

Polk County

Internal Policies Manual



POLK COUNTY POLICIES MANUAL FORWARD

The policies contained in this manual have been previously approved by the Polk County Board of Supervisors. Publication of this manual is not intended to alter current County policies, but merely to compile previously adopted policies into one manual for the convenience of the general public and County employees.

In the course of Web Page formatting, minor, non-material modifications have been made to assist the user in accessing these documents.

A copy of this manual is available at the Polk County Auditor's Office, 111 Court Avenue, Room 230, Des Moines, Iowa 50309 - (515) 286-3080.

POLK COUNTY INTERNAL POLICIES MANUAL

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AED Policy

An Automated Defibrillator (AED) is used to treat victims who experience sudden cardiac arrest (SCA). It is only to be applied to victims who are unconscious, not breathing normally and not showing any signs of circulation, such as normal breathing coughing and movement. The AED will analyze the heart rhythm and advise the operator if shock is advised. If a detectable rhythm is detected, the AED will charge to the appropriate energy level and advise the operator to deliver a shock.



GLOSSARY OF TERMS

A. DEFINITIONS

1. AED Program Medical Advisor is the Medical Director of Polk County Health Department.
2. AED Coordinator is the employee of the Polk County Health Department, Franny Medeiros CMA, who oversees the AED Program for Polk County, maintenance of the AED Units, and training of the employees.
3. AED Healthcare Provider, Lay Responder / Rescuer (LRR) shall refer to an Polk County employee who is appropriately trained and certified to carry and operate an AED Unit during his/her time at work.
4. AED Unit is the Zoll AED Plus and equipment that complies with the “Guidelines for Public Access Defibrillation Programs in Federal Facilities”. The automated external defibrillator (AED) is a computerized medical device. An AED can check a person's heart rhythm. It can recognize a rhythm that requires a shock. And it can advise the rescuer when a shock is needed. The AED uses voice prompts, lights, and text messages to tell the rescuer the steps to take.
5. Defibrillation is an electric “SHOCK” delivered to the heart to correct certain life threatening heart rhythms

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Responsibilities as AED Coordinator

The AED Coordinator is the primary liaison between the AED program, the Medical Director and Polk County Risk Management. This person has the following general responsibilities:

- Maintain all equipment and supplies.
- Organize training programs and regular re-training programs for staff.
- Maintain all training records and Call Report/Patient Care Records for a minimum of 5 years.
- Forward any incident data to the Medical Director and responding EMS.
- Ensure that the AED is properly maintained after any use.
- Maintain and revise the procedure manual in accordance with state regulations and cooperation with program's Medical Director.
- Maintain all equipment inspection and maintenance records, QC and supply records (such as lot #s for supplies).
- Schedule annual review meeting with Medical Director.
- Monitoring the effectiveness of this system.
- Communicate with medical director on issues related to medical emergency response program including post event reviews.

Applicable Documents

- AED Policy and Procedures for Polk County Employee's.

Medical Control

The Medical Advisor of the AED program is Dr. Carlos Alarcon, MD

The Medical Director has authority over the entire AED program and its participants. General responsibilities include the following:

- Conducts an annual review of program paperwork (training, procedures, QC, maintenance, inspections, etc.)
- Functions as a resource to the agency in planning, scheduling and training for the services personnel.
- Development of a mechanism to assure the continued competency of service personnel to include periodic training and semi-annual skill proficiency demonstrations.
- Periodic review of service activities as they relate to patient care.
- Establishment of any other rules or activities needed to ensure the delivery of patient care within the services scope of practice.
- Conduct an annual review meeting with the Coordinator and Targeted Responders to review all paperwork, machine maintenance and oversee the review training.
- Providing medical direction for the use of the AED. Reviewing and approving guidelines for emergency procedures related to the use of the AED and CPR.
- Evaluation of post-event review forms and digital files downloaded from the AED.

Annual Program Review

The AED Coordinator will annually conduct a review of all components of the AED program and make appropriate recommendations for improvement or remediation. The annual review will include at least the following components:

- Review of the AED written Policy and Procedures,
- Review of Iowa state laws and guidelines related to AED use,
- Discussion and review of AED Program Medical Advisor's responsibilities and activities.
- Review of all departmental records related to personnel training and AED locations, use, service, and testing.
- Review of recommendations for improvement or remediation with Polk County Risk Management.

Authorized AED Users

- All employees updated in Healthcare provider CPR or Heartsaver AED.
- Anyone at their discretion may provide assistance to victims of a medical emergency. To the extent to which individuals respond shall be appropriate to their training and experience.
- Required to Activate 911 and provide prompt basic life support including AED usage according to training and experience.
- Must understand and complying with the requirements of this policy.

Equipment

The AED should be brought to all medical emergencies. The AED should be used on any person that display's all the symptoms of a cardiac arrest. There is one set of Adult electrodes attached to the AED, one spare set in AED bag and one set of Pediatric electrodes to be used on persons 0-8 years of age. The AED will be placed only after the following symptoms are confirmed:

- Victim is unconscious
- Victim is not breathing
- Victim has no pulse and/or shows no signs of circulation such as normal breathing, coughing, or movement.

Location of AED

The AED will have one ADULT set of defibrillation electrodes connected to the device, one spare ADULT set of electrodes and one set of PEDIACTRIC electrodes with the AED. One resuscitation kit will be connected to each of the electrode package. This kit contains, one razor, one set of trauma sheers, and one facemask barrier device. There is an ADULT mask in AED case.

- Location of AED's for Polk County starts on page 18.

Training

- All selected employees must complete training adequate to provide basic first aid, CPR, and AED. Training will be provided on site. AED Coordinator shall maintain training records for all employees.
- Certified Employee's will be notified of Recertification every two years.

Medical Response documentation

It is important to document each use of the emergency response system. The following forms shall be sent to the AED coordinator within 24 hours of a medical event:

- Employees shall complete a medical event form (injury form) when an AED is used.
- Any and all patient information generated during AED use must be collected into a patient's confidential file.
- A copy of AED use information shall be presented to the medical director of the AED program within 72 hours of an emergency.

Equipment Maintenance

All equipment and accessories necessary for support of medical emergency response shall be maintained in a state of readiness. Specific maintenance requirements include:

- The AED Coordinator shall be informed of changes in the availability of emergency response equipment. If equipment is withdrawn from service, the operator shall be informed then notified when equipment is returned to service.
- The AED Coordinator shall be responsible for informing response team of changes to availability of emergency medical equipment.
- Under the training of the AED Coordinator, designated persons will be responsible for having regular equipment maintenance performed. All maintenance tasks shall be performed according to equipment maintenance procedures as outlined in the operating instructions.
- Page 17 of this manual will be available via email to designated persons to test AED machine monthly for performance tests and inspection. This form will be sent to the AED coordinator by the last day of each month at franny.medeiros@polkcountyiowa.gov
- Following the use of emergency response equipment, all equipment shall be cleaned and/or decontaminated as required. If contamination includes body fluids, the equipment shall be disinfected according to procedure.

System Verification and Review

The medical emergency response system is ultimately successful if necessary medical assistance is provided to victims in a timely and safe manner. Since actual use of this system procedure is expected to be very infrequent, other measures of effectiveness are required.

Annual System Assessment

Once each calendar year, the System Owner or their designee shall conduct a document system readiness review. This review shall include review of the following elements:

- Training record
- Equipment operation and maintenance records

Monthly System Check

Once each calendar month, the designated person shall conduct and document a system check. These records shall be retained according to the schedule established for the AED Coordinator. This shall include reviews of the following elements:

- Electrodes Expiration dates
- AED battery life
- AED operation and status
- The designated person will complete the AED inspection form on a monthly basis and email the AED Coordinator the completed form if deficiencies occur. The AED Coordinator will ensure ted.

Post Event Review:

Following each deployment of the emergency response system, or if a volunteer responder uses an AED, a review shall be conducted to learn from the experience. The Medical Emergency System Owner shall conduct and document the post event review. All key participants in the event shall participate in the review. Included in the review shall be the identification of actions that went well and the collection of opportunities for improvement as well as critical incidence stress debriefing. A summary of the post event review shall be sent to the AED Coordinator, Risk Management, and the Medical Director. Risk Management or AED Coordinator, according to the record retention policy, shall maintain a copy of the post event review summary.

Approvals

Functions
Date

Printed Name

Signature

Medical Director

Polk County Board of Supervisors

Chair

Date: _____

Author: Franny Medeiros, CMA
History: Updated 8/3/11 by Terri Henkels

Contact: Polk County Health Department
515-286-3759

Adopted: 11/1/11

[Click for Resolution:](#)

Charitable Solicitation Policy

CHARITABLE SOLICITATION BY NON-POLK COUNTY AFFILIATED ORGANIZATIONS

POLICY

It is the policy of Polk County that solicitation of Polk County employees at the workplace by qualified federations of charitable organizations will be allowed annually pursuant to the procedures set forth by the County in order that the goals of the County may be met. The County does not support or endorse any charitable organization or federation of organizations.

GOALS OF THE POLICY

The following are the goals of the Polk County Board of Supervisors.

1. Lessen the burdens of County government in meeting the needs for health and human welfare services in Polk County by allowing solicitations of County employees for donations to organizations with goals of meeting health and human welfare needs. Organizations which provide opportunities for education to persons who would not otherwise receive such opportunities are included within these goals.
2. Serve the health and human welfare needs individuals who live or work in Polk County or those needs of their families.
3. Provide a convenient channel through which County employees may contribute to qualified federations of organizations.
4. Minimize or eliminate disruption to the County workplace and the administrative costs to the County taxpayers that such fundraising and payroll deduction may entail.
5. Ensure that recipient federations or organizations are responsible in the uses of the funds raised through fundraising from County employees.

EMPLOYEE SOLICITATIONS

Employee solicitations are to be conducted using only methods that encourage voluntary giving. Activities that do not allow free choice or the appearance thereof are prohibited. This should not restrict the need for an effective, well organized education program among employees. All employees will be given the necessary information to make an informed choice.

DEFINITIONS

1. A federation is a group of voluntary charitable health, education or and human welfare organizations existing for the purpose of supplying common fund-raising, administrative, and management services to its constituent members.
2. A qualified federation of organizations is a federation which meets all of the following requirements:
 - a. The federation must consist of representatives of a minimum of fifteen or more eligible charitable organizations. Each charitable organization of a federation must comply with all requirements established for such organizations by these procedures.
 - b. The federation must be a charitable, tax-exempt organization as defined in 501(c) (3) of the U.S. Internal Revenue Code.

- c. The federation must have a direct and substantial local presence in Polk County. A telephone number alone shall not constitute a local presence.
 - d. The federation must operate without discrimination based on age, race, creed, color, sex, national origin, or disability in employment, the delivery of services, and the distribution of funds.
 - e. A report must be made available annually to the general public detailing the activities of the federation.
 - f. The federation must make available to the public and to the County an annual auditor's report which is prepared by an independent certified public accountant.
 - g. The federation must maintain with the federation an annual year end report from each organization of the federation which sets forth the organization's financial status and activities and a description of the programs and services supported by the organization.
 - h. The federation must complete the County's application of participation each year. The application shall include a certification that all participating organizations meet all eligibility criteria to be an eligible charitable organization as defined in the procedures.
3. A charitable organization is an organization which is a non-profit, philanthropic, health and human welfare organization that provides or supports health or human welfare services, or provides or supports education related to health and human welfare needs.
4. An eligible charitable organization is a charitable organization which meets the following requirements:
- a. Each organization of a qualified federation of organizations must be a nonprofit, tax exempt charitable organization as defined in 501 (c)(3) of the U.S. Internal Revenue Code or any instrumentality of the State of Iowa or of any political subdivision thereof.
 - b. The organization must provide or support health, education or human welfare services in Polk County that are readily accessible to persons who live or work in Polk County and their families at the time that donations are to be received.
 - c. The organization must operate without discrimination based on age, race, creed, color, sex, national origin, religion or disability in employment, the delivery of services, and the distribution of funds.
 - d. A report must be made available annually by the organization to the general public detailing the local activities of the organization.
 - e. The organization shall make available to the general public an annual auditor's report which is prepared by an independent certified public accountant or a report which demonstrates financial responsibility and that the organization's financial practices conform to generally accepted accounting procedures.

PROCEDURES

- 1. The purpose of the County's procedures is to establish the standards which will be applied in determining how solicitation of County employees by various qualified federations of charitable organizations will be conducted.
- 2. Solicitation of County employees shall occur only once per year between September 1 and November 30. Specific time frames during which solicitation will be allowed will be determined annually by the governing committee.

3. Only qualified federations of charitable organizations will be allowed to solicit donations from County employees at any County worksite.
4. The following types of contributions will be allowed:
 - a. Payroll deductions to a qualified federation of organizations.
 - b. Direct contribution to a qualified federation of organizations.
 - c. Direct contribution or payroll deduction to individual charitable organizations if a qualified federation assumes responsibility for directing the donation to the intended organization(s).

ADMINISTRATION

1. Campaign Manager

The Polk County Administrator will appoint a County employee as a campaign manager. This individual will work with the County's governing committee or an external administrator to coordinate all solicitation activities with department heads and elected officials.

2. Governing Committee/External Administrator

The Polk County Board of Supervisors may request proposals yearly for administration of the campaign. Responsibilities of the administrator may include but are not limited to determining the eligibility of federations for participation. The request for proposals will establish the responsibilities of the external administrator. The Board of Supervisors reserves the right to reject all proposals and assign the responsibility of administering the campaign to a governing committee appointed from among Polk County employees.

3. Payroll Deduction

- a. Payroll deductions may be made only for contributions to a qualified federation of organizations.
- b. Any request for payroll deduction must be in writing, signed by the employee.
- c. An authorization for payroll deduction shall not continue in effect for a period of time exceeding one year.
- d. An employee may terminate the authorization for deduction at any time by providing 30 days written notice to the Polk County Auditor.
- e. An employee will be deemed to have authorized withholding 1/26th of the entire amount pledged by payroll deduction per pay period. Termination of employment with Polk County will be deemed to be a termination of authorization for deduction of the pledged amount. Any outstanding amount of the pledge will not be withheld from the employee's final paycheck. The County Auditor will deduct pledges beginning with the first paycheck in January.
- f. A minimum deduction of one dollar (\$1.00) per pay period per federation will be required for payroll deduction.

4. Pledge Authorization Forms

The campaign manager will distribute an annual pledge authorization form approved by the campaign manager to all employees to use for all contributions made to federations by payroll deduction.

ORGANIZATION PARTICIPATION

1. Requests for Participation Federations wishing to participate in the campaign program shall forward an application annually to the campaign manager on a date established by the governing committee. The governing committee or external administrator shall determine whether the federation meets the qualifying requirements. The federation shall be notified within thirty calendar days following the closing date for applications whether the federation has been determined qualified and if not, the reasons for the determination. A federation which has been denied admission to the campaign will be allowed fifteen work days following the date of the notice of denial to file a written request for reconsideration with the County Administrator. The County Administrator shall notify federations of the final decision within fifteen work days following receipt of the request. The County Administrator decision shall be considered final.

2. Criteria for Ongoing Participation

Once approved for participation, any qualified federation may be disqualified by the governing committee or external administrator for any of the following reasons:

- a. Failure to comply with board policies and procedures or failure to meet qualifying criteria.
- b. Filing an application to participate which contains false or misleading information.
- c. Failure of a federation to receive pledges from at least twenty employees for payroll deductions.

3. Appeal of Disqualification

A qualified federation which is disqualified from ongoing participation may appeal the decision. An appeal must be filed within fifteen work days of the date of the disqualification by filing a written request for reconsideration with the County Administrator. The County Administrator shall notify the federation of the final decision within fifteen work days following receipt of the request for reconsideration. The County Administrator decision shall be considered final.

4. Administrative Charges

The County reserves the right to charge the actual administrative costs of managing the campaign to each participating qualified federation of organizations. The percentage of the total cost assessed to a qualified federation as costs shall be equal to the percentage of total campaign funds received by that federation of organizations. The charges will be collected from the contributors to each qualified federation. Qualified federations will be advised of the items to be included as administrative costs at the time the qualified federations are advised that their applications for solicitation have been accepted.

5. Campaign Literature and Presentations

Each qualified federation will be allowed to provide literature as approved by the campaign manager to be distributed to employees. The literature may describe the federation and charitable organizations and purpose of the organizations. Distributions will be arranged by the campaign manager and distributions may not be made directly to an employee at the work site by any federation. If any qualified federation is allowed a presentation about its organization, all qualified federations will be allowed equal time and opportunity for a presentation to County employees. All decisions about the length, location and date of presentations will be made by the campaign manager.

6. Work Site Solicitation

Federations of organizations may not, on their own motion, solicit employees at any County work site. All solicitations must occur during the solicitation period as set out in this policy and only under the directions of the campaign manager, in accordance with these procedures.

ACCESS TO INFORMATION

Employees shall be free to publicize their gifts or maintain confidentiality about them. Individual employee records will be treated as confidential personnel records pursuant to §2.7(11), Iowa Code.

The universal form provided by the County shall remain confidential and will be used by the County Auditor for financial purposes only. It will not be made available to any charitable organization or federation. Donation forms submitted by qualified federations of organizations for the purpose of soliciting direct contributions will be returned to the originating federation, once completed by the employee. The forms will not be made available to other agencies, federations, organizations or individuals. A report will be sent with each remittance of payroll deductions to each federation listing their contributors (name only) and the amount of their contributions.

Contact: Auditor's Office
515-286-3080
Revised: 8/10/99

[Click for Resolution:](#)

Claims Procedure (personal Injury /property damage)

POLK COUNTY RISK MANAGEMENT CLAIM REPORTING PROTOCOL

When an incident resulting in personal injury or property damage occurs, excluding incidents covered by Workers Compensation, the following protocol will be followed:

1. If a Polk County employee is involved, the incident must be reported to his/her supervisor immediately.
2. The employee's supervisor or department head will notify the Risk Manager or designee (Safety & Loss Control Specialist) as soon as possible.
3. After logging the incident report, the Risk Manager or Safety & Loss Control Specialist will notify the County Attorney's Office
4. The County Attorney and Risk Manager will agree on an amount to reserve for the any claim payments.
5. The Safety and Loss Control Specialist will then proceed with an investigation on behalf of the County Attorney's Office. The investigation may consist of some or all of the following:
 - a.) Interview the County employee involved and have a Polk County Incident Report Form completed.
 - b.) Contact other individuals involved and have them complete the Polk County Incident Report form.
 - c.) Interview the parties involved and obtain their written statements.
 - d.) Investigate the incident scene and take pictures of the area and equipment.
 - e.) Obtain names of any witnesses and obtain their statements (written or recorded)
 - f.) Obtain any reports generated by other agencies (i.e. law enforcement, insurance companies, etc.)
 - g.) Obtain estimates of damage.
 - h.) Obtain medical releases, records of medical treatment, physician's notes and hospital records (including, if applicable, emergency room records).
 - i.) Investigate further as appropriate under the circumstances.
6. The Risk Manager or the Safety & Loss Control Specialist will prepare a summary of the collected material and submit it along with the original documents to the County Attorney. The County Attorney will determine the direction of any additional investigation to be initiated.
7. Upon completion of the investigation, the Risk Manager will make a recommendation to the County Attorney concerning disposition of the claim. The County Attorney may deny the claim, settle the claim within the limits of delegated settlement authority, or recommend settlement to the Board of Supervisors.
8. The County Attorney, Civil Bureau, has delegated settlement authority up to and including \$15,000.00 (fifteen thousand dollars) and also has delegated authority to deny any claim.

Contact: Risk Management
515-286-3633

Revised: 9/2/08

[Click for Resolution:](#)

Clean Air Policy

These rules apply to all employees and visitors that enter grounds County-owned or leased buildings and offices including parking lot areas.

1. Vending machines that contain cigarettes or other smoking tobacco will not be permitted on County-owned or leased property.
2. Smoking will be prohibited at all times on the grounds of any public owned building, any building leased by Polk County, or any building operated by or under the control of Polk County, except as designated below.
3. No smoking areas will include:
 - a. All buildings owned, leased, or controlled by Polk County;
 - b. All County-owned trucks, automobiles and equipment at any time.
4. Designated smoking areas shall be limited to the following;
 - a. Designated areas on County owned or leased parking lots. Smoking in parking lots of public buildings shall not interfere with the ingress or egress of any public owned building, any building leased by Polk County, or any building operated by or under the control of Polk County.
 - b. Smoking in personal vehicles on County owned or leased parking lots shall be allowed.
5. Department heads/elected officials and managers are responsible for ensuring and actively maintaining compliance within their respective departments/offices.

Contact: Human Resources
515-286-3200
Revised: 10/7/08

[Click for Resolution:](#)

Drug-Free Workplace Policy

Purpose

It is the purpose of this policy to provide and maintain a drug-free, healthful, safe and secure work environment, and to comply with the Drug-Free Workplace Act of 1988 (Pub. L. 100-690 Title V, Subtitle D).

Policy

- I. Employees are expected and required to report to work on time and in appropriate mental and physical condition for work.
- II. The unlawful, manufacture, distribution, dispensation, possession, or use of controlled substance on the employer's premises or while conducting the employer's business is absolutely prohibited. Violations of this policy will result in disciplinary action, up to and including termination, and may have legal consequences.
- III. The County recognizes drug and alcohol dependency as illnesses and a major health problem. The County also recognizes drug and alcohol abuse as a potential health, safety and security problem. Accordingly, employees who think they have an alcohol or drug usage problem are urged to seek confidential assistance through the Employee Assistance Program. The County will be supportive of those who seek help voluntarily. However, the County will be equally firm in identifying and disciplining those who continue to be substance abusers and do not seek help.
- IV. In order to comply with the Drug-Free Workplace Act of 1988, employees are required to report any convictions under criminal drug statute for violations occurring on the employer's premises or off the employer's premises while conducting County business. A report of a conviction must be made to the employee's supervisor or other appropriate official within five (5) days after the conviction.
- V. Compliance with the terms and reporting requirements of this policy is required as a condition of employment for all employees.

Contact: Human Resources
515-286-3200

Revised: 10/31/89

[Click for Resolution:](#)

Emergencies Interrupting Work Hours Policy

Non- Weather Related Emergencies

Interrupting Work Hours

This policy is to provide clarification on how to treat compensation of employees during unforeseen events.

It should be understood that although some office hours may be interrupted during certain emergency situations, County Government does not close operations. This is especially true for public safety functions.

County employees are expected to make all reasonable efforts to report to work and to remain during their regular working hours. In recognition of this expectation, the following policies are adopted:

Employees are to receive full regular pay under the following conditions:

1. Fire/bomb or other similar situations that require evacuation of the work site, when occurring during employee's regular working hours, during the time the building is restricted to emergency personnel.
2. When worksite is closed due to an extraordinary event for a period of one day when no alternative worksite is designated.

Employees are to be charged appropriate paid leave or unpaid leave when the following events occur:

4. If an employee requests to leave the assigned area (while waiting to see if a building will be closed) and the building is not officially shut down for the day.
2. When worksite is closed for more than one day and no alternate site has been designated.

Polk County Policy regarding Weather Emergencies

For Non-Essential Employees

Within the bounds of reason and safety, every effort will be made to keep the County offices open and services available to the public. Essential County functions do not close for weather emergencies. Departments/Offices shall notify employees if they are deemed to be performing essential functions.

- 1) At the beginning of each winter season, an email shall be sent by the County Administrator or his/her designee to all employees advising them to consult the Polk County website for the official announcement of office closures due to weather conditions.
- 2) Whenever there is bad weather but no office closure, a liberal leave policy allowing the use of vacation and personal time will be allowed for individual circumstances, at the discretion of the department head or elected official. On such occasions employees shall be allowed a grace period of one-half hour to report (beyond their normal start time) without loss of pay or use of accrued paid leave. Time of arrival beyond the one-half hour grace period will be covered by appropriate paid or unpaid leave. If the County Administrator or his/her designee declares a severe weather situation during the work day, and the Department/Office allows employees to leave early, time will be charged to the appropriate paid or unpaid leave account.
- 3) In the event that an office closure becomes necessary, declaration of the closure of Polk County offices due to a weather emergency shall be announced by the County Administrator or his/her designee in consultation with the Chair of the Polk County Board of Supervisors.

- 4) Weather emergencies that result in the closing of Polk County government offices shall be based on official predictions that create an unreasonable hazard to employees and the general public. If the County Administrator or his/her designee declares a weather emergency during the work day Department/Office will allow employees, not employed in essential functions, to leave early and employees shall not suffer any loss of pay due the closure of the office.
- 5) Should the weather event occur on a Sunday or following the close of business during the week and when possible, the decision to close Polk County offices shall be made no later than 3 a.m. CST of the weather emergency day. If such notification is given employees will be required to utilize appropriate paid or unpaid leave for the closure.
- 6) Once a Polk County government office closure or a severe weather situation has been declared, the following shall take place.
 - a. Notification by the County Administrator or his/her designee to the Human Resources Director.
 - i. The Human Resources Director shall communicate with the Labor Relations Manager and the Unions regarding protocol for institutional operations.
 - b. Notification by the County Administrator or his/her designee to each Elected Official and Department Head.
 - c. Notification by the County Administrator or his/her designee to:
 - i. Chief Information Officer to:
 1. Post closure on the Polk County website.
 2. Provide global email to all employees should the closure occur as part of the regular work day.
 - ii. All area media.

Contact: Human Resources
515-286-3200
Revised: 6/12/2012

[Click for Resolution:](#)

Family and Medical Leave Act (FMLA) Policy

A. Purpose

Up to twelve (12) weeks of unpaid, job protected leave will be provided each fiscal year to eligible employees to care for a newborn or newly placed adopted or foster child, to care for a child, spouse or parent with a serious health condition, or because of the employee's own serious health condition. The terms in this policy will be defined in the same way as those terms are defined in the Family and Medical Leave Act of 1993 and its applicable rules and regulations. A copy of the law and the rules and regulations is available to employees who request a copy from the Human Resources Department.

B. Applicability

This policy applies to all county employees who have been employed for at least 12 months and who have worked at least 1250 hours the previous 12 months.

C. General

Eligible employees may receive up to 12 weeks of unpaid, job protected leave each year for the following reasons:

1. Because of the birth of a son or daughter of the employee and in order to care for such son or daughter;
2. Because of the placement of a son or daughter with the employee for adoption or foster care;
3. In order to care for the spouse, son, daughter or parent of the employee with a serious health condition;
4. Because of a serious health condition that makes the employee unable to perform his or her job functions.

The term "year" is determined as a twelve month period based on the County's fiscal year.

Entitlement to leave for a birth and to care for a son or daughter, for placement of a son or daughter for foster care, or adoption expires at the end of the 12 month period beginning on the date of such birth or placement.

Where both spouses are employed by the County, the amount of leave provided for care of a newborn or newly placed adopted or foster child, or to care for a parent with a serious health condition is limited to a total of 12 weeks for both spouses. The leave may not be used by the employee to care for a parent-in-law with a serious health condition. Where leave is taken to care for a spouse or child with a serious health condition and both spouses are employed by the County, each may take 12 weeks of leave.

D. Paid Leave

Eligible employees shall utilize available accrued paid leave if County policies permit their use for any part of the 12 week period. Consistent with County policies the following shall apply:

- Use of FMLA for the employee's own serious health condition shall utilize sick leave until such leave is exhausted (employee may choose to use Personal time, Vacation time, or Compensatory time for purpose of sick leave).

If sick leave is exhausted employee shall be required to use Personal time and then Vacation time before leave status is considered unpaid.

- Use of FMLA for an employee to care for a newborn, newly placed adopted or foster child, or to care for a child, spouse, or parent with a serious health condition shall utilize any accrued but unused family Sick leave (maximum six days per fiscal year), Personal time and then Vacation time (if any accruals are available) before leave status is considered unpaid.

The County is not by this policy authorizing the use of paid leave in any situation not otherwise authorized by its current policies, nor is it abrogating the requirement that paid leave be exhausted for receipt of any benefits authorized by its current policies.

All requests for leave of any type shall state on the leave form submitted to the department whether the leave is for Family and Medical Leave Act purposes.

E. Intermittent Leave

Leave for childbirth or adoption shall not be taken intermittently or on a reduced leave schedule. However, leave taken to care for a spouse, child, parent or for the employee's own serious health condition may be taken intermittently or on a reduced schedule, if it is medically necessary. Certification of need shall be provided. The taking of leave intermittently or on a reduced leave schedule does not reduce the total amount of leave for which the employee is entitled.

F. Notice Requirement

When leave for an expected birth or adoption or foster placement is foreseeable, employees shall provide the County with at least 30 days notice of their intention to take leave, or as much notice as is practicable under the circumstances.

When leave for planned medical treatment is foreseeable, employees shall provide the County with at least 30 days notice of their intention to take leave, or as much notice as is practicable under the circumstances. If an employee requests intermittent leave or leave on a reduced leave schedule, the County may require the employee to transfer temporarily to an alternate position with equivalent pay and benefits which better accommodates the leave schedule.

Employees shall make a reasonable effort to schedule treatment so as not to unduly disrupt the operation of the County.

G. Certification

Each employee shall provide with his or her leave application, certification issued by the health care provider of the eligible employee. Should the leave request be for the care of a spouse, son, daughter or parent of the employee, then a certification issued by their respective health care provider should accompany the leave application. The certification will be considered sufficient if it includes the date on which the illness commenced, the probable duration of the illness, the appropriate medical facts, and where applicable, a statement that the employee is (1) unable to perform his/her job, or (2) is needed to care for his/her child, spouse, or parent. In addition, for intermittent leave requests, the health care provider must certify that such leave is medically necessary, and state the expected duration and expected schedule of the intermittent leave or reduced leave schedule.

In any case in which the County has reason to doubt the validity of the certification for leave to care for a child, spouse, or parent with a serious health condition or because of the employee's own serious health condition, it may require, at its own expense, that the employee obtain the opinion of a second health care provider designated or approved by the County.

Where the second opinion differs from the opinion provided in the original certification, the County may require that the employee obtain the opinion of a third health care provider approved jointly by the County and the employee. The opinion of the third health care provider shall be final and binding on both the employee and the County.

H. Employment Protection

Eligible employees who take leave under the Family and Medical Leave Act are entitled to return to the same position they held before taking leave, or to be restored to an equivalent position with equivalent employment benefits, pay, and other terms and conditions of employment.

I. Benefits Protection

All benefits which eligible employees had accrued prior to taking leave shall be retained. However, employees restored to their former or equivalent positions shall not be entitled to the accrual of seniority or employment benefits during any period of leave except as authorized by County policy.

The County shall, during any period that an eligible employee takes leave, maintain his/her coverage under its group health, dental, and life insurance plan for the duration of such leave at the level and under conditions of coverage which would have been provided if the employee had continued in employment for the duration of such leave. However, if the employee fails to return from leave within the time required under the Act, the employer may recover any group health plan premiums paid for maintaining that coverage while the employee was on leave. If, however, the employee fails to return from leave due to the continuation, recurrence or onset of a serious health condition, covered under the Act or due to circumstances beyond the employee's control, such premiums may not be recovered.

POLK COUNTY POLICY SERVICEMEMBER FAMILY AND MEDICAL LEAVE

The federal Family and Medical Leave Act (FMLA) now entitles eligible employees to take leave for a covered member's service in the Armed Forces ("Servicemember FMLA"). This policy supplements our FMLA policy and provides general notice of employee rights to such leave. Except as mentioned below, an employee's rights and obligation to Servicemember FMLA Leave are governed by our existing FMLA policy.

A. Employee Entitlement to Servicemember FMLA

Servicemember FMLA provides eligible employee's unpaid leave for any one, or for a combination of the following reasons:

1. A "qualifying exigency" arising out of a covered family member's active duty or call to active duty in the Armed Forces of the United States in support of a contingency plan; and/or
2. To care for a covered family member or next of kin who has incurred an injury or illness in the line of duty while on active duty in the Armed Forces of the United States provided that such injury or illness may render the family member medically unfit to perform duties of the member's office, grade, rank, or rating.

B. Duration of Servicemember FMLA

1. When leave is due to a "Qualifying Exigency": An eligible employee may take up to twelve (12) workweeks of leave during a twelve (12) month period based on the County's fiscal year.

2. When leave is due to Care for an Injured or Ill Servicemember: An eligible employee may take up to twenty-six (26) workweeks of leave during a single twelve (12) month period, based on the County's fiscal year, to care for the Servicemember. Leave to care for an injured or ill Servicemember, when combined with other FMLA qualifying leave may not exceed twenty-six (26) weeks in a single twelve (12) month period.
3. Servicemember FMLA runs concurrent with other leave entitlements provided under federal, state, and local law.

C. General

- Use of FMLA for an employee who is an immediate family member (spouse, child, or parent) of military personnel and/or reservists who have a "qualifying exigency" shall utilize personal time and vacation time (if any accruals are available) before leave status is considered unpaid.
- Use of FMLA for an employee to care for an immediate family member (spouse, child, or parent) who is a member of the Armed Forces of the U.S. and who have been injured or wounded in the line of duty shall utilize any accrued but unused family sick leave (maximum six days per fiscal year), personal time and then vacation time (if any accruals are available) before leave status is considered unpaid.

