have been created to comply with the Security Rule and best practices:

- IT02 - In-Home Workers
- IT03 - Acceptable Asset Use
- IT04 - Password Management
- IT05 - Remote System Use
- IT06 - Authentication Credentialing
- IT07 - Network Access
- IT08 - Email and Instant Messaging
- IT09 - Incident Reporting
- IT10 - Physical Asset Management
- IT11 - Anti-Virus and Anti-Spyware Software Management
- IT12 - System Outage Notification
- IT13 - Minimum Information Access
- IT14 - Information Classification
- IT15 - Contracted Service Providers
- IT16 - Risk Assessment
- IT17 - Access Provisioning and Deprovisioning
- IT18 - Physical Access



IV. Policy Violations

EMSA will ensure it mitigates damages that may occur because of any violation of the Security Rule or our Security Policies or specific Security Procedures.

Any team members who violate the Security Rule or EMSA security policies will be subject to disciplinary action, up to and including suspension and/or termination.

EMSA will not intimidate or retaliate against any person for exercising his or her rights under the Security Rule or for reporting any concern, issue or practice that the person believes in good faith to be in violation of the Security Rule or our Security Policies or specific Security Procedures.

EMSA will not require any person to inappropriately waive any rights that person may have to file a complaint with any state or federal agency.



Policy Title: In Home Workers

IT02

Policy Category: Information Technology

Policy Owner: Chief Information Officer

Approval Authority: Board of Trustees and CEO

CURRENT EFFECTIVE DATE: 11/02/2020	Policy Origination Date: 08/26/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: IT01 General Security Additional Resources: CAAS:103.01.04 Legal Review	

I. Purpose

This policy provides team members with a clear understanding of their responsibilities and the measures that need to be in place to ensure that any remote or occasional in-home worker securely protects information safeguarded by EMSA for which they have access to in their home.

II. Scope

This policy applies to team members, volunteers, contractors, consultants, temporary team members, students, and others at EMSA who have access to “devices” at home, including all personnel affiliated with third parties who may be providing service in benefit of EMSA. This policy applies to all “devices” which are owned or leased by EMSA and all “technology services” provided by or contracted for by EMSA.

III. Policy

All team members who are to be provisioned as an “In-Home worker” must be approved by a manager and said manager to have requisitioned the equipment and in-home installation through the help desk system.

All team member who are provisioned as an “In-Home worker” must have received training and adhere to **ALL** EMSA Security and Privacy policies within their home environment. This includes but not limited to:

- Any information classified as “Confidential” or “Protected” (See *IT14 - Information Classification* policy) which is printed must be either shredded in the EMSA provided document shredder or locked away in a secure location prior to the team member leaving their home work office space.
- Any visibility of “Confidential” or “Protected” (See *IT14 - Information Classification* policy) information displayed on EMSA equipment must be restricted to In-Home worker only and restrictions undertaken to ensure this information is not visible to anyone else in the home.
 - Closing the door or providing some other type of partition that will block the screen from other persons inside of the home-office.



- Minimizing the applications or turning off computer monitors when someone other than an EMSA team member is present in the work area of the home-office.

All EMSA provided equipment is for EMSA work production only and is not to be used for any other purpose (i.e. when the EMSA team member is not working on the clock, the in-home EMSA issued equipment may not be used for any purpose) without the express written permission of the CIO or other member of the executive leadership team.

Only EMSA authorized team members may use the EMSA issued home equipment without the express written permission of the CIO or other member of the executive leadership team.

Upon termination of employment, all EMSA issued in-home equipment must be returned to EMSA at the time of the termination. EMSA IT team members will assist in the retrieval of the equipment as needed.

Any exceptions to the above must be logged in the help desk ticketing system.

IV. Policy Violations

Failing to follow this policy could result in disciplinary action or sanctions according to EMSA *IT01 - General Security*.



Policy Title: Acceptable Asset Use

IT03

Policy Category: Information Technology

Policy Owner: Chief Information Officer

Approval Authority: Board of Trustees and CEO

CURRENT EFFECTIVE DATE: 11/02/2020	Policy Origination Date: 08/26/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: IT01 General Security Additional Resources: § 164.308(a)(3)	

I. Purpose

The purpose of this policy is to outline the acceptable use of EMSA “devices”, “technology’ and “services”. These rules are in place to protect the team members and patients of EMSA and the information safeguarded by EMSA. Inappropriate use exposes EMSA to risks including virus attacks, compromise of network systems and services, breach of patient confidentiality, other legal claims and increases the support cost of EMSA’s infrastructure.

II. Scope

This policy applies to team members, volunteers, contractors, consultants, temporary team members, students, and others at EMSA who have access to “devices”, including all personnel affiliated with third parties who may be providing service in benefit of EMSA. This policy applies to all “devices” which are owned or leased by EMSA and all “technology” and “services” provided by or contracted for by EMSA.

