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Medical Care Program	General
SCPMG Laboratory System	Policy

Call-Off / Absence Notification Policy

Safety Message

Give yourself plenty of time to come to work so that you don't have to rush and potentially have an injury.

Introduction

This policy describes the expectations and responsibility to call-in to report an absence within the laboratory and pathology department. This policy is observed in conjunction with the national policy for Approval of Employee Time and Attendance, the regional policy for TIME Keeping procedures, and the department Attendance and Time Off policy. The intent of the policy is to establish a departmental call-off / absence notification policy.

Scope

This policy applies to all laboratory and pathology hourly staff. All laboratory and pathology staff will observe the Call-Off / Absence Notification policy described in the provisions below.

Reporting an Absence

It is an employee's responsibility to report to work as scheduled. Punctuality and regular attendance are essential elements of satisfactory job performance.

When an employee is unable to report to work for any reason, it is imperative that they provide notification of their absence as soon as possible before their schedule shift.

All employees are to adhere to the following process when unable to report to work:
1. Employees must call the Laboratory Department directly and ask to speak to a manager/supervisor to report their absence.
    a. A manager/supervisor is present on-site during business hours and most evening, Monday through Friday.
    b. Do not leave a voicemail for any manager/supervisor, as it may not be retrieved.
2. If an employee calls off for a shift during night hours, inform the GY Shift Lead CLS of your call-off.
3. The GY Shift Lead CLS will document each call-off during the night using a call-off form, which will be kept on the lead clipboard.
4. MONDAY TO FRIDAY: At 0500, the Scheduler on duty will collect all call-off forms from the GY Lead CLS.
    a. If no Scheduler arrives at 0500, the GY Lead CLS must page and notify the on-call manager/supervisor of call-offs at 0530 via text or phone call.
    b. GY Lead CLS will continue to take call-offs until 0700 or until lab management is on-site and continue to communicate call-offs to the scheduler.

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5. WEEKENDS AND HOLIDAYS: GY Lead CLS must page and notify the on-call manager/supervisor of call-offs at 0530 via text or phone call. On-call manager/supervisor will also contact the laboratory in the morning to confirm all call-offs were received no later than 0600.
    a. Lead CLS' will continue to notify manager/supervisor on-call as call-offs occur via text or phone call.

Notes:
1. A family member or friend cannot call-off for an employee, unless the circumstances are exceptional.
2. Be prepared to discuss with management the reason for your call-off for timekeeping purposes (SICK, CESLA, FMLA, LBL, etc.).
3. All text messages to managers/supervisors must be acknowledged by the managers/supervisors. If the text is not acknowledged, the Lead CLS must call the manager.

Documenting Employee Call-Offs

An Employee Call-off form must be completed by the manager/supervisor or Lead CLS for each call-off received. The employee must provide the manager/supervisor or Lead CLS the following information:
- Full name, phone number where you can be reached up to 3 hours after the start of shift, location you are scheduled to work, the shift and expected date and time of return to work.
- Reason for calling in:
    - Illness:
        - Own
            - Is it work-related and if previously reported?
                - Who was this reported to?
            - Is it for approved FMLA?
                - Paid or unpaid
        - Family member
            - Relationship
            - Providing care to that family member today?
            - CESLA or FMLA?
                - Is it approved FMLA and specify if more than one on file
                    - Paid or unpaid
                        - Paid from CESLA, LBD, or VAC?
    - Personal emergency
        - What is the emergency?
        - Approximately when will the emergency be resolved?
        - Will you be able to report to work?
            - Expected time?

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- If your ability to report to work is unknown, what time will you contact your Manager with a status?
  - ○ Do you have Emergency Flex day available?

Timeliness of Reporting an Absence

If an employee is unable to report to work for any reason, it is the employee's responsibility to contact the Laboratory Department before their scheduled shift, no later than two (2) hours prior to their scheduled start time.

Note: For staffing purposes, it is preferable that employees call in at least 6 hours in advance for the night or evening shifts.

Physician Certification

Management has the right to request supporting documentation for unscheduled absences on a case-by-case basis. Physician certification of illness does not excuse an unscheduled absence. Failure to provide the requested documentation is considered a failure to follow a management directive and may result in corrective action.

Employees under a physician's certification of illness must communicate the length of the intended absence and submit a copy of the Document of Medical Impairment (DMI) to their immediate supervisor as soon as practical.

An employee must report their status after each physician's appointment, if under an indefinite off work order by their physician.

An employee who is absent for 3 calendar days or more must contact a Laboratory manager directly with an expected date of return to work. Additionally, if the 3 or more calendar days of absence are due to personal illness or illness of a family member, a physician's certification of illness may be required. Furthermore, a manager may request a physician's certification for absences less than 3 calendar days if deemed necessary.

Note: Family is defined as set forth in the family leave provisions of the CBA.