Contact: Human Resources
515-286-3200
Revised: 4/21/09

[Click for Resolution:](#)

Key Policy

GUIDELINES FOR COUNTY DISTRIBUTION OF KEYS TO COUNTY OWNED BUILDINGS

In the interest of maintaining the security of County-owned buildings, the County Key and Door Opener Policy has been revised. Keys issued as of the date of passage of this Policy will be left as issued. However, beginning on that day, the following guidelines will be followed in determining to whom keys will be distributed:

1. Employees may be issued keys to their immediate office areas, if needed to access their work stations.
2. Area masters may be issued to department heads and to employees with special duties requiring a master i.e., clerical staff charged with opening the office in the morning, or a night watchman or other individual who is required to check a secure area.
3. Keys to other areas, such as storage or conference rooms, may be issued temporarily, within each department. Each department will be issued a maximum of two keys to such area.
4. Exterior door keys may be issued to Elected Officials/Department Heads and those other employees who are asked to work at times other than the regular work day. Buildings & Grounds staff will be issued keys necessary to perform building duties.
5. County employees shall be issued keys and door openers to County Buildings only with the written consent of the respective office holder or Department head and when in concurrence with this County Key and door opener policy. Approval of the Director of General Services is required prior to issuing requested keys or openers.
6. Distribution of building Master Keys or exterior door keys issued to any County facility require the written approval of the Director of General Services and the County Administrator.
7. Keys will be issued to employees for areas or building within their scope of responsibility.

TRANSFER OF KEYS:

1. Transfer of keys from one employee to another must be noted to the Director of General Services by memo from Department Head/Elected Official.
2. Final paycheck of terminated employee will be held until:
 - A. Central Accounting has notified General Services to determine if keys are held prior to issuing final paycheck.
 - B. Keys are returned to General Services Director who will issue memo to Central Accounting to release check; or

- C. Keys are transferred to another department employee, as evidenced by memo from Department Head/Elected Official to Director of General Services, whereupon Central Accounting will be notified to Release final paycheck.

KEY DISTRIBUTION RECORDS:

1. Each department Head/Elected Official will designate one employee and back-up to keep key distribution records with that department. These contact persons names will be forwarded to the Director of General Services.
2. Key distribution records will be updated annually in January. General Services Staff will send a copy of records to department contact person who will note changes or initial and return.

Contact: General Services
515-286-3215
Adopted: 11/17/87

[Click for Resolution:](#)

Pay Adjustment Policy

For the purposes of this policy the following definitions are applicable:

- Promotion/Upgrade- Advancement of an employee to a higher paying job classification (higher pay grade/salary range). Includes temporary promotions.
- Demotion/Downgrade- Permanent movement of an employee to a lower paying job classification (pay grade/salary range).
- Transfer- Permanent movement of an employee to a job classification with the same pay grade/salary range.
- Reclassification- Permanent movement of an employee to a different job classification following a Human Resources audit of the position. Can result in upgrade, downgrade, or transfer.
- Red-Circled Salary- An individual pay rate that is above the range maximum for the pay grade as approved by the Board of Supervisors. The employee is typically ineligible for pay increases until the range maximum surpasses the actual pay rate.
- Hire/rehire – An employee that is being newly hired to the County or is being rehired to the county after a break in service.

Pay Upon Promotion, Demotion, and Reclassification:

1. Pay Upon Promotion/Upgrade:

Upon receiving a promotion, the Employee shall receive a 5% increase, or the pay rate commensurate with the Minimum level in the higher job classification, whichever is greater. In no case shall the employee be assigned below the minimum or above the maximum of the assigned salary range. The promotion shall be effective at the beginning of the payroll period following Board approval of the action.

2. Pay Upon Demotion/Downgrade:

Upon receiving a demotion or downgrade, the rate of pay shall be established by the Director of Human Resources but in no case shall the employee be assigned below the minimum or above the maximum of the assigned salary range unless the Board approves red-circling of the employee's salary. The demotion/downgrade shall be effective at the beginning of the payroll period following Board approval of the action.

3. Pay Upon Transfer:

No pay adjustments are made following transfers.

4. Pay Upon Reclassification:

Movement to a higher paying job classification will be treated the same as pay upon promotion/upgrade. Movement to a lower paying job classification shall be at the employees current pay rate except in no case shall the employee be assigned below the minimum or above the maximum of the assigned salary range, unless the Board approves red-circling of the employee's salary. The reclassification shall be effective at the beginning of the payroll period following Board approval of the action.

Progression Following Promotion, Demotions, and Transfers:

Promotions/upgrades, demotions/downgrades, and transfers do not change the anniversary date for within pay grade increases except for Teamsters (the anniversary date for Teamsters promoted to sworn positions changes to the Civil Service Date).

Pay Upon Hire/Rehire:

All regular full-time Employees, with the exception of management employees, shall be hired at the Minimum of their respective pay grade, unless otherwise agreed to in a collective bargaining agreement. The Director of Human Resources may authorize an advance appointment rate not to exceed 10% above the minimum of the pay range for excluded, management/supervisory, and/or director employees, with the approval of the Board of Supervisors. If the appointment is above the Minimum of the pay grade, the employee shall not advance at the end of their probationary period but would advance annually upon their applicable anniversary date. Procedures for pay upon hire/rehire shall not apply to any other section of this policy.

Appointment above the Minimum rate involving bargaining unit employees requires the signed agreement of the applicable bargaining unit representative in addition to Board approval, unless specifically addressed in the Collective Bargaining Agreement.

Contact: Human Resources
515-286-3200
Revised: 6/12/2012

[Click for Resolution:](#)

Nepotism Policy

BE IT RESOLVED THAT there be established a County Policy on Nepotism, in accordance with Section 71.1 of the Code of Iowa, 1975, to read as follows:

It shall hereafter be in violation of Polk County Personnel Regulations for any person elected or appointed to any public office or position, under the laws of the state, to appoint as Deputy, Clerk or helper in said office or position to be paid from the public funds, any person related by consanguinity or affinity, within the third degree, to the person elected or appointed.

WHEREAS, "family" shall be defined as including an employee's spouse, children, other dependant minors, parents, step-parents, sisters, brothers, sisters-in-law and brother-in-law.

Contact: Human Resources
515-286-3200
Revised: 3/2/76

[Click for Resolution:](#)

Personal Property Repair and Replacement Policy

PERSONAL PROPERTY COVERED BY POLICY

Personal Property required in performance of work duties which is damaged performing assigned work duties, through no fault of the employee, may be repaired or replaced by Polk County. This includes such items as eyeglasses, hearing aids, watches, and personal clothing. In order to be compensated, such damage must occur during working hours and in the performance of assigned work duties. Damage to personal property which occurs as a result of a violation of safety rule, work rule, or the negligence of the employee, will not be reimbursed. In no event, however, shall reimbursement exceed **\$250.00 per item (\$300.00 for Sheriff Deputies)**.

PERSONAL PROPERTY NOT COVERED BY POLICY

Damage to any personal property which is not absolutely necessary for the performance of work assignments shall not be reimbursed. This includes such items as rings, watches, jewelry, and other items not absolutely essential for the performance of assigned work duties.

Polk County shall not be responsible for damage or loss to personal property due to vandalism, theft, negligence, or other causes. Employees are encouraged to provide their own insurance to cover such damage or loss.

Contact: Risk Management
515-286-3633
Revised: 3/27/90

[Click for Resolution:](#)

**REQUEST FOR REPAIR OR REPLACEMENT OF PERSONAL
PROPERTY**

1. TO BE COMPLETED BY EMPLOYEE

Name of Employee	Job Classification
Department	Description of Property Damaged
Date / Time / Location	Cost of Repairing/Replacing Property (Attach Estimate/Report)
Did the damage occur during working hours? <input type="checkbox"/> Yes <input type="checkbox"/> No	Were any safety rules or work rules violated? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of incident which resulted in damage	
<hr/>	
<hr/>	
<hr/>	
Signature of Employee	Date

2. TO BE COMPLETED BY DEPARTMENT HEAD (OR DESIGNEE)

Recommended Action -- Approval Disapproval

Comments

Signature of Department Head
(certifying that damage occurred & in the
manner described)

Date

3. TO BE COMPLETED BY RISK MANAGEMENT

Recommended Action -- Approval Disapproval Amount \$

Comments

Signature of Risk Manager

Date

Purchasing Policy
POLK COUNTY
DEPARTMENT OF GENERAL SERVICES

Effective date March 2011

PURCHASING POLICY
of
POLK COUNTY, IOWA

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GENERAL SERVICES

Central Services Purchasing Division

PURCHASING POLICY

A. Purpose

1. General Services shall have responsibility for purchasing, acquiring, leasing and renting goods and services for the County and for the sale, disposition of county surplus goods or services.
2. Central Services-Purchasing Division is responsible for recommending and administering purchasing policies, programs, and procedures for the acquisition of materials, equipment, supplies, services and construction projects for Polk County.
3. The Purchasing Division is a centralized procurement division. All requests for prices or services and all purchases shall be made through Central Services-Purchasing Division. This authority may be delegated to others, if certain criteria exist, in accordance with the Polk County Purchasing Policy.
4. Central Services-Purchasing Division has the authority to investigate the quality, quantity, and type of material purchased in order to best serve the interests of Polk County and the taxpaying citizens of Polk County Iowa.
5. This Policy applies to all offices, departments and agencies of Polk County; Board of Supervisors, Auditor, County Attorney, Recorder, Sheriff, Treasurer, Human Resources, Community, Family & Youth Services, General Services, Health Department, Information Technology, Public Works, Risk Management, Department of Human Services-Polk County, Veterans Affairs, Medical Examiner, Emergency Management and other departments created by the Board of Supervisors.

B. Conflict of Interest

1. The Purchasing Division shall not knowingly issue a purchase order where there is evidence of a conflict of interest. Acceptance of gifts, other than advertising novelties, is prohibited according to Iowa Code.
2. No County employee or immediate family member shall receive a benefit or profit from any purchase or contract made in conjunction with their job as a County employee.
3. Employees of the County shall not procure or assist in procuring any materials, supplies or equipment for the personal use of any employee, or official of the County.
4. Employees by virtue of position are not entitled to any special consideration from vendors and contractors in their personal affairs nor are they to attempt to procure material for the personal use for any other person.

C. Central Stores

1. The Central Services Division shall maintain an inventory of generally required supply items necessary for the day to day operation of the work place. A Central Stores Catalog shall be made available for all county units to use in ordering their supplies.
2. Departments are to use the Central Stores Supply Requisition spread sheet to order supplies.

D. Outside Purchases

1. Requisition

A requisition for all supplies or services shall be used to order items not available through Central Stores. The Requisition should be completed and forwarded to the Purchasing Division through the ERP System.

2. Emergency Purchases

- a. An emergency may be deemed to exist when one or more of the following occur:
 - 1) A breakdown in machinery and/or a threatened termination of essential services or a dangerous condition develops.
 - 2) Any unforeseen circumstances arise causing curtailment of an essential service or where lack of immediate action would result in danger to public health or safety.
- b. If the emergency situation arises during working hours, the Elected Official/Department Head or designee must contact the Central Services Manager or designee to obtain the name of the appropriate vendor and Purchase Order number.
- c. If the emergency situation arises outside of normal business hours, the Department Head or designee may purchase the required goods or services directly, and notify the Central Services Manager upon the next business day.

3. Blanket Purchase Orders

- a. The Blanket Purchase Order is used for multiple purchases from a single vendor over a period of time, i.e. (month, year or length of project). The use of the Blanket Purchase Order must be approved by the Central Services Manager.
- b. The General Services Department/Purchasing is responsible for monitoring the use of Blanket Purchase Orders to identify commodity categories that are being purchased to insure compliance with the original requested use. Misuse may cause the Blanket Purchase Order to be cancelled.
- c. Criteria for approval of the blanket purchase order method are as follows:
 - 1) the category of material must be repetitively required,
 - 2) items must be needed for immediate use,
 - 3) use of the procedure will not adversely affect use of other purchasing techniques that might produce greater discounts.

4. Capital Reserve Purchases

- a. Capital items will be purchased by General Services according to the Board of Supervisors approved budget when authorized by the County Administrator.

5. Competitive Sealed Bids

- a. Competitive Sealed Bidding is the preferred method for acquiring equipment, supplies, services and construction for public use.
 1. Conditions for Use: Contracts (and/or Purchase Orders) shall be awarded by competitive sealed bidding except as otherwise provided in Section D.2, Emergency Purchase Procedures.

2. Invitation for Bids:
An Invitation for Bids shall be issued and shall include a purchase description and all contractual terms and conditions applicable to the purchase.

6. Request for Proposals

- a. When the Central Services Manager determines that the use of competitive sealed bidding is either not practicable or not advantageous to Polk County and receives concurrence from the Director of General Services, the purchase of specified equipment, supplies, services or construction may be handled through the use of a Request for Proposals (RFP).

E. Professional and Consultant Services

1. These services are defined as any type of professional service which may be legally performed pursuant to a certificate or license and any other type of similar contractual service (including consultants) required by Polk County but not furnished by its own employees, which is in its nature so unique that it should be obtained by negotiation on the basis of demonstrated competence and qualification for the type of professional service required and at fair and reasonable compensation rather than by competitive sealed bidding.
2. A Request for Qualifications (RFQ) shall be prepared for each occurrence. Individuals with known qualifications may be sent a copy of the RFQ or notified in some other manner.
3. A Public Notice in the newspaper is not required but may be done, if it is considered to be of special interest to vendors or the public.

F. Iowa Preference

1. By virtue of statutory authority, preference will be given to products and provisions grown and produced within the State of Iowa.
2. At the discretion of the Board of Supervisors, preference may be given to Polk County vendors who produce goods or maintain an office in Polk County.
3. Further, it shall be policy to actively solicit and seek out local vendors of goods and services and to encourage local vendors to stock and supply Iowa-made products.

G. Sole Source Purchase

1. A purchase may be awarded without competition when the Central Services Manager determines after a good faith review of available sources that there is only one source for the required goods or services.

H. Federal, State and Cooperative Programs

1. Cooperative procurement agreements, which have met the sealed bid requirements, as outlined in the Purchasing Policy, in which Polk County is eligible to participate, shall be considered to have met all bid documentation requirements.
2. State of Iowa bid contracts qualify for this bid documentation exemption; any other cooperative procurement agreement must be documented in writing and approved by the Director of General Services prior to any purchase being made through the agreement. The approval authority for all normal purchases remains in effect.

I. of County Property

1. General Services is responsible for disposing of surplus County equipment, tools and vehicles.
2. Surplus items approved by the Board of Supervisors shall be disposed of in any or all of the following methods:
 - a. Physical Auction
 - b. Internet or Virtual Auction
 - c. Letter Auction
 - d. Donation

J. Procedures Manual

1. General Services shall make available to each using department/agency, a procedural manual outlining how the policy of Polk County will be implemented.
2. General Services will make available training to departments/agencies on following the purchasing policies contained in the procedural manual.
3. Upon recommendation of the Director of General Services, any changes to the purchasing procedures to the Manual will be submitted to the County Administrator for approval.

Contact: General Services
515-286-3215
Adopted: 1/6/87
Revised: 3/8/11

[Click for Resolution:](#)

Records Management Policy

Preface

The Records Management Division of the Department of General Services is charged with the responsibility of developing, implementing and maintaining a County Records Management Program. The County Records Management Program is designed to provide economy and efficiency in the creation, organization, maintenance, use, and disposition of county records.

The Polk County Standards and Procedures Manual contain the standards, procedures, and guidelines established by the Board of Supervisors and administered by the Department of General Services to implement the County Records Management Program.

The Polk County Standards and Procedures Manual is available to all County agencies, and should be utilized to achieve compliance with its provisions.

Access to Public Records and Documents

I. Responsibilities:

It is the responsibility of the head of each County office or department to provide for the maintenance, protection, and security of public records and documents, and to assure compliance with all provisions of the Code of Iowa.

II. Procedures:

A. Right to Examine Records

1. Every citizen has the right to examine all public records and to copy such records, and the news media may publish records, unless a provision of the code expressly limits that right or requires certain public record to be kept secret or confidential.
 - a. All examination and copying of public records will be done under the supervision of the lawful custodian of the records, or an authorized deputy.
 - b. The lawful custodian of the records, or an authorized deputy, may charge a reasonable fee to recover costs incurred for the services, including reproduction costs.
2. In accordance with the rules of Civil Procedure, a district court may grant an injunction restraining the examination (including copying) of a specific public record, if the petition supported by affidavit shows and if the court finds that such examination would clearly not be in the public interest and would substantially and irreparably injure any person or persons.
3. Original records and documents will not be released from a County office or department unless so ordered by a court or by the lawful custodian of the records, or an authorized deputy; a certified copy of a document will be retained by the department if the original record or document is released. Certain exceptions to this procedure may be authorized at the discretion of the office holder or department head.

B. Confidential Records

1. The Code of Iowa stipulates that certain public records will be kept confidential unless otherwise ordered by a court, or by the lawful custodian of records or an authorized deputy.
2. The head of each office or department is responsible for noting applicable Code sections defining certain records as confidential.
3. In the event that records classified as confidential are released to a service bureau for microfilming, it is the responsibility of the lawful custodian of the records to assure that the service bureau implements appropriate measures to preserve the confidentiality of those records.
4. The micrographics sections of the Recorder's Office is responsible for maintaining confidentiality of records which are in its custody during the microfilming process.

General Responsibilities: County Offices and Departments

I. Responsibilities:

It is the responsibility of the head of each office or department to establish and maintain a program for the economical and efficient management of its records, in cooperation with the Director of the Department of General Services and the Records Management Division.

II. Procedures:

A. Polk County Records Officers

1. The head of each office or department will designate an employee to function as Records Officer, in addition to that person's regularly assigned responsibilities.
 - a. The Records Officer will be a permanent, full-time employee knowledgeable in the overall programs and functions of that office, and the related records required to document those programs and functions.
 - b. The Records Officer will be delegated the authority to act on behalf of the department head in routine decisions regarding the retention and disposition of that office's record and files.
2. The Records Officer will maintain liaison with the Records Management Division of the Department of General Services.
 - a. At the time a department Records Officer ceases to be employed in that capacity, the head of that office will designate another individual to act as the officer.
 - b. The Records Management Division of the General Services Department will maintain a current list of Records Officers and is to be notified by the department head when a new person is designated.

B. County Office Records and Files

1. The head of each office or department will submit to the Records Management Division of the General Services Department, a complete listing of records in the custody of that office and will submit an update of those records in January of each year thereafter.

- a. Records Inventory forms will be provided by the Records Management Division of the General Services Department.
 - 2. The head of each office or department will submit to the Records Management Division of the General Services Department a complete listing of records in the custody of that office deemed vital.
 - a. Vital Records Inventory forms will be provided by the Records Management Division of the General Services Department.
 - 3. The Records Management Division of the General Services Department will consult with the Records Officer or the department head to establish the approved record retention and disposition schedules of all records.
- C. Department Records Management Programs
- 1. The head of each County office or department will establish and maintain an office records management program.
 - a. The departmental program will provide for effective controls over the creation, maintenance, and the use of records to conduct official business.
 - b. The program also will provide for coordination with the Director of the Department of General Services and the Records Management Division in developing and implementing techniques to provide for the maintenance and security of records and to facilitate the disposal of records no longer required to be preserved.
 - 2. The office records management programs will be compatible with the objectives and procedures of the Department of General Services Records Management Program.
- D. Departmental Acquisition of Records Storage, Duplicating and Micrographics Equipment, Supplies, and Services.
- 1. The head of each County office or department will insure that all proposed purchases of records storage, duplicating, and micrographics equipment, supplies, or services to be used for preservation of records are reviewed by the records Management Division of the General Services Department and approved by the Director of General Services prior to the expenditures for the same. There is created a Records Technical Advisory Committee who shall provide technical guidance and expertise and shall review for cost effectiveness, appropriateness all request for services affected by their section. This committee is composed of the Directors of Information Services and General Service, or their designee, the County Recorder and the staff of the Records Management Division of the General Services Department.
 - 2. Leases or rentals of records storage, duplicating, and micrographics equipment, supplies, or services also will be subject to the same review process.

General Responsibilities: Records Management Division

I. Responsibilities:

It is the responsibility of the Records Management Division of the General Services Department to supervise and coordinate all records management activities of County offices and departments, and to function in an administrative capacity on behalf of Polk County.

II. Procedures:

A. County Records Standards and Procedures

1. The Records Management Division will furnish a copy of Polk County Standards and Procedures to all County offices and departments.

B. Assistance to County Offices and Departments

1. The Records Management Division of the Department of General Services, at the request of an office holder or department head, will assist other Polk County offices in reviewing and improving records management programs and activities.
 - a. Assistance will be provided on a time-available basis, and will be limited to the system studies and recommendations, and the training of office personnel in records management techniques. The Records Management Division will not purge records and files or physically convert files from one system to another.
 - b. The Records Management Division will maintain liaison with vendors and consultants in the field of records and filing equipment and services (including micrographics and equipment and services) and will coordinate contacts between offices and vendors or consultants as deemed appropriate by the Director of the Department of General Services.

RECORDS ORGANIZATION AND EVALUATION

Retention and Disposition

I. Responsibilities:

County Offices and Departments:

It is the responsibility of the head of each office or department to determine a retention period and final disposition for all records in the custody of that office.

Records Management Division:

It is the responsibility of the Records Management Division of the General Service Department, to establish uniform standards and procedures for the retention and final disposition of County records, and to assure that such standards and procedures are in accordance with applicable state and federal statutes, rules and regulations.

II. Procedures:

A. Records Retention

1. The head of each office or department will identify the records in the custody of that office, and will determine the minimum retention requirements in accordance with the operational needs of the office.
 - a. Statutory retention requirements will be noted where applicable.
 - b. Recommendations for final disposition or destruction of the records also will be determined by each office or department.
 - c. The listing of records, and proposed retention and disposition schedules, will be submitted to the Records Management Division of the General Services Department.
2. The Records Management Division will review the proposed schedules against criteria for administrative, legal, fiscal, and historical value:

- a. Administrative value is determined by the minimum length of time requires to have the records available in the office for the conduct of day-to-day operations. Generally, this requirement will be through program or project completion, or the completion of a business transaction.
 - b. Legal value is determined by statutory provisions. The statue of limitations for various claims against the county also will be considered.
 - c. Fiscal value is determined by State, Federal or County audit requirements. Generally, records subject to State or County audit will be retained three years, then destroyed; records subject to Federal audit will be retained five years subsequent to the end of the grant period of final report.
 - d. Historical value is determined by the long term usefulness of a record containing adequate and authentic evidence of an office organization, policies, decisions, procedures, operations, or other activities; or significant information about people, places and events.
3. The Records Management Division of the General Services Department will assist offices in determining the length of time the records should be retained in the office; and whether the records finally should be deposited in Archives or destroyed.

B. Records Disposition

4. At termination of the required length of time for retention of the records in the immediate office, the department will provide for transfer of the records to Archives, or for destruction of the records.
5. Transfer of records to Archives requires the completion of a Request for Record Action Forms. (See exhibit D).
 - a. Inactive records control section provides detailed instructions for preparation of material to be transferred to Archives.
 - b. The Buildings and Grounds Division of the Department of General Services will provide pick-up and delivery service to transfer records from County offices to Archives. A representative from the originating office should accompany the records to assure placement in the proper area.
6. At the termination of the required length of time for retention of records in Archives, the Records Management Division of the General Services Department will provide for destruction of the records.
 - a. Destruction of records in the physical custody of Archives requires the preparation of a Request for Record Action Form from the office or department having legal custody of the records.
7. Records to be destroyed should be processed according to final disposition requirements:
 - a. Records that are of a confidential nature will be shredded under the supervision of Buildings and Grounds personnel or office representative, or may be removed for recycling by a paper disposal contractor.
 - b. Records that are not classified as confidential will be disposed of as waste paper, or taken to the land fill.

- c. The Records Management Division and the Buildings and Ground Division of the General Services Department will coordinate large volume disposal requirement.

Vital Records Protection

I. Responsibilities:

County Offices and Departments:

It is the responsibility of the County office or department to provide to the Records Management Division of the Department of General Services, a listing of all office records defined as vital records.

Records Management Division:

It is the responsibility of the Records Management Division to establish standards and procedures for the preservation and protection of vital records, and to assure that such standards and procedures are implemented by the respective offices.

II. Procedures:

A. Identification of Vital Records

1. The head of each County office or department will identify vital records in its custody and furnish the Records Management Division of the General Services Department with a copy of the vital records list.
2. Vital records will be identified according to generally accepted standards and criteria, those documents necessary for:
 - a. The resumption or continuation of operations.
 - b. The reconstruction of the legal and financial status of the office.
 - c. The receipt of payments due to the County from outside sources.
 - d. The fulfillment of financial obligations to County employees and outside sources.
3. Factors to be considered in determining the designation of record series as "vital" include:
 - a. The extent to which destruction of those records would jeopardize the general public interest.
 - b. The extent to which unavailability of particular records would delay recovery of monies with which to replace buildings and equipment.
 - c. The extent to which unavailability of records would delay restoration of operations and services.
 - d. The relative difficulty with which records could be replaced if destroyed.
4. Vital records generally represent approximately one percent of an organizational unit's total records.
5. The Records Management Division of the Department of General Services will retain a composite listing of vital records from each County office or department for emergency and post emergency operations.

- a. The Records Management Division of the Department of General Services will coordinate its vital records program with the Polk County Disaster Recovery Team Managers.

B. Protection and Preservation of Vital Records

1. The Records Management Division of the Department of General Services, in consultation with the head of each County office or department and the Records Technical Advisory Committee, will determine the appropriate method for providing vital records copies.
 - a. Copies of vital records are classified as preservation duplicates, and as such have the same force and effect for all purposes as the original records
 - b. Copying (duplication) may require either the preparation of extra copies of the record at the time of its origination, or scheduled reproduction of existing records.
 - c. Copies most commonly prepared will include carbons, photo copies, and microfilm (including Computer Output Microfilm)
2. Vital records copies will be protected in the most economical and efficient manner deemed appropriate by the Records Management Division of the General Services Department and the head of each County office or department, according to the function of the records in day-to-day operations.
3. Security storage or relocation of vital records will be in accordance with the Director of General Services.

ACTIVE RECORDS CONTROL

File Maintenance Procedures:

I. Responsibilities:

County Offices and Departments:

It is the responsibility of the head of each County office or department to provide for efficient and economical maintenance of office records and files required to conduct current business and operations.

Records Management Division:

It is the responsibility of the Records Management Division of the Department of General Services to recommend basic standards and procedures relating to maintenance of County office files, and to assist County departments in reviewing and improving specific problem areas in file maintenance.

II. Procedures:

A. File Control

1. Office file control may be maintained through the implementation of a file system recognizing the following ten basic file groups to classify records:
 - a. General correspondence: consists of letters, memos, telegrams, enclosures, reports, and miscellaneous materials relating to a subject or function. General correspondence should be filed in separate folders under an appropriate subject heading, and should be purged at least annually (generally non-record by definition).

- b. **Transitory Correspondence:** consists of routine requests for the information or publications, routine data to other offices; also convenience copy files and read files. Transitory correspondence also should be filed in separate folders under the appropriate subject heading, and flagged for semi-annual purging and destruction (generally non-record by definition).
- c. **Case files or Project Files:** Contains material relating to a specific action, event, person, organization, location, or product. Common examples include contracts, investigations research projects and construction projects. Case files and project files should be filed intact, insofar as possible, under the appropriate subject. Related "general correspondence" files may be placed immediately preceding or following the case or project file, but should be kept separate to facilitate purging (case files are generally records by definition).
- d. **Technical Reference Materials:** printed reports, periodicals, technical manuals articles, clippings, sales catalogs, and special studies. Technical reference to case files and project files as necessary and appropriate (generally non-record by definition).
- e. **Audio-visual:** Graphic images, such as positive and negative prints; electronic or other mechanical reproductions of sound or coded information, such as tape recordings; magnetic and paper tapes; x-ray films; and similar material. Audio-visual materials should be filed separately due to physical characteristics (record or non-record by definition, accordingly to content).
- f. **Cartographic Material:** maps, charts, aerial photographs, physiographic diagrams, graphic map indexes, field survey notes, geodetic surveys, and similar material. Cartographic materials should be filed separately, due to physical characteristics and cross-referenced to the case files or project files (generally records definition, although some material may be referenced).
- g. **Engineered Drawings:** Original drawings (tracings) of plans for structures, vehicles, vessels, or other objects; full-sized reproductions of original drawings such as blueprints and blueines; microfilms of engineering drawings; or paper reproductions of microfilmed drawings made on microfilm reader/ printers. Engineering drawings may be interfiled in case or project files, although separate files are recommended in situations where too much bulk may otherwise exist (generally records by definitions).
- h. **Cards:** index cards, IBM cards, aperture, etc. Card files should be maintained separately according to size and format and cross-referenced as appropriate (record or non-record by definition according to content).
- i. **Machine Language Records:** Magnetic tapes, discs, or drums; and paper tapes. Such records should be filed separately (generally records filed by definition).
- j. **Microfilms:** all miniaturized records, including roll film, microfiche and computer output microfilm (COM). Microforms normally should be filed separately and cross-referenced to case or project files; interfiling paper records and microfilms may lead to loss of or damage to the microforms. (generally records by definition).

B. File Maintenance

1. Exhibit C lists several common filing problems and recommended solutions to those problems.

C. Space Planning

1. Office layouts should be designed to facilitate efficient paper flow in relation to operational requirements.
2. The Records Management Division of the General Services Department, at the request of an office head, will provide assistance to County offices or departments in designing office layouts to achieve maximum utilization of space in relation to paperwork requirements.

Common Filing Problems

Too many filing places	Centralized filing of records of common interest in one location under one supervisor. File specialized records in offices where handled, but follow established handling procedure.
Everybody a File Clerk	Centralize authority with responsibility allow only designated persons to use files except in emergencies.
Files disordered; show no particular plan or arrangement	Utilize the Uniform File System, expanding and adapting it to meet unique agency subject areas.
System doesn't fit the way material is called for	Study the possibilities of using subject, geographic, or numeric filing as well as alphabetic filing, for certain specialized materials.
Filing decisions erratic	Start filing procedure manual based on the Uniform File System and then USE It! Don't depend on snap judgment or the opinions of others. When a problem arises, make a ruling, then write it down.
Takes too long to find a folder	Have an index guide for each inch of active drawer space or each six to eight folders. Twenty-five guides per drawer provides the best efficiency.
Same Trouble with file cards	Have no more than thirty cards to a guide in an average reference file; no more than twenty in an active or growing one, and definitely no more than ten to fifteen to a guide in a posted record file, such as a ledger.
Drawers jammed too tight	Allow 3 to 4 inches of working space in letter files, 1 to 2 inches in card files.
Bulging folders slow down filing speed	Have no more than twenty-five sheets per folder for best efficiency; do not exceed fifty.
Papers pile up in the miscellaneous	Create a file for a subject after the sixth folder letter on that subject. If that doesn't work a larger number of divisions are needed in the index.
Individual folder too full	Make a special guide for the individual or subject, then put a set of period or chronological folders back of the guide.
Guides in bad condition	Replace broken guides. Use reinforced tabs in the active file. Use angular tabs for easier reading. Use the tab inserts for greater versatility and less expansion.

Folder tabs difficult to read	Use gummed labels; they strengthen and add legibility. Use the reinforced tabs when reference is frequent. Use a good grade of material for active files.
Folders out of sight	Use stiffer folders. Use scored or below folders for better expansion.
Folders wear out to soon	Use at least an 11-point folder for frequent use out of the file; 14 point or pressboard for heavy use. Save space yet add strength with double tabbed folders.
Old correspondence slowing up filing of current records	Transfer or destroy old material at least once a year See if some types of correspondence need to be filed at all.
File storage using up valuable floor space	Check use of five-drawer cabinets. Check shelf filing for certain records. Establish a definite destruction plan for all types of papers you file. Consolidation of files might help.
Trouble finding material called for before it is filed	Use sorting devices to completely arrange the papers.
Getting papers into the folders takes too long	Use sorting devices to completely arrange the papers.
Work is tiring	Use filing shelf to free both hands for filing. The stool is another handy device to ease fatigue.
Trouble finding missing papers or cards	Keep track of removed papers and cards without guides or folders.

Adapted from a report prepared by the National Office Products Association, as Reprinted in Maedke, Robek, and Brown Information and Records Management, Glencoe Press, Beverly Hills, 1974, pp. 158-160

INACTIVE RECORDS CONTROL

Archival Areas

I. Responsibilities:

County Offices and Departments:

It is the responsibility of the head of each County office or department to transfer records to a designated archival area in accordance with the procedures set forth by the Records Management Division of the General Services Department.

Records Management Division:

It is the responsibility of the Records Management Division of the Department of General Services to establish and maintain Archival Areas for the purpose of providing the most efficient and economical means of records storage to Polk County offices.

II. Procedures:

A. Archival Areas

1. Records Management Division of the Department of General Services will determine current and projected records storage space requirements in consultation with County Records Officers.
2. The Records Management Division will take necessary security Precautions to include:
 - a. Fire Protection-provision of fire extinguishers and fire hose connections; "no-smoking" enforcement.
 - b. Water protection-adequate controls against dampness, mildew or possible flooding.
 - c. Vandalism protection-limited access to archival areas and control against unauthorized employees or other persons gaining entrance to the areas.

B. Design of Archival Areas

1. The Records Management Division of the General Services Department will design the layout of Archival Areas to provide for ample records storage.
2. Steel shelving will be used to achieve maximum efficiency in the available space whenever possible.

C. Criteria for Records Transfer

1. A request for Record Action Form must be in effect or pending approval; records for which a request has not been established will not be accepted for transfer to Archival Areas.
2. Records are normally transferred shortly after the end of a fiscal or calendar year, or when the reference activity becomes less than once per month per file drawer.

D. Preparing Records for Transfer

1. Standardized records storage cartons must be used for the storage of records in Archival Areas; exceptions require prior approval from the Records Management Division of the General Services Department.
 - a. The standard letter/legal carton (10"x12"x15") holds either letter or legal sized documents and may be obtained through the Central Stores Division of General Services.
 - b. A microfilm/check size carton will accommodate smaller material such as cards, receipts, cartridges, and so forth. (approval must be obtained from the Records Management Department prior to the use of such boxes).