III. Definitions

Device: Any computer, workstation, mobile device or cloud service capable of accessing EMSA’s network or containing EMSA data.

Cloud: Any application/service provided from servers that are outside of EMSA’s network.

Service(s): Applications which are not run on your local computer.

Technology: Any software, storage media, data or other services.

IV. Policy

All users, as defined by the scope of this document are responsible to ensure adherence to related policies such as, but not limited to:

- IT06 - Authentication Credentialing – Your responsibility for action taken with your credentials.
- IT08 – Email and Instant Messaging – Your responsibility and actions required to manage your email, instant messaging, or texting use.

- IT14 - Information Classification – How to appropriately secure information based on data sensitivity.
- IT04 - Password Management – Your responsibility and actions required to manage your password.
- IT05 - Remote System Use – Your responsibility and actions required to access EMSA remotely.

Use of “Devices” and “Technology”:

- All data created or recorded using any “device” owned, controlled, or used for the benefit of EMSA, is at all times the property of EMSA. Because of the need to protect the EMSA computer network, EMSA cannot guarantee the confidentiality of information stored on any network device belonging to EMSA, except that it will take all steps necessary to secure the privacy of all PHI in accordance with all applicable laws.
- Team members are responsible for exercising good judgment regarding the reasonableness of personal use and must follow operational guidelines for personal use of Internet/Intranet/Cloud systems and any “device”.
- At no time may any pornographic or sexually offensive materials be viewed, downloaded, saved, or forwarded using any EMSA “device”. Please refer to EMSA’s Preventing Sexual and Other Harassment policy for further information.
- Team members will not install any software onto a “device” owned by EMSA except as authorized by the EMSA IT team members.
- For security and network maintenance purposes, authorized individuals within EMSA may monitor equipment, systems and network traffic at any time, to ensure compliance with all EMSA policies.
- EMSA’s Privacy Officer or at least one member of the “Executive Leadership” team must be notified immediately of the loss, or suspected loss, of a “device”.

Security and Proprietary Information

- All PCs, laptops, workstations and remote devices should be secured with a password-protected screensaver, lock screen, or other method of screen “blanking”, wherever possible, and set to deactivate after being left unattended for 15 minutes or more, or by logging-off when the equipment will be unattended for an extended period.
- All computer equipment used by team members, whether owned by the individual team member or EMSA, shall continuously run approved virus/spyware scanning software with a current database in accordance with EMSA Anti-Virus and Anti-Spyware Software policy. Any computer equipment connecting to the EMSA network remotely will be checked for compliance before access is allowed. Immediately contact the Help Desk if any suspicious symptoms or alerts of an infection arise.
- Team members must use extreme caution when opening e-mail attachments received from unknown senders, which may contain viruses.
- EMSA’s Privacy Officer or at least one member of the “Executive Leadership” team must be notified in a timely manner if a team member is aware of or suspects a breach of security has taken place.

Unacceptable Use

- Under no circumstances is a team member of EMSA authorized to engage in any activity that is illegal under local, state, or federal law while utilizing EMSA resources.
- The lists below are by no means exhaustive, but attempt to provide a framework for activities that fall into the category of unacceptable use and are strictly prohibited, with no exceptions:



- Violations of any individual, company, or EMSA's copyright, trade secret, patent or other intellectual property, or similar laws or regulations, including, but not limited to, the installation or distribution of "pirated" or other software products that are not appropriately licensed for use by EMSA.
- Unauthorized copying of copyrighted material including, but not limited to, digitization and distribution of photographs from magazines, books or other copyrighted sources, copyrighted music, and the installation of any copyrighted software for which EMSA or the end user does not have an active license is strictly prohibited.
- Exporting system or other computer software is strictly prohibited and may only be done with express permission of management.
- Introduction of malicious programs into the network or server (e.g., viruses, worms, etc.).
- Revealing your account password to others or allowing use of your account by others. This includes family and other household members when work is being done at home.
- Using an EMSA computer device to actively engage in procuring or transmitting material that is in violation of the EMSA's prohibition on sexual and other harassment.
- Making fraudulent statements or transmitting fraudulent information when dealing with patient or billing information and documentation, accounts or other patient information, including the facsimile or electronic transmission of patient care reports and billing reports and claims.
- Causing security breaches or disruptions of network communication. Security breaches include, but are not limited to, accessing data of which the team member is not an intended recipient or logging into a server or account that the team member is not expressly authorized to access, unless these duties are within the scope of regular duties.
- Providing information about, or lists of, EMSA team members or patients to parties outside EMSA.

V. Policy Violations

Failing to follow this policy could result in disciplinary action or sanctions according to EMSA *IT01 - General Security*.



