

University of Texas Medical Branch	Effective Date:	Apr 23
Pulmonary Function Clinic	Revised Date:	Jun 23
Policy 02-05 PFT Lab Staff Operations	Review Date:	Jun 23

PFT Lab Staff Operations

Audience All personnel in the Pulmonary Laboratories: Pulmonary Function Clinic

Purpose The purpose of policy is to provide written details for daily staff operations and expectations while employed in the Pulmonary Function Testing (PFT) Laboratory.

Policy Daily operations and expectations for staff will be listed in this policy. Adherence to policies listed is evaluated and compliance will be documented. Key components include but not limited to Staff Schedule/ Hours, Clocking In/Out & Tardies, Attendance & Time off, Personal & Professional Space, Daily Operations, Orientation and Training. This policy will be reviewed upon initial employment, reviewed with supervisor or manager, and signed by employee on the first day of employment, and annually. Department will adhere to UTMB IHOP (Institutional Handbook of Operating Procedures) policies.

Key Components

Staff Schedule/ Hours:

Each staff member is assigned a weekly schedule per the supervisor or manager and will be either 8:00am to 5:00pm or 7:00am to 4:00pm on a rotating basis. Other schedules, based on staff job description may vary based on department needs as determined by supervisor or manager. The supervisor/manager reserves the right to change or assign different schedule as necessary to staff the laboratories, with little or no notice. These assignments are viewed in the PFT Calendar shared by supervisor or manager. Staff are expected to check the schedule and notify supervisor or manager for any questions and/ or changes.

Clock In/Out & Tardies:

Staff will follow the UTMB Kronos clock in schedule 7-minute rule and use the following times:

<u>Shift</u>	<u>Clock In Times</u>	<u>Lunch In/Out</u>	<u>Clock Out Times</u>
7-4	6:53am – 7:00am	11:53 to 12:00pm	3:53pm to 4:07pm
8-5	7:53am – 8:00am	12:53 to 1:00pm	4:53pm to 5:05pm

Clocking outside these times for any reason requires notification by supervisor or manager and will be considered a tardy or unapproved overtime. Staff are to notify the supervisor or manager if they are unable to clock in on time for their shift. Staff will be verbally reminded on excessive tardiness which is 4 tardies in 2 months. Staff clocking out after clock out times will be considered unapproved overtime. Staff must notify supervisor or manager of any overtime and the reason. Unapproved tardies or overtime will result in escalating disciplinary action up to and including termination. Staff are responsible for reviewing timecards, submitting requests, and approving their timecards during Pay week.

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Transfer time

Staff will transfer time when working in another area/department or at an off-site location. Staff are expected to notify supervisor or manager if you fail to transfer time. Excessive failure to do so may result in disciplinary action.

Attendance & Time off

The PFT lab will adhere to UTMB attendance policy for tracking absences. Staff are expected to give as much notice as possible for any absence, and if less than 48 hours, will be considered an unexcused absence, per UTMB (IHOP) policy. Specifically, for call ins, staff are expected to notify (call or text) the supervisor or manager at least 2 hours prior to the start of their assigned shift. Excessive unscheduled absences are defined as three in one month. An email notification will be sent by the supervisor or manager reminding staff that they are at the two unexcused limit. If a third unexcused absence occurs, then staff will receive further escalating disciplinary action up to and including termination. The supervisor/ manager reserves the right be lenient in special circumstances discussed between the employee and the supervisor/ manager and/ or director.

Kronos, PTO (Paid-Time-Off)/ EIB (Extend Illness Bank)

Staff will use Kronos to document time. It is the responsibility of staff to maintain their time, submit PTO/EIB requests, and approve bi-weekly timecards. Staff are expected to transfer their time when working in other areas or departments and will be provided department numbers. Staff will also be required to be flexible with their schedule based on patient/ department needs. Staff will not incur overtime without supervisor or manager approval.

Staff are encouraged to take their time off (PTO) away from work. Refer to UTMB website for the MyPTO program guidelines regarding accruals and usage. Staff should email request to supervisor or manager within 3 weeks of request or as soon as possible and submit request in Kronos. Requests for large spans of time (i.e.,5+ days) require minimum of 2 months' notice. PTO time will be approved according to availability in the department. Due to small size of the department, usually only one person off at a time is allowed. Staff should view rotating schedule before requesting time. It is the responsibility of the employee to make sure supervisor or manager is notified, time is requested, place in calendars, and approved before leave is allowed. Only the supervisor/ manager or director can approve requests.