2. Packing Records in Storage Cartons:

- a. Purge files in so far as is practicable to remove miscellaneous correspondence of no further value.
- b. Remove all ring binders and file index guides (and file Folders, if feasible).
- c. Pack the records in the same order they are filed in the office.
- d. Leave at least one inch clearance in each box to facilitate reference.
- e. Leave additional space for expansion of records are to be interfiled at a future date.
- f. Face letter sized records toward the 12" end of the box.
- g. Face legal size records towards the 15" end of the box.
- h. DO NOT PLACE RECORDS WITH DIFFERENT RETENTION PERIODS IN THE SAME BOX.
- i. Fill in the information on our standard red self-adhesive label completely (type or print) and affix to lower left-hand corner of front 12" end of carton.
- j. Maintain a list of all records in archives by box number in your office.

3. Complete a request for Record Action Form. Submit the white copy to the records Management Division of the General Services Department for review and approval.

- a. The Records Management Division will contact the Buildings and Grounds Division to assist with the transfer of cartons to the Archival Area.
- b. A representative from the office whose records are being transferred should accompany records so as to insure placement in the proper area.

E. Final Disposition

1. At the expiration of the established retention period, records in the physical custody of archival areas shall be destroyed. A Request for Record Action Form, originating from the office or department having legal custody of the records will be sent to the Records Management Division of the Department of General Services to implement the destruction process.
2. The Building and Grounds Division of the Department of General Services will notify the County office or department having legal custody of the records as to the exact time of record destruction.
3. Upon completion of the destruction process, the Building and Grounds Division will notate the work order number on the white copy of the Request for Records Action form and return it to the Records Management Division for documentation purposes.
 - a. The originating office or department will retain the Pink copy of the Request for Record Action form for its record.

Micrographics and Reproduction

Microfilming Operations

I. Responsibilities:

County Offices and Departments:

It is the responsibility of the head of each County office or department to assure that Departmental records designated to be microfilmed, either by the Polk County Recorders Office or an outside service bureau, are properly maintained and prepared for the Microfilming process.

Records Management Division:

It is the responsibility of the Records Management Division of the Department of General Services working with the Records Technical Advisory Committee, to establish and maintain standards relating to microfilm produced by and for county offices or Departments; and to coordinate all micrographics services through vendors.

II. Procedures:

A. Priority of Records to be microfilmed

1. The Polk County Recorders Office being primary County microfilming agency, will accept microfilming projects from other County offices or departments as assigned by the Records Management Division of the department of General Services, These projects will be worked on daily but only after their in-house records have been microfilmed.
 - a. The Records Management Division will coordinate these projects with the assistance of the Records Technical Advisory Committee, and with the Polk County Recorder's Office and County agency whose records are being microfilmed.

B. Records Design

1. Records which have been or may be designated for microfilming should be prepared on white or light pastel shades of paper; dark colors do not film well.
2. Black or dark blue ink should be used to provide sharp contrast to background paper; pencil markings are more difficult to film. Red markings should be avoided as much as possible.

C. Records Maintenance

1. Records which have been or may be designated for microfilming should be handled carefully to avoid folding, creasing, tearing, etc.
2. Staples or other fasteners should be located in the same position (upper left hand corner) for all files within a record series to facilitate rapid removal.

D. Preparation of Records for Microfilming

1. Records which have been designated for microfilming will be made "camera-ready" by the office or department responsible for maintaining the records.
 - a. All staples, paperclips and other fasteners will be removed if possible.
 - b. All tears will be mended, creases flattened out, etc., whenever possible.

2. Records will be arranged in the proper sequence for filming, and all extraneous papers, notes and other non-record material will be removed from the files.
 - a. Indexing instructions will be prepared to identify the records and record series.
3. A list identifying all record series that are defined as vital records will be prepared and forwarded to the Records Management Division of the Department of General Services.
4. Records will be packaged for transfer to the Polk County Recorder's Office or to a services bureau.
 - a. The Records Management Division will arrange the transfer procedures with the office or department at the time the microfilming project is accepted.
 - b. Instructions as to final disposition of the records after Microfilming will be included ("return original documents to department or destroy records after microfilming").

Records Management Future Objectives

A. Immediate

1. Present information to the records committee concerning the proposed purchase of a paper shredder.
2. Provide for restoration of archival books of historical value not on microfilm.
3. Explore archival restoration and procedures for the use of archives.
4. Provide off-site storage for existing microfilm.
5. Duplicate or preserve all card files used as an index.
6. Determine which indexes need to be protected (by duplication/microfilming, computer, etc.)

B. Intermediate

1. Provide off-site storage and or microfilming of all vital records.
2. Determine the best and most appropriate storage system for all archival records.
3. Prioritize records storage needs.
4. Provide or locate space to house records before and after they have been microfilmed and before disposal of paper.
5. Work with Information Services Department to expand the use of computer output microfilm.
6. Train the departmental Records Officers in proper standards and procedures.

C. Secondary

1. Monitor all existing microfilm functions for quality and standards and procedures.
2. Conduct training sessions with all department Records Officers in the following areas:
 - a. use of record forms
 - b. use of archives
 - c. use of General Services in record keeping
 - d. microfilming and how to use it
 - e. their responsibility
 - f. my assistance to them.
3. Establish a reference room within the Records Division of General Services where Record Officers may come to reference records periodicals and books.

Contact: General Services
515-286-3215

Adopted: 6/28/88

[Click for Resolution:](#)

Respiratory Protection Policy

POLK COUNTY RESPIRATORY PROTECTION POLICY

Limited to use with N95 air-purifying respirators and Powered Air Purifying Respirator (PAPR) only

Purpose

This policy is designed to help reduce employee exposure to airborne disease hazards. Respiratory hazards are eliminated through the use of engineering controls where feasible. This policy addresses work-related activities requiring NIOSH approved N95 air purifying respirator and powered air purifying respirators (PAPRs).

This program shall be administered pursuant to the requirements of OSHA Respiratory Protection Standards.

Note: If utilizing a face mask not addressed in this policy, see Risk Management for further instructions.

APPLICABILITY

This policy is applicable to all Departments and Polk County employees whose job duties have the potential risk for exposure to airborne disease hazards requiring the wearing of an N95 or PAPR for personal protection.

Departments with the potential for exposure include the Health Department, Sheriff's Department, Medical Examiner, Community and Family Youth Services' Juvenile Detention and Youth Shelter Services, General Services, Public Works, and any other employee who is deemed by Polk County Risk Management, in consultation with Human Resources, for potential exposure to airborne disease hazards.

Polk County shall provide each employee required to use respiratory protection with a medical assessment, respiratory protection equipment, and training on the safe and proper way to use and care for their respirator. Each employee participating in the Polk County respiratory protection program shall have full responsibility for using respirators as instructed and in strict accordance with all provisions of this policy document.

GENERAL N95 AND POWERED AIR PURIFYING RESPIRATORY INFORMATION

- An N95 respirator is a mask that is approved by the National Institute for Occupational Safety and Health (NIOSH) and worn to filter out 95% of airborne particulate matter. The N95 provides protection against diseases that are both aerosols (fine particles suspended in air i.e., diseases such as TB that are transmitted by small droplet aerosols) and droplets (liquid drops sprayed into the air, but which do not remain suspended), whereas a surgical type facemask will protect only against droplets.
- A PAPR (or tight-fitting goggles and an N-95 respirator) should be worn for high-risk aerosol-generating situations. PAPRs are expensive, generally limited in supply and cumbersome to wear while conducting tasks. This is not a general practical solution. Loose-fitting full face piece PAPRs do not require fit testing but must be inspected prior to use for defects. A PAPR may be selected for use if:

- individuals cannot be fitted and certified to use an N95;
- the [N95 respirator](#) choice(s) does not fit;
- an employee has facial hair or facial deformity that would interfere with mask-to-face seal;
- the [N95 respirator](#) choice(s) are unavailable; or
- there is a potential for exposure to high-risk aerosol-generating situations

ASSIGNMENT OF RESPONSIBILITY

Department Program Oversight

Each department shall manage the plan within their department by identifying at-risk employees, selecting appropriate respirators based on the potential risk for exposure to specific airborne disease agents, operating characteristics of the respirator, and the behaviors of employees using it. Additionally, each department will ensure at-risk employees wear N95 or PAPR when appropriate as well as ensuring that employees utilize, care, and store their equipment properly. Departments will ensure any employees using a respirator receive a medical assessment, training and fit testing before recurring respirator use as well as annual medical assessment, training and fit testing or whenever there are changes in workplace conditions, respirator selection or evidence of improper respirator use. See Training Section below.

If possible, applicable departments should identify at least two of their employees to be trained as a unit based Trainer/Fit-Tester. See Training Section below.

Each department will maintain or submit required reports as set out in this Policy.

Program Manager

Risk Management in collaboration with Human Resources shall manage the Respiratory Protection Policy. Polk County will provide certified NIOSH respirators that, when used properly, will minimize or eliminate exposure to airborne disease hazards. Polk County will provide respirators that are clean, sanitary and in good working order to ensure that equipment protects as designed. These shall be provided at no cost to the employees.

The Program Manager shall ensure that all departments assess their workplace to determine if hazards are present that require the use of respirators. The Program Manager shall ensure all departments are complying with the Respiratory Protection Policy including employees using an N95 respirator pass an appropriate qualitative and/or quantitative fit test as defined by 29 CFR 1910.134 on an annual basis or whenever a different respirator face piece (size, style, model, make) is used.

The Polk County Health Department will work with Risk Management and Human Resources to provide an annual review of the policy and provide recommended best practice updates or suggested changes.

Program Administrator and Medical Provider

The Polk County Health Department serves as the Program Administrator and Medical Provider. A nurse from the Communicable Disease Team is responsible for implementation of, and adherence to, the provisions of the respiratory protection policy.

The Program Administrator and Medical Provider will provide fit testing training to designated department representatives who can then serve as the designated department Trainer/Fit-Testers. The Trainer/Fit Tester trainings will be held annually in December. If a department cannot designate a person to conduct fit testing then the Program Administrator will provide annual training/fit testing for those departments. The Medical Provider will administer medical evaluation(s) and maintain medical records within the employee's official medical record.

The Program Administrator will maintain a list of employees trained as Trainer/Fit Testers and a list of employees who have been fit tested. A copy of these lists will be provided to the applicable Department, Risk Management and Human Resources.

The Program Administrator and Medical Provider will conduct an annual evaluation of the policy in conjunction with the Program Manager and Human Resources.

Departments

Departments will assess the workplace to determine if hazards are present that require the use of respirators. See Appendix E. Each department shall designate a supervisor and/or administrative to ensure employees are trained in the use of N95 masks and/or PAPR masks, proper cleaning and any other risk reduction strategies. Supervisors will respond to employee concerns and can consult with Program Administrator and Medical Provider. Departments will ensure proper adherence to this plan through periodic audits.

Departments are encouraged to designate at least two staff to be trained as Trainer/Fit-Testers. If departments are unable to designate staff to serve as Trainer/Fit Testers, the Program Administrator will provide fit testing to the department.

Departments in conjunction with the Program Manager and Human Resources will identify all job classifications and locations in which employees may have potential risk for exposure to airborne disease hazards warranting the wearing of an N95 or PAPR for personal protection. The **Job Classification/Expected Exposure List as set out in Appendix A** shall be updated as job classifications or work and employee situations change.

Departments will assure that employees whose job duties have potential risk for exposure to airborne disease hazards wear an appropriate face piece. If the PPE is an N95 or PAPR departments will ensure applicable employees participate in the annual January training/fit testing including completion of the Medical Evaluation Form (See Appendix B) and submit the completed form to the Program Administrator and Medical Provider between November 1st and December 1st.
Note: The designated months for annual medical evaluation and fit testing can only be changed upon consensus with the Program Administrator and Medical Provider.

Employees

Employees shall wear respirators when and where required (as determined by their Department, Risk Management, Human Resources, and the Program Administrator/Medical Provider) and in the manner in which they were trained.

Employees shall inspect respirators prior to each use. If a defect is discovered, the respirator shall be disposed of immediately. Employees are responsible to check their respirators for user seal and fit by performing positive checks as described in Appendix D. If these checks are not successful, the respirator should not be used.

If a defect develops during use, the wearer shall remove themselves from the contaminated area and notify the proper authority of potential exposure. Employees shall care for and store their respirator as instructed. Employees shall inform their direct Supervisor and Program Manager should they have difficulty when wearing or using a respirator.

Employees shall inform their direct supervisor of any concerns that may impact their use of a respiratory face piece including a change in physical condition. PCHD Program Administrator/Medical Provider will be available to the Supervisor for consultation during regular business hours.

Employees shall properly maintain and store respirators pursuant to training.

Contractors

Contract employees shall be responsible for complying with this policy, and shall be provided the training described herein by the responsible person within the department.

EXPOSURE DETERMINATION

All job classifications and locations in which employees may have potential risk for exposure to airborne disease hazards, based on the nature of the job or collateral duties, regardless of frequency, shall be identified and evaluated by each affected department in conjunction with Risk Management and Human Resources. This list shall be updated as job classifications or work and employee situations change. Exposure determination shall be made without regard to the use of personal protective equipment. **See Appendix A, Job Classification/Expected Exposure List.**

Record Keeping

29 CFR 1910.34 requires the employer to establish and maintain documentation of this plan, medical examination and fit testing. This information will be maintained by the Program Administrator/Medical Provider as well as all medical assessments and follow-up care in the official employee medical record maintained at the Polk County Health Department.

PCHD will maintain an Excel spreadsheet by department of those employees fit tested and whether they passed, passed with restrictions or failed. Copies will be shared with the applicable department, Program Manager and Human Resources.

Medical Evaluation

All employees subject to exposure requiring respiratory protection shall complete a medical questionnaire. (See attached Appendix B.) This questionnaire must be reviewed by a Physician or Licensed Health Care Professional (PLHCR) before issuance of an N95 respirator. Medical examinations may be given to an employee at the discretion of the PLHCP.

Physician or other licensed health care professional (PLHCP) means an individual whose legally permitted scope of practice (i.e., license, registration, or certification) allows them to independently provide, or be delegated the responsibility to provide, some or all of the health care services required by paragraph (e) of 29 CFR 1910.134.

The medical examination shall be administered confidentially by the PCHD PLHCR. The employee shall also be given the opportunity to discuss with the health care professional the results of the medical evaluation. Examinations will be provided at the PCHD clinic during regular business hours.

Based on the results of the medical evaluation and examination, the PHCLR will determine whether wearing a mask is appropriate for each individual employee and their job duty.

Fit Testing

Before any employee is allowed to wear an N95 or PAPR respirator, the employee shall have a medical evaluation and if necessary a follow-up medical examination. The employee shall receive training and be fit tested with the same make, model, style and size of respirator that will be used. The fit test shall be administered using OSHA accepted protocols (See Appendix C).

The Program Administrator/Medical Provider or the department Trainer/Fit Tester shall conduct additional fit tests whenever an employee reports a problem, or when it is recognized that a change has occurred in the employee's physical condition that could affect respirator fit. Additional medical evaluation and assessment may be conducted based on changes in medical status.

Note: If respirators other than N95 or PAPRS are required, fit testing specific to these other respirators may be required and Risk Management should be consulted.

Training

The Program Administrator/Medical Provider will provide training and refresher training that is comprehensive, understandable and practical. Departments are responsible for identifying at least two staff to complete the training to become Trainer/Fit Testers within their department. If Departments are unable to assign internal fit testers, the PCHD will provide said training/fit testing. Annual fit and refresher training will occur in January and at any time that it becomes apparent that additional training will prove beneficial.

All employees serving as Trainers/Fit Testers must provide training to include, but is not limited to the following:

- Why a respirator is necessary and how improper fit or usage can compromise the protective effect of the respirator.
- Limitations and capabilities of the respirator.
- How to effectively use the respirator.
- What to do if the respirator malfunctions.
- Procedures for maintenance and storage of the respirator.
- How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators.
- The specific requirements of the respiratory protection plan and OSHA 29 CFR 1910.134.

Note: Refresher training must be conducted whenever there are changes in workplace conditions, respirator selection, evidence of improper respiratory use, or change has occurred in the employee's physical condition that could affect respirator fit.

Program Evaluation

The fit testing program will be evaluated annually in the month of April to determine if it is still effective and current. As part of this evaluation, all applicable federal and state standards will be reviewed to ensure that this plan is in compliance. Program review will be conducted by the Program Manager, Program Administrator/Medical Provider and Human Resources.

POLK COUNTY BOARD OF SUPERVISORS

Chair

Author: Thenkels

Review: PCHD Nurse Practitioner, Nurse Manager and Infectious Disease Nurse

Date: 8/22/11

Contact: Polk County Health Department
515-286-3759

Adopted: 11/1/11

[Click for Resolution:](#)

Policy on Sexual Harassment

Purpose

It is the purpose of this policy to create a work environment free of sexual harassment and to sensitize employees to the issue of sexual harassment. The policy was prepared in accordance with the Equal Employment Opportunity Commission's Rules and Regulations, 29 CFR Part 1604, and reaffirms that sexual harassment in the workplace is an unlawful employment practice under Title VII of the Civil Rights Act of 1964 as amended.

Applicability

This policy is applicable to all County employees.

General

The Equal Employment Opportunity Commission's Rules and Regulations provide that harassment on the basis of sex is a violation of Title VII, Section 703 of the Civil Rights Act of 1964 as amended. More specifically, Section 1604.11 of the Rules of the Equal Employment Opportunity Commission set forth criteria for determining whether behavior constitutes sexual harassment. The criteria are as follows:

"Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitutes sexual harassment when:

1. Submission to the conduct is either an explicit or implicit term or condition of employment;
2. Submission to or rejection of the conduct is used as the basis for employment decisions affecting the person who did the submitting or rejecting; or
3. The conduct has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment."

For the purpose of this policy, sexual harassment is defined as unsolicited, non-reciprocal behavior by an employee who is in a position to control or affect another employee's job out of fear that he or she would be punished for refusal to submit. Sexual harassment also includes any employee conduct unreasonably interfering with another employee's work performance by creating an intimidating, hostile or offensive working environment.

Sexual harassment may consist of a variety of behaviors by a County employee directed to employees but not limited to, subtle pressures for sexual activity, inappropriate touching, inappropriate language (sexual jokes), demands for sexual favors, posting of sexually graphic material and physical assault.

Employee's Responsibilities

An employee who perceives the comments, gestures or actions of another employee or supervisor to be sexually harassing should communicate to that person that such behavior is unwelcome. However, failure to express unwelcomeness does not prevent the employee from filing a complaint nor does it in any way exonerate the harasser.

Any employee, including a supervisor, who believes he or she has been sexually harassed or asked to perform a sexual favor should immediately report the incident to his/her immediate supervisor. If the harasser is the employee's supervisor or if the employee does not feel that the situation was adequately resolved, he or she should report the incident(s) to the Labor Relations Manager or the Employment Manager located in the Human Resources Department, by filing a written complaint on forms provided by the employer.

Any employee who witnesses this type of behavior has a responsibility to report it to an appropriate supervisor. If the harasser is an employee's immediate supervisor, the witness should support the harassed employee in reporting the incident to another supervisor or to the Labor Relations Manager or the Employment Manager located in the Human Resources Department.

Supervisor's Responsibilities

A supervisor must listen to the complaint and regard it seriously. A supervisor should not shrug off the complaint, minimize it or otherwise discourage employees from reporting such complaint. The supervisor shall record and document the complaint and perform an immediate preliminary investigation to determine the validity of the complaint. The supervisor shall provide a copy of the report to the Labor Relations Manager regardless of the supervisor's findings.

Complaint Procedures

All complaints filed under these procedures are confidential and this policy prohibits the intimidation, reprisals and/or retaliation against any person who files a complaint under these procedures or with other enforcement agencies.

Any person who feels that they have encountered sexual harassment may file a complaint with the Labor Relations Manager. The Labor Relations Manager or the Employment Manager will assist the complainant in filling out the appropriate form and offer any other technical assistance needed. Complaints should be filed as soon as possible following any alleged harassment.

The Labor Relations Manager will investigate the complaint and present the findings to the Director of Human Resources no later than 20 work days after it is received. Before a determination is rendered by the Human Resources Director, the complainant, if desired, will be given the opportunity to appear before the Director of Human Resources to offer any additional information relative to the case.

The Human Resources Director will have 15 work days upon receipt of the information from the Labor Relations Manager to render a determination. In the event the complaint is not resolved to the complainant's satisfaction, the complainant shall be advised of the outcome and shall be given the opportunity to file with other federal and state enforcement agencies.

When a "finding of fact" of sexual harassment is determined, corrective action will be taken immediately. The scope of disciplinary action shall range from a written warning or reprimand to suspension without pay and possible termination.

Contact: Human Resources
515-286-3200
Revised: 04/29/08

[Click for Resolution:](#)

Polk County Bloodborne Pathogen Policy

BLOODBORNE PATHOGEN AND OTHER POTENTIALLY INFECTIOUS MATERIAL CONTROL AND EXPOSURE POLICY

I. PURPOSE

To meet the standards of the Occupational Safety and Health Administration's (OSHA) Bloodborne Pathogens Standard, 29 CFR 1910.1030, and to eliminate or minimize employee occupational exposure to blood, certain other body fluids, or other potentially infectious materials (OPIM) as defined below and to provide the most expeditious assessment and treatment of employees potentially experiencing an exposure:

Blood means human blood, human blood components, and products made from human blood.

Bodily fluids means semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.

Other potentially infectious materials (OPIM) means any unfixed tissue or organ (other than intact skin) from a human (living or dead), and human immunodeficiency virus (HIV)-containing cell or tissue cultures, organ cultures, and HIV- or hepatitis B virus (HBV)-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

II. APPLICABILITY

This policy applies to all Polk County employees who have the potential for exposure to blood, bodily fluids and other potentially infectious diseases in the course of conducting their job duties. This includes health care workers, emergency response, public safety personnel, and other workers who are deemed at risk. Bloodborne pathogen exposure risks include needle sticks, sharps injuries, mucus membrane, and open skin that have been exposed to blood or contaminated body fluids.

Departments with the potential for exposure to blood, bodily fluids and other potentially infectious diseases include the Health Department, Sheriff's Department, Medical Examiner, Community and Family Youth Services' Juvenile Detention and Youth Shelter Services, General Services and any other Polk County employees who have been deemed by Polk County Risk Management, after consultation with the Human Resources.

III. BACKGROUND

To provide best practices in worker safety by identifying situations and job classifications in which employees may be exposed to blood or other potentially infectious materials, and to provide protection and risk reduction to these employees in the form of engineering controls, personal protective equipment, vaccinations and protocols for exposures.

IV. ASSIGNMENT OF RESPONSIBILITY

A. Management

Polk County will provide adequate controls and equipment that, when used properly, will minimize or eliminate risk of occupational exposure to blood or OPIM. These shall be provided at no cost to the employees. Department management staff will ensure proper adherence to this plan through periodic audits.

B. Program Administrator

Risk Management in collaboration with Human Resources shall manage the Bloodborne Pathogen and OPIM Exposure Control Plan. The Polk County Health Department will work with Risk Management and Human Resources to provide an annual review of the policy and provide recommended best practice updates or suggested changes. Risk Management will ensure proper adherence to this plan through periodic audits and training opportunities.

C. Supervisors

Each department shall designate a supervisor and/or administrative staff to ensure employees are trained in and uses proper work practices, universal precautions, the use of personal protective equipment, and proper cleanup and disposal techniques and other risk reductions such as vaccinations and blood borne exposure protocols.

D. Employees

Employees are responsible for employing proper work practices, universal precautions, personal protective equipment and cleanup/disposal techniques as described in this plan. Employees are also responsible for reporting all exposure incidents to their Supervisor immediately.

E. Contractors

Contract employees shall be responsible for complying with this plan, and shall be provided the training described herein by the responsible person within the department.

V. EXPOSURE DETERMINATION

All job classifications and locations in which employees may be expected to incur occupational exposure to blood or OPIM, based on the nature of the job or collateral duties, regardless of frequency, shall be identified and evaluated by each affected department in conjunction with Risk Management and Human Resources. This list shall be updated as job classifications or work situations change. Exposure determination shall be made without regard to the use of personal protective equipment (**employees are considered to be exposed even if they wear personal protective equipment**).

A. Category I

Job classifications in which employees are exposed to blood or OPIM on a regular basis, and in which such exposures are considered normal course of work, fall into Category I. The Department's assigned responsible staff shall maintain a list of these types of jobs and the locations in which the work will be performed. **See Category I - Job Classification/Expected Exposure List, Appendix A.**

B. Category II

Job classifications in which employees may have an occasional exposure to blood or OPIM, and in which such exposures occur only during certain tasks or procedures that are collateral to the normal job duties, fall into Category II. The Department's assigned responsible staff shall maintain a list of these types of jobs and the locations in which the work may be performed. **See Category II – Job Classification/Expected Exposure List, Appendix B.**

Copies of Category I and II lists should be maintained by the affected Department and shared with the appropriate management/supervisory or other staff assigned to ensuring employee safety. Departments should provide copies of current Category I and II lists to Risk Management and Human Resources.

VI. IMPLEMENTATION SCHEDULE AND METHODOLOGY

Compliance Methods include:

Universal precautions

Universal precautions shall be used at Polk County to prevent contact with blood or OPIM. All blood or OPIM shall be considered infectious, regardless of the perceived status of the source individual.

Engineering Controls

The engineering and work practice controls listed below shall be used to minimize or eliminate exposure to employees at Polk County.

- a) **Hand washing** - Hand washing facilities shall be made available to employees who incur exposure to blood or OPIM. If hand washing facilities are not feasible, antiseptic cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes will be made available to employees. If these alternatives are used, the hands are to be washed with soap and running water as soon as feasible.
 - i. Hand sanitizer and dispensers will be made available in departments that are at risk for exposure to blood or OPIM. It is the department's responsibility to place the sanitizer and dispensers strategically within the department where hand washing facilities are not easily available.
 - ii. Facility maintenance staff will ensure that hand sanitizer dispensers are working properly and have adequate sanitizer to dispense. In the case of the dispensers not working properly it is staffs responsibility to inform the maintenance staff.
 - iii. Portable hand sanitizer, clean cloth, paper towels or antiseptic towelettes will be placed in county vehicles driven by staff that are at risk for exposure to blood or OPIM.
 - iv. It is the responsibility of the employee to ensure proper use of hand sanitizer if a hand washing facility is not readily available.
 - v. Employees will follow established timeframes for hand washing as outlined:
 1. Before, during, and after preparing food, and before eating

2. After using the toilet
3. After changing diapers or cleaning a person who has used the toilet
4. Before and after patient care or caring for someone who is sick
5. After removing personal protective equipment (PPE)
6. After blowing nose, coughing, or sneezing
7. After touching hazardous waste
8. Before and after treating a cut or wound
9. After contact with another person's bodily fluids or feces

If an employee incurs exposure to their skin or mucous membranes, those areas shall be flushed with water as soon as possible.

b) Sharps containers shall be:

- i. closable, puncture resistant, and leak proof;
- ii. appropriately labeled with a biohazard label and color-coded;
- iii. designed with an opening that is large enough to accommodate disposal of an entire blood collection assembly (i.e., blood tube holder and needle); and
- iv. easily accessible to the immediate area where sharps are used;
- v. easily portable if employees travel from one location to another; and
- vi. located anywhere that sharp objects will be used including but not limited to outreach activities in the community, clinic rooms, vehicles when it is possible that sharp objects will need to be disposed.

Sharps containers shall not be:

- i. reused;
- ii. filled over the fill line; and
- iii. opened manually or in any other manner.

Disposal of sharps containers will be arranged by each department with a biohazard hauler. Polk County General Services is not responsible for pick up of sharps containers.

c) Contaminated needles and other sharps shall not be bent, manually recapped, removed, sheared, or purposely broken. Contaminated sharps shall be placed immediately, or as soon as possible, after use into appropriate sharps containers.

At Polk County, the following procedure(s) requires a contaminated needle to be recapped or removed only when using the mechanical safety shield needle device. This method requires a one-handed scoop technique, and no alternative is feasible. The Mechanical Safety Shield Device Method is as follows:

- i. After performing venipuncture engage pink safety shield with thumb on the thumb pad.
- ii. Flip the shield over the needle so that it is capped.
- iii. Dispose of all used materials in appropriate biohazard container.

d) Annual review of sharps device data – Each August, all applicable departments shall review sharps device data during safety or infection control-related meetings with documentation in minutes. If no injuries have occurred with a particular device or injury

rates are reduced, it may be determined that a review is not needed. If needed, the review will include:

- i. Assessment of the nature and circumstances of sharps-related injuries to determine if the injury is from the device or perhaps some other issue like overfilled disposal containers that needs to be addressed.
- ii. If there is an increase in injuries from a specific device and all the injuries occur during activation of the safety mechanism, it might indicate the need to evaluate a different device.

e) **Specimens** - Blood or other potentially infectious material specimen guidelines:

- i. Place specimens in a container that will prevent leakage during the collection, handling, processing, storage, and transport of the specimen.
- ii. Any specimens that could puncture a primary container shall be placed within a secondary puncture-resistant container.
- iii. If outside contamination of the primary container occurs, the primary container shall be placed within a secondary container that will prevent leakage during handling, processing, storage, transport, or shipping of the specimen.

f) **Contaminated Equipment and Facility** - Departments will designate responsible staff to ensure that equipment that has become contaminated with blood or other potentially infectious materials is examined prior to servicing or shipping. Contaminated equipment shall be decontaminated, unless decontamination is not feasible. Contaminated equipment shall be tagged and labeled as such.

Facilities shall be cleaned and decontaminated regularly and as needed to prevent exposure of blood or OPIM or in the event of a gross contamination. All contaminated work surfaces; bins, pails, cans, and similar receptacles shall be inspected and decontaminated regularly.

Each Department with potential for bloodborne or OPIM contamination will maintain a schedule describing the work areas that should be decontaminated, decontamination frequency and method, and required types of cleaning. **See Cleaning and Decontamination Schedule, Appendix C.**

Departments will provide a copy of the Cleaning and Decontamination Schedule to General Services.

g) **Personal Protective Equipment (PPE)**

Each department shall ensure that the provisions regarding personal protective equipment described in this plan and the Polk County Fit Testing Policy are met to ensure employees use appropriate and fitted PPE.

Each department will designate a responsible administrative staff or supervisor to ensure that appropriate PPE in the necessary sizes is readily accessible at the work site or is issued to staff at risk as well as the repair, replacement, cleaning, laundering and disposal of PPE. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.

Personal protective equipment shall be chosen based on the anticipated exposure to blood or OPIM. Each department will identify the appropriate PPE based on their employee risk factors. PPE shall be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach an employees' clothing, skin, eyes, mouth, or other mucous membranes under normal and proper conditions of use and for the duration of time that the equipment will be used.

Each Department will keep a current PPE task list of job classifications and their task or procedure that requires PPE as well as the specific PPE to be used and the staff person issuing said PPE. See Personal Protective Equipment/Task List, Appendix D.

Copies of Category I and II lists should be maintained by the affected Department and shared with the appropriate management/supervisory or other staff assigned to ensuring employee safety. Departments should provide copies of current Category I and II lists to Risk Management and Human Resources.

Types of PPE utilized by Polk County include:

i. Gloves

1. **Disposable gloves** are not to be washed or decontaminated for re-use, and are to be replaced as soon as possible when they become contaminated. Gloves that become torn or punctured (or their ability to function as a barrier is otherwise compromised) shall be replaced immediately or as soon as feasible.

It is critical that disposable gloves are removed without having the contaminated glove touch bare skin. Proper disposable glove removal is one component of universal health precautions that will help avoid infection in personal or professional settings. **Assume that all blood, mucus, urine and feces contain an infectious agent---this will ensure that every necessary precaution is taken.**

- Pinch the lower palm of one contaminated glove with the gloved fingers of your other hand, and pull it toward your fingertips so that it rolls off your hand with the inside facing outward. Do not remove it completely, though.
- Pinch the lower palm of the other glove with the fingers of the partially-gloved hand, and pull it off completely by pulling it upward and inside-out. Do not dispose of this glove yet---hold it with the fingertips of your partially gloved hand.
- Insert the thumb and forefinger of your bare hand between your wrist and the inside-out cuff of the partially-removed glove. Use caution to avoid touching the outside of the contaminated glove with your bare fingers.
- Pull the glove toward your fingertips and then over the other contaminated glove.
- Dispose of the gloves in a marked infectious waste container. Wash your hands immediately with soap and hot water.

2. **Utility gloves or Protective Search and Duty Gloves** may be decontaminated for re-use if the integrity of the glove is uncompromised and according to manufacture instructions. Utility or Protective Search and Duty gloves shall be disposed of properly if they are cracked; peeling, torn, punctured, or they exhibit other signs of deterioration or inability to function as a barrier without compromise.

ii. **Eye and Face Protection**

Masks worn in combination with eye protection devices (such as goggles or glasses with solid side shield, or chin-length face shields) are required when the occurrence of splashes, splatters, or droplets of blood or other potentially infectious materials can reasonably be anticipated to contaminate an employee's eye, nose, or mouth. Situations at Polk County where eye and face protection is required include:

1. All situations where a risk of splattering is present.
2. All situations where spraying of potentially infectious materials exists.

iii. **Other PPE**

Additional protective clothing (such as lab coats, gowns, aprons, clinic jackets, or similar outer garments) shall be worn in instances when gross contamination can reasonably be expected. The following situations require additional protective clothing:

1. While working in situations that produce a high risk for large amounts of potentially infectious material spill.
2. While handling laundry from an exposure;

All garments penetrated by blood or OPIM shall be removed immediately or as soon as feasible. All PPE shall be removed before leaving the work area.