Policy Title: Password Management

IT04

Policy Category: Information Technology

Policy Owner: Chief Information Officer

Approval Authority: Board of Trustees and CEO

CURRENT EFFECTIVE DATE: 11/02/2020	Policy Origination Date: 08/26/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: IT01 General Security Additional Resources: § 164.308(a)(5)	

I. Purpose

The purpose of this policy is to outline the appropriate management of passwords to preserve the integrity of EMSA’s systems access and thereby the data and information safeguarded by EMSA.

II. Scope

This policy applies to team members, volunteers, contractors, consultants, temporary team members, students, and others at EMSA who have access to “devices”, including all personnel affiliated with third parties who may be providing service in benefit of EMSA. This policy applies to all “devices” which are owned or leased by EMSA and all “technology services” provided by or contracted for by EMSA.

III. Definitions

Term of Service: The anticipated date that a contractor or consultant is expected to conclude their service to EMSA.

IV. Policy

Security is everyone’s responsibility and requires active participation. Failure to prevent, resolve or report a violation means you share in the responsibility for that violation.

Authorized users are responsible for the security of their passwords, accounts and any actions taken using their password credentials, whether knowingly or not.

Keep passwords secure and do not share passwords, even with a manager or co-worker to protect your password from inadvertent disclosure to others.

Passwords are required to be a minimum of ten (10) Characters, including at least one (1) upper AND lower case, one (1) number and one (1) special character (e.g. non-alphanumeric) if supported by the application.



Passwords will be required to be changed if suspicious account activity is detected or if notification is received that the account credentials have been compromised.

Network (Windows login) passwords are required to be different from all other stand-alone application or service passwords (with the exception of certain integrated Single Sign On Applications). Examples of stand-alone applications might be sites used by the patient financial services team to access payor websites or external applications like ESO EHR.

Contractors or Consultants (excluding Operations contractor team members) who have a definitive length of service will have their passwords set to expire at the "Term of Service" date or 90 days from start of service, whichever is shorter. Contractors or Consultants who do not have a definitive length of service will have their password managed the same as EMSA team members.

Password Security Considerations:

- Should not be found in dictionary.
- Should not be names of family, pets, friends, fantasy characters, etc.
- Should not be birthdays or other personal information such as addresses and phone numbers.
- Should not use any patterns like aaabbb, 123456, etc.
- Can be strengthened by use of Pass Phrases such as using the first character of a favorite nursery rhyme for example: " Sing a song of sixpence, a pocket full of rye" = Saso6apfor

EMSA's Privacy Officer or at least one member of "Executive Leadership" must be notified in a timely manner if a team member is aware of or suspects a breach of security has taken place.

EMSA team members will be required to change their network passwords every one hundred and eighty (180) days. Application and external website passwords should be changed (if supported by that application or website) at the same interval.

V. Policy Violations

Failing to follow this policy could result in disciplinary action or sanctions according to EMSA *IT01 - General Security*.



Policy Title: Remote System Use

IT05

Policy Category: Information Technology

Policy Owner: Chief Information Officer

Approval Authority: Board of Trustees and CEO

CURRENT EFFECTIVE DATE: 11/02/2020	Policy Origination Date: 08/26/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: Additional Resources: § 164.312(a)(1)	

I. Purpose

The purpose of this policy is to define standards for connecting to EMSA's network from any host. These standards are designed to minimize the potential exposure to EMSA from damages which may result from unauthorized access or use of information safe guarded by EMSA.

II. Scope

This policy applies to all EMSA team members, contractors or vendors using an EMSA or personally owned "device" to connect to the EMSA network to do work on behalf of EMSA, including but not limited to; reading or sending email, viewing intranet web resources or applications/data. It is not intended for those team members designated as "In-Home Workers" who are governed by the In-Home worker policy (Policy IT02).

III. Definitions

Device: Any computer, workstation, mobile device or cloud service capable of accessing EMSA's network or data.

Cloud: Any application/service provided from servers that are outside of EMSA's network.

Service(s): Applications which are not run on your local computer.

In-Home Workers: EMSA team members who have had EMSA equipment installed at their home.

Remote Desktop Access software: Applications which allow remote access/control of a computer within the protected network environment of EMSA. Current primary solution used by EMSA is LogMeIn.

Email-Client: Any email client, such as Microsoft Outlook, capable of connecting to the EMSA email service.

Executive Leadership: Members include CEO, CFO, CIO and CCO/CRO



IV. Policy

Use of a Virtual Private Network (VPN) connection to gain direct access to shared files or applications on EMSA's network is only approved on EMSA owned "devices" or by exception approved by the CIO.