EIB should be used for qualifying events listed on Human resources website. Employees calling out sick are required to use 16 hours (2 days) of PTO before using EIB (sick leave). If a third day is required off, staff are expected to provide a physician's release and return to work note upon day of return, per UTMB policy. Forty hours (40hrs.) of EIB time is given at the beginning of each fiscal year, September 1st, and can be used directly for qualifying events per MyPTO guidelines. EIB time not used will remain year after year unless needed.

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Once staff have depleted PTO and EIB accruals, and need additional time, supervisor/ manager and/ or director may approve Leave WithOut Pay; however, this is only approved on a case-by-case basis. Please be careful using your time.

Personal & Professional Space

- a. Uniforms - All staff are expected to wear assigned uniforms. Respiratory therapists will wear official assigned color: light gray scrubs; however, may wear other gray shades approved by supervisor or manager. UTMB or Respiratory shirts may be worn on days specified by supervisor or manger. PSS staff will wear assigned UTMB black shirt and black pants. Other UTMB shirts or colors may be worn on days specified by supervisor or manger. Staff are expected to arrive dressed in uniform and ready for work upon clocking in. Staff are responsible for purchasing and maintaining their uniforms. Lab coats and undershirts are not required but should be same color as uniform per UTMB policy.
- b. Jewelry - Therapist may wear jewelry; however, not in excess to impact patient care or impact PPE protection (i.e., large earrings when wearing masks). PSS may wear appropriate jewelry that is not excessive to impact job duties or be distracting to other staff or patients.
- c. Nails – All staff may wear artificial and/ or polished nails and will maintain professional appearance per UTMB guidelines.
- d. Hair – All staff are expected maintain personal hygiene. In patient care areas, staff should pull back long hair, so it doesn't impact patient care.
- e. Perfume/cologne – Since the lab sees patients that have Respiratory disorders and are sensitive to fragrances, staff should limit perfume and cologne to a minimum. Excessive use may result in patient and/ or staff complaints.
- f. Piercings/ Tattoos – Should not impact or influence patient care in any way. Please maintain hygiene and professionalism. Staff may be asked to remove or cover piercings or tattoos at supervisor/manager or director discretion.
- g. Personal information- Staff will not give divulge any personal information to anyone without permission. This includes cell phone numbers, address, and shared personal information.

Staff are expected to follow all UTMB (IHOP) policies. Any reports of personal issues between staff will be investigated by the supervisor or manager. Staff will be reminded, warned, then disciplined for non-compliance to policies. We work in a professional environment, and you are expected to be professional, respectful, and conduct yourself accordingly. Be mindful that we work in a diverse population of staff and patients, so please aware of your conduct and interactions.

Daily Operations

Daily operations require preparing the laboratory for patient testing. Staff are expected to perform tasks daily to ensure proper functioning of equipment and systems before patients arrive.

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Therapist Operations

1. Unlock & open all doors.
2. Turn on Body Box in main lab and 2nd lab, then computers. Open tanks. Login into computer. Open Breeze. Use your password to login. Allow machines required warm up time.
3. Check ABG machine, make sure analyzer shows parameters in green, and document required activity in ABG Logbook. Therapist will troubleshoot any issues, document, and seek guidance if necessary.
4. Calibrate main and 2nd lab, transport machine every Monday and as needed. CPET/MVO2 calibrated as needed but restart computer every Monday and as needed. Save all calibrations.
5. Review all orders for patients on the schedule daily.
6. Staff should log out of computer when not using workstation.
7. Log off computers and shut off tanks during the week. Shut down computer, turn off box on Fridays and at VTC location. Shut down power and computer in all lab on Fridays.
8. Turn of power to Body Box on Fridays.
9. Late staff can leave Breeze open until closing then shut down.
10. If Cleaning staff have not arrived by end of day, leave trash cans front of door in hallway, then close and lock doors. Including breakroom.
11. Store personal belongings in breakroom and lock upon leaving every time. Staff are required to purchase their own key since UTMB does not issue these keys.