When PPE is removed, it shall be placed in a red biohazard bag and notification to a laundry service of OPIM. Arrangements shall be made for laundering of contaminated garments and proper labeling for the laundry service.

h) **Polk County First Report of Injury Form** - After **any** potential blood or OPIM exposure, employees must immediately notify their Supervisor and complete a Polk County Incident Complaint form. The completed form must be turned into the employee supervisor and Risk Management. Risk Management will maintain blood or OPIM exposure logs for five years after the end of the log year.

i) **Work Area Restrictions** - In work areas where there is a reasonable risk of exposure to blood or OPIM, employees shall not:

- i. Eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses.
- ii. Food and beverages shall not be kept in refrigerators, freezers, shelves, cabinets, or on counter tops or bench tops where blood or other potentially infectious materials may be present.
- iii. Mouth pipetting or suctioning of blood or other potentially infectious materials is prohibited.

All processes and procedures shall be conducted in a manner that will minimize splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials.

j) **Engineering Controls Review** – Each August, the following schedule shall be followed to review the effectiveness of the engineering controls:

- i. Each control is to be reviewed annually by department designated supervisors or administrators;
- ii. Annual review of new equipment and/or technologies present at the workplace; and
- iii. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used.

3. **Hepatitis B Virus**

a) **Background Information**

Hepatitis B virus (HBV) is transferred through contact of contaminated blood, mucous membranes, or contaminated body fluids. Percutaneous injuries are among the most efficient modes of transmission. However, HBV can survive in dried blood at room temperature on environmental surfaces for at least 1 week. Therefore, healthcare providers (HCP) are at about a 10 X higher risk to acquire hepatitis B virus than the general public.

Blood is the most important vehicle of transmission in health-care settings of HBV, but Hepatitis B surface Antigen (HBsAg) is also found in several other body fluids including; breast milk, bile, cerebrospinal fluid, feces, nasopharyngeal washings, saliva, semen, sweat, and synovial fluid. The concentration of HBsAg in these body fluids is so low that these are not efficient vehicles of transmission but do pose a small risk for transmission.

Other body fluids are not infectious unless they contain blood. These fluids include the following; feces, nasal secretions, saliva, sputum, sweat, tears, urine, and vomitus. The risk of transmission from these fluids is extremely low.

In a laboratory setting, any direct contact to a concentrated virus is considered an exposure that requires medical evaluation. Human bites must also be considered as a transmission risk for both the person bitten and the person who inflicted the bite. Transmission of HBV has been rare by this route.

HBV infection is an occupational risk for health care workers, emergency personnel, public safety, and others occupational professions. The degree of risk depends on the degree of contact with blood and the Hepatitis B e Antigen (HBeAg) status of the source person. In studies, it has shown that the risk of acquiring HBV from a needle stick injury with a source who is HBsAg and HBeAg positive was **22%-31%** for clinical symptoms and **37%-62%** for serologic evidence of HBV infection.

b) Hepatitis B Prevention Vaccinations

"Engerix-B" (Hepatitis B Vaccine [Recombinant]) is a noninfectious Recombinant DNA Hepatitis B Vaccine. Clinical studies have shown that after three doses 96% of healthy adults have been seroprotected.

Persons with immune system abnormalities, such as dialysis patients, have less response to the vaccine, but over 67% of those receiving it do develop antibodies. If you have immune deficiency problems, you should obtain a written release from your physician.

TWINRIX® [Hepatitis A Inactivated & Hepatitis B (Recombinant) Vaccine] is a sterile bivalent vaccine containing the antigenic components used in producing HAVRIX® (Hepatitis A Vaccine, Inactivated) and ENGERIX-B® [Hepatitis B Vaccine (Recombinant)]. Clinical studies have shown that healthy adults, after three doses, found the following levels of protection against 99.9% v (Hep A) and 98.5% (Hep B) have been seroprotected.

Employees at risk for blood or OPMI exposure as part of their occupational duties will be offered Hepatitis vaccine (either Enegerix B or Twinrix {Hepatitis A Inactivated & Hepatitis (Recombinant) free of charge and administered by the Polk County Health Department.

Employees who have been identified by Risk Management with input from Human Resources as being at risk for exposure through their occupational duties, will start their hepatitis vaccination series during their employment physical unless they are detention officers or internal transfers who will schedule an appointment with the health department to start their vaccination series on their first day of employment.

Current employees who are at risk for exposure and have not received their Hepatitis vaccination will be given the opportunity to receive a vaccination at any time and administered by the Polk County Health Department free of charge.

If an employee declines vaccination or has a medical contraindication to hepatitis vaccine, said declination will be documented in the employee's medical record maintained at the Polk County Health Department.

Employees who have previously received the complete hepatitis B vaccination series will provide a copy of their immunization record to the Polk County Health Department for filing in the employee medical file. If proof of immunization cannot be produced, the employee will be offered antibody testing for confirmation of immunity.

Employees declining the Hepatitis B vaccination, or who fail to complete the vaccination series, shall be required to sign and submit a declination statement for filing in their medical file. **See Appendix E.**

If the employee initially declines vaccination but at a later date decides to accept the vaccination, said vaccination will be made available at that time by the Polk County Health Department and free of charge.

C) Post-Exposure Prophylaxis (PEP) for HBV

Risk for Occupational Transmission of HBV

HBV infection is a well recognized occupational risk for HCP. The risk of HBV infection is primarily related to the degree of contact with blood in the work place and also to the hepatitis HB e antigen (HBeAg) status of the source person. In studies of HCP who sustained injuries from needles contaminated with blood containing HBV, the risk of developing clinical hepatitis if the blood was both hepatitis B surface antigen (HBsAg)- and HBeAg-positive was 22%--31%; the risk of developing serologic evidence of HBV infection was 37%--62%. By comparison, the risk of developing clinical hepatitis from a needle contaminated with HBsAg-positive, HBeAg-negative blood was 1%--6%, and the risk of developing serologic evidence of HBV infection, 23%--37% (26).

Although percutaneous injuries are among the most efficient modes of HBV transmission, these exposures probably account for only a minority of HBV infections among HCP. In several investigations of nosocomial hepatitis B outbreaks, most infected HCP could not recall an overt percutaneous injury, although in some studies, up to one third of infected HCP recalled caring for a patient who was HBsAg-positive. In addition, HBV has been demonstrated to survive in dried blood at room temperature on environmental surfaces for at least 1 week. Thus, HBV infections that occur in HCP with no history of non-occupational exposure or occupational percutaneous injury might have resulted from direct or indirect blood or body fluid exposures that inoculated HBV into cutaneous scratches, abrasions, burns, other lesions, or on mucosal surfaces. The potential for HBV transmission through contact with environmental surfaces has been demonstrated in investigations of HBV outbreaks among patients and staff of hemodialysis units.

In serologic studies conducted in the United States during the 1970s, HCP had a prevalence of HBV infection approximately 10 times higher than the general population. Because of the high risk of HBV infection among HCP, routine pre-exposure vaccination of HCP against hepatitis B and the use of standard precautions to prevent exposure to blood and other potentially infectious body fluids have been recommended since the early 1980s.

Recommendations for HBV post-exposure management include initiation of the hepatitis B vaccine series to any susceptible, unvaccinated person who sustains an occupational blood or body fluid exposure. Post-exposure prophylaxis (PEP) with hepatitis B immune globulin (HBIG) and/or hepatitis B vaccine series should be considered for occupational exposures after evaluation of the hepatitis B surface antigen status of the source and the vaccination and vaccine-response status of the exposed person. In the occupational setting multiple doses of Hepatitis B Immune Globulin (HBIG) should be initiated within 1 week following percutaneous exposure with known or suspected hepatitis B positive blood. This provides an estimated 75% protection from HBV infection. Although post exposure efficiency of the combination of HBIG and Hepatitis B vaccine series has not been evaluated in the occupational setting, the combination is used based on studies of increased combination efficacy in perinatal settings. There is no apparent risk for adverse effects to developing fetuses when hepatitis B vaccine is administered to pregnant women. Therefore, neither pregnancy nor lactation should be considered a contraindication to vaccination of women. HBIG is not contraindicated for pregnant or lactating women.

Hepatitis B immune globulin is not a vaccine. Therefore it will not provide long-term protection from hepatitis B.

The Polk County Health Department will maintain a stock of Hepatitis B Immune Globulin. Employees with a percutaneous exposure to HBsAG with known or suspected hepatitis positive blood should make an appointment with the health department within seven days of exposure to receive education, treatment and any applicable labs. When contacting the Health Department they should instruct medical receptionist that they have had an occupational exposure and need an appointment immediately.

4. Hepatitis C Virus

Risk for Occupational Transmission of HCV

Hepatitis C Virus (HCV) is not transmitted efficiently through occupational exposures to blood. The average incidence of anti-HCV seroconversion after accidental percutaneous exposure from an HCV-positive source is **1.8%**. Environmental exposure to dried blood with HCV is not a significant risk for transmission in the health-care setting.

Post-Exposure Prophylaxis for HCV

It has been concluded through multiple studies that using Immune Globulin (IG) as PEP for HCV was not supported due to the following facts:

- i. No protective antibody response has been identified following HCV infection.
- ii. Previous studies of IG used to prevent post transfusion non-A, non-B hepatitis may not be relevant in making recommendations regarding PEP for hepatitis C.
- iii. Experimental studies in chimpanzees failed to show that IG would prevent HCV transmission after an exposure.

Therefore, recommendations of post exposure management are intended to achieve early identification of chronic disease and, if present, referral for evaluation of treatment options.

Employees with a percutaneous exposure to HBsAG with known or suspected hepatitis positive blood should make an appointment with the Polk County health department within seven days of exposure to receive education and follow-up labs. When contacting the Health Department they should instruct medical receptionist that they have had an occupational exposure and need an appointment immediately

5. Human Immunodeficiency Virus

Risk for Occupational Transmission of HIV

Risk for occupational transmission of Human Immunodeficiency Virus (HIV) after a percutaneous exposure in HIV infected blood has been estimated at 0.3% and after a mucous membrane exposure 0.09%. Epidemiologic and laboratory studies have indicated that the following increase the transmission of HIV:

Larger quantity of blood from the source (visible blood on sharp).
Procedure involving a needle being placed directly in a vein or artery or a deep injury.
Source person has terminal illness (higher titer of HIV in blood late in course of AIDS).

Post-Exposure Prophylaxis for HIV

The use of PEP should be decided on a case-by-case basis, considering the severity of the exposure and the epidemiologic likelihood of HIV exposure. Follow-up of exposed healthcare personnel—including post-exposure testing and monitoring of PEP toxicity—are also important. Post-exposure prophylaxis is antiretroviral drug treatment that is started immediately after someone is exposed to HIV. The aim is to allow a person's immune system a chance to provide protection against the virus and to prevent HIV from becoming established in someone's body. In order for post-exposure prophylaxis to have a chance of working the medication needs to be taken as soon as possible and definitely within 72 hours of exposure to HIV. Left any longer and it is thought that the effectiveness of the treatment is severely diminished. The use of prophylaxis antiretroviral medications is based on the following:

- i. Pathogenesis of HIV infection- information about primary HIV infection indicates that systemic infection does not occur immediately. This means there is a brief window of opportunity in which antiretroviral medications may modify or prevent viral replication and infection.
- ii. Biological plausibility that infection can be prevented or ameliorated by using antiretroviral drugs.
- iii. Direct or indirect evidence of the efficacy of specific agents for prophylaxis- use of ZDV was associated with a reduction in the risk of HIV infection by approximately 81% in a retrospective case-control study. Therefore, if the incident poses high risk for transmission of human immunodeficiency virus, antiretroviral medications should be initiated immediately.

These medications should be taken twice a day for 4 weeks but may be discontinued if results of the source patient's testing come back negative for HIV. The Polk County Health Department will keep on hand at least 2 doses of Hepatitis B Immune Globulin and enough for at least 3 days of Combivir treatment. Employees who are started on HIV PEP will be given a prescription for the medication, along with Corvel Rx card to be used at the pharmacy of their choosing. The employee should take the prescription directly to the pharmacy to ensure they have medication on hand after the initial pills have been taken. The ID card will allow the employee to receive the medications from the pharmacy without any out of pocket charges. All charges will be sent to Polk County Risk Management.

Those with occupational exposures to HIV should receive follow-up counseling, post exposure testing, and medical evaluations **regardless** of whether they receive PEP.

After initial baseline testing, when the exposure is suspected, follow-up tests should be performed at 6 weeks, 3 months, and 6 months after exposure. When workers are exposed to HIV, it's imperative to advise them of the importance of completing the prescribed regimen.

POST-EXPOSURE PROTOCOLS FOR POLK COUNTY EMPLOYEES:

1. Immediately wash exposure site with warm water and soap.
2. Report incident to manager right away.
 - i. Manager will send employee to the Polk County Health Department for history, physical exam, lab testing and if appropriate initiation of medication.

- ii. Manager will report incident to risk management immediately upon receipt of information

Note: In order for post-exposure prophylaxis to have a chance of working the medication needs to be taken as soon as possible and definitely within 72 hours of exposure to HIV. Left any longer and it is thought that the effectiveness of the treatment is severely diminished. It is recommended that Polk County employees seek a medical assessment and prophylaxis antiretroviral medications, if appropriate, within 2 hours of exposure.

3. If the exposure occurs between the hours of **8am and 5pm Monday** through Friday or until 7:00pm Tuesday the Manager should **call the Polk County Health Department (286-3798 + 0)** and tell the person answering that a bloodborne incident occurred and they will be sending source/blood (if appropriate) and employee for appropriate care management. (If no provider is on site, office staff will inform manager and ask that the employee be sent immediately to Mercy Emergency Department).

4. If exposure occurs **outside** of the Polk County Health Department's regular hours, employee and source blood (if an inmate) should be sent directly to Mercy Emergency Department. Employee should **call Mercy ER at 247-3211** while in route, ask to speak with the charge nurse, and tell the charge nurse that they are on their way and will need testing and treatment after a blood and/or body fluid exposure.

- i. Employee should present at Mercy Medical Center with a copy of the following documents which are provided in the **Bloodborne Pathogen Packet** prepared by the Polk County Health Department and located within each department deemed at risk for bloodborne and OPMI exposures. These documents should be presented by the employee to the Emergency Room check-in clerk and nurse:

- Bloodborne Protocol;
- Completed non-employee blood borne pathogen post exposure laboratory requisition form;
- Polk County Health Department records release form; and
- Report of exposure to infectious disease form.

- ii. If the employee needs a **Polk County Health Department advocate** to help instruct Mercy staff, the employee can contact PCHD during regular business hours at 286-3798 or they can call the PCHD on-call nurse anytime after regular business hours at 234-9477.

5. Sources (outside of a correctional institute) should be asked to voluntarily provide a blood sample. They can be directed to the Polk County Health Department the same day of the exposure or on the next regular work day for a blood draw and testing. Preferably, the source blood is obtained immediately following the incident for comparison with the exposed employee. Medications will be prescribed to the employee based on the results of the source blood.

If incident occurs at jail, detention center, or another location where health care is provided for the source, the blood should be drawn from the source on site and sent immediately to the Health Department for Mercy for lab testing. In this case the risk assessment and history of source should also be performed by on-site health care

provider. **See Appendix F1.** If the source is an inmate that is refusing a blood draw, call your supervisor to obtain a court order.

6. An employee who presents to Mercy Medical Center should make a follow up appointment with the Nurse Practitioner at the Polk County Health Department on the next business day following the exposure. Call 286-3798 and inform the staff person that you need to make an appointment with the Nurse Practitioner for a blood and/or body fluid exposure for that day. The follow-up appointment will include pre and post test exposure education, medical evaluation including history, further lab testing as deemed appropriate, and physical examination (see attached forms). Employee will be scheduled for further follow up testing and care as needed based on the type of exposure, vaccination, immunity status, and treatment recommendations.

7. An employee experiencing a bloodborne exposure should complete the county Report of Exposure to Infectious Disease and turn it in to the appropriate supervisor to be forwarded to Risk Management.

See F, Bloodborne Pathogen Algorithm.

Polk County Board of Supervisor

Author: Terri Henkels

Date: 8/10/11

Contact: Polk County Health Department
515-286-3759

Adopted: 11/1/11

[Click for Resolution:](#)

Polk County Standby Status Policy

Purpose

It is the purpose of this policy to provide for uniform and consistent application of the provision of the AFSCME collective bargaining agreement regarding standby pay throughout the County's various departments.

Policy

- I. Standby status is intended for employees who hold positions which may regularly be called to duty outside their normal work schedule.
- II. No employee shall be eligible to receive standby pay as set forth in Article XVIII, section 16 of the 1989-92 AFSCME-Polk County Collective Bargaining Agreement, unless the department has received authorization from the Personnel Department.
- III. Standby status may only be authorized if a written request is submitted by the department to the Personnel Department. The request must include the following:
 1. Detailed statement of need
 2. Length of expected assignment
 3. Alternatives to standby explored and reason(s) for rejecting each
 4. Position(s) involved
 5. Estimate of standby hours per pay period for each position
 6. Estimate of the frequency the position will be called to duty from the standby status
 7. Estimate the cost of standby for each position
- IV. This policy shall become effective November 3, 1990.

Contact:: Human Resources
515-286-3200
Adopted: 10/23/90

[Click for Resolution:](#)

Polk County Substance Abuse Policy (Commercial Drivers License Holders)

Introduction

Polk County is dedicated to providing safe and efficient service to the public. The County's employees are its most valuable resource in ensuring the quality of this service. It is the County's goal to provide its employees with a work place environment which promotes health and safety. To meet this goal it is the County's policy to establish a program designed to help prevent accidents and injuries resulting from the misuse of alcohol or use of controlled substances by drivers of commercial vehicles.

2.0 Purpose

The purpose of this policy is to assure that County employees who drive commercial motor vehicles are fit for duty and to protect our employees and the public from risks posed by the misuse of alcohol and use of prohibited drugs by such drivers. This policy is intended to comply with the Omnibus Transportation Employee Testing Act of 1991 and all applicable federal regulations governing substance abuse prevention programs for employees who operate commercial motor vehicles and who are required to have a commercial driver's license. The Department of Transportation (DOT) has published 49 CFR Parts 382 and 40 that mandate urine drug testing and breath alcohol testing for safety-sensitive positions; prohibit performance of safety sensitive functions when there is a positive test result; and set standards for the collection and testing of urine and breath specimens. This policy incorporates those requirements for employees who operate commercial motor vehicles. All covered employees must comply with the regulations set forth in 49 CFR Parts 382 and 40, which are incorporated herein by reference. Copies of the regulations are available in the Human Resources Department. If any provision of this policy conflicts with the regulations in 49 CFR, Parts 382 and 40, the regulations shall control.

3.0 Covered Employees

The County's Substance Abuse Policy applies to all drivers as defined in 49 CFR 392.103, who operate commercial motor vehicles and who are required to hold commercial drivers licenses. Contractors who employ drivers are responsible for compliance with all applicable federal regulations.

Each employee subject to this policy shall receive a copy of the policy. The policy will be located in a place readily accessible to all covered employees.

A safety-sensitive function is any duty related to the operation of a commercial motor vehicle by an employee required to have a commercial driver's license including:

- a. All time the driver is waiting to be dispatched, unless the County has relieved the driver from duty;
- b. All time inspecting, servicing, or conditioning any commercial motor vehicle at any time;
- c. All driving time;
- d. All time in or on any commercial motor vehicle;
- e. All time supervising, assisting, or attending the loading or unloading of a vehicle, or remaining in readiness to operate the vehicle, or in giving or receiving receipts for shipments loaded or unloaded.
- f. All time repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle;

- g. Performing any other work in the capacity of, or in the employ or service of a common, contract or private motor carrier.
- h. Performing any compensated work for a non-motor carrier entity.

4.0 Prohibited Substances

Prohibited substances addressed by this policy included the following:

4.1 Controlled Substances

Any illegal drug or any substance identified in schedule I through V of Section 102 of the Controlled Substance Act (21 U.S.C. 802), and as further defined by 21 CFR 1300-11 through 1300.15. This includes, but is not limited to:

- ◆ Marijuana
- ◆ Amphetamines
- ◆ Opiates
- ◆ Phencyclidine (PCP)
- ◆ Cocaine

Illegal controlled substances include any drug not approved for medical use by the U. S. Drug Enforcement Administration or the U. S. Food and Drug Administration. Illegal use includes use of any illegal drug, misuse of legally prescribed drugs, and use of illegally-obtained prescription drugs.

4.2 Legal Drugs

The appropriate use of legally prescribed drugs and non-prescription medications is not prohibited. However, the use of any substance which carries a warning label that indicates that mental functioning, motor skills, or judgment, may be adversely affected must be reported to supervisory personnel and medical advice must be sought by the employee, as appropriate, before performing work-related duties.

A legally-prescribed drug means that the individual has a prescription or other written approval from a physician for the use of a drug in the course of medical treatment. If the employee tests positive for drugs, he/she must provide within 24 hours a valid prescription. A valid prescription includes the patient's name, the name of the substance quantity/amount to be taken, and the period of authorization. The misuse or abuse of legal drugs by covered employees while performing County business or on County property is prohibited.

4.3 Alcohol

The use of or possession of alcohol, unless the alcohol is manifested and transported as part of a shipment, while performing safety-sensitive functions for the County, is prohibited. This included beverages containing alcohol, medicines containing alcohol (prescription or over-the-counter), or any other substance such that if ingested, alcohol would be present in the body. The concentration of alcohol is expressed in terms of grams of alcohol per 210 liter of breath as measured by a breath testing device.

5.0 Prohibited Conduct

5.1 Manufacture, Trafficking, Possession and Use

Covered employees are prohibited from engaging in the unlawful manufacture, distribution, dispensing, possession or use of prohibited substances on County premises, in County vehicles, or while on County business. Employees who violate this provision may be terminated. Law enforcement shall be notified, as appropriate, where criminal activity is suspected.

5.2 Intoxication/Under the Influence

Any covered employee performing safety-sensitive functions, who is reasonably suspected of being intoxicated, impaired, or under the influence of a prohibited substance, or not fit for duty shall be relieved from job duties pending an investigation and verification of his/her condition. Employees who fail to pass a drug or alcohol test shall be removed from duty and required to successfully complete a drug or alcohol rehabilitation program, and shall be subject to discipline up to and including discharge. Failure to successfully complete the program will result in immediate termination. A drug or alcohol test is considered positive if the individual is found to have a quantified presence of a prohibited substance in the body above the minimum thresholds defined in 49 CFR Part 40, as amended.

5.3 Alcohol Use

No covered employee should report for duty or remain on duty, requiring the performance of safety-sensitive functions, when his/her breath alcohol concentration is 0.04 or greater. No covered employee shall use alcohol while on duty, or while performing safety-sensitive functions. No covered employee shall use alcohol within four hours of reporting for duty, or during the hours that the employee is on call. Violation of these provisions is prohibited, and will subject the employee to discipline up to and including discharge.

5.4 Compliance with Testing Requirements

All covered employees will be subject to urine drug testing and breath alcohol testing in accordance with section 6. Any covered employee who refuses to comply with a request for testing shall be removed from duty, will be considered as having a positive test, will be required to successfully complete a drug or alcohol rehabilitation program, and be subject to discipline up to and including discharge. If he/she does not successfully complete this program, the employee will be terminated. Any covered employee who is suspected of providing false information in connection with a test, or who is suspected of falsifying test results through tampering, contamination, adulteration, or substitution will be required to undergo an observed collection. Verification of these actions will result in the employee's removal from duty and termination of employment. Refusal can include an inability to provide a sufficient urine specimen or breath sample without a valid medical explanation, as well as a verbal declaration, obstructive behavior, or physical absence resulting in the inability to conduct the test.

5.5 Treatment Requirements

All employees are encouraged to make use of the available resources for treatment of alcohol misuse and illegal drug use problems. Under certain circumstances, employees may be required to undergo treatment for substance abuse or alcohol misuse as explained in this policy. Any employee who refuses or fails to comply with the County's requirements for treatment, after care or return-to-duty shall be terminated. The cost of treatment or rehabilitation service will be paid for by the employee's insurance provider or, if not covered, by the employee.

An employee required to take time off in order to participate in a rehabilitation program will be permitted to use sick leave, vacation time, personal leave, compensatory time-off and/or unpaid leave. Such leave will be considered leave pursuant to the County's Family and Medical Leave Act Policy. If the rehabilitation program does not require the employee to take time off, then non-safety-sensitive duties will be assigned to the employees until the Medical Review Officer (MRO) or Substance Abuse Professional (SAP) determines the employee may return to safety-sensitive duty.

5.6 Consequences for Violations of Drug Policy

Employees who are tested and found to be in violation of the policy the first time will normally be referred for a drug abuse evaluation. If treatment is recommended, the employee is required to successfully complete treatment. Absent extraordinary circumstances, any employee testing positive for a second time, whether random, post-accident, reasonable suspicion, or follow up test, will be terminated from County employment. In all respects, including determining when an employee has tested positive a second time, a constructive positive, i.e., an employee's refusal to submit to testing, will be treated as an actual positive. Any temporary restrictions that create an inability to perform the essential functions of the employee's position may subject the employee to a demotion in classification until such restrictions are withdrawn.

This policy recognizes a spectrum of potential breaches including such extremely serious ones as use, possession, sale, or distribution of illegal drugs, being unfit to work due to presence of illegal drugs in one's system, and far less serious violations, such as an employee's failure to advise the employer that he or she is taking medication which might affect safety or other aspects of performance. Therefore, corrective disciplinary action is intended to be proportional to the magnitude of the offense.

Certain serious offenses may result in immediate termination unless there are compelling facts relative to the offense, i.e., employee's work history, performance, and prior compliance with County's policy and rules or other personal factors that strongly suggest a lesser form of corrective action and/or rehabilitation are most appropriate. An example of a serious offense includes, but is not limited to:

- ◆ Use, possession, sale, or distribution of controlled substances and/or drugs County premises, on County business, or during working hours.
- ◆ Involvement in a traffic accident resulting in a fatality while the employee has a positive drug test.

5.7 Consequences for Violations of Alcohol Policy

Employees who are tested and found to be in violation of the policy the first time with an alcohol level of 0.02 or greater, but less than 0.04 will be considered to be unable to perform their duties for 24 hours and on an unexcused absence subject to progressive discipline.

Additional tests with an alcohol level of 0.02 or greater but less than 0.04 will be grounds for discipline up to and including discharge.

Employees performing safety-sensitive functions, who are tested and found to be in violation of the Policy with an alcohol level of 0.04 and above, or who have used alcohol within four hours prior to performing safety-sensitive functions shall be subject to discipline up to and including discharge.

The program recognizes a spectrum of potential breaches including such extremely serious ones as use or possession of alcohol during working hours, being unfit to work due to presence of alcohol in one's system, and far less serious violations. Therefore, disciplinary action is intended to be proportional to the magnitude of the offense and in keeping with the Positive Discipline Program. Any temporary restrictions that create an inability to perform the essential functions of the employee's position may subject the employee to a demotion in classification until such restrictions are withdrawn.

Certain serious offenses may result in immediate termination unless there are compelling facts relative to the offense, i.e., employee's work history, performance, and prior compliance with County policy and rules or other personal factors that strongly suggest a lesser form of corrective action and/or rehabilitation are most appropriate. Examples of such serious offenses include, but are not limited to:

- ◆ Use or possession of alcohol on County premises or during working hours.
- ◆ Refusal to submit to a required alcohol test.
- ◆ Involvement in a traffic accident resulting in a fatality while the employee has a positive alcohol test.

5.8 Proper Application of the Policy

Polk County is dedicated to assuring fair and equitable application of this substance abuse policy. Therefore, supervisors/managers are required to use and apply all aspects of this policy in an unbiased and impartial manner.

5.9 Employee Requested Treatment

Any covered employee who feels he/she has an alcohol or drug abuse problem may use appropriate leave, if applicable, or request an unpaid leave of absence for the purpose of attending a registered drug and alcohol abuse treatment program. The County will assist, in any manner possible, an employee who requests this treatment voluntarily. Such requests must be completed voluntarily and prior to any pending drug/alcohol test or disciplinary action. The employee will not be disciplined for requesting this treatment. Employees who voluntarily request treatment are subject to the return-to-duty testing and requirements set forth in section 6.7.

6.0 Testing Procedures

Urine Drug testing and breath testing for alcohol shall be conducted as required by federal regulations. All covered employees shall be subject to testing prior to employment, for reasonable suspicion, at random, and following an accident as defined in Section 6.3, 6.4, 6.5, 6.6 and 6.7 of this policy. In addition, all covered employees will be tested prior to returning to duty after failing a drug or alcohol test and after completion of the Substance Abuse Professional's recommended treatment program. Safety-sensitive employees shall also be subject to follow-up testing on a random, unannounced basis. Follow-up testing will be conducted for a period of 12 months, with at least six tests performed during the year.

Testing shall be conducted in a manner to assure a high degree of accuracy and reliability and using techniques, equipment, and laboratory facilities which have been approved by the U.S. Department of Health and Human Services (DHHS). All testing will be conducted consistent with the procedures put forth in 49 CFR part 40, as amended.

The drugs that will be tested for include marijuana, cocaine, opiates, amphetamines, and phencyclidine. An initial drug screen will be conducted on each urine specimen. For those specimens that are not negative, a confirmatory Gas Chromatography/Mass Spectrometry (GC/MS) test will be performed. The test will be considered positive if the amounts present are above the minimum thresholds established in 49 CFR part 40, as amended. In addition, if a urine sample cannot be analyzed because of dilution, a retest will be authorized. A second diluted sample shall be considered positive.

Tests for breath alcohol concentration will be conducted utilizing a national Highway Traffic Safety Administration (NHTSA)-approved evidential breath testing device (EBT) operated by a trained breath alcohol technician (BAT). If the initial test indicates an alcohol concentration of 0.02 or greater, a second test will be performed to confirm the results of the initial test. A covered employee who has a confirmed alcohol concentration of 0.02 or greater but less than 0.04 will be removed from his/her position until the start of his/her next regular duty period, but not less than twenty-four (24) hours following the test; and be on an unexcused absence subject to progressive discipline. An alcohol concentration of 0.04 or greater will be considered a positive alcohol test and in violation of this policy and a violation of the requirements set forth in 49 CFR Part 382 for covered employees. Any covered employee that has a confirmed positive drug or alcohol test will be removed from his/her position, informed of educational and rehabilitation programs available, referred to a Substance Abuse Professional (SAP) for assessment, and be subject to discipline up to and including discharge.

Polk County affirms the need to protect individual dignity, privacy and confidentiality throughout the testing process. All records will be maintained in accordance with 49 CFR 382.401, et seq. Laboratory reports or test results shall not appear in an employee's general personnel file. Information of this nature will be contained in a separate confidential medical folder that will be kept under the control of the Labor Relations Manager. The reports or test results may be disclosed to Polk County's management strictly on a need-to-know basis and to the employee upon request. Disclosures without employee consent may also occur when:

1. The information is compelled by law or by judicial or administrative process;
2. The information has been placed at issue in a formal dispute between the employee and employer;
3. The information is needed by medical personnel for the diagnosis or treatment of the employee who is unable to authorize disclosure.

6.1 Compensation for Testing

Polk County will pay employees for drug or alcohol testing according to the following:

Paid Testing: (random, reasonable suspicion and post-accident testing) - employees will be paid regular wages from the time they are notified of testing and relieved of job duties until such time as they are released by the supervisor to return to work or are relieved of their duties.

Unpaid Testing: (pre-employment and return-to-work) - Covered applicants for employment required to undergo pre-employment testing and employees subject to return-to-work testing will not receive compensation for the time spent testing.

6.2 Employee Requested Testing

Any covered employee who questions the results of a required drug test under paragraphs 6.3 through 6.8 of this policy may request that an additional test be conducted. This test must be conducted at a different DHHS-certified laboratory. The test must be conducted on the split sample that was provided by the employee at the same time as the original sample. All costs for such additional testing are paid by the employee unless the result of the split sample testing invalidates the result of the original test. The method of collecting, storing, and testing the split sample will be consistent with the procedures set forth in 49 CFR Part 40, as amended. The employee's request for a split sample test must be made to the Medical Review Officer within 72 hours of notice of the original sample verified test result. Requests after 72 hours will only be accepted if the delay was due to documentable facts that were beyond the control of the employee.

6.3 Pre-Employment Testing

All applicants for positions with safety-sensitive functions shall undergo urine drug testing and breath alcohol testing immediately following the offer of employment or transfer into a safety-sensitive position. Receipt by the County of a negative drug test result is required prior to employment. Receipt of a negative alcohol test is also required prior to employment before the employee can perform any safety-sensitive duties. Pre-employment drug tests may be administered only after the applicant is informed that a urine sample and breath test are required, as mandated by Section 730.5(7) (a) of the Iowa Code. Failure of a pre-employment drug or alcohol test will disqualify an applicant for employment at the County for at least six months. Polk County will reconsider an applicant's employment if all the following conditions are met:

1. At least six months has lapsed between applications; and
2. The applicant can show proof of successfully completing a drug or alcohol treatment program; and
3. Passes a new drug/alcohol test.

6.4 Reasonable Suspicion Testing

All covered employees may be subject to a fitness-for-duty evaluation, and urine and/or breath testing when there are reasons to believe that the employee has violated Department of Transportation regulations in 49 CFR sections 382.201 to 382.215 concerning alcohol or controlled substances. A reasonable suspicion referral for testing will be made on the basis of objective facts and circumstances which are consistent with the short-term effects of substance abuse or alcohol misuse. Examples of reasonable suspicion include, but are not limited to the following:

1. Physical signs and symptoms consistent with prohibited substance use or alcohol misuse, including appearance, behavior, speech, or body odors.
2. Evidence of the manufacture, distribution, dispensing, possession, or use of controlled substances, drugs, alcohol, or other prohibited substances.
3. Occurrence of a serious or potentially serious accident that may have been caused by prohibited substance abuse or alcohol misuse.
4. Fights (to include physical contact), assaults, and flagrant disregard or violations of established safety, security or other operating procedures.

