

**Mass General Brigham
CONFIDENTIALITY AGREEMENT**

Mass General Brigham, its affiliates and joint venturers, have a legal and ethical responsibility to safeguard the privacy of all patients and to protect the confidentiality of their health information. Additionally, Mass General Brigham, its affiliates and joint venturers, must assure the confidentiality of its patient, fiscal, research, computer systems, management and other business information. In the course of my employment/assignment at a Mass General Brigham organization/practice, I may come into the possession of confidential information. In addition, my personal access code [User ID and Password] used to access computer systems is also an integral aspect of this confidential information.

By signing this document, I understand the following:

1. Access to confidential information without a patient care/business need-to-know in order to perform my job - whether or not that information is inappropriately shared - is a violation of this policy. I agree not to disclose confidential or proprietary patient care and/or business information to outsiders (including family or friends) or to other employees who do not have a need-to-know.
2. I agree not to discuss confidential patient, fiscal, research, computer systems, management and other business information, where others can overhear the conversation, e.g., in hallways, on elevators, in the cafeterias, on the shuttle buses, on public transportation, at restaurants, at social events. It is not acceptable to discuss clinical information in public areas even if a patient's name is not used. This can raise doubts with patients and visitors about our respect for their privacy.
3. I agree not to make inquiries for other personnel who do not have proper authority.
4. I know that I am responsible for information that is accessed with my password. I am responsible for every action that is made while using that password. Thus, I agree not to willingly inform another person of my computer password or knowingly use another person's computer password instead of my own.
5. I agree not to make any unauthorized transmissions, inquiries, modifications, or purgings of data in the system. Such unauthorized transmissions include, but are not limited to, removing and/or transferring data from Mass General Brigham's computer systems to unauthorized locations, e.g., home.
6. I agree to log off a Mass General Brigham workstation prior to leaving it unattended. I know that if I do not log off a computer and someone else accesses confidential information while the computer is logged on with my password, I am responsible for the information that is accessed.

Mass General Brigham, its affiliates and joint venturers, have the ability to track and monitor access to on-line records and reserves the right to do so. Mass General Brigham, its affiliates and joint venturers, can verify that those who accessed records did so appropriately.

I have read the above special agreement and agree to make only authorized entries for inquiry and changes into the system and to keep all information described above confidential. I understand that violation of this agreement may result in corrective action, up to and including termination of employment and/or suspension and loss of privileges. I understand that in order for any User ID and/or Password to be issued to me, this form must be completed.

Name

Date

ResCUE Model™ for Cross-Cultural Communication



Res

Respect Diversity

Avoid assumptions
Look for similarities
Accept differences

C

Communicate Clearly

Use interpreters with
LEP individuals
Use plain language
Use “teach back”

U

Understand Differences

Look for cultural differences
in:

- Timeliness
- Assertiveness
- Trust

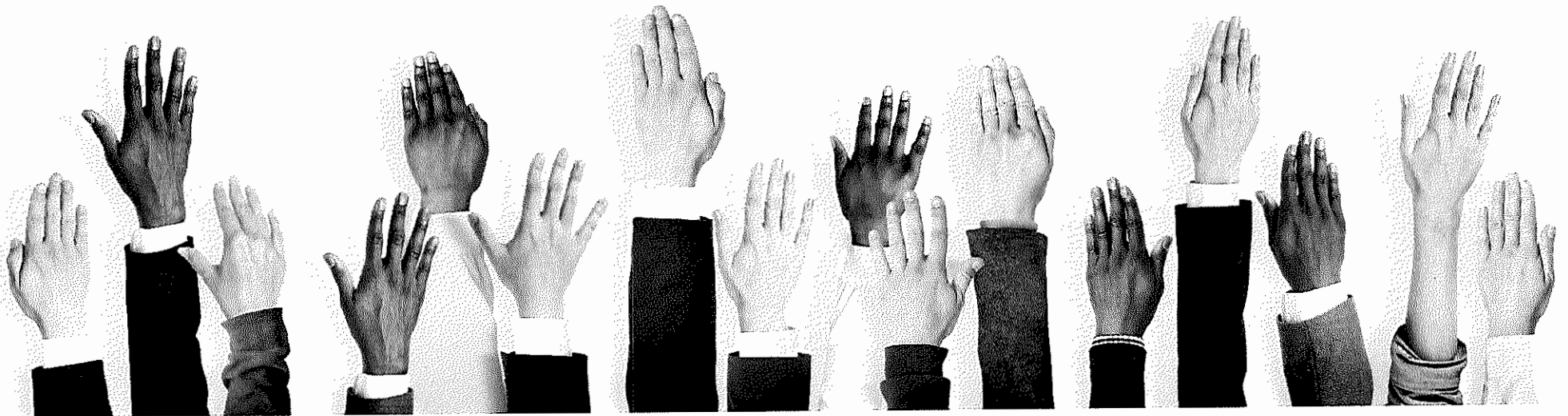
E

Engage for a Solution

Ask open-ended questions
Find a middle ground
Check for agreement

Orientation Objectives

- Discuss why diversity and inclusion is important to Mass General Brigham
- Learn a common language and key concepts of why diversity and inclusion is important
- Explore how dignity and respect impacts your job performance, feeling safe, and providing quality care to patients across the system



Definitions

di • ver • si • ty

Diversity includes all the ways that individuals and organizations are unique and different from each other. Mass General Brigham recognizes and celebrates the rich dimensions of diversity, whether these dimensions are inherent or acquired.

e • qui • ty

Organization Equity means that throughout Mass General Brigham, everyone has a fair and just opportunity: hiring, promotions, development.

Health Equity means that everyone should have a fair opportunity to attain their full health potential and that no one should be disadvantaged from achieving this potential.

Definitions

in • clu • sion

At Mass General Brigham, we acknowledge and engage differences in a deliberate and meaningful way. We actively involve everyone, including the under-represented, so that all employees are heard, valued and have an equal chance to contribute and grow.

D&I Aligns to Mass General Brigham Values

Diversity and Inclusion

We foster an environment where everyone can achieve their greatest potential and sharing diverse ideas and values is encouraged. We hire, develop and promote the best people.

Integrity and Respect

We treat everyone with concern and respect while always operating with integrity and honesty. Learning, Continuous Improvement & Personal Growth. We invest in our people and share with them responsibility for their personal and professional growth.

Teamwork and Collaboration

We collaborate as a team of professionals, value the unique contributions of each, and share with each other in the pursuit of the highest level of performance as individuals and as an organization.

Why Is Diversity & Inclusion Important?

How I see the world

Communication

Impact on patient care

Innovation/Research

Teamwork

Why is Diversity & Inclusion Important to Mass General Brigham?

- We recognize that everyone is unique and part of the diversity at Mass General Brigham
- While recognizing everyone's contribution, we also have a strategic goal of increasing the racial and ethnic diversity across all levels of the organization
 - 32% of our workforce is racially or ethnically diverse



MGB Workforce: Changing Demographics

OUR WORLD IS CHANGING AND WE ARE BECOMING MORE DIVERSE EVERY DAY INCLUDING ...

- **Generations:** There are currently 5 generations in the workplace
- **Socio-economic class:** Our employees come from different socio-economic backgrounds
- **Sexual orientation, gender identity & expression:** MGB is pleased to support all employees regardless of sexual orientation, gender identity or gender expression
- **Race & ethnicity:** MGB employees come from a wide range of races and ethnicities and this strengthens our institutions
- **Disability:** MGB is pleased to have people with disabilities in our workforce across the system



Why Is Diversity and Inclusion Important to Patient Care?