Access of EMSA network and/or EMSA safeguarded information from a non-EMSA owned "device" is only allowed through the approved remoted desktop access software with the following restrictions:

- Said non-EMSA owned "device" must:
 - Be password protected in accordance to EMSA's *IT04 - Password Management* policy.
 - Have a unique user account configured for and accessed by only the EMSA team member, contractor or vendor who is permitted to access the EMSA network.
 - Remote "devices" configured to be able to access the EMSA network must:
 - Not be left unattended.
 - Should be configured to automatically activate password protected screen saver or lock screen function following a maximum of 15 minutes of inactivity.
 - EMSA's Privacy Officer or at least one member of "Executive Leadership" must be notified in a timely manner if a non-EMSA owned "device" which has been configured to connect to the EMSA network is, or suspected to be, lost, stolen or security on said "device" compromised.
 - Use of any "Email Client" is approved on non-EMSA owned "devices", however individual emails or their attachments may not be saved as independent files (*.msg format) or transferred to a locally stored Personal Storage Table (*.pst format) folder. Licensing of "Email Client" on non-EMSA owned "devices" is the sole responsibility of the owner of that "device" and they are expected to comply with all state and federal copyright and ownership statutes.
- Use of "Remote Desktop Access software" is approved on non-EMSA owned "devices" only with software listed on the approved Remote Desktop Access list.
- No data classified as CONFIDENTIAL or PROTECTED (See *IT14 - Information Classification policy*) may be stored on, or printed from, non-EMSA owned "devices" unless one of the two following conditions have been met:
 - A signed "Information Security Agreement" by team member and either the EMSA Privacy Officer or Chief Information Officer (not self-authorizing).
 - A signed "Information Security Agreement" by contractor or vendor and either the EMSA Privacy Officer or Chief Information Officer.
 - A signed "Business Associates Agreement" is executed, and copy resides within EMSA's document management system.

V. Policy Violations

Failing to follow this policy could result in disciplinary action or sanctions according to EMSA *IT01 - General Security*.



Policy Title: In Home Workers

IT07

Policy Category: Information Technology

Policy Owner: Chief Information Officer

Approval Authority: Board of Trustees and CEO

CURRENT EFFECTIVE DATE: 11/02/2020	Policy Origination Date: 08/26/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: IT01 General Security Additional Resources: § 164.308(a)(4)	

I. Purpose

The purpose of this policy to preserve the integrity of EMSA’s network and thereby the systems, data and the information safeguarded by EMSA.

II. Scope

This policy applies to team members, volunteers, contractors, consultants, temporary team members, students, and others at EMSA who have access to “devices” which may connect to the EMSA network, including all personnel affiliated with third parties who may be providing service in benefit of EMSA.

This policy applies to all networks EMSA provides including but not limited to; at each of its facilities and mobile hotspots in ambulances/official EMSA vehicles.

III. Definitions

Device: Any computer, workstation, mobile device, or cloud service capable of accessing EMSA’s network.

Guest Wireless Network: Wireless network connection to provide internet access to non-EMSA team member and segregated from EMSA’s primary internal network. This network is Currently named “EMSA-Guest-WiFi”.

IV. Policy

All non-EMSA owned devices must connect to the internet via the “Guest Wireless Network” and may not at any time connect to EMSA’s internal network (wirelessly or hardwire) unless prior authorization has been received in writing or email from the CIO or the Privacy Officer.

The main EMSA wireless network requires a unique user id and password to connect. Sharing of wireless access passwords provided for access to EMSA networks, even amongst team member, is strictly prohibited. Anyone requiring wireless access to the EMSA network must submit a request themselves or have their manager request through a help desk ticket.



Extending or retransmitting EMSA's network (wirelessly or otherwise) without authorization is strictly prohibited.

Any "device" connected to the EMSA network, whether owned or not by EMSA, must not have, or download, any security or utility analysis software such as password cracking programs, packet sniffers, port scanners or network mapping tools unless prior authorization has been received in writing or email from the Chief Information Officer. IT Team Members and authorized network contractors are permitted to use network diagnostic tools and software such as packet sniffers and network mapping tools without receiving prior authorization.

V. Policy Violations

Failing to follow this policy could result in disciplinary action or sanctions according to EMSA *IT01 - General Security*.



Policy Title: Electronic Communication

IT08

Policy Category: Information Technology

Policy Owner: Chief Information Officer

Approval Authority: Board of Trustees and CEO

CURRENT EFFECTIVE DATE: 11/02/2020	Policy Origination Date: 08/26/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: IT01 General Security Additional Resources: § 164.308(a)(4)	

I. Purpose

The purpose of this policy is to ensure the proper use of our “Electronic Communication” to adhere to regulatory compliance, respect the public image of EMSA and manage the cost of support. As a public trust, any communication, including but not limited to, email, IM or texting, sent/received while on duty or is EMSA related in nature is a matter of public record and is discoverable by anyone submitting the appropriate “Open Records Request”.

II. Scope

This policy applies to any email sent from an EMSA email address, or any IM/Texting communications while on duty or in service to EMSA, and applies to all team members, volunteers, contractors, consultants, temporary team members, students operating on behalf of EMSA regardless of if it is created or received on an EMSA owned or personally owned “device”.