Reasonable suspicion referrals must be made by two supervisors who are trained to detect the signs and symptoms of drug and alcohol use and who reasonably conclude that an employee may be adversely affected or impaired in his/her work performance due to possible prohibited substance abuse or alcohol misuse. Polk County's "Reasonable Suspicion" form will be completed by the two supervisors and a copy given to the employee.

6.5 Post-Accident Testing

All covered employees will be required to undergo urine and breath testing if they are involved in an accident with a County vehicle that results in a fatality. In addition, a post-accident test will be conducted if:

1. An accident results in injuries requiring transportation to a medical treatment facility; or
2. One or more vehicles incur disabling damage that requires towing from the site and within 8 hours of the accident, the employee receives a citation under State or local law for a moving traffic violation.

Following an accident, the covered employee will be tested as soon as practicable, but not to exceed eight hours for alcohol and 32 hours for drug testing. Any covered employee involved in an accident must refrain from alcohol use for eight hours following the accident or until he/she undergoes a post-accident alcohol test. Any covered employee who leaves the scene of the accident without justifiable explanation or consumes alcohol within the eight hours prior to submission to drug and alcohol testing will be considered to have refused the test and will be considered as having a positive drug test.

6.6 Random Testing

Employees in covered positions will be subjected to random, unannounced testing. The selection of covered employees for random alcohol testing will be made by the County, through a intergovernmental consortium, using a scientifically-valid method that ensures each covered employee that he/she will have an equal chance of being selected each time selections are made. The random tests will be unannounced and spread throughout the year. All covered employees in the consortium will be tested at the rate of 50% for drugs and 25% for alcohol. All covered employees will be placed in a common consortium selection pool. Each employee in this pool will be matched with a unique random selection number. Through the use of a computer based random number generation program, the required number of persons will be selected by the consortium for each testing cycle throughout the year. All employees in the pool will remain in the random selection pool at all times throughout the year regardless of whether or not they have been previously selected. Polk County's Labor Relations Manager will be notified by the consortium of the identity of the covered employee selected for testing. Notification will then be made to those who must submit a specimen or complete an alcohol breath test. If selected for testing, the covered employee must proceed to the test site immediately. If he/she is performing a safety-sensitive function, he/she must cease performing and proceed to the test site as soon as possible. The employee will be escorted to the medical facility for the test. As soon as the specimen is collected or breath test complete, the employee will be required to return to work.

6.7 Return-To-Duty Testing

All covered employees performing safety-sensitive functions who previously tested positive on a drug or alcohol test must test negative for drugs and below 0.02 for alcohol and be evaluated and released to duty by the Substance Abuse Professional before returning to work. If an employee refuses the return-to-duty test, he/she will be considered as having a positive drug or alcohol test and shall be subject to discipline up to and including discharge.

6.8 Follow-Up Testing

Covered employees will be required to undergo frequent, unannounced random urine and/or breath testing following their return to duty after a positive drug or alcohol test and treatment. The follow-up testing will be performed for a period of 12 months with a minimum of six tests to be performed during the year. If a subsequent drug test is positive, or results in an alcohol concentration of 0.04 or greater, the employee shall be subject to discipline up to and including discharge.

7.0 Employment Assessment

Any covered employee who tests positive for the presence of illegal drugs or alcohol above the minimum thresholds set forth in 49 CFR part 40, as amended, will be referred for evaluation by a Substance Abuse Professional (SAP). A SAP is a licensed or certified physician, psychologist, social worker, employee assistance professional or addiction counselor with knowledge of and clinical experience in the diagnosis and treatment of alcohol or drug-related disorders. The SAP will evaluate each employee to determine what assistance, if any, the employee needs in resolving problems associated with prohibited drug use or alcohol misuse. If a covered employee is allowed to return-to-duty, he/she must properly follow the rehabilitation program prescribed by the SAP; the employee must have a negative return-to-duty drug and alcohol test and be subject to unannounced follow-up tests for a period of 12 months. The cost of the treatment or rehabilitation services will be paid by the employee's insurance providers or if not covered, by the employee.

8.0 Re-Entry Conditions

Employees who re-enter the workforce after the assessment required in section 7.0 must agree to re-entry conditions. Those conditions may include (but are not limited to):

1. A release to work statement from the Substance Abuse Professional.
2. A negative test for drugs and below 0.02 for alcohol.
3. An agreement to unannounced frequent follow-up testing for a period of at least twelve (12) months with at least six tests performed during the year.
4. A statement of expected work-related behaviors.
5. An agreement to follow specified after-care requirements with the understanding that violation of the re-entry conditions is grounds for termination.

9.0 Contact persons

Any questions regarding this policy or any other aspect of Polk County's drug-free and alcohol-free program should contact the following County representative:

Program Manager:

Name:	Michael Campbell
Title:	Labor Relations Manager
Address:	111 Court Avenue, Room 390 Des Moines, Iowa 50309
Telephone:	(515) 286-3200
Fax:	(515) 286-3316

Assistant Program Manager

Name:	Lola Evans
Title:	Human Resources Analyst
Address:	111 Court Avenue, Room 390 Des Moines, Iowa 50309
Telephone:	(515) 286-3200
Fax:	(515) 286-3316

Medical Review Officer(s):

Name Douglas Martin, M.D.
Richard Thompson, D.O.

Address: 3410 Futures
S. Sioux City, NE

Telephone: (877) 412-4290

Fax:

Employer Assistance Program:

Name Employee and Family Resources

Address: 505 5th Avenue, Suite 600
Des Moines, Iowa 50309

Telephone: (515) 244-6090

Fax:

Substance Abuse Professionals:

Name To Be Determined

Address:

Telephone:

Fax:

Name To Be Determined

Address:

Telephone:

Fax:

Direct any questions regarding substance abuse to the following:

Iowa Substance Abuse Information Center
Cedar Rapids, Iowa
1-800-247-0614

Employee and Family Resources
505 5th Avenue, Suite 600
Des Moines, Iowa 50309
1-515-244-6090 (Des Moines)
1-800-327-4692 (Iowa)
1-800-327-3020 (Nationwide)

OVERVIEW OF POLICY

The following briefly summarizes the information contained in this policy.

Section 1.0 - This section describes Polk County's policy on substance abuse and the goal of the County's substance abuse program - to provide a safe service for the public and employees.

Section 2.0 - This section discusses the purpose of the policy which is twofold - provide a safe service and to comply with federal laws enacted on drug and alcohol abuse in the workplace.

Section 3.0 - This section discusses who will be affected by this policy. Briefly, all safety-sensitive transportation employees, i.e., employees who are required to have a commercial driver's license, a CDL is required for drivers operating a vehicle in excess of 26,000 pounds GVWR, designed to carry 16 or more passengers or any size which is used to transport a placardable amount of hazardous material. These positions are called, "safety-sensitive." A list of the positions covered under this policy is attached. Non-safety-sensitive employees fall under this policy in all areas except random testing. Section 730.5 of the Iowa Code will not allow random testing of employees who are not considered safety-sensitive. The federal government does not require testing of these employees, therefore, state law prevails.

Section 4.0 - Section 4.0 addresses the substances that are considered illegal under the law. There are five drugs plus alcohol that are considered illegal. This section also discusses what a legal drug is and how employees are required to handle prescriptions.

Section 5.0 - This section discusses the types of behavior that are illegal such as being intoxicated, trafficking of drugs while on County business, the legal limit for intoxication, treatment requirements, notification of a drug conviction and the procedure that will be followed when an employee requests treatment on their own.

Section 6.0 - This section discusses the seven types of testing and employee pay for this testing. The types of testing that will be completed by Polk County are:

1. Pre-employment
2. Required Physical Examinations
3. Reasonable Suspicion
4. Post-Accident
5. Random
6. Return-To-Duty after a positive test
7. Follow-up after a positive test

Wage and hour laws require employees to be paid for the entire time required for testing including travel time.

Section 7.0 - Section 7.0 discusses the role of the Substance Abuse Professional (SAP). Polk County is required to have a professional assess an employee who has tested positive on a drug test. The reason for this assessment is to determine if there are additional problems that are contributing to the employee's substance abuse problem and to aid the employee in resolving these issues. The SAP will also recommend the frequency of follow-up tests when an employee is returned to work after treatment.

Section 8.0 - This section discusses conditions that will be placed on the employee when he/she re-enters the workforce, such as a negative drug test result, follow-up tests, etc.

Section 9.0 This last section discusses who and where questions regarding this policy and the drug and alcohol process should be directed. Internally, Polk County's Labor Relations Manager will be responsible for this program.

Contact: Human Resources
515-286-3200
Effective: 12/27/94
Revised: 8/1/95

[Click for Resolution:](#)

Travel and Expense Reimbursement Policy

GENERAL POLICY

It is the policy of Polk County to pay reasonable amounts related to travel, meetings and expense reimbursement which are deemed to serve the public purpose of being necessary and/or beneficial to the operation of Polk County,

APPLICABILITY

This policy applies to all persons, departments and entities for which the Board of Supervisors is budgetarily responsible. Thus, the following entities are not subject to this policy unless they elect to be covered by the policy:

County Assessor
Emergency Management

OVERNIGHT TRAVEL

Definition and Authorization

1. Overnight travel is defined as any travel while on County business requiring an employee or elected official to stay away from home and out of the County overnight.
2. All requests for overnight travel shall be submitted by employees to an Elected Official/Department Head on the 'Polk County Request for Travel Form'. Employee overnight travel shall have prior approval on this form from an Elected Official/Department Head.

Department Head overnight travel shall have prior approval from the County Administrator. Veteran Affairs Director and Conservation Director overnight travel shall have prior approval from their respective Boards. County Chief of Staff overnight travel shall have prior approval from the Chair of the Board of Supervisors.

3. Code of Iowa mandated overnight travel for transporting prisoners, witnesses, juveniles, etc. is exempt from the above prior authorization requirements and use of the 'Request for Travel Form'.

Reimbursement Process

1. Claims (payment vouchers) for reimbursement of overnight travel expenses should be filed with the Polk County Auditor's Central Accounting Division after expenses have been incurred. Expenses shall be summarized on the 'Request for Travel Form' and supported by receipts as described in other sections of this Policy.
2. Prepayment of registration fees, lodging and transportation (excluding mileage) can be obtained at the discretion of the County Auditor with the prior approval of the Elected Official/Department Head. Requests for prepayment should be filed with the Polk County Auditor's Central Accounting Division at least ten days before the prepayment check is desired.

Registration Fees

1. Registration fees are reimbursable, if prior approval has been obtained from an Elected Official/Department Head. Claims for reimbursement shall be accompanied by receipts.
2. Registration fees for separate social events, tours, excursions, etc. associated with a meeting or conference are not reimbursable.

Transportation

1. Air travel will be reimbursed at 'coach' rates, Receipts showing point of departure, intermediate and final destinations are required. Alternate air travel arrangements (i.e. depart from other than Des Moines, stay over on a Saturday night, etc.) will be reimbursed if cost savings to the County can be documented.
2. Claims for other forms of commercial carrier transportation, i.e. rail, bus, etc. are allowable if rate does not exceed coach air fare, and receipts are provided.
3. When a personal car is used for overnight travel, reimbursement will be based on the cost of coach class air travel, or actual mileage, whichever is the lesser amount. En route meals and lodging expenses will be reimbursed to the extent they would have been incurred had travel been via air. The use of a personal car for overnight travel is also subject to the following provisions:
 - a. When using a privately owned vehicle for overnight travel, mileage shall be figured at the prevailing rate per mile, as set by the Board of Supervisors.
 - b. If two or more County employees are transported in the same vehicle, mileage will be paid the driver only.
 - c. Persons driving a County-owned vehicle for overnight travel may not apply for mileage reimbursement.
4. Local Transportation:
 - a. Local transportation costs, including such costs as limousine and taxi fare, may be reimbursed. When possible, receipts are to be obtained.
 - b. Individuals are permitted to rent cars in those cases where estimated local transportation will exceed the cost of car rental. Claims for reimbursement for car rental shall be accompanied by receipts. Car rental contract collision damage insurance and comprehensive coverage should be accepted or utilized.
5. Parking shall be reimbursed based on the fee charged to park. When possible, receipts are to be obtained.

Lodging

1. The hotel and type of room selected should be reasonable. For example, luxury hotels and/or suites are not considered to be reasonable unless lodging is pre-assigned by the organization hosting the conference.
2. The County will only reimburse the single room rate per employee unless two or more County employees share the same room.
3. When reserving lodging, inquiries should be made to determine if a discounted government or corporate rate is available.

4. Lodging includes the cost of the room and related taxes. Expenses incurred for items such as in-room movies and use of health club facilities are not considered 'lodging' and will not be reimbursed.
5. Requests for reimbursement of lodging expense must include the original hotel bill detailing all charges.

Meal and Miscellaneous Expense

1. Reimbursement of meal costs (including tips and gratuities not exceeding 20% of the cost of a meal) shall not exceed the current federal daily per diem rate based on the city/county of the traveler's destination. Cities and /or counties not specifically listed on the federal daily per diem rates will be reimbursed at the current standard overall per diem rate. Meal or tip costs exceeding the maximum limit by \$1.00 or less will be reimbursed to minimize administrative costs of processing travel claims. Current federal per diem rates are available at www.gsa.gov
2. Receipts for meal costs are not required for meal costs of \$10.00 or less per meal. Receipts are required for meal costs in excess of \$10.00 per meal. Meal receipts should include a detailed itemized bill listing food and beverages purchased. Reimbursement for alcoholic beverages is prohibited.
3. Snacks and incidental beverages are not reimbursable unless they are claimed as a substitute for regular meals of breakfast, lunch or dinner.
4. It is recognized that employees may incur miscellaneous personal expenses that would not have been incurred if the employee were not away from home overnight. Thus, the County will reimburse miscellaneous expenses such as a personal safe-arrival telephone call. In addition, for extended trips, the County will reimburse laundry expenses, additional personal calls home, etc. Personal phone calls should be limited to 10-15 minutes per day.

Business calls incurred during overnight travel will also be reimbursed as miscellaneous expenses. Brief explanatory notes (i.e. call to office, call to vendor, etc.) should be written by business call charges.

Other Provisions

1. Overnight travel expenses paid by private interests are prohibited.
2. The following expenses will not be reimbursed:
 - a. Entertainment
 - b. Alcoholic beverages
 - c. Lodging and meals before the beginning or after the ending of a conference unless business purpose or monetary savings can be documented.
 - d. Travel expenses for employee's spouse, other family member and/or acquaintance that accompany the employee on County-related travel.

EXPENSE REIMBURSEMENT

Definition

Expense reimbursement is defined as direct payment or reimbursing County employees and Elected Officials for expenses incurred while on County business (other than expenses associated with overnight travel). Examples of reimbursable expenses include mileage, registration costs at local seminars, food for in-house meetings, etc.

Reimbursement Process

1. Claims (payment vouchers) for expense reimbursement should be filed with the Polk County Auditor's Central Accounting Division after the expenses have been incurred. However, prepayment of local seminar registration fees can be obtained at the discretion of the County Auditor. All claims (payment vouchers) for expense reimbursement should be approved by the Department Head/Elected Official.
2. Claims for mileage reimbursement must be supported by a Polk County Mileage Reimbursement Form. Other claims for expense reimbursement shall be supported by invoices, paid receipts or other documentation at the discretion of the County Auditor.

Mileage Expense and Allowances

1. When using a privately owned vehicle on County business mileage shall be figured at the prevailing rate per mile, as set by the Board of Supervisors.
2. If two or more County employees are transported in the same vehicle, mileage will be paid the driver only.
3. Mileage shall be summarized on a Polk County Mileage Reimbursement Form. The following items are required on the form:

Date
Point of Departure
Intermediate Destinations
Final Destination
Total Miles Driven (rounded to the nearest whole mile)

Employees or elected officials who are paid for mileage via a monthly mileage allowance are not required to summarize mileage on the Polk County Mileage Reimbursement Form.

4. Board of Supervisors

Board members may receive mileage reimbursement for actual miles driven or a mileage allowance, both as authorized by Code of Iowa Sections 331.215(2) and 70A.9. The aggregate maximum reimbursement set forth in Code of Iowa Section 331.215(2) shall be divided equally among the members of the Board of Supervisors. All mileage allowances are subject to tax withholding and will be included on the Board member's annual W-2 form. Mileage allowances will be paid as part of payroll on the first two paydays of each month.

5. Mileage allowances for employees other than Board of Supervisors must be approved by separate resolution of the Board of Supervisors.
6. Persons driving a County owned vehicle may not apply for mileage reimbursement. However, they may apply for reimbursement for gasoline, oil or repairs in the event that the securing of these items becomes necessary while traveling on County business outside of Polk County. All requests for reimbursement shall be accompanied by receipts.
7. Mileage for travel between the official domicile (home) and work site shall be paid only when the employee is required to make a special trip (not contiguous with regular scheduled work hours) to the work site on official County business. However, in accordance with a January, 1970 Iowa Attorney General's opinion, members of the Board of Supervisors may be paid for mileage between home and work site.

8. Mileage should only be claimed from the work site to the destination and then back to the work site. Mileage relating to any intermediate personal destination should be subtracted when computing total mileage.
9. Mileage claims are required to be submitted for reimbursement within six months after mileage has been driven.

Technology Stipend

1. Elected officials have the option of either submitting actual cellular phone billings and personal digital assistant (PDA) billings for reimbursement or receiving a monthly technology stipend as described below. Only those PDA devices identified by the County will be eligible for reimbursement or technology stipend.
2. The technology stipend will be made available to elected officials upon submission of a signed cellular phone package contract and PDA contract to the County Auditor's Office. The monthly allowance amount for each elected official will equal the total of these two submitted items subject to an overall technology stipend maximum established annually by the County General Services Department.
3. Elected officials are responsible for notifying the County Auditor's Office for any changes in the contracted amounts and providing supporting documentation of the changes.
4. Initial cellular phones and all PDA devices will be furnished by the County to the elected officials.

Local Meetings

1. Meal expenses and registration fees at conferences, seminars, etc. which are directly related to the effective performance of an Elected Official's or County employee's official duties shall be reimbursed by the County, if prior approval has been obtained from an Elected Official/Department Head.
2. Meal expenses for Elected Officials or County employees at meetings such as Advisory Boards, Citizen Boards, etc. will be reimbursed if the meetings are directly related to official County duties. Reasonable meal expenses for limited departmental or office planning retreats, budget retreats, etc. may be reimbursed. Claims for reimbursement of local meeting meal expenses shall list purpose of the meeting and summarize who was in attendance, i.e., external board, department head, program manager, etc. An Elected Official/Department Head signature on such meal claims for employees will denote that the employees were required to attend the meeting.
3. Mileage paid for attendance at approved local seminars/conferences and meetings shall be calculated to and from the place of employment and the meeting place; however, mileage will be paid from the official domicile provided the meeting is conducted outside of the established working hours.

In-House Meetings

1. Food and beverage expenses (as defined below) for County-wide training sessions will be reimbursed.
2. Food and beverage expenses (as defined below) for in-house meetings with the public, vendors or other local government officials are considered customary and reasonable and will be reimbursed. Claims for reimbursement of such expenses should list purpose of the meeting and summarize who was in attendance.
3. Allowable food and beverage expenses for the above in-house meetings consist of coffee, soft drinks, doughnuts, cookies, and items of a similar nature. In addition, reasonable meal expenses for in-house meetings conducted over the lunch hour are also allowable.

4. The purchase of food and beverages strictly for the use of County employees (i.e. for regular office use, regular staff meetings, etc.) is prohibited, other than meals allowed under item #3 of Other Provisions below

Other Food and Beverage Expenditures

1. Reasonable business meal expenses for an employee or elected official and an external contact will be reimbursed when purpose of the business meal is to gather or provide specific information from or to an external contact in furtherance of the interest of Polk County. Business meals should normally be restricted to management level employees and shall be approved by a department head/elected official. Claims for reimbursement of business meal expenses shall summarize who was in attendance and note the nature of the business discussed.
2. The Board of Supervisors or other Elected Officials may authorize limited reasonable public receptions for purposes such as open houses for office facilities, honoring new or departing elected officials, visiting dignitaries, etc. As is the case with all County expenditures however, any such receptions must be for the public benefit and not simply be 'employee parties' as discussed in an April 25, 1979 Iowa Attorney General's opinion. All claims for reimbursement of such expenses shall summarize the public purpose of the event (i.e. a public reception to honor departing public official Jane Doe).
3. A department head or elected official may authorize limited and reasonable meals to be provided on County premises for the convenience of the employer when employees are required to take a minimal meal break and remain on County premises to resume work as soon as possible. The use of this provision should be restricted to times of peak workload when work schedule flexibility, etc. is not feasible.
4. Employees scheduled for a work assignment outside Polk County boundaries may be reimbursed for meal costs.

Motivational and Goodwill Expenditures

1. Reasonable expenditures for plaques or items of a similar nature recognizing employee achievement or special merit may be reimbursed upon the request of a department head or elected official.
2. A retirement honorarium of up to \$50.00 will be allowed from departmental budgets to reimburse the cost of a plaque, cake, etc. honoring a retiring County employee who has completed a minimum of ten years of service with the County.
3. A floral remembrance on behalf of Polk County upon the death of a current County employee will be reimbursed from the We Care committee budget. All other floral items or items of a similar goodwill nature for ill employees, other local governmental officials, etc. are considered to be personal expenditures.

Interview and Moving Expenditures

Interview expenses for candidates not from Polk County, or adjoining counties will be reimbursed for department head or other specialized positions. Allowable interview expenditures for candidates include the following:

- Mileage and meals for candidates from the State of Iowa who are not from the counties specified.
- Transportation, meals and lodging for candidates from outside the State of Iowa.

Interview expenses will be charged to the respective department or elected office budget and are limited to the initial interview. All interview expenses must be in compliance with the Polk County Travel Policy. Exceptions to interview expenses must be approved by the County Administrator and the Human Resources Director.

Limited moving expenses for individuals moving to Polk County from outside the State of Iowa may be reimbursed for a department head position or other specialized positions. All moving expense reimbursement offers must be coordinated through the Human Resources Department and approved by the County Administrator.

Prohibited Expenditures

The following types of expenses will not be reimbursed (except as specifically authorized by the Business Promotional Expenditures Policy for the Iowa Events Center or other specific Board of Supervisors resolution):

- a. Entertainment
- b. Alcoholic beverages
- c. Retirement parties
- d. Charitable contributions.
- e. Common courtesy expenditures such as flowers or cards for ill County employees or local governmental officials.
- f. Expenses for employee's spouse, other family member or acquaintance.

Contact: Polk County Board of Supervisors
515-286-3120

Revised: 6/27/06

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Tuberculosis Control Plan Policy

Tuberculosis Control Plan For Polk County Employees

Justification/Purpose: To meet the requirements of the Department of Occupational Safety and Health for health care settings, correctional institutions and shelters to have a Tuberculosis (TB) Control Plan.

Applicability: All staff determined to be at higher risk for exposure to TB at the Polk County Health Department (PCHD); Polk County Jail, Polk County Community & Family Services' Juvenile Detention and Shelter Services; Polk County Medical Examiner; and any other Polk County employees who have been deemed by Polk County Risk Management, after consultation with the Human Resources Department.

Implementation:

Baseline Analysis for New Hires and Internal Transferring Employees

Upon the hiring of a new employee or an internal transfer of an employee from a low risk work setting to one of the above identified departments, said department will schedule an appointment for the employee with the Polk County Health Department within 24 hours of the employee start date for a medical history, assessment and screening relating to TB. The official medical record will be maintained at the PCHD.

New hires or transferring employees will receive a two-step TB skin test which involves the application and reading of two consecutive PPD tests, the second of which will be administered one to three weeks after the first.

If a new hire or transferring employee has been screened in the past twelve (12) months, said employee will be required to provide a copy of medical documentation for review and recording in the PCHD medical records.

New hires or transferring employees who have a positive TB skin test will be referred to the PCHD for a chest x-ray and thorough medical evaluation within 72 hours of the skin test reading. If active TB disease is excluded as a diagnosis by the PCHD clinician, said employee will be considered for Latent TB Infection therapy.

New hires or transferring employees with a history of a positive PPD skin test result are required to present proof that he/she is currently free of active disease. Such proof may include:

a) Physician documentation of a negative chest x-ray at the time the PPD was first read positive, accompanied by physician certification that the person is currently free of signs and symptoms of active TB. **OR**

b) In the absence of a negative chest X-ray at the time the PPD was first read as positive, a chest x-ray at any time prior to hire or transfer provided it is after the PPD was first noted to be positive accompanied by medical certification that the person is currently free of signs and symptoms of active TB.

c) Medical certification of completion of a course of prophylactic therapy for latent TB infection, or completion of therapy for active disease in the past and that the person currently remains symptom free.

New hires or transferring employees who cannot obtain the required documentation, will receive a medical evaluation, chest x-rays and possible prophylactic therapy through the PCHD.

On-going TB Screening

All departments specifically listed above and other employees as determined by Risk Management to be in a high risk position, who have a history of negative TB screening result, will receive annual TB skin test conducted by the PCHD. Only PCHD nurses are authorized to read the results. Results read by a non-PCHD nurse will be considered *invalid* and a repeat skin test will be required.

Employees who have a history of a positive TB skin test result, regardless of whether or not they completed treatment for latent TB infection, are exempt from tuberculosis skin test and rather will be evaluated on an annual basis by the PCHD for symptoms of TB disease. Annual chest x-rays are unnecessary for the follow-up evaluation of a latently infected person. Employees who are found to have symptoms suggestive of TB will not return to the workplace until the PCHD has excluded a diagnosis of active TB disease.

Employees who have a positive TB skin test during the annual screening will be referred to the PCHD clinic within 72 hours of the skin test interpretation for a medical evaluation, chest x-ray and possible prophylaxis. Employees who are found to have symptoms suggestive of TB will not return to the workplace until the PCHD has excluded a diagnosis of active TB disease. Employees who are asymptomatic will not return to the workplace until the PCHD has, on a case by case, basis excluded a diagnosis of active TB disease.

Employees who have a positive TB skin test and have been determined by the PCHD to have a diagnosis of suspect TB will receive further medical evaluation, x-rays, laboratories and prophylaxis as necessary. Employees with active TB will receive further medical evaluation, x-rays, laboratories, prophylaxis, and any appropriate specialist referrals as determined by the PCHD primary provider. Employees with a preliminary diagnosis of suspect or active TB will immediately leave the workplace and will not return to the workplace until a definitive diagnosis is made and a physician clearance for return to work.

TB skin test results, medical evaluation, x-rays, laboratories, and treatment will be maintained in the PCHD Electronic Medical Record.

Change in High Risk Environment

In conjunction with Risk Management, the PCHD, Polk County Sheriff and Community & Family Youth Services and Polk County Medical Examiner will periodically assess their department's risk status through evaluation of the characteristics of the populations served and conversion rates of employees. More frequent screenings could also be recommended based on substantially higher conversion rates or when evidence of ongoing transmission is detected.

Sources:

MMWR, July 7, 2006, Prevention and Control of Tuberculosis in Correction and Detention Facilities Recommendations from CDC and MMWR, December 30, 2005, Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health Care Settings.

POLK COUNTY BOARD OF SUPERVISORS

Chair

Author: Thenkels

Date: 1/11/10

Contact: Polk County Health Department
515-286-3759

Adopted: 11/1/11

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Vacant Positions Due to Extended Medical Leaves Policy

Purpose

To provide County services authorized by the Board of Supervisors while an employee is on an approved medical leave of absence.

Definition

Non-Permanent Vacant Position: A full-time position vacant as a result of an existing full-time employee being placed on an extended leave of absence.

Policy

All requests for leave of absence will be made on an individual basis. Requests for additional staff coverage must be submitted to the Human Resources Department with the appropriate employee request for Medical Leave of Absence, Disability Income or Worker's Compensation for review and approval.

Requests will be evaluated utilizing the following criteria:

1. Short-Term Leave of Absence: A Short-Term Leave of Absence is not to exceed a four month period. This type of vacancy will be evaluated by the Human Resources Department to determine utilization of the existing departmental staff or placement of a County pool employee.
2. Long-Term Leave of Absence: A Long-Term Leave of Absence is a period of more than four months.

Positions vacant for an extended period of time will be evaluated by the Human Resources Department to determine the necessity of providing additional staff to the department.

At the time a request is recommended to place an employee on medical leave of absence, the Human Resources Department will also recommend to the Board of Supervisors the necessary action to take in assuring that operational efficiency will be maintained.

If it is determined by the Human Resources Department that additional staff is needed to continue current level of service, the Human Resources Department will recommend that a new full-time position be created to perform the duties of the employee placed on an indefinite leave and/or not anticipated to return to work. The position occupied by the employee on leave of absence will be held open until he/she returns to work or terminates employment as specified in the union contract/employee manual.

If the employee does not return to work after the approved leave of absence has exhausted, the position previously held by the employee will be abolished.

If the employee does return to work, he/she will return to their former position. The next vacancy that arises in the classification in the department will be abolished. If no vacancy occurs within six months, the Human Resources Department shall conduct a job audit and will reassign the employee to an equivalent position unless the extra position in the department can be justified. All decisions will require approval by the Board of Supervisors based on recommendation from the Human Resources Department.

Contact: Human Resources
515-286-3200
Revised: 10/11/88

[Click for Resolution:](#)

Computer Procedures, Internet and E-mail Policies Executive Summary

Polk County has an applications-driven strategy that allows employees and departments to deliver service, define problems, and participate in technology solutions. The Information Technology (IT) Department endeavors to stay current with hardware and software configurations. IT will maintain the professional expertise necessary to sustain current County technology and incorporate service innovations in the business process.

Polk County continues to upgrade and improve computer systems in order to fulfill our mission and better serve Polk County citizens. This acceleration of our technological base, especially personal computers, has expanded and decentralized our employee user base. The power of the individual workstation and ability to communicate externally makes it appropriate for the County to have guidelines for the procurement and utilization of Information Technology resources.

Polk County

Computer Procedures - Including E-Mail and Internet Policies

I. PURPOSE:

This policy establishes guidelines and standards for the use of County-owned computing equipment, software, data, electronic mail and the Internet. These guidelines and standards must be understood by each End User. Further, revisions to these guidelines and standards may be expected as new products and services are introduced and as the understanding of information processing and Polk County business practice evolves.

II. DEFINITIONS:

Hardware Physical equipment used for processing or data communications

Software Programs, programming languages, instructions, or routines which are used to perform work on a computer

Data Information such as records, images, e-mail, or other textual material stored on or accessible through a computer whether that data resides on County computers or is accessible through the Internet or other on-line services through the use of County computers

III. COMPUTER PROCEDURES

The first and foremost rule for using these technologies is:

Don't say, do, write, view, or acquire anything that you wouldn't be proud to have everyone in the world learn about if the electronic records are laid bare.

1. Inappropriate Conduct

Conduct which violates the County's Computer Usage Policy with respect to computing resources includes:

- A. Copying County-owned or licensed software or data to another computer system for personal or external use;
- B. Attempting to, or modifying County-owned or licensed software without approval from IT;
- C. Attempting to, or accessing Operating System prompts or executing Operating System commands without approval from IT;
- D. Attempting to, or damaging or disrupting operation of computing equipment, data communications equipment, or data communications lines;
- E. Attempting to, or intentionally accessing or modifying data files, databases, directories, or software without proper authorization;
- F. Using County computing resources for purposes other than those intended, including:
 - 1 Allowing access by unauthorized persons
 - 2 Using County resources for external purposes or personal gain
 - 3 Transporting computers, data, data media, programs, documentation and/or equipment to another location unless authorized by IT;
- G. Invading the privacy of an individual by using electronic means to ascertain confidential information;

- H. Copying or altering another user's software or data without permission from that user;
- I. Knowingly accepting or using software or data which has been obtained by illegal means;
- J. Abusing or harassing another user through electronic means;
- K. Using the County's computing facilities in the commission of a crime;
- L. Using the County's computing resources to access, transmit, store, display or request obscene, pornographic, erotic, profane, racist, sexist or other offensive material (including messages, video, images or sound);
- M. Connecting or attaching equipment not purchased by Polk County to County-owned workstations and equipment without approval from IT; and
- N. Installing or using software not purchased by Polk County on County-owned workstations and equipment; or knowingly copying or using programs in contravention of copyright laws

2. Identification & Passwords

The County's computer systems require that each user have a unique identity, referred to as a "User-Id", protected by a "Password", to gain access to the system. This identity and password are used to represent an End User in various system activities, to provide access to certain software and data based on his/her duties and purpose for requiring such access. As such, this computer identity is another instrument of identification and its misuse constitutes forgery or misrepresentation.

Conduct which involves misuse of User-ID and Password includes:

- A. Allowing another individual to use the identity and password;
- B. Using another individual's computer identity and password even if the individual has neglected to safeguard his or her computer identity

3. Security Concerns

The placement of a computer system in a user area and the portability of the equipment and associated data media creates special user concerns, as outlined below:

- A. IT and the End Users must insure that all equipment is located in a secure area where the opportunities for theft are minimized.
- B. The End User must insure that only authorized personnel have access to the computer system and that only legitimate items of County business are processed thereon.
- C. Local data files must be safeguarded from unauthorized access.

The ability to load a large amount of data on an easily transported media makes it imperative that confidential data be carefully controlled and safeguarded.

