CEDAR GROVE FAMILY MEDICINE

Employee Handbook

The Practice Field Guide | A clear guide to working well together

FICTIONAL NORTH CAROLINA SAMPLE | VERSION 0.1 | EFFECTIVE DATE: [DATE]

A short preview of the practice-wide employment rules. Bracketed items are customization fields.

THE EMPLOYEE JOURNEY

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01 / Purpose, scope and document control

This handbook summarizes the practice-wide employment rules and workplace expectations for Cedar Grove Family Medicine. It applies to employees unless a written agreement or applicable law provides otherwise. Owner: [practice administrator]. Effective date: [date]. Review at least annually and when a material change occurs.

02 / Mission and how we work

Our mission is to provide respectful, reliable family medicine and make each visit easier to navigate. We value patient dignity, teamwork, clear communication, accurate records and accountability. Every employee is expected to support safe, courteous service and raise concerns promptly.

03 / Employment definitions and classifications

“Employee” means an individual employed by the practice. Roles may be full-time, part-time, temporary or per diem; exempt/nonexempt status is determined by the practice under applicable law, not by title alone. A contractor is not an employee and must be classified based on the actual relationship. Benefits and leave eligibility depend on the written plan and applicable law.

04 / Hiring, onboarding and building access

Before independent work, new staff complete required employment forms, role orientation, privacy/security training and role-specific safety training. The manager explains schedules, contacts, emergency routes and assigned duties. Badges, keys and system access are assigned by role; do not share them. Report lost credentials immediately. Follow visitor, opening/closing and restricted-area procedures in the separate Building Security procedure.

05 / Equal opportunity, respect and accommodations

The practice expects a workplace free from discrimination, harassment and bullying. Raise concerns with [manager], [alternate leader] or [reporting channel], even if the concern involves a supervisor. The practice will review concerns promptly and limit sharing to those who need to respond. Retaliation for good-faith reporting or exercising workplace rights is prohibited. Employees may request a reasonable accommodation through [HR contact]; the practice will engage in an appropriate interactive process.

06 / Schedules, attendance and timekeeping

Schedules and coverage expectations come from the department manager. If you will be late or absent, notify [supervisor] through [approved channel] as soon as practical and follow department call-out steps. Record all time worked accurately, including approved work outside a scheduled shift; never work off the clock or alter a time record. Send corrections or pay questions to [payroll contact]. Overtime must be approved in advance when practicable, but all hours worked must still be reported.

07 / Pay, benefits, time off and leave

Paydays are [schedule]; direct deposit and pay statements are handled through [system/contact]. Benefit options, eligibility, enrollment deadlines and plan terms are described in current plan documents, which control if they differ from this summary. Request PTO through [system] with as much notice as practical; approval depends on coverage and applicable law. Report an unexpected absence promptly. Protected leave, accommodation-related absences and legally protected activities are handled under applicable law and separate leave procedures; ask [HR contact] for guidance.

08 / Conduct, performance and corrective action

Employees are expected to be honest, prepared, respectful, attentive to assigned duties and cooperative with reasonable supervision. Follow clinical scope limits, practice rules and professional boundaries; report errors and safety concerns promptly. Coaching and corrective action may include: (1) coaching or verbal warning, (2) written warning, (3) final written warning, and (4) termination. The practice may skip or repeat steps depending on the facts and applicable law. Each formal step should document the concern, employee response, expectations, support, follow-up date and decision-maker. No step guarantees continued employment.

09 / Dress, phones and social media

Wear clean, role-appropriate attire and required identification. Clothing and footwear must support safety and the duties assigned; follow any department uniform or PPE standard. Keep personal phones away during patient-facing duties except for approved work or urgent needs. Never photograph, record or post patient information or images. Do not speak for the practice online unless authorized; personal posts must not reveal confidential information or imply an official practice position. Nothing in this policy is intended to restrict rights protected by law.

10 / Privacy, HIPAA and information security

Access, use or disclose patient information only as needed for assigned duties and through approved systems. Verify the recipient before sharing; secure screens, records and devices; use unique credentials; and report a suspected misdirection, loss, inappropriate access or security event immediately to [privacy/security contact]. Do not discuss identifiable patient information in public areas or personal channels. Detailed privacy and security requirements, sanctions and breach response are in the separate Privacy and Security policies.

11 / Safety, infection prevention and emergencies

Follow training, standard precautions, PPE instructions, exposure-control measures and equipment rules for your role. Report hazards, injuries, needlesticks, exposures and near misses promptly to [safety contact] and seek appropriate care. Do not perform a task for which you are not trained or authorized. Know exit routes, severe-weather/fire response, emergency contacts and the building evacuation plan. The practice maintains separate safety, exposure-control, emergency and infection-prevention documents.

12 / Reporting, records and investigation

Report harassment, discrimination, retaliation, unsafe conditions, privacy concerns, suspected misconduct, time/pay issues or policy conflicts to [manager], [alternate contact] or [reporting channel]. A manager who receives a report must promptly route it to [designated leader] and preserve relevant records. Cooperate honestly in reviews. Retain employment documents only in approved systems; do not place personnel documents in patient charts.

13 / Separation, property and access

When employment ends, the practice will communicate next steps, return of keys/devices/property, account access, benefits information and final pay through the appropriate contacts. Return practice property and protect confidential information after separation. The practice documents the reason and approvals for its decision and maintains records under its retention schedule. Final pay and benefit handling follow applicable law and plan terms.

14 / Acknowledgment and related documents

Sign the acknowledgment to confirm receipt and responsibility to read this handbook. Acknowledgment does not mean agreement with every provision or waive legal rights. Related controlled documents include department policies, SOPs, leave/benefit plan materials, privacy/security policies, exposure-control and safety plans, emergency procedures, clinical protocols and the building security procedure. Use the current approved version; ask [manager] where it is stored.

EMPLOYEE ACKNOWLEDGMENT

I acknowledge receipt of this handbook and understand that I am responsible for reviewing it and asking questions. My signature confirms receipt; it does not waive legal rights or change the terms of a separate written agreement.

Employee: _____ Signature: _____ Date: _____

SAMPLE USE NOTE This fictional sample demonstrates structure and example language only. It is not legal advice, a compliance certification or a ready-to-adopt policy. Tailor it to the practice and applicable requirements; obtain qualified employment, privacy and safety review before adoption.