- In a patient-centric approach, research shows that treating people with respect:
 - Improves patient safety
 - Improves access to healthcare
 - Improves outcomes for patients
- MGB cares for patients from many different cultures and backgrounds
 - 30% of our patient population comes from outside the U.S. to receive care within the system



How We Are Addressing DE&I

DE&I Systemwide Summit

Employee Resource Groups

Supporting member of the
Equity of Care pledge

Gender identity/expression &
Disability policies and toolkits

Community Partnerships &
Sponsorships

DE&I Educational Courses

For more information visit: <https://www.partners.org/About>



Putting Diversity, Equity & Inclusion to Work

- Our words and our actions demonstrate our commitment to creating a workplace that values diversity and inclusion
- Seemingly small actions can have a big impact upon our working relationships
- Dignity and respect are the ways that we build an inclusive and supportive workplace culture



Definitions

dig • ni • ty

Our inherent value and worth.

Donna Hicks, PhD, Weatherhead Center for International Affairs at Harvard University

re • spect

The willingness to believe that other people's experiences and ideas are valid, important and worthy of being acknowledged.

Kari Heistad, MIA, Founder & CEO, Culture Coach International

Dignity and Colleagues

Treating others with dignity means we recognize both physical and emotional pain

- Humans are wired for empathy
- When we see someone treated with dignity, we feel better too
- When we treat each other with dignity:
 - It allows us to focus more of our attention and energy on doing our jobs well
 - Reduces conflicts, improves teamwork
 - Increase innovation and creativity



What happens when we are not treated with dignity and respect?

- Our sense of self-worth suffers
- We are less willing to share information and ideas
- We trust and engage less

Dignity and Patient Care

Dignity means treating the whole person, i.e., physical and emotional pain

- This helps the patient to feel seen and heard
- Builds trust and rapport with the patient
- Improves patient satisfaction scores

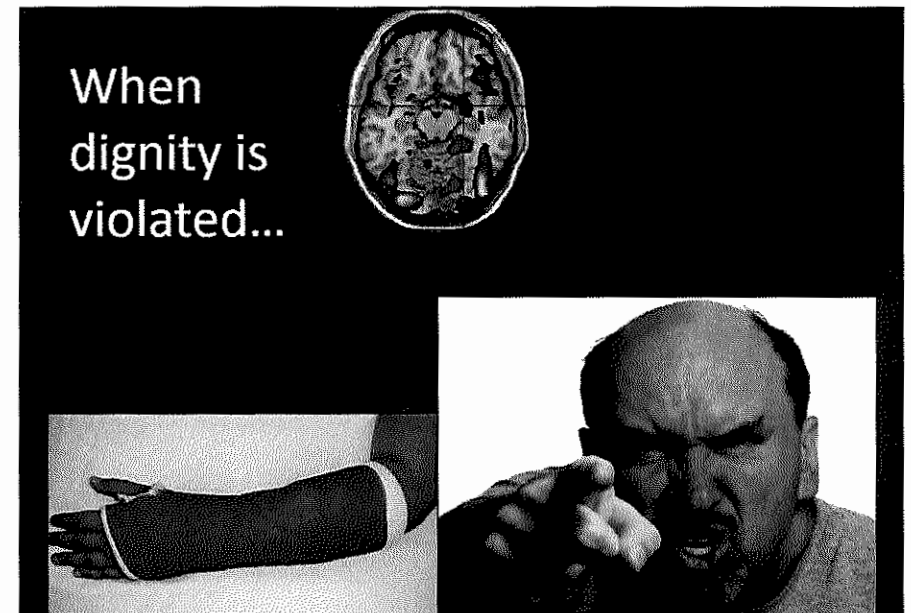
What happens when patients are not treated with dignity and respect?