4. Equipment Care, Maintenance, and Disposal

Users must insure that their computers are not exposed to extremes of heat or cold, dust, smoke, or other potential contaminants. Drinks and food should be kept away from the equipment or storage media. Diskettes are particularly sensitive to heat, water, or magnets; care should be exercised in handling them.

IT should be advised of any malfunctions arising with the equipment. IT will maintain a repository of computer system components and will supply user areas with available components as needed. Hardware and software components, should be transferred to IT for disposal.

5. Reporting Violations

Abuses of County computing resources should be brought to the attention of the appropriate departmental manager or office supervisor. If this is not possible, report such abuses to IT.

6. Sanctions

Anyone found to have violated any section of this policy will be subject to disciplinary action which could result in termination of system access, termination of employment and/or criminal prosecution, if appropriate. Disciplinary actions shall be determined by the appropriate Department Head/Elected Official.

IV. E-MAIL POLICIES

Polk County provides electronic mail to employees for business purposes. All electronic messages are the property of the County and therefore are not considered private unless otherwise protected by law. The County provides access to its electronic mail system to external users, such as consultants, temporary employees, special task force members and others as deemed necessary to conduct Polk County business. External users will only be given access to the County's electronic mail system if they agree to abide by all applicable rules.

1. Prohibited Use of E-Mail

The following uses of the County's Electronic Mail System are prohibited:

- I. To send County-wide mail not related to County business;
- II. To send copies of documents in violation of copyright laws;
- III. To compromise the integrity of Polk County and its business in any way;
- IV. To advertise personal business;
- V. To send messages containing offensive, abusive, threatening or other language inappropriate for the workplace;
- VI. To send messages that violate the County's Sexual Harassment Policy or any other Polk County Policy; and
- VII. To obtaining access to the files or communications of others for no substantial business purpose

2. Monitoring of Electronic Mail and Data

All electronic mail messages and related data are the property of Polk County. The County reserves the right to access messages and related data whenever there is a legitimate purpose to do so or under the following circumstances:

- A. Upon the discontinuation of County employment for any reason, a user's mail and data may be accessed for the purpose of saving those messages and files that pertain to County business. This access will be granted only upon written notification from the Department Head/Elected Official to IT. These files may be subject for transfer to another user if necessary to conduct County business;
- B. If required by law to do so;
- C. In the course of an audit or investigation triggered by indications of impropriety or as necessary to locate substantive information;
- D. When necessary to investigate a possible violation of a County policy or a breach of the security of the electronic mail system; and
- E. In the event there is reasonable suspicion that a user has committed or is committing a crime against the County or for which the County could be held liable

3. Disclosure of Mail Accessed by Monitoring

The contents of electronic mail created and sent for legitimate business purposes, such contents not being protected by the Privacy Act, are subject to Open Records Law and may be disclosed without the permission of the End User.

However, disclosure of the unprotected contents of a message not created or sent for business purposes, such disclosure being without the consent of the employee, shall be limited to investigative employees who have need for access to such information or in the course of an investigation. Any electronic mail message, except those protected by the Privacy Act, may be disclosed to law enforcement officials, if legally required. The Director of IT will review any such requests and provide the contents of electronic mail without the consent of End User, sender or recipient.

4. Retention of Electronic Mail Messages

Messages that have been moved/stored in the Trash Folder are automatically deleted after 7 days. All messages stored in a user's "mailbox" folders are retained at the discretion of the End User. These messages will be periodically purged to conserve disc space. IT recommends that messages retained after 180 days be archived and stored for the End User.

V. INTERNET POLICIES

Polk County provides Internet connectivity for authorized employees in selected facilities for business purposes.

Internet connectivity will be provided to those employees approved by their Department Head or Elected Official. These End Users will be granted the appropriate access and security setup after the End User Agreement, is signed.

IT will initiate and administer controls to the access, security, firewalls and all Internet applications.

1. Responsibilities

End User responsibilities are to:

- A. Secure their account and passwords. IT will presume that all use of the account and passwords to be by the authorized End User of that account and passwords. End Users must take reasonable precautions to prevent the account and passwords from becoming known to other persons;
- B. Ensure they are the sole user of the assigned Internet account;
- C. Take reasonable effort to use the Internet resources effectively and economically;
- D. Obey all instructions, written or verbal, given by IT in regard to Internet use;
- E. Advise IT or their supervisor/manager if information to which the End User is not entitled has been inadvertently obtained or sent, or they become aware of a breach of security; and
- F. Sign an End User Agreement

2. Unauthorized Use:

End Users are not permitted to use Internet resources to:

- A. Copy, disclose, transfer, examine, rename, change, or delete information or programs belonging to another End User or Polk County without the express permission of that End User or Polk County IT;
- B. Avoid any restrictions or security placed on the use of their Internet account;
- C. Knowingly store, transmit, or receive any material of an obscene, vulgar, slanderous, offensive, harassing, or illegal nature;
- D. Obtain unauthorized access to any computer facility or service;
- E. Send any material over the Internet that identifies the End User and/or portrays Polk County in an unprofessional manner; and
- F. Install software or download files without approval to purchase required licensing from IT.

VI. END USER AGREEMENT

1. Valid signatures are required for permission to use Polk County's Local Area Network, Wide Area Network and/or provided Internet accounts.
2. Permission is in effect for the duration of the End User's employment with Polk County or until the Office/Department Supervisor and/or IT rescinds permission.

By signing this agreement, I _____ (print name) agree to abide by the terms and conditions outlined in this Computer Usage Policy. I realize that the Computer Usage Policy is provided to improve access to information and enhance productivity throughout Polk County. I agree to use Polk County's equipment and facilities legally, efficiently and in a manner consistent with County purposes and with general standards of decency. I acknowledge that some material available through the Internet may be offensive, defamatory, graphic, inaccurate, illegal, or otherwise objectionable. However, I agree that Polk County shall not be held liable for any objectionable materials that I might encounter. By my signature, I agree that I hold sole responsibility for my conduct regarding network, e-mail and Internet accounts. I am also responsible for any materials that I access through the Internet, and for any consequences that I incur as a result of improper network use.

Employee Signature

IT Director

Office/Department Manager

Date

Contact: Information Technology
515-286-3757
Revised: 10/29/02

[Click for Resolution:](#)

Equal Employment Opportunity/Affirmative Action/ ADA Policy Statement

It is the official policy of Polk County to provide equal employment opportunity for all employees and applicants for employment with Polk County. This policy shall be in accordance with all applicable Equal Employment Opportunity/Affirmative Action statutes, directives and regulations of the federal government, State of Iowa and Polk County Board of Supervisors, including: the Equal Pay Act of 1963, as amended; Title VI and Title VII of the Civil Rights Act of 1964, as amended; the Age Discrimination in Employment Act of 1967, as amended; Sections 503 and 504 of the Rehabilitation Act of 1973, as amended; Title I and Title II of the Americans with Disabilities Act of 1990, as amended; the Genetic Information Nondiscrimination Act (GINA) of 2008; the Vietnam Era Readjustment Assistance Act of 1974, as amended; Presidential Executive Order 11246 of 1965, as amended; the Iowa Civil Rights Act; Iowa Code Chapter 216; and other applicable sections of the State of Iowa Codes, and Polk County policies.

Polk County shall not discriminate against or harass any employee or applicant for employment because of race, color, religion, creed, sex, sexual orientation, gender identity, age, national origin, genetic information, disability, or veteran or military status. Polk County shall take all actions necessary to ensure that the county's employment practices and other personnel actions are administered in an equitable and impartial manner. This includes, but is not limited to: terms and conditions of employment, advertising, recruitment, examinations, selection, promotions, demotions, transfers, classification decisions, layoffs, disciplinary action, termination, rates of pay and/or other forms of compensation, benefits, and selection for training.

Polk County shall commit the necessary time and resources, both financial and human, to achieve the goals of EEO/AA expressed in the EEO/AA plan. This shall include the evaluation of the performance of its management and supervisory personnel on the basis of their support in achieving EEO/AA objectives as well as other established criteria. Any employees of this County who do not comply with the EEO/AA policies and procedures as set forth in this statement and plan shall be subject to disciplinary action.

Polk County fully supports incorporation of non-discrimination and EEO/AA regulations into all contracts and taking steps to ensure subcontractors comply with all applicable EEO/AA statutes, directives and regulations of the federal government and State of Iowa codes.

The County Board Chair and ADA Coordinators (employment) and (program and service accessibility) will receive and review reports on the progress of the program. This will include monitoring all EEO/AA activities and reporting the effectiveness of the County's EEO/AA program.

Employees and/or applicants who believe they have been discriminated against or who wish to file a complaint can do so by contacting the Labor Relations Manager/ADA Coordinator for employment at (515) 286-3200, or the Director of General Services/ADA Coordinator for program and service accessibility at (515) 286-3215, or by writing to the Affirmative Action Program, Suite 390, Polk County Administration Building, 111 Court Avenue, Des Moines, Iowa 50309, without fear of reprisals.

Americans with Disabilities Act (ADA)

POLK COUNTY POLICY OF NON-DISCRIMINATION ON THE BASIS OF DISABILITY

Polk County Government does not discriminate on the basis of disability in the admission or access to, or treatment or employment in, its programs or activities. The Labor Relations Manager, 111 Court Avenue, Suite 390, Des Moines, Iowa 50309, (515) 286-3200 has been designated to coordinate compliance with the non-discrimination requirement contained in Section 35.107 of the Department of Justice Regulations. Information concerning the provisions of the Americans with Disabilities Act of 1990, and the rights thereunder, are available from the designated ADA Coordinator in the Human Resources Department.

Contact: Human Resources
515-286-3200

Revised: 12/22/09

[Click for Resolution:](#)

Workplace Violence Prevention Policy

PURPOSE

Polk County is committed to preventing workplace violence and to maintaining a safe work environment. Given the increasing violence in society in general, Polk County has adopted the following guidelines to deal with intimidation, harassment, or other threats of (or actual) violence that may occur during business hours or on its premises.

STATEMENT OF POLICY

It is the intent of Polk County to provide a safe workplace for all employees. Behavior that is physically or verbally threatening, either overtly or implicitly, as well as behavior that is coercive, intimidating, violent or harassing will not be condoned. Polk County is committed to working with its employees to maintain a work environment that is free of violence and intimidation.

SCOPE

This policy applies to all Polk County full time, part time, temporary employees, volunteers, contractors, or the public on County premises.

DEFINITIONS

For the purposes of this policy the following definitions apply:

Intimidation: Stalking or engaging in actions intended to coerce or induce duress. Such actions can include oral or written statements, gestures, or expressions, the use of profanity or other personally insulting remarks, whether made by telephone, voice mail, face-to-face, in writing, or via e-mail.

Physical Attack: Unwanted or hostile physical contact such as hitting, fighting, pushing shoving, or throwing objects.

Property Damage: Intentional or unintentional damage to property, which includes property owned by the County or employees.

Threat: Any behavior, physical or verbal, either overt or implicit, which communicates an intent to cause physical, emotional or mental harm. An expression constitutes a threat without regard to whether the party communicating the threat has the ability to carry it out and without regard to whether the expression is contingent, conditional, or future.

Weapons: As defined in Section 702.7 of the Code of Iowa, any dangerous instrument or device which is designed to inflict or capable of being used to inflict death or injury to a human being or animal. This includes, but is not limited to, any pistol, revolver, gun or other firearm, dagger, razor, stiletto, switchblade knife, or knife having a blade exceeding five (5) inches in length.

Workplace Violence: Intimidation, threats, or acts which adversely affect employee morale or employee/departmental performance or which results in physical, emotional and/or property damage.

WEAPONS

Polk County prohibits all employees from carrying handguns, firearms, explosives, or weapons of any kind onto County property. County property includes, without limitation, all County parking lots, building (leased and owned); grounds and vehicles used for County business. Employees who are off County property but performing a task for the County are covered by this policy.

This section shall not apply to County employees who are authorized to use weapons in the performance of their job responsibilities (such as sheriff), or for those who are authorized to use hazardous tools or devices as bona fide portions of their jobs.

PROHIBITED CONDUCT

Polk County will not tolerate any type of workplace violence committed by or against employees. Employees are prohibited from making threats or engaging in violent activities toward any employee of Polk County or any member of the general public while on duty for Polk County.

Although not all-inclusive, the following are examples of behaviors included in this policy:

- Causing physical injury to another person.
- Making threatening remarks in person, in writing, by telephone, or other means of communication.
- Aggressive or hostile behaviors that create a reasonable fear of injury to another person or subjects another individual to emotional distress.
- Intentionally damaging County property or property of another employee.
- Unauthorized possession of a weapon while on County property or while on County business.
- Committing acts motivated by, or related to any form of prohibited harassment or domestic violence.

PROCEDURE

If any employee observes, or has information regarding violent, threatening, intimidating, or other disruptive behavior, such as those listed above, by anyone on County premises, they are to report it immediately to a supervisor or manager. If you are uncertain about an observed behavior or situation, or have questions or concerns regarding workplace violence, advise your supervisor, or contact the Human Resources Department immediately. This does not eliminate the initial responsibility of every employee to work to resolve conflicts promptly and, if possible, without the need for external, or management intervention.

Employees can also help to prevent violence in the workplace by reporting any suspicious behavior that they observe that could contribute to violence in the workplace.

ENFORCEMENT

Threats, threatening conduct, or any other acts of aggression or violence in the workplace will not be tolerated. Any employee determined to have committed such acts or any employee who fails to report such acts committed by others shall be subject to disciplinary action, up to and including termination. Non-employees engaged in violent acts toward County employees will be reported to the proper authorities and may be banned from County property and fully prosecuted.

Contact: Human Resources
515-286-3200

Revised: 4/29/08

[Click for Resolution:](#)

Disposal of Obsolete, Surplus Equipment or Miscellaneous Items Policy

- I. All goods, materials, supplies and equipment that are surplus items, obsolete or unusable to any County Department may be disposed of by contacting General Services.
 - A. Policy:
 1. Disposal of County owned surplus property by barter or exchange method is not permissible.
 2. Disposal of County owned surplus property by gift, destruction or discard is not authorized unless approval is given by the Board of Supervisors.
 3. Lawful disposition may be made only by sale, at the County auction, or by transfer to another County department.
 4. The Purchasing Division shall be notified of any equipment transfer between County departments.
- II. A piece of worn equipment to be replaced by a new piece of equipment of the same kind is not surplus and can be used by a County department for trade-in purposes on a purchase requisition for new equipment.
- III. A County department housing surplus items to be disposed of, should submit a memo to General Services containing the following information:
 1. Title of Department, name of person submitting memo, telephone number.
 2. State as subject of memo – Request for Disposal of Surplus items.
 3. State a complete description of each item (i.e. –manufacturer, model, size, age and any other information which might be necessary to identify the item.) Include a description of the equipment's condition and point out any known problems.
 4. Indicate the County Tag Number, if any.
 5. Give the location of the item.
 6. Give the date the item must be removed from your department.
 7. The memo must be signed by the Department Head of designee.
- IV. Upon receipt of the memo authorizing General Services to dispose of the surplus item, the item will be removed from the Department and placed in storage, if the department needs the space immediately. Otherwise, the surplus item will remain in the department, to avoid double handling, until they can be disposed of properly.
- V. Any moving costs involved in removing surplus items will be paid for by the department. If County personnel are capable of removing the surplus item, there will be no charges incurred. Should special equipment be needed, the department shall be responsible for paying the rental.

- VI. Periodically, General Services will circulate a notice to all Departments notifying them that surplus items are available for transfer to any department. You may wish to call from time to time to check and see if equipment is available for your use.

- VII. If there are no County Departments interested in the available surplus items, they will either be stored or offered for sale at the annual County auction.

Contact: General Services
515-286-3215
Adopted: 5/9/78

[Click for Resolution:](#)

Disposal of Surplus Computer Equipment Policy

Purpose

The purpose of this policy is to allow donation of surplus, usable computer equipment to nonprofit agencies. This policy enables Polk County to recycle computer equipment no longer usable within County government providing a much needed service to those in need within Polk County.

Policy

- 1) It is the responsibility of the Information Technology Department to evaluate the life expectancy and usefulness of Polk County computer equipment.
- 2) The Information Technology Department shall determine when computer equipment is no longer usable within any department of Polk County government.
- 3) Excess computer equipment will not include computer software (other than Operating System software – OEM).
- 4) Once a determination has been reached by the Information Technology Department that Polk County has surplus computer equipment to be recycled, the Information Technology Department will notify the Board of Supervisors in writing. Such notification shall include the quantity, detailed description and condition of the excess surplus equipment.
- 5) The Polk County Board of Supervisors, by resolution, will make the determination of the award of recycled computer equipment to the specified nonprofit agency or agencies.
- 6) The Information Technology Department shall be responsible for arranging the transfer of the equipment to the nonprofit agency.
- 7) Any moving costs involved in the removal of the recycled computer equipment shall be paid for by the recipient.
- 8) If it is determined that there is not a nonprofit agency interested in obtaining the recycled computer equipment, the Board of Supervisors will notify the Information Technology Department and said equipment shall be forwarded to the General Services Department to sell at the annual County auction.

Contact: Information Technology
515-286-3757

Adopted: 3/19/02

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Polk County Community Development Grant Policy

Purpose

The Polk County Board of Supervisors wishes to provide grant opportunities to enhance community service projects and the quality of life within Polk County. The awards are made possible and funded by rental income received by Polk County from the operation of Prairie Meadows Racetrack and Casino.

Definition

Community Development Grants are funding opportunities for local service organizations seeking financial assistance in excess of \$5,000 for projects or programs. To be eligible for a Community Development Grant, the applicant organization must have an Internal Revenue Service designation as being non-profit entity. Any request for grant funds below \$5,000 should be made through the Community Betterment Grant process.

Procedures

The Polk County Board of Supervisors has established a formal application process to administer the Community Development Grants. These procedures are also designed to assure proper use of grant funds.

- 1) Application Process
 - a. Community Development Grant Application Instructions are provided in the packet.
 - b. Community Development Grant Application Form shall be completed and returned to the Grant Administrator.
 - c. Community Development Checklist Narrative contains additional requirements and information.
 - d. Grant Administrator may determine that a site visit is conducted to evaluate organizations project.
 - e. Written report provided to Board of Supervisors by Grant Administrator detailing grant request, application information and site visit results.
 - f. Consideration by Board of Supervisors.
- 2) Organizations receiving funding will be subject to a formal written grant agreement.
- 3) A Grant Reporting Form shall be submitted by the organization receiving a Community Development Grant within 90 days of the expenditure of funds. Audited financial statements will be required. Small organizations may submit unaudited statements.
- 4) Monitoring of grants shall be the responsibility of the Grant Administrator, Budget Officer, and the Polk County Auditor's Office.

Application Period

The Community Development Grant Program will be administered on a quarterly cycle beginning on July 1st each year. Grant applications will be accepted during the first month of the quarter. Site visits, reports and Board presentations will be completed during the second and third months of the quarter. Awards will be granted to successful applicants following approval by the Polk County Board of Supervisors at the end of the quarter.

Grant Calendar

Applications accepted: July, October, January and April

*Site visits and reports: August/September, November/December, February/March,
May/June*

*Grant Awards Determined by Board of Supervisor: September, December, March and
June*

Contact: Board of Supervisors
Community Grant Administrator
515-286-3301
Adopted: 8/17/2010

[Click for Resolution:](#)

Policy on Corporate Credit Cards

General Concept

As certain County expenditures such as travel basically require the use of a credit card to obtain goods or services, and as it is unfair to require County employees to use their own personal credit cards in such situations, Polk County will use corporate credit cards on a limited controlled basis as outlined below.

Applicability

These procedures apply to all persons, offices, departments and entities for which the Board of Supervisors is budgetarily responsible. The following entities are not subject to this policy unless they elect to be covered by the procedures:

County Assessor
Joint Disaster Services

Administrative Office

The County Auditor's Central Accounting Division will be responsible for administering the issuance and use of corporate credit cards.

Overall Structure

The County will obtain multi-purpose corporate credit cards such as MasterCard or Visa from one of the County's primary banks used by the County Treasurer's Office. The cards will be issued as follows:

1. 'Polk County' cards with the name of an Office or Department appearing as the user name on the cards. These cards will be used internally within each office to reserve and/or pay for airfare, hotel reservations, etc.
2. Cards with the name of an individual person imprinted on them (but with the County being liable for the cards) for the following individuals if requested by an Elected Official in writing to Central Accounting:

Elected Officials
Distribution of Cards

If requested in writing by an Elected Official or County Administrator, one 'Polk County' card will be issued to that office or department. At the direction of Central Accounting, one additional 'Polk County' card may be issued to department or office that have various locations, etc.

As noted above, cards with individual names on them will be distributed upon written request from an Elected Official.

Cards should not be requested for offices or individuals who do not have a need for a card as part of their job duties.

Allowable Expenditures

County corporate cards may be used for the following categories of expenditures:

1. Travel expenses limited to airfare, hotels and local transportation such as car rentals, except for the following provision. Cards imprinted with the name of an individual person may be used for travel meal expenses. However, cards imprinted with the name of an Office or department may not be used for travel meal expenses. In all instances, all travel expenses charged to County credit cards are required to be in conformity with the County's current Travel and Expense Reimbursement Policy.
2. Employee recruitment expenses limited to advertising and travel expenses.

Other categories of expenditures may be added at the discretion of Central Accounting for any types of expenditures that are not required to be purchased through the County purchase order process.

Unauthorized Expenditures

County corporate credit cards are not to be used for personal expenditures or for County expenditures not designated as allowable expenditures by Central Accounting. The use of County credit cards for unauthorized expenditures may result in additional restrictions or loss of card use for the person making such unauthorized expenditures. Additionally, unauthorized use by employees may result in discipline, up to and including discharge.

Sales Tax

All expenditures made using the County corporate credit cards should be tax exempt from Iowa sales tax. Employees responsible for informing vendors of the sales tax exemption. If requested by a vendor, a State of Iowa sales tax exemption certificate is available from Central Accounting.

Credit Card Statement Processing

All credit card monthly statements will be mailed directly to Central Accounting to facilitate timely processing and payment. Central Accounting will make a good faith effort to process all monthly statements within the credit card grace period so as to avoid having the County incur monthly finance charges.

Credit card users will turn in supporting receipts for credit card expenditures to their departmental accounts payable person, within 15 days after a travel event. Account coding and departmental approvals will be added to the receipts before the receipts are forwarded to Central Accounting. Expenditures will be charged to the budget of the Office or Department incurring the charges. The approved receipts will then be matched to the monthly credit card statements by Central Accounting and a combined payment voucher prepared using account coding furnished by departments.

Supporting original receipts are required for each credit card expenditure. An acceptable receipt must include vendor name, amount, date and itemized description of item or service purchased. If credit card receipt only includes total expenditure amount, supporting documentation such as an itemized invoice is required to be submitted with the credit card receipt. Failure to provide acceptable documentation may result in loss of credit card privileges and/or employee being asked to pay County for undocumented expenditures.

Credit Card Fees

Annual card charges, etc. will be paid from the non-departmental budget. However, any finance charges caused by lack of timeliness by an individual, office or department or card misuse may result in finance charges being charged back to that Office, department, or individual. In addition, continuing fees caused by an individual or department may result in additional restrictions or loss of card use.

Correspondence with Credit Card Company

Employees should immediately notify credit card company and Central Accounting of any lost or stolen card.

All other correspondence with credit card company, i.e. for disputed amounts, etc. should be coordinated through Central Accounting.

Contact: Auditor's Office
515-286-3418
Revised: 7/17/01

[Click for Resolution:](#)

Polk County Board of Supervisors Boards and Commissions Appointment Policy

Policy

The Polk County Board of Supervisors strives to appoint representatives to Boards and Commissions that will be representative of Polk County as a whole.

Definition

Bi-Partisan – Both major political parties are represented on the board or commission.

Gender Balanced – An equal representation of both men and women shall be represented on any board or commission.

Geographic Balance – Appointee must be a resident of Polk County and if provided by statute, each supervisor district shall have representation on any board or commission.

Good Faith Effort – A conscience effort will be made to meet this adopted policy.

Purpose

It is the responsibility of the Polk County Board of Supervisors to appoint representatives to boards and commissions. These boards and commissions should reflect the composition of Polk County. The Polk County Board of Supervisors will make a conscience and good faith effort to ensure that consideration of representation on the various boards and commissions is bi-partisan, gender balanced and representative of the overall county population in regard to the following criteria: age, race, economic and geographical. The Board of Supervisors will look toward bi-partisan representation ensuring both major political parties have at least some representation on each commission. The Board of Supervisors will, when possible, look for a gender balance on each commission. The target percentages of each of the preceding criteria will be based on the last decennial census for Polk County.

Procedures

- 1) An applicant information form shall be completed by each person interested in serving on a board or commission. The applicant information form shall require that the following information be completed: political party, gender, age, race, economic data and geographic location.
- 2) Appointed representatives to various boards and commissions shall have a background or interest conducive to the board or commission they represent.
- 3) Board and commission representatives shall be eligible for reappointment upon completion of their term if allowed by statute and/or the bylaws of the board or commission on which they serve.

Contact: Board of Supervisors
515-286-3120

Revised: 6/17/03

[Click for Resolution:](#)

Financial Policies of Polk County, Iowa

FINANCIAL POLICIES OF POLK COUNTY, IOWA

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- K. Accounting, Auditing and Financial Reporting and External Financial Relationships

A. Purpose

The purpose of Polk County's financial policies is to facilitate decision making by the Board of Supervisors, provide direction for staff and elected officials for handling the County's day to day financial business, and to serve as a foundation for long and short range planning. The implementation of sound fiscal policies enables County officials to protect the public interest, ensure public trust and confidence, and maintain the fiscal integrity of the County.

B. Operating Budget

1. Operating budgets will be prepared and approved by the Board for all statutory budget funds, internal service funds and enterprise funds prior to the beginning of the fiscal year.
2. The County will integrate goals and performance indicators into the annual budget process.
3. The County's budget documents will be presented in a manner that is easily understood by the public.
4. The Board will be presented with a two-year budget as part of the budget process as a trend analysis tool.
5. Assumptions in the multi-year budget will be clearly drawn out and use the most conservative available assumptions regarding revenue and expenses.
6. Budgets will be prepared in conformity with State Department of Management guidelines. The Board will be furnished additional analyses and schedules to facilitate informed discussion and approval of the budget.
7. The County will pay for all current expenditures with current revenues. The County will avoid budgets that balance current expenditures by strategies such as postponing expenditures into future years, accruing future years' revenues, or rolling over short-term debt.
8. In the event that the County determines it in the best interest of the County to lower its year end general fund balance, it shall determine the amount to be lowered, and shall spend that amount on one-time capital expenditures, and in no event shall those funds be spent toward ongoing annual operating expenses. Any expenditure under this section shall comply with Section I herein.
9. The County will continue its efforts to minimize the financial burden on the taxpayers. The goal will be to offset growth in expenditures with growth in revenues and other sources while avoiding a reduction in fund balance or an increase in tax levy rates. The County notes that Section I herein requires a minimum fund balance as a % of expenditures, and that over time, as expenditures grow, the fund balance must grow through annual operating surpluses in order to maintain the balance as a % of expenditures.
10. The budget will provide for adequate maintenance of the capital plant and equipment and for their orderly replacement. This will be accomplished through the use of annual earmarked capital outlay pools. The pools include but are not limited to office furniture, fixtures and equipment; computer equipment; building repairs; and motor vehicles.
11. The operating budgets approved by the Board will be adhered to unless it is in the best interest of the County to expend additional revenue received during the fiscal year or if unanticipated circumstances require a reallocation of planned expenditures or additional expenditures from reserves. All increases to the budget must be approved by the Board via periodic budget memorandums and semi-annual budget amendments.
12. The Board of Supervisors will be provided periodic financial reports comparing actual revenues and expenditures to budgeted amounts.
13. Every year, the County will update expenditure and revenue projections for the next five years. The projections will cover statutory budget funds, internal service funds and enterprise funds. Also, the projections will include estimated operating costs of future capital improvements that are included in the capital budget.

C. Capital Budget

1. The County will manage County-owned property proactively and strategically to promote the public interest and, whenever possible, to enhance the County's overall financial resources.
2. The County will make capital improvements in accordance with a 5 year capital improvement plan compiled annually by the General Services Department in conjunction with affected County offices and departments. The plan will serve as the basis for capital improvement appropriations and will be presented to the Board prior to the conclusion of budget deliberations for the upcoming fiscal year.
3. The County will utilize data from the five year capital improvement plan as part of the overall County budget process. Future operating costs associated with new capital improvements will be projected and included in the corresponding operating budget.
4. The County will identify the estimated costs and potential funding sources for each capital improvement before it receives final approval from the Board.
5. A separate capital improvement fund will be used to account for major capital improvements. Any unspent bond proceeds remaining in the fund at the completion of the improvement will be transferred to the related debt service fund. Any unspent other revenues remaining in the fund will remain in the fund for future related improvements or transferred back to the originating funds.
6. Interest earned on bond proceeds in capital improvement funds will be transferred to the related debt service fund at the completion of the improvement unless circumstances warrant an alternate use of the interest income.

D. Debt Management

1. Capital Borrowings. Long-term borrowing will not be considered to fund operational costs.
2. Credit Ratings. The County will seek to maintain the highest level of ratings in order to minimize the County's interest costs and maintain the County's access to credit.
3. Debt Capacity.
 - a. The County will use no more than 50% of its statutory debt limit. The remainder will be preserved to accommodate emergencies. No more than 20% of this scheduled general obligation debt will be issued on behalf of other jurisdictions.
 - b. The County's debt service levy will not exceed 20% of the total countywide levy.
 - c. Average annual payments of principal and interest on all long-term debt paid directly by the County from governmental funds will not exceed 10% of total revenue credited to governmental funds during the most recently completed fiscal year. Annual payments in any given year shall not exceed 15%.
4. Debt Structure.
 - a. When the County finances capital projects by issuing bonds or other forms of debt, it will pay back the bonds within a period not to exceed the expected useful life of the project, but in no case will the pay back period exceed 20 years.
 - b. The County will not exceed an average maturity of 15 years on general obligation bonds.
 - c. The term of revenue bonds shall not exceed the term of dedicated revenue streams.
 - d. The County will generally structure its debt to produce approximately level debt service over the life of the loan. Accelerated or deferred debt will be considered when A) such structures more closely match a dedicated revenue stream and B) such structures confer a demonstrated financial benefit to the County.

5. Refundings.

- a. The County will review its debt position biennially. Analysis will be performed on the cost/benefit of refunding debt and on the feasibility of calling outstanding maturities.
- b. Current refundings (bonds sold to refund bonds callable within 90 days of refunding issuance) will be considered with a demonstration of material present value savings.
- c. When possible, current refundings will be combined with new money issuances to reduce costs.
- d. Advance refundings will be considered when demonstrated present value savings is at least 3% of the refunded par amount. Other factors, such as option value and the length of time to the call date may also be considered. In the event that an advance refunding has material negative arbitrage in the escrow, the net present value savings shall be at least 5% of the refunded par amount.
- e. The County may consider refundings for non-economic reasons, such as the elimination of burdensome covenants or other management purposes. Such refundings need not meet the savings criteria identified above.

E. Debt Instruments

1. General Obligation Bonds.

- a. The County will issue general obligation bonds only for long-term capital improvements meeting the following criteria: A) Aggregate project costs in excess of \$300,000 B) County-wide benefit C) Expected utilization of 10 years or more and D) Projects need to be financed within two years.
- b. General obligation debt may be used to finance projects for special districts (water, sanitary sewer, drainage) or other local public bodies (e.g., hospitals, cities, aviation authorities) when the cost is to be repaid through fees, special assessments, and other dedicated sources. To the extent possible, multiple projects should be combined into one bond issue to reduce overall costs. When the County finances a project for a third party (for example, another city within the County), it shall receive a note or other instrument documenting the third party's obligation to pay, including appropriate legal opinion as to validity of the note received. Any third party issuing a note or other instrument that is not a general obligation note or instrument payable from a continuing annual levy of ad-valorem property taxes to the County shall fund a one-year's debt service payment reserve. The reserve shall be either held by a third party on behalf of the County or by the Issuer, in the County's sole discretion.

2. Revenue Bonds.

- a. The County may issue debt secured solely by a pledge of revenues when there is a revenue stream that A) is proven for the timely payment of the debt and B) can secure the debt at cost-effective interest rates.
- b. The County will not issue revenue bonds without undertaking an affordability analysis, which will include A) additional bonds test B) projected coverage analysis and C) cash balance impact.
- c. Revenue bonds will be accompanied by covenants designed to increase the marketability of the bonds and to ensure timely payment.

3. Inter-fund Loans. Inter-fund loans will be considered as the first option for interim financing.
4. Notes. Short-term debt, defined as having a maturity of no more than 2 years, is to be avoided if at all possible. Short term debt may be issued to provide interim financing in anticipation of long-term debt, where the board determines that there is a material financial advantage to the County of issuing said short term debt. Short term debt shall not mature longer than six months after the expected completion of the Project.
5. Capital Leases. Capital leases will generally be avoided unless the equipment has a short life and the capital lease addresses economic obsolescence concerns.
6. Purchase Contracts. The County will only consider utilizing long-term equipment purchase contracts when it is in the best financial interest of the County and the life expectancy for utilization is at least the length of the purchase contract.
7. Private Activity Bonds. The County may issue private activity bonds as defined by the Internal Revenue Code for eligible projects. This debt may be limited if it impacts the financial benefits of direct County debt.