III. Definitions

Device: Any computer, workstation, mobile device.

Electronic Communication: Including but not limited to Email, IM, Texting or Telephonic conversations.

Email: The electronic transmission of information through an email server.

IM (Instant messaging): The exchange of typed messages, files, pictures or video between computer users in real time sent over the internet (Note: With no EMSA internal solution in place, all content of IM’s transmits through the public internet, even if the computers are side by side)

Texting: The exchange of typed messages, files pictures or video sent over a cellular network from one mobile device to another.

Telephonic: Voice communication over cellular, terrestrial, or voice-over-ip.

Open Records Request: A written request by a public citizen for documentation generated, stored, or received by a government, or public trust organization.

IV. Policy



Personally, Owned Mobile Devices:

Use of a personally owned mobile device to conduct EMSA business via Instant Messaging, Texting, or Email is prohibited. If anyone in scope of this policy violates this their personal devices could potentially be subject to subpoena as required by court of law.

Instant Messaging:

- EMSA IT does not support any IM software, although appropriate use of IM as guided by EMSA Acceptable Use Policy and Code of Conduct is not prohibited.

Texting:

- EMSA IT does not support texting functionality, although appropriate use of texting, as guided by EMSA Acceptable Use Policy and Code of Conduct is not prohibited.

Email Use:

- All outbound EMSA email will automatically have a confidentiality statement included as a footer to the email. Any deletion or alteration of the statement's content is prohibited.
- All EMSA email should follow appropriate etiquette guidelines such as but not limited to:
 - Do not send anything that could not go on the front page – Open records act
 - Spell check before you send (or set auto-check) – show your professionalism
 - Know when to call instead of sending an email – emails can be “misunderstood”
 - Do not use ALL CAPS – deemed as shouting in an email
 - Do not default to “Reply All” unless required – just more emails to process
 - Keep emails short – if longer than 1 screen, many will not read it (call instead)

Prohibited Email Use:

- Sending unsolicited e-mail messages, including the sending of "junk mail" or other advertising material to individuals who did not specifically request such material (e-mail spam).
- Any form of harassment, whether through language, frequency, or size of messages.
- Unauthorized use or forging of e-mail header information.
- Solicitation of e-mail for any other e-mail address, other than that of the poster's account, with the intent to harass or to collect replies.
- Creating or forwarding "chain letters", "Ponzi" or other "pyramid" schemes of any type.
- Use of EMSA e-mail to advertise or sell anything personal including but not limited to business product, service, fundraiser, etc.
- The creation of a Personal Storage Table (*.pst) file is strictly prohibited. All company email should remain stored on EMSA's email server.
- Individual email size (including attachments) is limited to 25 megabytes email accounts are limited to 50 gigabytes.

Personal Email Use:

- In general, the use of your emsa.net email account should not be used for personal reasons. We do understand that from time to time it's necessary, but it is generally discouraged. However, the following personal activities are strictly prohibited:



- Sending/forwarding chain letters or joke emails from an EMSA email account
- Signing up for personal services using your EMSA email address, some examples of personal services would be shopping, newsletters, bank accounts, and other online applications that are not work related. This list is not inclusive of all things you should not use your EMSA email address for, but it is an example.
- In general, if it is not directly related to your work, you should not use your work (EMSA) email address for it.

Telephonic Use:

- Prohibited behaviors are any that would threaten, intimidate, or coerce any parties.
- Team members should not willingly falsify any information to any party at any time.
- Refrain from any behavior that would violate the code of conduct, policy, regulation, or law.

Personal Telephonic Use:

- Limit personal telephonic use to necessary calls.

Monitoring:

- All emails stored, received, or created using any “device” owned, controlled, or used for the benefit of EMSA, is always the property of EMSA and no expectation of privacy shall be presumed.
- Authorized individuals within EMSA may monitor any electronic communication at any time, without prior notice, to ensure compliance with all EMSA policies or other official reasons.

Archiving:

- All email sent or received, internally or externally shall be archived.
- Email archives will be maintained in accordance with the then current data retention policies or as directed by EMSA legal counsel.
- Individuals may access their own personal archives through EMSA’s then current email archive software or service.

V. Policy Violations

Failing to follow this policy could result in disciplinary action or sanctions according to EMSA *IT01 - General Security*.



Policy Title: Incident Reporting

IT09

Policy Category: Information Technology

Policy Owner: Chief Information Officer

Approval Authority: Board of Trustees and CEO

CURRENT EFFECTIVE DATE: 11/02/2020	Policy Origination Date: 08/26/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: IT01 General Security Additional Resources: § 164.308(a)(6)	

I. Purpose

To reduce or mitigate the impact of Information Technology (IT) policy violation “incident(s)” by defining the policy for reporting incidents.