- They are less willing to share information
- They trust less
- Healthcare outcomes worsen



Harm To Our Dignity

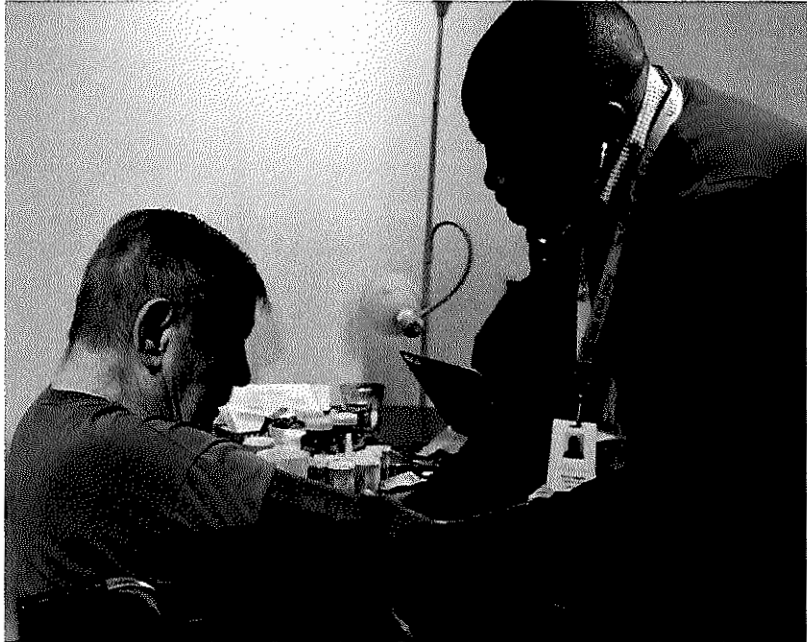
- A physical injury the same as a violation to our Dignity
- Dignity (or the lack thereof) is contagious
 - We see it, we feel it, we do it
 - “Ripple Effect”
- Even though we cannot see the injury, it is still there
- If we think we have injured someone’s dignity, we need to seek to make it right



How do we repair someone’s Dignity?

- Apologize
- Ask how I can address the harm caused?

Showing Respect Conveys Dignity

- Respect and dignity are closely linked
 - When we treat other people with respect, they feel their value and worth has been recognized
 - Dignity is the idea, respectful behavior is the action
- 
- When we treat people with respect, we create a workplace that brings out the best in ourselves and others
 - When we treat our patients with respect, we create more engaged patients, better healthcare outcomes, and improved patient satisfaction scores

Treating Others With Dignity and Respect



Examples:

- Give someone your full attention when interacting with them
- Pay attention to what is not being said
- Show that you are listening by responding to concerns
- Greeting people when you pass them in the hallway
- Putting away your phone when talking with people

Key Take-Aways

- D&I are important to all of the work that we do at MGB:
 - Creates a more welcoming and inclusive work environment for all employees
 - Creates a workplace where we all want to come to work
 - Promotes better healthcare outcomes
- Treating people with dignity and respect:
 - Creates sense of belonging
 - Encourages ideas and creativity in the workplace
 - Is everyone's responsibility everyday
 - Improves the patient experience





I reviewed the MGB Diversity, Equity & Inclusion presentation.

NAME:

DATE:

SRN ORIENTATION AND ANNUAL REVIEW SUMMARY



FOR USE BY: *INCLUDING BUT NOT LIMITED TO - CONTRACT PERSONNEL (E.G. IV ACCESS-RN, SODEXO, NOVA, ETC), VOLUNTEERS, STUDENTS, HAIRDRESSERS, INTERPRETERS, RESEARCH STAFF, COMMUNITY PARTNERS (E.G. ELDER SERVICES, SCI ASSOC. OF MA, MA COMMISSION, ETC.), MGB EMPLOYEES, OUTSIDE POLICE/SECURITY, AND OTHER NON-EMPLOYEES*

Welcome to the Spaulding Rehabilitation Network (SRN). We are pleased to have you as part of our team. Providing a safe and caring environment for our patients and staff is our utmost priority. Please thoroughly read this brochure to understand your role in maintaining this environment. Speak to your supervisor promptly if you have any questions or concerns.

SCC – Spaulding Cape Cod : SHC – Spaulding Hospital Cambridge :
SNS – Spaulding North Shore : SRB – Spaulding Rehabilitation
Brighton : SRH – Spaulding Rehabilitation Hospital

MISSION STATEMENT

SRN is committed to delivering compassionate care across the healthcare continuum to **improve quality of life** for persons recovering from or learning to live fully with illness, injury and disability.