F. Debt Issuance

1. The County will generally use competitive sale methods for debt issues. This process may be waived in cases where circumstances such as timing, market conditions, complexity, etc. call for negotiated sale of debt.
2. The County Administrator will recommend to the Board the optimum financing package for each major capital improvement. The Board will then adopt a formal authorization to proceed with the project financing before the debt marketing process is begun.
3. When possible, bid solicitations will be scheduled such that Board action for the award of said bid will occur within one business day of the bid solicitation.
4. Selection of an underwriter in a negotiated process shall, in most cases, be pursuant to a Request for Proposal.
5. Private placement may be considered for small issues (less than \$1 million) for which a competitive process is deemed ineffective or for larger issues financed through a unique loan program which offers more favorable terms than available through a competitive process (e.g., Iowa Finance Authority loan program)
6. The County will use bond proceeds within the time frame set forth by bond documents to avoid arbitrage. The County will maintain a reporting system to meet Internal Revenue Service arbitrage rebate regulations.
7. Fixed interest rates shall be used on County general obligation Bonds and Notes, including short term Notes, and on any utility revenue bonds or notes of the County. Variable interest rate structures will not be utilized by the County.
8. Derivative instruments (for example, interest rate swaps) shall not be utilized by the County on any general obligation bonds or notes, short term notes, or utility revenue bonds or notes. The County may enter into a forward-delivery agreement for purpose of selling a bond in the future at an interest rate agreed to at the time of issuance, so long as the liability to the County is limited to the delivery of the bond or note at the specified date and at the specified interest rate.

G. Revenues

1. The County will diversify its revenue sources where possible as a protection against short-run fluctuations in any one revenue source.
2. The County will take steps necessary to preserve and increase its tax base. Proposals to remove property from the County's tax base via TIF districts and annexations will be carefully reviewed for the long-term financial impact on other taxpayers and the public purpose of the proposals. The County may resist efforts to remove property from the tax base.
3. The County will establish all user charges and fees at a level not to exceed the cost of providing the services, while remaining competitive with similar services offered by other jurisdictions. The County will periodically recalculate the full costs of activities supported by user fees to identify the impact of inflation and other cost increases.
4. Revenues of a limited or indefinite term will be used for one-time operating expenditures or capital projects to ensure that no ongoing service or program is jeopardized when such revenues are reduced or discontinued.
5. The County will apply for grants that are consistent with the County's business plan. All grant applications shall be reviewed for cash match requirements, potential impact on the operating budget and impact on workload of current staff. Departments shall seek Board approval for any grants in excess of \$100,000 prior to submission of a grant application, except for renewal applications for existing grants. Departments shall inform the County Administrator of grant applications for new grants between \$10,000 and \$100,000. Elected officials shall provide written communication to the Board of grant applications in excess of \$100,000. All grant agreements and contracts are required to be approved by Board resolution, as are any grant amendments with fiscal impact.
6. The County will comply with all grant conditions and provisions. In addition grants will be administered in compliance with all applicable state and federal laws, rules, ordinances, regulations and orders as well as all applicable internal County policies and procedures.
7. All positions funded by grant revenue will be identified and tracked in County personnel records. Employees in grant-funded positions will be notified prior to accepting the position that the position may be eliminated when the grant funds expire.
8. For Federal, State and private grants the County will apply for indirect cost reimbursement at the discretion of the County only when doing so increases the grant dollars received or utilized by the County. Recovered indirect cost revenue will be credited as revenue of the office or department managing the grant.
9. The County will include indirect costs in cost analyses used to calculate cost per diem rates or other cost recovery mechanisms. Examples of such cost recovery processes are the Local Administration Expense process for the Department of Human Services and Care of Federal Prisoners reimbursements.
10. All Enterprise and Internal Service Funds may be assessed an indirect cost charge as calculated by the County's indirect cost consultant. The resulting indirect cost revenue will be credited to the County general fund.
11. The County encourages gifts, donations and bequests from the community to provide for services, etc. that might not otherwise be funded. The County will earmark such revenues in an agency fund to ensure that the donated dollars are expended for the intended purposes.

12. Interest earnings on investments are normally credited to the County general fund in conformity with Iowa law. However, the County has elected to allocate applicable interest earnings to the Conservation Land Acquisition Trust Fund, the Donated Funds portion of the Trust and Agency Fund and all Enterprise and Internal Service Funds. Additionally, earnings and interest from investment of bond proceeds shall be credited to the debt service fund and used to pay the principal or interest as the principal or interest come due.

H. Expenditures

1. All County expenditures will be for a public purpose for the benefit of the citizens of Polk County.
2. Budgeted funds will be spent in conformity with the current annual budget subject to the following limitations:

Elected Offices:

Overall expenditures budget may not be exceeded

Encouraged to follow other expenditure budget policies as outlined below for other departments

Other Departments:

Budget for authorized positions may not be used for other expenditures

Budget by activity (as defined by the Uniform Chart of Accounts for Iowa Counties) may not be exceeded

Overall fund level expenditures budget may not be exceeded

Exceptions to the above limitations must be approved by Board of Supervisors on a Memorandum of Budget Actions

3. Expenditure budgets will be monitored throughout the fiscal year by department heads, elected officials, Board staff and Central Accounting staff.
4. Donated dollars earmarked in the Donated Funds portion of the Trust and Agency Fund will only be expended for the intent for which they were given. Any unspent donated funds at the end of a fiscal year will be carried forward to be expended in a subsequent year.
5. High priority will be given to expenditures that will reduce future operating costs, such as increased utilization of technology and equipment.
6. Expenditures will be made in conformity with the following policies as most recently adopted by the Board:

Procurement Manual

Travel and Expense Reimbursement

Corporate Credit Cards

Financial Controls for Vendor Reimbursements

Community Development Grants

Economic Development

I. Reserves

- The County will maintain cash reserves within the following targets to ensure adequate cash flow, avoid the need for short-term borrowing and minimize the tax levy rate:

Fund #	Fund Name	Targeted Ending Cash Balance
1	General Basic	Within the range of 20-25% of combined expenditures + Secondary Roads transfer – bond funded expense
2	General Supplemental	Within the range of 20-25% of combined General Supplemental + Self-Insurance Reserve fund expenditures
3	Self-Insurance Reserve	\$0
4	Community Betterment	\$0
5	Economic Development	= Revolving loan fund balances that have not been re-invested
10	MH/MR/DD	Within the range of 10-15% of expenditures; may be adjusted as needed to maximize state funding
11	Rural Basic	Within the range of 20-25% of combined expenditures + Secondary Roads transfer
12	Rural Supplemental	20-25% of expenditures
13-15, 18, 21, 25, 26	Various funds managed by elected officials and Conservation	>= \$0
20	Secondary Roads	\$0
24	Fire protection	= June tax collections
28	Contingency Reserve	>=\$5,000,000 + accumulated reserve for 27 th pay period + inflation factor
43-45	Debt Service – Specific Projects	>= \$0
46	Debt Service - Combined	\$300,000
50-58	Capital Projects	Balance of unspent bond proceeds + capital improvement reserve

Any unassigned cash balance in the above funds that exceeds the targeted levels may be transferred for the following uses:

- Enhance a reserve for future capital expenditures
 - Offset recurring expenditures that are bonded for on a regular basis
 - Enhance reserves for risk management, employee insurance, etc.
- The County will maintain a Self-Insurance Reserve fund. This fund will be used for the payment of claims that are not covered by purchased insurance policies. Other risk-management related expenditures may be made from this fund to the extent they are not paid from other sources. The Risk Management Committee will annually review fund activity and recommend an appropriate reserve level, which reserve level will approximate 18 months of claims history.
 - The County will maintain an Employee Insurance Internal Service Reserve to account for insurance premiums and pay claims, premiums, and administrative fees. The reserve level will reflect a reserve for incurred but not yet paid claims as computed by the County's actuarial firm plus a claims fluctuation reserve equal to two to three months of paid claims.

4. The County will maintain a Contingency Reserve Fund for large unanticipated shortages in other funds. This reserve will provide financial security for meeting other county obligations in the event of temporary shortfalls in other funds. The current targeted fund balance will be \$5 million. This target may be adjusted upward to provide additional security during economic downturn.
5. The County will annually contribute to a 27th pay period reserve in the Contingency Reserve Fund to fund the extra pay period that occurs on a cash-basis every eleven years. The amount of annual contribution shall be at least equal to the amount of cash-basis savings that is realized from paying out 26 pay periods when actual days worked equate to more than 26 pay periods. County Endowment gaming taxes up to an amount equal to the 27th payday factor will be committed by the Board of Supervisors as the primary inflow for the Contingency Reserve Fund for the 27th pay period reserve.
6. In addition to using Contingency Reserve funds for the 27th pay period, draws on the reserves may be made 1) whenever revenues for any given year are at least \$1,000,000 less than needed to maintain current operational levels for budget stability, provided, however, that if such draw occurs, the County shall consider a plan to reduce future budget imbalances; 2) to phase-in more conservative budgeting practices such as early retirement programs, staffing reductions through attrition, external contract renegotiations, or bond refinancing; 3) to loan Reserve proceeds to another County fund with the expectation that the loan will be repaid within three years; or 4) to settle legal claims that exceed funds available in the County's self-insurance reserve.
7. If draws are made on the Contingency Reserve fund, the County will replenish the reserve to its minimum balance at the earliest possible fiscal opportunity. The County may use proceeds from its casino lease to replenish the Contingency Reserve fund.

J. Investment Practices

1. The County will invest in accordance with the County Investment Policy most recently adopted by the Board of Supervisors.

K. Accounting, Auditing and Financial Reporting and External Financial Relationships

1. The accounting system will maintain records on a basis consistent with accepted standards for local government accounting. The County's accounts and reporting will be consistent with State law and rules of the State of Iowa County Finance Committee.
2. Regular monthly financial reports prepared on the budgeted cash basis of accounting will be presented to management and the Board.
3. The County will annually prepare a Comprehensive Annual Financial Report (CAFR) in conformity with generally accepted accounting principles. The preparation of the CAFR has been delegated to the County Auditor's Central Accounting Division in conjunction with Board staff. Central Accounting is responsible for the selection and application of appropriate accounting principles and calculation of appropriate estimates and assumptions as disclosed in the Notes to the Financial Statements section of the CAFR. The CAFR will be prepared in compliance with the established criteria for the Government Finance Officers Association's Certificate of Achievement for Excellence in Financial Reporting and will be submitted to that award program by December 31st of each year. The CAFR shall include all necessary tables or exhibits for the County to meet its continuing disclosure obligation pursuant to its outstanding bonds.
4. An independent public accounting firm will perform an annual audit and will publicly issue a financial opinion.

5. The County's relationship with its independent accounting firm, indirect cost consultant firm, and actuarial firms will be reviewed every three years to determine if level of service is satisfactory or if a Request for Proposals should be issued.
6. The County will formally review this set of financial policies at least once every three years.

Contact: Auditor's Office
515-286-3418
Adopted: 11/25/08
Revised: 6/12/2012

[Click for Resolution:](#)

HIPAA Security Policies and Procedures

Polk County Security Policies and Procedures For the Health Insurance and Portability Act, of 1996 HIPAA

COUNTIES MUST COMPLY WITH THIS REGULATION BY APRIL 21, 2005.

Effective Date: 4/21/2005

Security Officer: Anthony Jefferson
Polk County
IT

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Compliance Dates HIPAA SECURITY

Compliance Dates for the Initial implementation of the Security Standards §164.318

A health plan that is not a small health plan must comply with the applicable requirements no later than April 21, 2005.

A small health plan must comply with the applicable requirements no later than April 21, 2006

A health care clearinghouse must comply with the applicable requirements no later than April 21, 2005.

A County that is a covered health care provider must comply with the applicable requirements no later than April 21, 2005.

Documentation Requirements

Policies and Procedures §164.316(a)

The County will implement reasonable and appropriate policies and procedures to comply with the standards, implementation specifications or other requirements of the HIPAA regulation. This standard is not to be construed to permit or excuse an action that violates any other standard, implementation specification or other requirements of the HIPAA regulation.

The County may change its policies and procedures at any time, provided that the changes are documented and are implemented in accordance with the HIPAA regulation.

Documentation §164.316(b)(1)

The County will maintain the policies and procedures implemented to comply with the HIPAA regulation (which may be electronic form); and if an action, activity or assessment is required by the HIPAA regulation to be documented, maintain a written (which may be electronic) record of the action, activity or assessment.

Time limit (Required) §164.316(b)(2)(i)

The County will retain the documentation for 6 years from the date of its creation or the date when it last was in effect, whichever is later.

Availability (Required) §164.316(b)(2)(ii)

The County will make documentation available to those persons responsible for implementing the procedures to which the documentation pertains.

Updates (Required) §164.316(b)(2)(iii)

The County will review documentation periodically, and update as needed, in response to environmental or operational changes affecting the security of the electronic protected health information (PHI).

General Requirements

General Requirements 164.306(a)

The County will do the following:

1. Ensure the confidentiality, integrity and the availability of all electronic protected health information (PHI) the County 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.
4. Ensure compliance with the security standards identified in the HIPAA regulations.

Flexibility 164-306(b)

1. The County may use any security measures that allow the County to reasonably and appropriately implement the standards and implementation specifications as specified in the security standards of HIPAA.
2. In deciding which security measures to use, the County will take into account the following factors:
 - a. The size, complexity and capabilities of the County.
 - b. The County's technical infrastructure, hardware and software security capabilities.
 - c. The Costs of security measures.
 - d. The probability and criticality of potential risks to protected health information.

Standards.164.306(c)

The County will comply with the standards of the HIPAA security regulations with respect to all PHI.

Implementation Specifications 164.306(d)

Implementation specifications are either required or addressable. When "required" appears in parentheses after the title of an implementation specification the County will implement the implementation specification. When "addressable" appears in parentheses after the title of an implementation specification the County will assess whether each implementation specification is a reasonable and appropriate safeguard in its environment, when analyzed with reference to the likely contribution to protecting the County's electronic PHI.

If the implementation specification is reasonable and appropriate the County will implement the specification. If the implementation specification is not reasonable and appropriate the County will:

- a. document why it would not be reasonable and appropriate, to implement the implementation specification; and
- b. the County will implement an equivalent alternative measure if reasonable and appropriate.

Maintenance 164.306(e)

The County will review and modify security measures implemented to comply with the HIPAA regulation to continue reasonable and appropriate protection of electronic PHI.

Administrative Safeguards

Security Management Process (Required) §164.308(1)(i)

The County will implement policies and procedures to prevent, detect, contain and correct security violations.

Risk Analysis (Required) §164.308(1)(ii)(A)

The County will conduct an accurate and thorough assessment of the potential risks and vulnerabilities to the confidentiality, integrity and availability of electronic protected health information (PHI) held by the County.

Risk Management (Required) §164.308(1)(ii)(B)

The County will implement security measures sufficient to reduce risks and vulnerabilities to a reasonable and appropriate level.

Sanction Policy (Required) §164.308(1)(ii)(C)

The County will apply appropriate sanctions against workforce members who fail to comply with the security policies and procedures of the County.

Information System Activity Review (Required) §164.308(1)(ii)(D)

The County will implement procedures to regularly review records of information activity, such as audit logs, access reports and security incident tracking reports.

Assigned Security Responsibility (Required) §164.308(2)

The County will identify the security official who is responsible for the development and implementation of the policies and procedures.

Workforce Security (Required) §164.308(3)(i)

The County will implement policies and procedures to ensure all members of the workforce have appropriate access to electronic PHI and to prevent those workforce members who do not access from obtaining access to electronic PHI.

Implementation Specifications §164.308(3)(ii)

1. Authorization and/or Supervision(Addressable)
The County will implement procedures for the authorization and/or supervision of workforce members who work with electronic PHI or in locations where it might be accessed.
2. Workforce Clearance Procedure (Addressable)
The County will implement procedures to determine that the access of a workforce member to electronic PHI is appropriate.
3. Termination Procedures (Addressable)
The County will implement procedures for terminating access to electronic PHI when the employment of a workforce member ends.

Information Access Management (Required) §164.308(4)(i)

The County will implement policies and procedures for authorizing access to electronic PHI that are consistent with the HIPAA regulation.

Implementation Specifications §164.308(4)(ii)(A)

1. Health Care Clearinghouse Functions. (Required)
If the County is a health care clearinghouse that is part of a larger organization, the County clearinghouse must implement policies and procedures that protect the electronic PHI of the County clearinghouse from unauthorized access by the larger organization.
2. Access Authorization. (Addressable)
The County will implement policies and procedures for granting access to electronic PHI, for example through access to a workstation, transaction, program, process or other mechanism.
3. Access Establishment and Modification. (Addressable)
The County will implement policies and procedures that, based upon the County's access authorization policies, establish, document, review and modify a user's right of access to a workstation, transaction, program, or process.

Security Awareness and Training §164.308(5)(i)

The County will implement a security awareness and training program for all members of its workforce including management.

Implementation Specifications §164.308(5)(ii)

1. The County will implement:
 - a. Security Reminders. (Addressable)
Periodic security updates.
 - b. Protection from Malicious Software. (Addressable)
Procedures for guarding against, detecting and reporting malicious software.
 - c. Log-In Monitoring. (Addressable)
Procedures for monitoring log-in attempts and reporting discrepancies.
 - d. Password Management. (Addressable)
Procedures for creating, changing and safeguarding passwords.

Security Incident Procedures 164.308(6)(i)

The County will implement policies and procedures to address security incidents.

Response and Reporting (Required) §164.308(6)(ii)

The County will identify and respond to suspected or known security incidents; mitigate, to the extent practicable, harmful effects of security incidents that are known to the County; and document security incidents and their outcomes.

Contingency Plan §164.308(7)(i)

The County will establish (and implement as needed) policies and procedures for responding to an emergency or other occurrence (for example, fire, vandalism, system failure, and natural disaster) that damages systems that contain electronic PHI.

Implementation Specifications §164.308(7)(ii)

1. Data Backup Plan. (Required)
The County will establish and implement procedures to create and maintain retrievable exact copies of electronic PHI.
2. Disaster Recovery Plan. (Required)
The County will establish (and implement as needed) procedures to restore any loss of data.
3. Emergency Mode Operation Plan. (Required)

- The County will establish (and implement as needed) procedures to enable continuation of critical business processes for protection of the security of electronic PHI while operating in emergency mode.
4. Testing and Revision Procedures. (Addressable)
The County will implement procedures for periodic testing and revision of contingency plans.
 5. Applications and Data Criticality Analysis. (Addressable)
The County will assess the relative criticality of specific applications and data in support of other contingency plan components.

Evaluation (Required) §164.308(8)

Perform a periodic technical and non-technical evaluation, based initially upon the standards implemented under this rule and subsequently, in response to environmental or operational changes affecting the security of electronic PHI, that establishes the extent to which the County's security policies and procedures meet the requirements of the HIPAA regulation.

Business Associate Contracts and other Arrangements (Required) §164.308(8)(b)(1)

A County, in accordance with §164.306, may permit a Business Associate to create, receive, maintain or transmit electronic PHI on the County's behalf only if the County obtains satisfactory assurances, in accordance with §164.314(a) that the Business Associate will appropriately safeguard the information.

This standard does not apply with respect to:

- a. The transmission by the County of electronic PHI to a health care provider concerning the treatment of an individual.
- b. The transmission of electronic PHI by a group health plan or an HMO or health insurance issuer on behalf of a group health plan to a plan sponsor, to the extent that the requirements of §164.314(b) and §164.504(f) apply and are met; or
- c. The transmission of electronic PHI from or to other agencies providing the services at §164.502(e)(1)(ii)(C), when the County is a health plan that is a government program providing public benefits, if the requirements of §164.502(e)(1)(ii)(C) are met.

If the County violates the satisfactory assurances it provided as business associate of another covered entity the County will be in noncompliance with the standards, implementation specifications, and requirements of the HIPAA regulation.

Written Contract or Other Arrangement (Required) §164.308(8)(4)

The County will document the satisfactory assurances through a written contract or other arrangement with the business associate.

Physical Safeguards

County Access Controls §164.310(a)(1)

The County will implement policies and procedures to limit physical access to its electronic information systems and the facility or facilities in which they are housed, while ensuring that properly authorized access is allowed.

Contingency operations (Addressable) §164.310(a)(2)(i)

The County will establish (and implement as needed) procedures that allow departmental access in support of restoration of lost data under the disaster recovery plan and emergency mode operations plan in the event of an emergency.

County Security Plan (Addressable) §164.310(a)(2)(ii)

The County will implement policies and procedures to safeguard departments and the equipment therein from unauthorized physical access, tampering and theft.

Access Control and Validation Procedures (Addressable) §164.310(a)(2)(iii)

The County will implement procedures to control and validate a person's access to facilities based on their role or function, including visitor control, and control of access to software programs for testing and revision.

Maintenance Records (Addressable) §164.310(a)(2)(iv)

The County will implement policies and procedures to document repairs and modifications to the physical components of a department which are related to security (for example, hardware, walls, doors, and locks).

Workstation-Use §164.310(b)

The County will implement policies and procedures that specify the proper functions to be performed, the manner in which those functions are to be performed, and the physical attributes of the surroundings of a specific workstation or class of workstation that can access electronic protected health information (PHI).

Workstation Security §164.310(c)

The County will implement physical safeguards for all workstations that access electronic PHI, to restrict access to authorized users.

Device and Media Controls §164.310(d)(i)

The County will implement policies and procedures that govern the receipt and removal of hardware and electronic media that contain electronic PHI into and out of a department, and the movement of these items with the department.

Disposal (Required) §164.310(d)(2)(i)

The County will implement policies and procedures to address the final disposition of electronic PHI, and/or the hardware or electronic media on which it is stored.

Media re-use (Required) §164.310(d)(2)(ii)

The County will implement procedures for removal of electronic PHI from electronic media before the media are made available for re-use.

Accountability (Addressable) §164.310(d)(2)(iii)

The County will maintain a record of the movements, hardware and electronic media and any person responsible therefore.

Data Backup and Storage (Addressable) §164.310(d)(2)(iv)

The County will create a retrievable, exact copy of electronic PHI, when needed, before movement of equipment.

Technical Safeguards

Access Control 164.312(a)(1)

The County will implement technical policies and procedures for electronic information systems that maintain electronic protected health information (PHI) to allow access only to those persons or software programs that have been granted access rights as specified in §164.308(a)(4).

Unique User Identification (Required) §164.312(a)(2)(i)

The County will assign a unique name and/or number for identifying and tracking user identity.

Emergency Access Procedure (Required) §164.312(a)(2)(ii)

The County will establish (and implement needed) procedures for obtaining necessary electronic PHI during an emergency.

Automatic Logoff (Addressable) §164.312(a)(2)(iii)

The County will implement electronic procedures that terminate an electronic session after predetermined time of inactivity.

Encryption and Decryption (Addressable) §164.312(a)(2)(iv)

The County will implement a mechanism to encrypt and decrypt electronic PHI.

Audit Controls §164.312(b)

The County will implement hardware, software, and/or procedural mechanisms that record and examine activity in information systems that contain or use electronic PHI.

Integrity §164.312(c)(1)

The County will implement policies and procedures to protect electronic PHI from improper alteration or destruction.

Mechanism to Authenticate Electronic Protected Health Information (Addressable) §164.312(c)(2)

The County will implement electronic mechanisms to corroborate that electronic PHI has not been altered or destroyed in an unauthorized manner.

Person and Entity Authentication §164.312(d)

The County will implement procedures to verify that a person or entity seeking access to electronic PHI is the one claimed.

Transmission Security §164.312(e)(1)

The County will implement technical security measures to guard against unauthorized access to electronic PHI that is being transmitted over an electronic communications network.

Integrity controls (Addressable) §164.312(e)(2)(i) .

The County will implement security measures to ensure that electronically transmitted electronic PHI is not improperly modified without detection until disposed of.

Encryption (Addressable) §164.312(e)(2)(ii)

The County will implement a mechanism to encrypt electronic PHI whenever deemed appropriate.

General Security Compliance Policy **HIPAA Security Policy #1**

Purpose

Polk County is committed to protecting Personal Health Information in accordance with those standards established by the Department of Health and Human Services under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). This Policy covers Polk County's approach to compliance with the Security Regulations. Polk County will:

1. Ensure the confidentiality, integrity and availability of all PHI Polk County 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
4. Ensure compliance with the Security Regulations by its Workforce.

Policy

1) A Hybrid Entity

Polk County is a hybrid entity under HIPAA with both covered and non-covered departments. Polk County hereby designates its HIPAA covered departments as health care components for purposes of the Security Regulations. Polk County's health care components are listed in Exhibit A.

2) Security Personnel and Implementation

Polk County has designated a Security Officer with overall responsibility for the development and implementation of policies for the Security Regulations. The HIPAA Security Officer is Anthony Jefferson in the Information Technology division of General Services. All impacted County departments and offices have acting HIPAA Security Liaisons. The HIPAA Security Liaison is responsible for ensuring that the department:

1. Complies with the HIPAA Security Policies.
2. Maintains the confidentiality of all PHI they are responsible for.

Polk County will implement reasonable and appropriate security measures to comply with security in the Security Regulations. To determine what is reasonable and appropriate, Polk County will take in to account its size, capabilities, technical infrastructure, security capabilities and the costs of the security measures against the potential risks to PHI disclosure.

3) Security Complaints

The Security Officer is responsible for facilitating a process for individuals to file a complaint regarding the handling of PHI by a Polk County Workforce member. The Security Officer is responsible for ensuring that the complaint and its disposition are appropriately documented and handled.

4) Sanctions and Non-Retaliation

Polk County will ensure the appropriate discipline and sanction for employees and any other Workforce members that violate the Security Policies. Polk County will refrain from intimidating or retaliating against any person for exercising his or her rights under the Security Regulations for reporting any concern, issue or practice that such person believes to be in violation of the Security Regulations. Polk County will not require any persons to inappropriately waive any rights to file a complaint with the Department of Health and Human Services.

5) Security Policies and Procedures

The Polk County HIPAA Security Policies and Security Procedures are designed to ensure compliance with any Security Regulations. Such Security Policies and Security Procedures shall be kept current and in compliance with any changes in the law, regulations or practices of Polk County's covered entity component parts in accordance with HIPAA Security Policy #9 - Periodic Evaluation of Security Policies and Procedures.

6) Responsibility of All Employees within a HIPAA Covered Department.

Every member of the Polk County Workforce within a HIPAA covered department of Polk County is responsible for being aware of, and complying with, the Security Policies and Security Procedures.

Violations

Any individual, found to have violated this policy, may be subject to disciplinary action up to and including termination of employment.

EXHIBIT A COMPONENT PARTS

1. Health Care Provider Component Parts

Polk County Health Services
Polk County Health Department
Polk County Attorneys Office
Polk County Sheriff's Office
Polk County Auditor's Office
Polk County Community, Family and Youth Services Department
Polk County General Services

Security Management Policy HIPAA Security Policy #2

Purpose

Polk County is committed to protecting Personal Health Information in accordance with those standards established by the Department of Health and Human Services under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Polk County has adopted this policy to ensure that security violations are prevented, detected, contained and corrected in accordance with the Security Regulations. This Policy covers risk analysis, the security measures and safeguards, and information systems review for PHI.

Policy

1. Risk Analysis

- a. Polk County acknowledges the potential vulnerabilities associated with storing PHI and transmitting PHI inside and outside the county.
- b. Polk County will assess such potential vulnerabilities through the following actions:
 - Identify and document all PHI repositories
 - Identify the potential vulnerabilities to each repository
- c. Polk County will update its PHI inventory annually.
- d. Each repository will be analyzed for any potential vulnerability to the integrity, confidentiality, and availability of contained PHI.
- e. Polk County will reassess the potential risks and vulnerabilities to the integrity, confidentiality, and availability of each repository and the level of risk assigned to each repository at least annually.

2. Risk Management

- a. Polk County will implement security measures and safeguards that are reasonable and appropriate for each PHI repository sufficient to reduce risks and vulnerabilities. Polk County will meet the following minimum guideline in implementing security measures and safeguards:
 - Repositories will be appropriately safeguarded by normal best-practice security measures in place such as user accounts, passwords, security groups and perimeter firewalls.
- b. Polk County will reassess the potential risks and vulnerabilities of PHI repositories as part of an annual review and update the security measures and safeguards.
- c. The security measures and safeguards implemented for each PHI repository will be documented by the Security Officer in conjunction with the HIPAA liaison.

Assigned Security Responsibility Policy HIPAA Security Policy #3

Purpose

Polk County is committed to protecting Personal Health Information in accordance with those standards established by the Department of Health and Human Services under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). This policy covers the procedures for identifying the security official who is responsible for the development and implementation of the policies and procedures for HIPAA Security.

Policy

Polk County will assign and document the person who is responsible for the development and implementation of the policies and procedures for HIPAA Security. See Exhibit A.

Exhibit A
Designation Security Officer

Security Officer: Anthony Jefferson
Phone: 515-286-3834
E-Mail: Tony.Jefferson@PolkCountyIowa.Gov

Contact Office: Polk County Information Technology
Phone: 515-286-3757 E-Mail:

Workforce Security Policy
HIPAA Security Policy #4

Purpose

Polk County is committed to protecting Personal Health Information in accordance with those standards established by the Department of Health and Human Services under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Polk County has adopted this policy to ensure that all Workforce members have appropriate access to PHI and to prevent Workforce members who do not have access to PHI from obtaining such access. This Policy covers the procedures Polk County has implemented to ensure that access to PHI is authorized, supervised and appropriate.

Policy

Authorization and/or Supervision of PHI

Polk County has procedures in place to ensure that only users with a need to access PHI are granted access to PHI. Any user needing access to PHI must be approved through their supervisor and department head before being granted access to the PHI.

Workforce Clearance Procedure

Polk County will create procedures to determine that the access to PHI is needed and appropriate for each user. This determination will be made by each department head or supervisor where PHI is involved.

Termination of Access

Polk County has a procedure for terminating access to PHI when the user's employment ends. This policy is used in all terminations of employee's and when access to PHI is no longer needed.

Violations

Any individual, found to have violated this policy, may be subject to disciplinary action up to and including termination of employment.

Security Awareness and Training Policy
HIPAA Security Policy #5

Purpose

Polk County is committed to protecting Personal Health Information in accordance with those standards established by the Department of Health and Human Services under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Polk County has adopted this policy to provide security awareness and training for all members of its Workforce. This Policy covers security reminders, procedures for guarding against, detecting and reporting malicious software, procedures for monitoring log-in attempts and reporting discrepancies and procedures for creating, changing and safeguarding passwords.

Policy

1. Security Reminders

- a. Polk County has established procedures on how the County departments and offices and users will be-notified of periodic updates of security changes in HIPAA security policies and procedures.
- b. Polk County has established procedures on how to notify departments and users of any warnings that are issued for discovered, reported or potential threats.

2. Password Management

- a) Information Technology will develop and implement procedures for creating, changing, and safeguarding passwords.
- b) These minimum procedures will be followed:
 - All County Employees who use a computer or has access to network resources or systems will have a unique user identification and password.
 - All computers, network resources, system and applications will require the user supply a password in conjunction with their unique user identification to gain access.
 - A generic user identification and password may be utilized for access to shared or common area workstations so long as the login provides no access to PHI. Access to PHI will be permitted if there is a second unique user ID and password required.
 - Elected Official and Department heads will be responsible for making their employees aware of all password-related policies and procedures, and any changes to those policies and procedures.
 - Information Technology will be responsible for setting password aging times for systems networks and applications.
 - All Polk County employees are responsible for the proper use and protection of their passwords and must adhere to the following guidelines:
 1. Passwords are only to be used for legitimate access to networks, systems, or applications.
 2. Passwords must not be disclosed to other users or individuals.
 3. Employees must not allow other employees or individuals to use their password.
 4. Passwords must not be written down, posted, or exposed in an insecure manner such as on a notepad or posted on the workstation.

Security Training Program

- a) Polk County will ensure that its Employees have been given the appropriate level of HIPAA security training so that all Employees who access, receive, transmit or otherwise use PHI are familiar with Security policies and procedures and their responsibilities regarding such policies and procedures. Training will consist of the following:
 - HIPAA Security Policy
 - HIPAA Business Associate Policy
 - HIPAA Sanction Policy
 - Confidentiality, integrity and availability
 - Individual security responsibilities
 - Common security threats and vulnerabilities

In addition those who set up manage or maintain systems and workstations will receive this training:

- Password structure and management procedures
- Server, desktop computer, and mobile computer system security procedures, including security patch and update procedures and virus and malicious code procedures
- Device and media control procedures
- Incident response and reporting procedures

Violations

Any individual, found to have violated this policy, may be subject to' disciplinary action up to and including termination of employment.

Data Backup and Contingency Planning Policy HIPAA Security Policy #6

Purpose

Polk County is committed to protecting Personal Health Information in accordance with those standards established by the Department of Health and Human Services under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Polk County has adopted this policy to ensure that data can always be made available and protected during disasters or equipment failure. This Policy covers the procedures for safe guarding data in the event of an emergency, disaster, fire, vandalism, of system failure.

Policy

1. Data Backup Plan

- a. Information Technology will establish and implement a Data Backup Plan which will allow for retrievable exact copies of all data and files on systems.
- b. The Data Backup Plan will require that media used for the backups be stored in a physically secure location off-site.

2. Disaster Recovery Plan

- a. Polk County will create a plan to recover from the loss of data due to an emergency or disaster such as fire, vandalism, terrorism, system failure, or natural disaster effecting systems in a timely manner.
- b. The Disaster Recovery Plan will include procedures to restore data from backups in the case of a disaster causing data loss.
- c. The Disaster Recovery Plan will be documented and easily available to the necessary personnel at all times.

3. Emergency Mode Operation Plan

- a. Polk County will establish procedures to enable continuation of critical business processes for protection of the security of electronic PHI while operating in emergency mode.
- b. The Emergency Mode Operation Plan will be documented and easily available to the necessary personnel at all times.