II. Scope

This policy applies to team members, volunteers, contractors, consultants, temporary team members, students, and others at EMSA including all personnel affiliated with third parties who may be providing service in benefit of EMSA. Incidents involving a breach, or suspected breach, of Protected data (See *Information Classification policy*), such as Protected Health Information, should be addressed through the EMSA’s *Breach of Patient Information policy*.

III. Definitions

Incident: Any event that, regardless of accidental or malicious cause, results in a violation of a published EMSA IT policy.

IV. Policy

Safely and appropriately using technology is everyone's responsibility and requires active participation. Failure to prevent, resolve or report a violation means you share in the responsibility for that violation.

If a violation is observed or suspected, your obligations are as follows:

- If feasible and appropriate, your first obligation is to rectify the violation (such as closing a door you found propped open).
- Whether you can rectify or not, your second obligation is to report the violation in a timely manner using common sense. The following offers guidelines for who and when to notify:
 - If a break into the building is observed - Call 911 immediately
 - If a door is found propped open - Notify your manager in a timely manner (same business day).



- If a virus is detected or you suspect EMSA information is at imminent risk - call the IT help desk or on-call person immediately.
- If you have a concern contact your immediate manager at that time.
- If there is any issue you are not sure about then you should submit an IT help desk request at helpdesk@emsa.net.

V. Policy Violations

Failing to follow this policy could result in disciplinary action or sanctions according to EMSA *IT01 - General Security*.



Policy Title: Anti-Malware Software Management

IT11

Policy Category: Information Technology
Approval Authority: Board of Trustees and CEO

Policy Owner: Chief Information Officer

CURRENT EFFECTIVE DATE: 11/02/2020	Policy Origination Date: 08/26/2020
	Last Revision Date: N/A
	Date of Last Legal Review: N/A
Related Policies: IT01 General Security Additional Resources:	

I. Purpose

The purpose of this policy is to ensure maximum protection is maintained for EMSA’s infrastructure and the information safeguarded by EMSA.

II. Scope

All devices that are or could be connected to the EMSA network.

III. Definitions

Definitions: File provided by Anti-virus vendor of virus characteristics used in identifying viruses.

Device: Any computer, workstation, mobile device capable of network access to EMSA.

Non-trusted entity: Any repository of files, data, or information from outside (Internet, FTP server, Vendor site, etc.) of the EMSA hosted systems.

IV. Policy

All devices will be protected by EMSA approved Anti-Virus and Spyware software (typically combined into one software solution).

Anti-Virus software “definitions” are to be updated on at least a weekly basis.

All E-mail attachments must be first virus scanned before opening (typical default of most Anti-Virus software).

All files downloaded from a “non-trusted entity” must be first virus scanned before being opened or stored on an EMSA owned device (typical default of most Anti-Virus software).

Unauthorized changes to EMSA installed Anti-virus software configuration settings is strictly prohibited.



Use of any device with an indication, or suspicion, of a virus infection should be discontinued immediately and the IT team member notified promptly.

V. Policy Violations

Failing to follow this policy could result in disciplinary action or sanctions according to EMSA *IT1 - General Security*.



Policy Title: Information Classification

IT14

Policy Category: Information Technology

Policy Owner: Chief Information Officer

Approval Authority: Board of Trustees and CEO

CURRENT EFFECTIVE DATE: 11/02/2020	Policy Origination Date: 08/26/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: IT01 General Security Additional Resources: § 164.308(a)(4)	

I. Purpose

To educate team members about the importance of protecting data generated, accessed, transmitted, and stored by EMSA and the level of security based on assigned classification.

II. Scope

This policy applies to team members, volunteers, contractors, consultants, temporary team members, students, and others at EMSA who have access to information safeguarded by EMSA, including all personnel affiliated with third parties who may be providing service in benefit of EMSA.

The information covered in this policy includes, but is not limited to, information that is either stored or shared via any means. This includes electronic information, information on paper, and information shared orally or visually (such as telephone and video conferencing).

III. Definitions

Access: Includes but is not limited to access to, modification, transmission, or storage of.

Protected health information: Defined in 45 CFR 160.103 as “individually identifiable health information which is created or received by a health care provider” and generally refers to demographic information, medical history, test and laboratory results, insurance information and other data that is collected by a health care professional to identify an individual and determine appropriate care.

IV. Policy

Team members are to use their best judgment in classifying information based on the following classifications. If there is any doubt, it is the team member’s responsibility to assume the higher (more secure) classification status.

Public Data: Information that may or must be open to the public. It is defined as information with no existing local, national, or international legal restrictions on access or usage. Public data is available to all team members and to all individuals and entities external to EMSA.

Example: Press releases or any information published on EMSA’s web site



Contractor Proprietary: Information that must be guarded due to proprietary, ethical or privacy considerations and must be protected from unauthorized “Access”. Contractor proprietary information is restricted to team members of said contractor who has a legitimate purpose for accessing such data.