VISION STATEMENT

SRN will be the nationally recognized leader in innovation, research and education, achieving exceptional patient outcomes and known for delivering a broad range of integrated health care solutions. We will exercise leadership to shape health policy and **advocate for our patients, their families and our staff.**

Important items to remember:

- You are required to **wear your picture ID badge at all times** while in SRN facilities.

- No weapons of any kind are allowed at our SRN facilities.
- Smoking/vaping is not allowed at our SRN facilities.
- You must complete your job-specific orientation program in your assigned work area.
- SRN InSite = www.pccinsite.partners.org

Helpful information, and SRN Policies, are located on SRN InSite

- Facility-specific emergency dial numbers:
SCC = 0 : SHC = 2222 : SRB = 60 : SRH = 86666 :
Bldg. 79/96 = 911 : Stand alone outpatient = 911
Refer to your SRN employee badge emergency card

WORK PLACE VIOLENCE

If a person exhibits sudden and negative behavioral changes, call your supervisor to assist in de-escalating the situation. If necessary, dial the emergency number in your facility and request a “Security Alert,” specifying the location. Specially trained staff will arrive to help resolve the situation. If you feel that you or someone else is at imminent risk of harm, please dial 911 immediately.

EMERGENCY MANAGEMENT

Familiarize yourself with the location of exits, fire extinguishers and fire alarm pull stations. Please notify your supervisor or call the operator to announce the following emergencies:

Types of Alerts:

- Medical Alert** – e.g. cardiac/respiratory arrest, or trach emergency
- Security Alert** – e.g. missing person, aggressive person, or active shooter.
- Weather Alert** – e.g. sudden or severe weather, tornado, hurricane or flash flood
- Facility Alert** – e.g. hazardous spills or fires

Rapid Response Team (RRT):

An RRT is activated when a patient has a significant change in medical status (BP, HR, O2, Cognition, Fall). Any member of the healthcare team or the patient/patient’s family can activate the RRT. It is available at the following inpatient facilities: SCC, SHC, and SRH. A ‘Medical Alert’ should be requested in these circumstances at SRB and at stand-alone outpatient facilities. Follow all **current** facility-based response protocols.

Unique RRT emergency dial number at SCC = 4222

For Active Shooter:

- Run
- Hide
- Fight

Call 911 to activate Emergency Response

FIRE SAFETY

Our code for fire is “Facility Alert.” Upon discovery of a fire, smoke, or suspected fire, remember:

R-A-C-E: Rescue – Alarm – Contain – Extinguish

Rescue patients and get anyone out of danger

Alarm: Pull the alarm; indicate the location

Confine: Close all doors and windows

Extinguish the fire with a fire extinguisher or evacuate to a safe area. Do **not** move through the building. Do **not** use elevators. If you are in the immediate area of the fire, evacuate to a safe location, horizontally or vertically, bringing patients and visitors with you.

To use a fire extinguisher: P.A.S.S.

Pull pin

Aim nozzle

Squeeze handle

Sweep at base of fire

ELECTRICAL EQUIPMENT

To ensure continuous electrical power supply, patient care equipment should be plugged into the **red emergency receptacles**. All electrical equipment must be tested and approved by the Maintenance Department prior to use at SRN.

INFECTION PREVENTION and BLOODBORNE PATHOGENS

HAND HYGIENE is the single most important procedure in preventing the spread of infection. Specific hand hygiene requirements are noted at the entry to patient rooms:

Hand Washing – Use soap and water for a vigorous 20-second rubbing together of well-lathered hands followed by a thorough rinsing. (Must use when hands are visibly soiled and after using the bathroom and before eating)

Hand-Rub – Use alcohol-based hand sanitizer when frequent hand hygiene is required (entering/leaving patient rooms, donning/doffing gloves, before and after contact with patients or patient equipment.) Cover

entire hands and fingers rubbing all surfaces, allow to air dry.