4. Testing and Revision Procedure

- a. Data backup procedures should be tested on a periodic basis to ensure that exact copies can be retrieved.
- b. The Disaster Recovery Plan should be tested on a periodic basis to make sure systems and data can be restored or recovered.
- c. Emergency mode operation procedures should be tested on a periodic basis to ensure that Critical business processes can continue in a satisfactory manner while operating in emergency mode.

5. Applications and Data Criticality Analysis

- a. Polk County will assess the relative criticality of specific applications and data in support of other contingency plan components.

**Business Associate Contracts and Other Arrangements Policy
HIPAA Security Policy #7**

Purpose

Polk County is committed to protecting Personal Health Information in accordance with those standards established by the Department of Health and Human Services under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Polk County has adopted this policy to ensure that access to PHI is appropriately limited. This Policy covers the procedures to allow for a Business Associate to create, receive, maintain or transmit electronic PHI on the County's behalf.

Policy

1. A County, in accordance with §164.306, may permit a Business Associate to create, receive, maintain or transmit electronic PHI on the County's behalf only if the County obtains satisfactory assurances, in accordance with §164.314(a) that the Business Associate will appropriately safeguard the information.
2. This standard does not apply with respect to:
 - a. The transmission by the County of electronic PHI to a health care provider concerning the treatment of an individual.
 - b. The transmission of electronic PHI by a group health plan or an HMO or health insurance issuer on behalf of a group health plan to a plan sponsor, to the extent that the requirements of §164.314(b) and §164.504(f) apply and are met; or
 - c. The transmission of electronic PHI from or to other agencies providing the services at §164.252(e)(1)(ii)(C), when the County is a health that is a government program providing public benefits, if the requirements of §164.502(e)(1)(ii)(C) are met.
3. If Polk County violates the satisfactory assurances it provided as a business associate of another covered entity, the County will be in noncompliance with the standards, implementation specifications, and requirements of the HIPAA regulation.
4. Written Contract or Other Arrangement (Required) §164.308(8)(4), See Business Associate agreement.
5. Polk County will document the satisfactory assurances through a written contract or other arrangement with the business associate.

**Access Control Policy
HIPAA Security Policy #8**

Purpose

Polk County is committed protecting Personal Health Information in accordance with those standards established by the Department of Health and Human Services under the Health Insurance Portability and Accountability Act of 1996 (HIPAA.) This policy covers procedures for electronic information systems that maintain electronic protected health information (PHI) to allow access only to those persons or software programs that have been granted access rights as specified in §164.308(a)(4).

Policy

1. Unique User Identification
 - a. All users that require access to any network, system, or application will be provided with unique user identification.
 - b. Users will not share their unique user identification or password with anyone.
 - c. Users must ensure that their user identification is not documented, written, or otherwise exposed in an insecure manner
 - d. If a user believes their user, identification has been comprised; they must report that security incident to Information Technology for a new password.

2. Emergency Access
 - a. Information Technology will establish and implement as needed, procedures for obtaining necessary electronic PHI during an emergency. Necessary PHI is defined as information, if not available, could inhibit or negatively affect patient care.
 - b. Systems that do not affect patient care are not subject to the emergency access requirement.

3. Firewall Use
 - a. Polk County's network will implement perimeter security and access control with a firewall.
 - b. Firewalls must be configured to support the 'following minimum requirements:
 - Limit network access to only authorized County' users and entities.
 - Limit network access to only legitimate or established connections.
 - Console and other management ports must be secured.
 - Must be located in a physically secure environment.
 - c. Information Technology will document the configuration of its firewalls used to protect the networks in Polk County.

Violations

Any individual, found to have violated this policy, may be subject to disciplinary action up to and including termination of employment.

Standards Sections Implementation Specifications (R) =Required, (A) = Addressable

Administrative Safeguards (see §164.308)

Security Management Process.....§164.308(a)(1)	Risk Analysis (R) Risk Management (R) Sanction Policy Activity Review (R) Information System Activity Review (R)
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Assigned Security Responsibility..... §164.308(a)(2)(R)

Workforce Security 1§64.308(a)(3)	Authorization and/or Supervision (A) Workforce Clearance Procedure Termination Procedures (A)
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Information Access Management...§164.308(a)(4)	Isolating Health care Clearinghouse Function (R) Access Authorization (A) Access Establishment and Modification (A)
--	--

Security Awareness and Training.. §164.308(a)(5)	Security Reminders (A) Protection from Malicious Software (A) Log-in Monitoring (A) Password Management (A)
Security Incident Procedures.....§164.308(a)(6)	Response and Reporting (R)
Contingency Plan..... §164.308(a)(7)	Data Backup Plan (R) Disaster Recovery Plan (R) Emergency Mode Operation Plan (R) Testing and Revision Procedure (A) Applications and Data Criticality Analysis (A)
Evaluation1§64.308(a)(8)(R)	
Business Associate Contracts and Other Arrangement..... 1§64.308(b)(1)	Written Contract or Other Arrangement (R)
Physical Safeguards (see §164.310)	
County Access Controls..... §164.310(a)(1)	Contingency Operations (A) County Security Plan (A) Access Control and Validation Procedures (A) Maintenance Records (A)
Workstation Use..... §164.310(b)(R)	
Workstation Security..... §164.310(c)(R)	
Device and Media Controls.....§164.310(d)(1)	Disposal (R) Media Re-use (R) Accountability (A) Data Backup and Storage (A)
Technical Safeguards (see §164.312)	
Access Control..... §164.312(a){1}	Unique User Identification (R) Emergency Access Procedure (R) Automatic logoff (A) Encryption and Decryption (A)
Audit Controls..... §164.312(b)	(R)
Integrity..... §164.312(c)(1)	Mechanism to Authenticate. Electronic Protected Health Information (A)
Person or Entity Authentication.....§164.312(d)	(R)
Transmission Security§164.312(e)(1)	Integrity Controls (A) Encryption (A)

Contact: Health
515-286-3759
Revised: 10/04/05

[Click for Resolution:](#)

Business Promotional Expenditures Policy For Iowa Events Center

General Policy

It is the policy of Polk County to pay reasonable business promotional expenditures as outlined below for the public purpose of solicitation and retention of business for the Iowa Events Center. All such business promotional expenditures shall be consistent with objectives outlined in the Events Center marketing plan.

Specific Provisions

1. **Business Meals**
Business meal expenses for Iowa Events Center management, sales/marketing coordinators, event coordinators and external contracts will be reimbursed. Allowable expenses include reasonable meals, tips and gratuities. Meal costs including tips and gratuities are limited to the per person daily maximums set forth in the current Polk County Travel and Expense Reimbursement Policy. Alcoholic beverages are not reimbursable.
2. **Conventions, Trade Shows, etc.**
Iowa Events Center management may designate individuals to attend regional or national conventions and trade shows to market the facilities. Travel expenses for individuals representing the Iowa Events Center will be reimbursed in accordance with the current Polk County Travel and Expense Reimbursement Policy. Business meals and promotional items for such conventions and trade shows will be reimbursed in conformity with provisions of the Business Promotional Expenditures Policy.
3. **Promotional Items**
Various promotional items of a reasonable nature may be purchased for distribution to Events Center clients or potential clients. Such promotional items may include items such as mugs, glasses, pens, clothing, etc. and should be used for promotion of the Iowa Events Center via insignias, monograms, etc.
4. **Entertainment**
Iowa Events Center management may authorize the hosting of social, cultural or sporting event activities for clients or potential clients. Such activities should be reasonable in nature and designed to promote the usage of the Events Center.
5. **Client Goodwill Expenditures**
Events Center management or event coordinators may authorize reasonable client goodwill expenditures to express appreciation for the client's business or to foster on-going goodwill with the client. Such goodwill expenditures could include floral or merchandise items or other items of a similar nature. Alcoholic items are not allowable as a client goodwill expenditure.
6. **Tickets to Iowa Events Center**
Reasonable numbers of tickets to events at the Iowa Events Center may be distributed to clients or potential clients to promote goodwill or to demonstrate the features and operations of the facilities.
7. **Monthly Expense Reports**
Business promotional expenses shall be summarized at the end of each month on a Business Promotional Expense Report. The report shall list date and description of the expense and provide a summary of who was in attendance at business meals or entertainment activities. The monthly expense reports shall be approved by the General Manager of the Events Center.

8. Miscellaneous

Based on the relationship between Polk County and Global Spectrum, Polk County recognizes the public purpose and importance of employee recognition for exemplary job performance and supports the General Manager in this practice. Employee recognition lunches and monthly birthday cakes for employees are approved reimbursable expenses not to exceed \$100 per occurrence. The costs of these expenditures will be allocated between the facilities using the current expense distribution formula.

Contact: Auditor's Office
515-286-3418
Revised: 11/18/08

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Federal Deficit Reduction Act Compliance Policy

Policy:

It is the policy of Polk County to be in compliance with the Federal Deficit Reduction Act of 2005 to correctly claim Federal funds for which Polk County is eligible; to prevent and detect errors and potentially fraudulent claims, and to protect whistleblowers from retaliation.

Purpose:

To provide guidance and training to all staff about the False Claims Act including whistleblower provisions in the law; detecting and preventing waste, fraud, and abuse; protecting the rights of employees as whistleblowers; policies concerning false claims laws; and ensuring that all employees comply with all applicable sections of the False Claims Act.

Scope:

This procedure applies to all Polk County employees, contractors and agents, volunteers, interns and Board members working in programs claiming federal funds.

Definitions:

Fraud – The intentional deception perpetrated by an individual or individuals, or an organization or organizations, either internal or external to Polk County, which could result in a tangible or intangible benefit to themselves, others, or could cause detriment to others or the Agency. Fraud includes a false representation of a matter of fact, whether by words or by conduct, by false or misleading statements, or by concealment or that which should have been disclosed, which deceives and is intended to deceive.

Whistleblower – An informant, most often an employee, who reports wrongdoing within an organization.

Retaliation – When an individual is discriminated against or penalized for reporting fraud or for cooperating, giving testimony, or participating in any matter in an audit/investigation, proceeding, or hearing.

Background:

Section 6032 of the Federal Deficit Reduction Act of 2005 and Section 1902 (a) (68) of the Social Security Act requires entities that make or receive annual Medicaid payments of \$5 million or more to provide in written policies (on paper or in electronic form) applicable to employees, contractors and agents, detailed information about the False Claims Act, any state laws that pertain to civil or criminal penalties for making false claims and statements, and whistleblower protection. As a requirement for Medicaid payment, those entities must establish written policies that:

1. Provide detailed information about the federal False Claims Act and comparable state anti-fraud statutes, including whistleblower provisions in those laws.
2. Detailed descriptions regarding the company's policies and procedures for detecting and preventing waste, fraud and abuse.
3. Include in any employee policy books a specific discussion of the laws described in the written policies, the rights of employees to be protected as whistleblowers.

The Deficit Reduction Act of 2005 establishes compliance with Section 6032 as a condition of receiving Medicaid payment, failure to meet the requirements could result in the forfeiture of all Medicaid payments during the period of noncompliance.

Summary of Federal and State False Claims Laws:

Federal Law:

Purpose: The False Claims Act exists to fight fraud, or false claims, against the federal government.

What is a “false claim”?: A false claim may take many forms, including, for example, overcharging for a product or service, failing to perform a service, delivering less than the promised amount or type of goods or services, underpaying money owed to the government, and charging for one thing while providing another.

Applicability: The Federal Claims Act covers fraud involving any federally funded contract or program, with the exception of tax fraud. For Polk County, the law covers Medicaid, foster care, SSI, law enforcement claims and other Federally funded programs.

Damages or Penalties: Under the Federal Claims Act, anyone (an individual, business or government entity) who knowingly submits or causes the submission of false claims to the government is liable for damages of up to three times the erroneous payment, plus civil penalties of \$5,000 to \$10,000 per false claim.

Mechanism: A private individual, called the whistleblower, who possesses and comes forward with information regarding false claims is authorized to file a case in federal court and sue, on behalf of the government, those entities that engaged in the fraud. The Department of Justice then decides on behalf of the government whether to join the whistleblower in prosecuting these cases.

The Department of Justice may also prosecute claims based on other investigations.

Whistleblower’s Share: If the case is successful, the whistleblower may share in the recovery. The amount of the whistleblower’s share depends on multiple factors, including whether the whistleblower planned and initiated the false claim (in which the whistleblower’s share can be reduced to any amount the court deems appropriate) and whether statutory bars preclude the whistleblower from sharing in the recovery because of a criminal conviction or jurisdictional disqualification.

Whistleblower rights and protections: The Federal Claims Act provides a remedy for whistleblowers who are discharged, demoted, suspended, or in any other manner discriminated against in the terms and conditions of employment by his or her employer in retaliation for filing a case. To receive the benefits of the employment protections of the False Claims Act, courts generally require that an employee demonstrate that: 1) he or she was engaged in an activity protected by the statute in furtherance of a qui tam suit; 2) the employer knew of the employee’s qui tam actions, and 3) the employer retaliated against the employee because of those actions. If the court finds a whistleblower was terminated or otherwise mistreated for filing a qui tam lawsuit, the employee is entitled to reinstatement at the same level, two times the back pay owed plus interest, and compensation for any special damages sustained as a result of the discrimination, such as attorney’s fees.

Procedures:

Reporting: In accordance with the County Fraud Prevention and Detection policy, any employee who has knowledge of an occurrence of fraud, or has reason to suspect that a fraud has occurred, shall immediately notify his/her supervisor or Chief of Central Accounting in the Auditor’s Office. If the employee has reason to believe that the employee’s supervisor may be involved, the employee shall immediately notify the Department Head or Chief of Central Accounting in the Auditor’s Office. Every employee shall cooperate with administrative investigations pursuant to the County Personnel Policies and Procedures. The employee shall not discuss the matter with anyone other than his/her supervisor, the Department Head, Chief of Central Accounting in the Auditor’s Office and law enforcement.

Investigations: Upon notification or discovery of a suspected fraud, the Chief of Central Accounting in the Auditor’s Office will promptly investigate the fraud and will promptly notify the Des Moines Police Department if criminal conduct is suspected.

Retaliation: It is a violation of policy for any individual to be discriminated against for reporting fraud or for cooperating, giving testimony, or participating in an audit investigation, proceeding, or hearing.

Disciplinary Action:

Employees found to be in violation of the False Claims Act provisions will be disciplined in accordance with County Personnel policies leading up to and including termination of employment. Failure to report a breach of which one has knowledge, or reporting of a breach in bad faith or for malicious reasons will result in appropriate disciplinary action.

Employee Training:

All employees will receive training on policies, procedures and laws about the False Claims Act as mandated by the Deficit Reduction Act of 2005. Each employee including contract employees, volunteer, intern and Board Member is required to sign an attestation form to verify the receipt of this training.

Executive Director's Signature: _____

Date: _____

Polk County
False Claims Act
Employee Acknowledgement

This is to acknowledge that as of the date listed below, I have received a copy of the Polk County False Claims Act Policy, and that my Operational Leader and/or supervisor has reviewed this with me. I understand that it is my responsibility to comply with the policy as summarized, and to report violations or suspected violations as outlined.

Employee Name: _____

Program: _____

Operational Leader or Supervisor: _____

Employee Signature: _____

Date: _____

**Polk County
False Claims Act
Board Member Acknowledgement**

This is to acknowledge that as of the date listed below, I have received a copy of the Polk County False Claims Act Policy. I understand that it is my responsibility to comply with the policy as summarized, and to report violations or suspected violations as outlined.

Board Member Name: _____

Date: _____

Contact: Lynn Ferrell
Polk County Health Services
515-243-6339
Adopted: 3/27/07

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Service Member Family And Medical Leave Policy

The federal Family and Medical Leave Act (FMLA) now entitles eligible employees to take leave for a covered member's service in the Armed Forces ("Servicemember FMLA"). This policy supplements our FMLA policy and provides general notice of employee rights to such leave. Except as mentioned below, an employee's rights and obligation to Servicemember FMLA Leave are governed by our existing FMLA policy.

A. Employee Entitlement to Servicemember FMLA

Servicemember FMLA provides eligible employee's unpaid leave for any one, or for a combination of the following reasons:

1. A "qualifying exigency" arising out of a covered family member's active duty or call to active duty in the Armed Forces of the United States in support of a contingency plan; and/or
2. To care for a covered family member or next of kin who has incurred an injury or illness in the line of duty while on active duty in the Armed Forces of the United States provided that such injury or illness may render the family member medically unfit to perform duties of the member's office, grade, rank, or rating.

B. Duration of Servicemember FMLA

1. When leave is due to a "Qualifying Exigency": An eligible employee may take up to twelve (12) workweeks of leave during any twelve (12) month period.
2. When leave is due to Care for an Injured or Ill Servicemember: An eligible employee may take up to twenty-six (26) workweeks of leave during a single twelve (12) month period to care for the servicemember. Leave to care for an injured or ill Servicemember, when combined with other FMLA qualifying leave may not exceed twenty-six (26) weeks in a single twelve (12) month period.
3. Servicemember FMLA runs concurrent with other leave entitlements provided under federal, state, and local law.

C. General

1. Use of FMLA for an employee who is an immediate family member (spouse, child, or parent) of military personnel and/or reservists who have a "qualifying exigency" shall utilize personal time and vacation time (if any accruals are available) before leave status is considered unpaid.
2. Use of FMLA for an employee to care for an immediate family member (spouse, child, or parent) who is a member of the armed forces of the U.S. and who have been injured or wounded in the line of duty shall utilize any accrued but unused family sick leave (maximum five days per fiscal year), personal time and then vacation time (if any accruals are available) before leave status is considered unpaid.

Contact: Human Resources
515-286-3200

Adopted: 4/29/08

[Click for Resolution:](#)

Donated Leave for Purpose of Organ Transplant Policy

Employees may donate up to eight (8) hours of earned vacation or personal leave to an eligible employee who has been approved for a leave of absence due to agreeing to donate an organ to a person deemed by a qualified physician as needing a transplant operation. Length of absence covered under this policy shall not exceed medical necessity, as determined by the health care provider, for the transplant operation and recovery. The maximum donated time an employee may receive for an instance covered by this policy in a twelve (12) month period is 240 hours.

Employees do not need to utilize all paid leaves prior to requesting and/or utilizing donated leave for the purpose of organ donation. Eligible employees are required to provide medical verification of the operation to be performed and the probable length of time needed to be off for the operation and recovery.

An eligible employee is defined as a regular full-time employee with at least twelve (12) months of continuous employment at the time of the employee's application for donated leave.

Requests for donated leave must be submitted for approval to the Human Resources Director along with a statement of need and supporting medical documentation. Upon approval, the employee's request will be communicated to all department offices to obtain donated leave. Donated leave shall be accepted until the maximum leave is donated or the employee returns to work, whichever occurs first.

The use of donated leave shall be subject to the same restrictions and/or requirements as other leaves of absence under county policies; and the employee/recipient shall not derive any accrual of leave as a result of the receipt of donated leave. Donated leave that is unused upon the employee's return to work shall be returned to the respective donor.

Upon request of the employee utilizing donated leave for this purpose thank you notices will be sent by interoffice mail to persons donating time. If the employee utilizing donated leave supplies thank-you notices and/or envelopes and postage, Human Resources will facilitate delivery of the thank you notices. Human Resources will not be responsible for any postage to deliver such thank-you notices.

Contact: Human Resources
515-286-3200
Revised: 9/22/2009

[Click for Resolution:](#)

Polk County Commuter Choice Plan Policy

As Amended July 1, 2011

Article I – Introduction and Definitions

1.1 Establishment of Plan

Polk County hereby establishes the amended Commuter Choice Plan effective January 1, 2011. This amended plan supersedes the Commuter Choice Plan approved by the Polk County Board of Supervisors on June 29, 2010.

1.2 Legal Status

This plan is intended to qualify as a 'qualified transportation fringe' benefit plan under IRS Code Section 132. The qualified transportation benefits under this plan are intended to be eligible for exclusion from participating employees' gross income.

1.3 Administrator

The Administrator of this plan is the Polk County Human Resources Department.

1.4 Plan

Plan means the Polk County Commuter Choice Plan as set forth herein and amended from time to time.

1.5 Plan Year

Plan Year means the fiscal year commencing on July 1st and ending on June 30th of each year.

Article II – Eligibility and Participation

2.1 Eligibility

The pretax payroll deduction for qualified transportation benefits is open to all regular full and part-time benefit eligible employees of the County. The parking subsidy is open to eligible employees as determined by the Plan Administrator who are not provided free parking at their work location.

2.2 Termination of Participation

An eligible employee will cease to be a participant in the plan upon the earlier of:

- The termination of this plan
- The date on which the employee ceases to be an eligible employee due to retirement, termination of employment, layoff, move to a non-benefits eligible position, etc.
- The date on which the employee elects to no longer participate in the plan.

Article III – Method and Timing of Elections

3.1 Initial Elections

Initial plan elections shall be made by submitting a Parking/Mass Transit Form to the Human Resources Department. Initial plan elections will be effective in the month following submission of the form.

3.2 Subsequent Elections

Plan elections may be changed at any time by submitting a new Parking/Mass Transit Form to the Human Resources Department, or electronically through the County Benefit Open Enrollment System. Changes and cancellations become effective the first of the month following the date the form is returned to Human Resources.

Article IV – Benefits Offered and Method of Funding

4.1 Benefits Offered

When eligible as described under Article II, participants will be given the opportunity to elect one or more of the following benefits:

- a. Qualified Parking Benefits, as described in Section 5.1
- b. Transit Pass Benefits, as described in Section 6.1

4.2 Employer and Participant Contributions

a. Employer Contributions: For participants who work at a County office where parking is not provided and who incur parking or mass transit expenses, the Employer will contribute a parking/mass transit subsidy in an amount prescribed by the current collective bargaining agreement or employee benefit manual. For payroll calculation purposes the subsidy will be calculated on the basis of 24 paydays and awarded to eligible participants on the 1st and 2nd paydays of each month. The subsidy will be awarded and applied on a pretax basis to fund parking/mass transit expenses.

b. Participant Contributions: Participants will contribute to the plan as needed via pretax payroll deductions on the 1st and 2nd paydays of each month. The payroll deductions will be combined with the employer contribution to fund parking/mass transit expenses that exceed the employer contribution.

Article V – Qualified Parking Benefits

5.1 Definition of Qualified Parking Benefits

Qualified parking benefits means expenses paid for parking expenses at garages, surface lots (including those owned by the County) and parking meters (Smartcard purchase and meter time).

5.2 Monthly Statutory Limit

Reimbursement for qualified parking expenses cannot exceed the applicable monthly limit described in IRS Code Section 132(f). (For calendar year 2011, the limit is \$230 per month.)

5.3 Participant Accounts

The County will establish and maintain an account for each plan participant, but will not create a separate fund or otherwise segregate assets for this purpose. The account will be for recordkeeping purposes for employer and participant contributions and related disbursements for qualified parking expenses.

5.4 Payment of Parking Expenses by County

a. Payment of expenses for employees parking in County owned parking lots will be processed by offsetting the parking subsidy and/or employee payroll deduction against the parking charge owed to the County. As a result, employee will not pay parking charge via check to the County each month, as an internal bookkeeping process will pay the County for the parking charge. Employee will acknowledge this arrangement when signing lease for County owned parking.

b. Payment of expenses for employees parking in major ramps or surface lots will be made monthly in advance via a combined County check covering all employees parking in the facility who have agreed to a direct payment arrangement. The subsidy awarded to the employees in the month following the direct payment will be used to offset the direct payment made by the County. The direct payment by the County does not constitute a lease between the parking facility and the County, as the parking lease remains between the facility and the employee. The Plan Administrator in conjunction with the County Auditor's Office will determine which parking facilities are eligible for the direct payment process.

5.5 Reimbursement Procedures

a. Reimbursements will be for expenses previously incurred, and not for any future expenses.

b. Reimbursement of expenses for employees with a multi-month lease for parking in a parking ramp or surface lot may be processed by having the employee submit a copy of the lease at the start of the lease period. Monthly parking reimbursements will be made using the monthly lease amount for the duration of the lease, with the lease serving as the documentation of the monthly reimbursable amount. Employees are responsible for notifying the County of any change or termination of the lease during the lease term.

c. Reimbursement of expenses for employees parking at a ramp or surface lot using a month-to-month lease, or where employee has not submitted a copy of a multi-month lease or parking at parking meters will be processed by having the employee submit a monthly parking reimbursement form and submitting third party documentation. Documentation for parking ramps or surface lots expense shall consist of receipt from management company or landlord. Documentation for parking meters expense shall consist of Smart Card receipts. However, the Plan Administrator and County Auditor's Office may approve alternative forms of documentation as they deem appropriate under the plan.

d. Employees can not submit reimbursement claims for parking expenses incurred by anyone but themselves. Claims for parking expenses paid through any other source are not eligible expenses.

e. Employees can only be reimbursed for parking expenses up to their current account balance. If claims submitted exceed the current account balance, a partial reimbursement payment will be made.

f. Employees must submit reimbursement claims within 90 days of incurring the expense to be eligible for reimbursement. Account balances shall be forfeited if reimbursement claims are not submitted within 90 days. Also, as described in Section 5.5(b), employees who have terminated or are no longer plan participants must submit reimbursement claims within 90 days after ceasing to be a plan participant.

5.5 Account Forfeiture

a. As described in Section 5.4(g), at any point during the plan year and at the end of the plan year, any account balances not claimed for reimbursement within 90 days after the expenditure is incurred shall be forfeited to the County.

b. If any balance remains in an employee's account more than 90 days after the employee ceases to be a plan participant, the balance shall be forfeited to the County. Parking expenses must be incurred while employee is still a plan participant; the 90 day period is for the purpose of employee reimbursement after termination of plan participation.

Article VI – Transit Pass Benefits

6.1 Definition of Transit Pass Benefits

Transit pass benefits means monthly Des Moines Area Regional Transit (DART) bus passes purchased through the County Human Resources Department or bus passes and tokens purchased through other outlets such as grocery stores.

6.2 Monthly Statutory Limit

Transit pass benefits cannot exceed the applicable monthly limit described in IRS Code Section 132(f). (For calendar year 2011, the limit is \$120 per month.)

6.3 Participant Accounts

The County will establish and maintain an account for each plan participant, but will not create a separate fund or otherwise segregate assets for this purpose. The account will be for recordkeeping purposes for employer and participant contributions and related disbursements for transit pass benefits.

6.4 Processing Procedures

a. Monthly passes are paid via payroll deduction /parking subsidy in the month for which the DART pass applies. If a DART pass is not purchased for a given month, the account balance shall be used for a DART pass within 90 days after the end of the month, or the account balance will be forfeited to the County.

b. DART bus passes are sold/processed only for complete calendar months. Cost of passes is not prorated for partial months upon either enrollment or termination.

c. All eligible employees as described in Section 2.1 are able to participate in the Transit Pass program even if they are not eligible for the parking subsidy.

6.5 Account Forfeiture

a. Any account balances not used for transit passes within 90 days after the end of a month shall be forfeited to the County.

b. If any balance remains in an employee's account more than 90 days after the employee ceases to be a plan participant, the balance shall be forfeited to the County.

Article VII – Administration

7.1 Administrator

The administration of the Plan shall be under the supervision of the Administrator, with the principal duty being to ensure the Plan is carried out in accordance with Plan terms for the benefit of employees eligible to participate in the Plan.

7.2 Powers of the Administrator

a. To interpret the Plan, including any possible ambiguities, inconsistencies and omissions in the Plan and related documents, and to decide all questions of fact concerning eligibility, participation, and benefits.

b. To prescribe procedures to be followed and forms to be used by employees and participants.

c. To receive from all employees and participants such information as deemed necessary for proper administration of the Plan.

7.3 Inability to Locate Payee

If the Administrator or their designee is unable ascertain the identity or whereabouts of a participant after reasonable efforts have been made to identify or locate the participant, any outstanding payments or account balances shall be forfeited.

7.4 Effect of Mistakes

In the event of a mistake concerning employee eligibility, participation or benefits paid to an employee, the Administrator shall make corrections as they deem necessary to rectify the situation.

Article VIII – General Provisions

8.1 Amendment and Termination

This Plan is intended to be maintained for an indefinite period of time. However, the County may amend or terminate all or any part of this Plan at any time by resolution of the Board of Supervisors.

8.2 Governing Law

This plan shall be administered according to the laws of the State of Iowa, to the extent not superseded by the IRS code or other federal law.

8.3 IRS Code Compliance

This plan is intended to meet all applicable requirements of the IRS code, and all related regulations. In the event of any conflict between any part of the Plan and the IRS code, the provisions of the IRS code shall be deemed controlling and thus deemed to supersede any applicable part of the Plan.

Contact: Human Resources
515-286-3200
Adopted: 6/29/2010
Revised: 12/21/2010

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Vacancy and New Position Review Policy

Goal Statement:

It shall be the goal of the Vacancy Review Committee to attempt to manage Polk County personnel-related costs of by eliminating positions through attrition where possible. The committee will further have a goal of determining which positions will remain vacant for an extended period where possible, reducing the County's work force through attrition while recognizing that some positions may need to be filled more expeditiously than others. The committee will be established to review vacancies, reclassification issues and new positions that are proposed to be filled by the various departments of Polk County. The Vacancy and New Position Review Committee will be composed of two members of the Polk County Board of Supervisors, the County Administrator and staffed as necessary. . To that end, the following guidelines shall govern the hiring process:

1. If a department under the direction of the Board of Supervisors desires to immediately fill a vacancy a Vacancy Review form must accompany the termination Personal Action Form (PAF). A proposed PAF should also be created for any requested new position, along with any documentation explaining the need for the new position and /or job description information.
2. An Elected Official wishing to fill a vacancy shall complete the process outlined in items 1, 3 and 4 and will be scheduled to present their appeal directly to the Vacancy Review Committee for consideration.
3. A current Position Classification Questionnaire (PCQ) will also be required if it is anticipated the vacant position is to be redesigned, reallocated or if a new position is being created.
4. The Vacancy Review Form and/or the Position Classification Questionnaire shall be submitted to the Human Resources Department for review. The Human Resources Director, and designated human resources staff will review documents and provide recommendations to the County Administrator.
 - A. When the position became vacant;
 - B. If Human Resources recommends the position should be filled or eliminated;
 - C. If Human Resources recommends the position could be left open for a designated period of time;
 - D. If the department is in agreement with Human Resources;
 - E. Recommendation of when the committee should meet to review the position.

5. Upon recommendation from the Human Resources Department or if a department wishes to appeal a decision of the Human Resources Department, the information will be forwarded to the County Administrator for approval or denial. Denied requests by the County Administrator may be appealed to the Vacancy Review Committee. The Vacancy Review Committee shall review request(s) and any supporting materials to fill vacancies, modify existing vacancies and/or to create new positions.
6. The department head or his/her designee of the department requesting a review will be given an opportunity to discuss with the Vacancy Review committee any request to fill a vacancy and/or reasoning for a position to be redesigned, reallocated, or created.
7. The Vacancy Review Committee will meet on an “as needed” basis at the direction of the Committee Chair.
8. This policy applies to the following:
 - All regular full and part-time positions currently vacant but desired to be filled.
 - All side-by-side positions regardless of 24/7 operations.
 - All creation of new positions or additional positions within the organization.
 - All on-call positions that would be an addition to the organization.
 - All temporary positions that would be an addition to the organization.
9. This policy does not apply to the following:
 - Positions within the elected offices of the County except that they may, if they so choose, proceed directly to the Vacancy Review Committee without review by Human Resources or the County Administrator.
 - Temporary positions which are existing within the department/office and not newly created or additional to the existing table of organization.
 - On-call positions which are existing and not newly created
10. For the purposes of clarification the following definitions shall be utilized:
 - A. **Regular Full-time employee** – A Regular Full-time employee is an employee that is regularly scheduled to work 40 hours per week.
 - B. **Regular Part-time employee** – A Regular Part-time employee is an employee that is regularly scheduled to work less than 40 hours in a week. Regular part-time employees are broken into two categories.
 - I. Employees working twenty four (24) hours per week or more (but less than 40) are allowed pro-rata benefits and insurance(s) as allowed by regular full-time employees. Such employees are also allowed step movement within their respective pay range and allowed across the board increases.

- II. Regular part-time employees working less than twenty four (24) hours per week are not allowed pro-rata benefits but are allowed to purchase insurance(s), other than life, at the Employer group rate. Part-time employees working less than twenty four (24) hours per week are not allowed step movement and are hired at the entry step of the pay range for their respective position. These employees are granted across the board increases when such increases occur.
- C. **On-Call employees** – An On-Call employee is an employee hired to fill in for a Regular Full-time or Regular Part-time employee when the regular employee is not available to fill their position, such as an employee who is out for an extended leave. On-Call employees may also be utilized as extra help during short periods of time (not longer than four (4) months). On-Call employees do not receive any benefits and are not allowed to purchase insurance(s). These employees are sometimes referred to as “pool employees” as a department/office may have several employees to choose from to fill in for vacancies as needed. On-Call employees are placed in a pay grade at the entry rate and receive across the board increases so as to maintain the entry rate.
- D. **Temporary employees** (Seasonal) – Temporary employees are employees that work a limited duration occurring outside of the summer program. The duration is typically less than four (4) months). If the temporary position reoccurs from year to year it would be given an across the board increase. Occasionally a temporary position is created to perform a unique function that would not be ongoing with the county. This type of function is commonly contracted but can also be handled in this manner.
- E. **Summer employees** – Employees assigned to summer job classifications are not assigned to a grade and receive a set hourly rate. These employees are not eligible for across the board increases. The Human Resources Department reviews the rates annually and submits requests for wage adjustments as deemed appropriate.

Contact: Human Resources
515-286-3200
Adopted: 11/1/11

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