Example: Operations Contractor team member’s personal information (DOB, etc.) is proprietary and should not be accessible by EMSA.

Confidential Data: Information for which all reasonable efforts must be made to safeguard due to its nature of being protected by statutes, regulations or EMSA contractual language. Confidential information is restricted to EMSA team members who have a legitimate and defensible purpose for accessing such data or through a properly processed “Open Records Request”, or subpoena. Disclosure to parties outside of EMSA team members must be authorized in writing by Chief Executive Officer and/or General Counsel.

Example: Financial Statements

- When stored in an electronic format, must be protected in accordance with Password Management policy and stored on servers in accordance with Physical Asset policy to protect against loss, theft, unauthorized access, and unauthorized disclosure.
- When not electronic, must be stored only in a locked drawer or room or an area where access is controlled sufficiently to afford adequate protection and prevent unauthorized access by members of the public, visitors, or other persons without a need-to-know.
- Must be destroyed when no longer needed subject to EMSA’s Records Retention policy. Destruction may be accomplished by:
 - "Hard Copy" materials must be destroyed by shredding or another process that destroys the data beyond either recognition or reconstruction. After destruction, materials may be disposed of with normal waste.
 - Electronic storage media shall be destroyed appropriately by then current appropriate methods prior to disposal. Disposal of electronic equipment must be performed in accordance with EMSA’s Physical Asset Management Policy.

EMSA’s Privacy Officer or at least one member of “Executive Leadership” must be notified in a timely manner if data classified as Confidential is, or suspected to be, lost, or disclosed to unauthorized.

Protected Data: Information that must be protected with all due diligence due to nature of “Protected Health Information” and the statutes and regulations governing its privacy. Protected information is restricted to EMSA team members who have a legitimate and defensible purpose for accessing such data.

Example: Treatment, assessment or transport of a patient, Insurance coverage, billing, or payment information.

- When stored in an electronic format, must be protected with strong passwords and stored on servers that have protection measures in place as per the appropriate EMSA IT security policies in order to protect against loss, theft, unauthorized access and unauthorized disclosure.
- Must be stored only in a locked drawer or room or an area where access is controlled sufficiently to afford adequate protection and prevent unauthorized access by members of the public, visitors, or other persons without a need-to-know.
- Must be destroyed when no longer needed subject to EMSA’s Records Retention policy. Destruction may be accomplished by:



- "Hard Copy" materials must be destroyed by shredding or another process that destroys the data beyond either recognition or reconstruction. After destruction, materials may be disposed of with normal waste.
- Electronic storage media shall be destroyed appropriately by then current appropriate methods prior to disposal. Disposal of electronic equipment must be performed in accordance with EMSA's Physical Asset Management Policy.

EMSA's Privacy Officer or at least one member of "Executive Leadership" must be notified in a timely manner if data classified as Protected is, or suspected to be, lost, or disclosed to unauthorized person or entity.

V. Policy Violations

Failing to follow this policy could result in disciplinary action or sanctions according to EMSA *IT01 - General Security*.



Policy Title: Access Provisioning & Deprovisioning

IT17

Policy Category: Information Technology
Approval Authority: Board of Trustees and CEO

Policy Owner: Chief Information Officer

CURRENT EFFECTIVE DATE: 11/02/2020	Policy Origination Date: 08/26/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: IT01 General Security Additional Resources: § 164.308(a)(3)	

I. Purpose

The purpose of this policy is to outline the appropriate provisioning and deprovisioning (termination) of access to “devices”, “technology” or “services”. These rules are in place to protect the team members and patients of EMSA, and the information safeguarded by EMSA.

II. Scope

This policy applies to team members, volunteers, contractors, consultants, temporary team members, students, including all personnel affiliated with third parties who may be providing service in benefit of EMSA who need to have access provisioned.

III. Definitions

Device: Any computer, workstation, mobile device, or cloud service capable of accessing EMSA’s network.

Service(s): Applications which are not run on your local computer.

Technology: Any software, storage media, data, or other services.

Authentication profile: The systems and applications an end user is authorized to access.

Scrubbed: The removal of all relevant data from a device from, including but not limited to, backups media, recycle bin, etc., in such a way that it may not be recovered by any reasonable means.

IV. Policy

Provisioning

- “Authentication profile” for new profiles will be mapped to user performing similar function. Any additional access required must be specifically listed in Help Desk ticket.
- A help desk ticket defining access changes to current “Authentication profile” is required from responsible manager or above.