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Absence Notification Process

IF	THEN
1. Monday through Friday 0500-2200	• Call the lab at 310-517-2620 Option 4 and speak to a manager/supervisor on duty. • If NO manager/supervisor is on duty, follow step 2 below. • Do not leave a voicemail.
2. Monday through Friday 0500-2200 (no manager on duty) **OR** Monday through Friday 2200-0500	• Call 310-517-2620 Option 4 and speak to the assigned Lead CLS. Describe the nature of the call-off (Sick, CESLA, FMLA, etc.) • Lead CLS will document the call-off on the "call off" form. • At 0500, the Scheduler on duty will collect all call-off forms from the GY Lead CLS. • If no Scheduler arrives at 0500, the GY Lead CLS must page and notify the on-call manager/supervisor of call-offs at 0530 via text or phone call. • GY Lead CLS will continue to take call-offs until 0700 or until lab management is on-site and continue to communicate call-offs to the scheduler.
3. Weekends and Holidays (weekend is considered Friday 1800 to Sunday 2300)	• GY Lead CLS must page and notify the on-call manager/supervisor of call-offs at 0530 via text or phone call. • On-call manager/supervisor will also contact the laboratory in the morning to confirm all call-offs were received no later than 0600. • Lead CLS' will continue to notify manager/supervisor on-call as call-offs occur via text or phone call.

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Note: All text messages to managers/supervisors must be acknowledged by the managers/supervisors. If the text is not acknowledged, the employee or Lead CLS must call the manager.

No Call/ No Show

Failure to provide notification about an unscheduled absence before the end of the scheduled shift is considered a No Call/No Show which may result in disciplinary action, up to and including termination. Refer to policy SBMC-PPP-0283, Attendance and Time off Policy.

Corrective Action

Failure to comply with the department call-off policy may lead to corrective action as defined in the Regional Attendance Program.

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Derivative Documents

None

Attachments

A. Employee Call-Off Form

References

UHW Collective Bargaining Contract.
UFCW Collective Bargaining Contract.

Related Documents

Document Number	Title
SCR.HR.TIME.001	Regional TIME Keeping Procedures
NATL.NPS.TIME.001	Approval of Employee Time and Attendance
NA	Kaiser Permanente Southern California Attendance Program
LAS 1360	Attendance and Time Off Policy

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ATTACHMENT A
EMPLOYEE CALL-OFF FORM

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Call-off Information for Managers/Supervisors or Leads
Leads: Please attach form to Lead Clipboard.
Monday-Friday, after 0500 hand-off to scheduler on duty.

Date and Time of Call	Date: Time:
Supervisor or Lead	
Employee	First Name: _____ Last Name: _____ Phone number employee can be reached at up to 3 hours after the start of shift. _____
Location where Scheduled	Location: Date Scheduled: Time Scheduled:
Reason for Call-in	

☐ Illness Own
Request Doctor's note if calling in on weekend for sick.
	☐ Dr's Note requested (for sick on weekend)
	☐ Work-related?
	     ☐ Has this been previously reported? ☐ Yes or ☐ No
	     ☐ Who was this reported to: _____
	☐ Approved FMLA?
	     ☐ Paid or
	     ☐ Unpaid

☐ Illness Family	Family Member: Relationship _____
	Providing care to that family member today? ☐ Yes or ☐ No
	Requesting:
	     ☐ CESLA
	     ☐ FMLA
	          ☐ Approved FMLA?
	          If more than one, which one:
	          _____
	          ☐ Unpaid? or
	          ☐ Paid?
	               Paid from:
	                    ☐ CESLA
	                    ☐ LBD
	                    ☐ Vacation

☐ **Personal Emergency**	What is the emergency? _____
	Approximately when will the emergency be resolved?
	_____
	
	Will the employee be able report to work?
	     What time? _____
	If ability to report to work is unknown, what time will employee contact Manager with status? _____
	     ☐ Does employee have Emergency Flex days available?

Employee Call Out Form - 02-2025

Signature Manifest

Document Number: SBMC-PPP-0285   **Revision:** 02

Title: Call-in to Report Absence Policy

Effective Date: 07 Mar 2025

All dates and times are in Pacific Standard Time.

Call-in to Report Absence Policy

Laboratory Manager Approval

Name/Signature	Title	Date	Meaning/Reason
Jay Raymund Castaneto (K258559)	Assistant Lab Director	25 Feb 2025, 05:11:33 PM	Approved

Operations Director Approval

Name/Signature	Title	Date	Meaning/Reason
Carlo Punu (F316195)	DIR OPER AREA LAB	26 Feb 2025, 02:25:34 PM	Approved

Medical Director Approval

Name/Signature	Title	Date	Meaning/Reason
Christopher Hale (K706810)	CLIA Director	06 Mar 2025, 05:45:30 PM	Approved