PSS Operations

1. Answer phones in courteous manner.
2. Check patients in for PFT appointments, collect payments required, document in Epic, verify/ enter parking validation, and provide patient instructions and labels for their procedure.
3. Check and schedule patients from the workque daily. Goal is to call patients within 48 hours of receiving referral.
4. Check patient chart and review orders before contacting or scheduling patients. Consult with Therapist or manager for any questions regarding referrals or orders.
5. Check for inpatient orders throughout the day, place orders in PFT Daily schedule folder in PFT office.
6. Confirm patients for next day. Check for payments and place appropriate notes in Appt Notes with your initials upon confirmation. If unable to contact patient, a very brief note should be placed. Patients that owe an amount for their visit will have a \$ in their note indicating a payment should be made, but the amount should not be listed. The Appt Note should include test to be performed, Diagnosis (DX), Payment (\$), if required, then confirmation details and initials of person making the contact.
 - a. Example: (PFT/ABG/6min Walk- DX Dyspnea, \$ conf 4/25 jm)

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7. Print daily schedule for next day, and place in PFT office, covered in schedule folder. For TDC clinic Mondays, print additional schedule and labels for all TDC patients for RT to take to clinic. If PSS is not at front desk, another schedule should be given to Echo PSS to assist with patient check-ins and payments.
8. Daily schedule should be documented by RTs performing tests and filed away in appt book.

Failure to perform any of the daily operations will result in verbal reminders by the supervisor or manager. Continual reminders may be escalated to written warnings if non-compliance occurs up to and including termination.

Orientation

Staff will attend all required UTMB orientation classes (IHOP policy 5-1), and job specific classes as necessary. Respiratory Therapists and PSS will be with supervisor or manager for first day, then assigned to Senior Respiratory Therapist or other assigned staff for their department training. Staff will be given PFT orientation sheet containing department information. Staff will receive feedback periodically on their progress by senior staff and/or supervisor or manager. New hires will remain in orientation phase until supervisor or manager determines they are prepared to perform their competency evaluations. Supervisor or manager will use feedback from training staff for new employee progress. See policy 02-02 for competency.

Cell Phones

Staff are not permitted to use cell phones for personal use during operating hours. Staff may use cell phones when contacting a physician regarding patient care if they choose to do so. Staff may share personal cell phone numbers amongst themselves, if they choose to do so. Staff are required to maintain communication with supervisor/ or manager at all times. If patients are not in the laboratory and operations are complete, then staff may use phones in downtime. Staff may use personal cell phone during lunch. Excessive or personal use during patient testing is not allowed, and staff will be given verbal reminders. If behavior continues, supervisor or manager may escalate disciplinary action up to and including termination. Currently, department does not reimburse for cell phone use for business operations.

Emergencies/ Medical issues

In the event of a personal emergency, staff are to notify the supervisor or manager immediately. Varying circumstances determined by the supervisor or manager may be granted to the employee to maintain compliance on all policies. Staff must communicate with supervisor or manager consistently regarding attendance, tardies, medical issues that impact the staff's assigned schedule or workflow in the laboratory. Medical issues will be referred to the ADA officer and human resources depending on the nature of the issue. Failure to adhere or comply will result in escalating disciplinary action up to and including termination. If you fail

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to arrive at your assigned time and do not respond within a timely manner, the supervisor or manager will attempt to contact you, leave a voicemail, and contact your emergency contact. Failure in those attempts will result in notification of your local police for a wellness check to ensure your safety. Once employee is physically accounted for and safe per police, and employee doesn't contact UTMB within 24 hours, job abandonment will be assumed, and UTMB will terminate employment.

For any questions not addressed previously, please refer to UTMB IHOP policies located on the UTMB website and/ or contact your supervisor or manager. These policies also apply when you visit other site locations including but not limited to LCC (League City Campus), CLC (Clear Lake Campus), and specifically, VTC (Victory Lakes Town Center) and ADC (Angleton-Danbury Campus) PFT Laboratories. Other sites may also have additional policies, so please inquire to site managers for specific questions and/ or regulations.

References See Institutional Policies (IHOP) Policy 5-1 for listing of trainings.

This form documents the approval and history of the policies and procedures for the Pulmonary Function Laboratory. The Medical Director signs all policies verifying initial approval. Annually thereafter, the Director and/or designee may approve reviews and revisions.

Date	Approved by:	Signature
4/23	A. Duarte, MD Medical Director Pulmonary Laboratory	

By signing this document, I am attesting that I have read this policy and understand my responsibilities to comply. I understand this document will be kept in my employee personnel file.

Employee Signature	Date
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Employee's Emergency Contact Name	Relation	Emergency Contact Phone Number
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Supervisor/ Manager Signature	Date
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