Wear eye protection or face shield to protect mucous membranes during procedures and patient care activities that are likely to generate splashes or sprays of body fluid.

STANDARD PRECAUTIONS & PERSONAL PROTECTIVE EQUIPMENT (PPE) SRN recognizes Standard Precautions as the minimum infection prevention measures for patient care in both inpatient and outpatient settings. These practices protect healthcare personnel and prevent the spread of infections among patients. Standard Precautions include:

- 1) hand hygiene,
- 2) use of appropriate PPE (e.g. gloves, gowns, masks, protective eyewear),
- 3) respiratory hygiene / cough etiquette,
- 4) safe injection practices, and
- 5) safe handling of potentially contaminated equipment or surfaces in the patient environment.

*Follow all **current** facility-based PPE protocols.*

TRANSMISSION-BASED PRECAUTIONS are used to supplement Standard Precautions for patients with known or suspected infection.

Transmission-Based Precautions include:

- 1) Contact Precautions (requires gown and gloves when entering a patient's room)
- 2) Contact Precautions Plus (as noted above plus handwashing and disinfection with bleach)
- 3) Droplet Precautions (requires a mask and goggles or face shield when entering a patient's room) and
- 4) Airborne Precautions (requires a fit-tested N95 respirator)
- 5) Enhanced Respiratory Isolation (requires gown, gloves, fit-tested N95 respirator, goggles or face shield – and door remains closed at all times)
- 6) Strict Isolation (gown, gloves, fit-tested N95, goggles or face shield – requires a NEGATIVE PRESSURE room and door remains closed at all times)

Precaution instruction signs are posted outside of patient rooms.

BLOODBORNE PATHOGENS All blood and body fluids are considered infectious. Any exposure to blood and/or other body fluids and sharps injuries must be washed immediately (for 5 – 10 minutes) and then

reported to the nursing supervisor for assistance to ensure timely activation of the Post Exposure protocol. Follow all **current** facility-based infection prevention protocols.

HAZARDOUS CHEMICALS & SDS

Safety Data Sheets (SDS) provide information about the chemical substances within products, safe handling procedures, first aid measures and procedures to be taken when a product is accidentally spilled or released. The SDS can be found on SRN InSite under 'Quicklinks.'

CORPORATE COMPLIANCE

Legal or ethical questions, or a belief that a member of the SRN community has violated a legal, ethical or regulatory responsibility, should be raised with your supervisor. You may also consult directly with SRN entity Directors of Quality and Compliance or the SRN Chief Compliance Officer (617-952-5991) or by calling the **confidential MGB Compliance Hotline at 1-800-856-1983.**

DIVERSITY, EQUITY & INCLUSION

At SRN, we have a commitment to respecting all people we serve, including our co-workers. We accept and embrace a wide variety of human differences and the values of cultural humility. Our policies protect our patients and our workforce from disrespect and discrimination. Please consult your supervisor for information and resources when needed.

ANTI - HARASSMENT

If any person believes that they have been subjected to sexual, racial or other types of harassment, the person has the right to file a complaint with SRN. This may be done in writing or verbally. The incident should be reported immediately to the supervisor, or your Human Resources representative.

HIPAA – CONFIDENTIALITY & PRIVACY

Privacy and Security of protected health information (PHI) is a patient right. Only access information that is needed to perform your job. Do not discuss PHI in public areas. Encrypt all devices used for SRN business – contact IS for assistance (617) 952-5555. Instead of email, use MyChart/Patient Gateway whenever possible to communicate with patients.

CYBER-SECURITY

Healthcare organizations are targets for online attacks launched to gain access to patient and employee health

and financial data. Do your part to guard against cyber phishing – never click on attachments or links from unknown individuals. When in doubt – send an email to "Report Phishing" or nospam@partners.org. Lock your computer screen when you leave your work station. Never share your passwords. Make sure to encrypt all devices.