Deprovisioning



- Help desk ticket for termination of user is required from responsible manager or above.
 - If termination is on good standing for future date, user's password will be set to be expired on termination date.
 - Help desk ticket must note if personal network drive ("U drive") or email is to be forwarded to alternative team member, otherwise email will be archived, and any inbound emails will receive "address not found" response.
- If termination is immediate or is suspected to pose a security risk the responsible manager is to call the "On Call" IT support member for coordination of real time termination of access.
- Responsible manager is required to collect all EMSA assets, including but not limited to, "devices" and physical access card at time of termination.
- In home workers
 - A network lock of the access will be placed at time of termination.
 - In home workers have 48 hours to return all EMSA equipment after termination.
- Team member who have stored Confidential or Protected information on their personal devices as approved in accordance with the Remote Access policy are expected to "scrub" their devices per the agreement.
- In the event of an IT team member's departure, all administrative credentials known to the team member must be changed immediately.

V. Policy Violations

Failing to follow this policy could result in disciplinary action or sanctions according to EMSA *IT01 - General Security*.



Policy Title: Physical Access

IT18

Policy Category: Information Technology

Policy Owner: Chief Information Officer

Approval Authority: Board of Trustees and CEO

CURRENT EFFECTIVE DATE: 11/02/2020	Policy Origination Date: 08/26/2020
	Last Revision Date: N/A
	Date of Last Legal Review:
Related Policies: IT01 General Security Additional Resources: § 164.310(a)(1)	

I. Purpose

The purpose of this policy is to outline the appropriate provisioning, management and deprovisioning (termination) of physical access to “premises” to protect the team members and patients of EMSA.

II. Scope

This policy applies to team members, volunteers, contractors, consultants, temporary team members, students, and others at EMSA who have access to “premises”, including all visiting personnel affiliated with third parties who may be providing service in benefit of EMSA. For the purpose of this policy, Operations Contractor team members will adhere to the same policies as EMSA team members through their contractual obligation.

III. Definitions

Device: Any computer, workstation, mobile device capable of accessing EMSA’s network.

Service(s): Applications which are not run on your local computer.

Technology: Any software, storage media, data, or other services.

Premises: EMSA managed facilities

Authentication profile: The area(s) within premises that an end user is authorized to access.

Long Term Contractors: Contractors or consultants under contractual relationship with EMSA but with no set term of expiration of contract.

Short Term Contractors: Contractors or consultants under contractual relationship with EMSA but with set term of expiration of contract, typically less than a year.

IV. Policy

Security is everyone’s responsibility and requires active participation. Failure to prevent, resolve or report a violation means you share in the responsibility for that violation.

Disabling or circumventing physical access controls (such as propping a door open) is strictly prohibited and in doing so, team member assumes responsibility for any actions which may occur.



Access to areas not authorized by current “authentication profile” without consistent escort of authorized person is strictly prohibited.

Authorized users are responsible for the security of their access pass card and any actions taken using their pass card, whether knowingly or not.

Visitors

- All visitors must sign in at reception desk prior to entering “premises” and sign out upon departure.
 - During certain times, it may be necessary to collect certain additional information such as a person's wellbeing, body temperature, and any history of recent illnesses.
 - When such additional information is requested, signs will be prominently posted advising visitors to EMSA's facilities of said requirements.
- All visitors without physical access cards must be consistently escorted by team member authorized for access to area to be visited
- Visitor physical access cards
 - Must be requested, verbally or by email, by responsible manager or IT team member
 - Must present at least one federal or state issued ID with picture to receptionist
 - Must return physical access card upon departure or end of day
 - Receptionist will perform daily audit of visitor physical access cards to ensure all have been returned. Any missing will be noted in Help Desk ticket to be de-activated immediately.

Team members, volunteers, temporary team members, students, or interns

- Provisioning
 - Help desk ticket for new team members or change to current team member's “Authentication profile” is required from responsible manager or above
 - “Authentication profile” for new team members will be mapped to team member performing similar function. Any additional access required must be specifically listed in Help Desk ticket.
- Deprovisioning
 - Help desk ticket for termination of team members is required from responsible manager or above. If termination is on good standing for future date, team member's physical access will be set to be expired on termination date.
 - If termination is immediate or is suspected to pose a security risk the responsible manager is to call the “On Call” IT support team member for coordination of real time termination of access.
 - Responsible manager is required to collect all EMSA assets, including but not limited to, “devices” and physical access card at time of termination.

“Short term contractors” will adhere to same provisioning and deprovisioning policies as EMSA team members. In addition, physical access will be set to expire semi-annually or term date of contract, whichever is shorter. Extension of physical access will require verification by responsibility by responsible manager.

“Long term contractors” will adhere to same provisioning and deprovisioning policies as EMSA team members. In addition, physical access will be set to expire at least semi-annually. Extension of physical access will require verification by responsibility by responsible manager.

EMSA's Privacy Officer or at least one member of “Executive Leadership” must be notified in a timely manner if a team member is aware of or suspects a breach of security has taken place.



V. Policy Violations

Failing to follow this policy could result in disciplinary action or sanctions according to EMSA *IT01 - General Security*.