RESTRAINTS

Non-behavioral restraints may be used if a person is at risk of interfering with medical treatment, and only after alternative, less-restrictive methods are proven ineffective. Please refer to the SRN Restraint Policy/Procedure for details.

ABUSE NEGLECT / DOMESTIC VIOLENCE

All staff are mandated reporters for the possible abuse and neglect of a minor child, adult disabled person or elderly person. The Joint Commission requires healthcare providers to share resource information with persons who may be involved with domestic violence. If you suspect abuse and neglect or domestic violence, immediately contact your supervisor.

NATIONAL PATIENT SAFETY GOALS (NPSG)

Recognizing and responding to changes in a patient's status is a primary patient safety goal. SRN actively addresses recognized NPSGs. Information about the current NPSGs can be located on SRN InSite under 'Quicklinks' and 'Joint Commission Resources.'

PATIENT RIGHTS

Patient Rights are posted in a public area at all sites. If you observe or suspect a breach of patient rights, you have a responsibility to contact your supervisor.

PATIENT FALLS

It is everyone's job to prevent patient falls. If you see a fall, please do not attempt to move the patient. Someone must always stay with the patient. Alert a nurse or notify a supervisor.

Please keep this brochure for your reference and give a signed copy to your SRN supervisor/liaison.

I have read and understand the Orientation Summary brochure.

Name(print): _____

Position: _____

Signature: _____

Date: _____

PHS NETWORK LOG-ON AND E-MAIL REQUEST FORM

Person-of-Interest (POI) Form

ALL FIELDS ARE REQUIRED TO OBTAIN NETWORK LOG-ON & EMAIL. Missing information WILL result in a delay of your request and will be sent back. Please send completed forms to: PHSPOIRequests@partners.org. This form must be completed 5-7 days prior to a POI starting.

Timeline Information

First Day of Work (MM/DD/YY)	
Last Day of Work [Tentative] (MM/DD/YY)	
Is this POI being used to fill a FTE vacancy?	
POI Type (Contractor/Intern/Consultant/Other)	
Referral Source and/or Agency Name	
-If other, what is the name of the company?	
Do you have a MSP, contract, or business agreement with the above agency?	

POI New Hire Information

POI Legal First Name	
POI Legal Last Name	
Address 1	
City	
State	
Zip Code	
Primary Phone Number	
E-mail Address	
Gender	
Birth Date (MM/DD/YY)	
Full Social Security Number	

Department Information (Note: Must report to a PHS employee)

PHS PSoft Department Code (usually begins with PR#### or PRX####)	
PHS PSoft Manager Name	
Do you have a workstation for this POI?	
If yes, what is the cube/workstation # (If applies)	
Worksite Location (Ex. LCC, Assembly Row)	

Information Systems & Partners e Care ONLY

Position Control ID (PCS ID)	
How is this position being funded?	
-If other, how is it being funded?	
Cost Center Number	
Cost Center Owner	

Computer Access Information

Does the person need a network log-on?	
Does the person need an e-mail account?	

Additional Info

Enter your text here.

SPAULDING NURSING & THERAPY CENTER, BRIGHTON

SEXUAL HARASSMENT POLICY

APPLIES TO: All employees, professional staff and volunteers

1. POLICY

1.1. It is the goal of Spaulding Nursing & Therapy Center, Brighton (SRB) to promote a workplace that is free of sexual harassment. Sexual harassment of employees occurring in the workplace or in other settings in which employees may find themselves in connection with their employment is unlawful and will not be tolerated by SRB. Further, any retaliation against an individual who has complained about sexual harassment or retaliation against individuals for cooperating with an investigation of a sexual harassment complaint is also unlawful and will not be tolerated.

1.2. Because SRB takes allegations of sexual harassment seriously, it will respond promptly to complaints of sexual harassment, and where it is determined that such inappropriate conduct has occurred, SRB management will act promptly to eliminate the conduct and take corrective action.

2. DEFINITIONS

2.1. In Massachusetts, the legal definition of sexual harassment is sexual advances, requests for sexual favors, and verbal or physical conduct of a sexual nature when:

2.1.1. submission to or rejection of such advances, requests or conduct is made either explicitly or implicitly a term or condition of employment or a basis for employment decisions, such as promotions, or scheduling vacations; or

2.1.2. such advances, requests or conduct have the purpose or effect of unreasonably interfering with an individual's work performance by creating an intimidating, hostile, humiliating, or sexually offensive work environment.

2.2. Sexual harassment may occur regardless of the intention of the person engaging in the conduct. While it is not possible to list all those circumstances that constitute sexual harassment, the following are some examples of conduct, which, if unwelcome, may constitute sexual harassment, depending upon the totality of the circumstances, including the severity of the conduct and its pervasiveness:

2.2.1. Sexual advances whether or not they involve physical touching;

2.2.2. Requests for sexual favors in exchange for actual or promised job benefits such as favorable reviews, salary increases, promotions, increased benefits, or continued employment;

2.2.3. Sexual jokes;

2.2.4. Use of sexual epithets, written or spoken references to sexual conduct, gossip regarding one's sex life, comment on an individual's body, comment about an individual's sexual activity, deficiencies, or prowess;

2.2.5. Displaying sexually suggestive objects, pictures, or cartoons;

2.2.6. Leering, whistling, brushing against the body, sexual gestures, suggestive or insulting comments;

2.2.7. Inquiries into one's sexual experiences;

2.2.8. Discussion of one's sexual activities; and

2.2.9. Assault or coerced sexual acts.

2.3. Either sex may be the harasser.

3. PROCEDURES

3.1. Complaints: Any employee who feels s/he has been sexually harassed has several ways to make his/her concerns known:

3.1.1. If the employee can comfortably do so, s/he should inform the employee engaging in the harassment that the conduct is offensive and must stop.

3.1.2. If the employee does not wish to communicate directly with the person or if communication has not brought results, the employee has the right to file a complaint with SRB.

3.1.3. Complaints may be filed in writing or verbally. The employee should contact Wendy Shea, Human Resources Manager, at 617-726-9705. If an employee feels more comfortable initially speaking to a representative of management, s/he may do so. The management representative receiving the complaint should inform the Human Resources Manager who will ensure an investigation takes place.

3.2. Sexual Harassment Investigation

3.2.1. When SRB receives a complaint, it will investigate the allegation fairly and promptly. The investigation will be conducted in such a way as to maintain confidentiality to the extent practicable under the circumstances. The investigation will include a private interview with the person filing the complaint and with witnesses, if any. SRB will also interview the person alleged to have committed sexual harassment. When the investigation is completed, the person

filing the complaint and the person alleged to have committed the conduct will be informed of the results of that investigation.

3.2.2. If it is determined that inappropriate conduct has occurred, SRB will act promptly to eliminate the offending conduct and take corrective action.

3.3. Corrective Action: An employee who has been found in violation of this policy by engaging in sexual harassment or by falsely accusing another employee of doing so, will be subject to Corrective Action. SRB may, at its discretion, determine that a first offense will result in immediate termination.

3.4. State and Federal Agencies

3.4.1. Federal discrimination enforcement agencies:

The United States Equal Employment Opportunity
Commission

John F. Kennedy Federal Building
475 Government Center
Boston, MA 02203
(617) 565-3200
(800) 669-4000

3.4.2. State discrimination enforcement agencies:

The Massachusetts Commission Against Discrimination

Boston Office	One Ashburton Place - Room 601 Boston, MA 02108 (617) 994-6000
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Springfield Office	436 Dwight Street – Room 220 Springfield, MA 01103 (413) 739-2145
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Originated: March 2002

Last Revision: November 2006

Last Reviewed: October 2017

I received a copy of the Spaulding Rehabilitation Network's Sexual Harassment Policy. Should I have any questions regarding the policy, I will contact my supervisor, a Human Resources Representative or the Executive Director.

Print Name

Signature

Date