


**GUAM MEMORIAL HOSPITAL AUTHORITY
ADMINISTRATIVE MANUAL**

APPROVED BY:  Peter John D. Camacho, M.P.H. Hospital Administrator/CEO	RESPONSIBILITY: Hospital-wide	EFFECTIVE DATE: February 15, 2017	POLICY NO.: A-HR1900	PAGE: 1 of 4
TITLE: OUTSIDE EMPLOYMENT				
LAST REVIEWED/REVISED: 02/2017				
ENDORSED: EMC 02/2017				

PURPOSE:

To ensure that GMHA maintains a safe level and mix of staff.

POLICY:

Title 4 GCA, §4105 (D) (4) Departmental Rules and 4205. Miscellaneous Prohibitions. (e) through (h) provides in part:

§ 4105(d)(4): “that employees may work at outside employment not in conflict with their government service, not such as would bring the government of Guam or its employees into disrepute, but that any employee may undertake such employment only if such is not in conflict with that person’s duly scheduled hours and only with the consent of that person’s department or agency head, which consent may not be unreasonable withheld,”

§4205(e): “No officer or employee of the Government shall conduct or engage in any business or trade outside the government services without the prior approval of his department head as provided in §4105 (d) of this Chapter:

In addition to the limitation contained in §4105(d) of this Chapter:

- (1) No approval shall be granted if such business or trade may be prejudicial to the best interests of the people or if there may be a conflict of interest between the officer’s or employee’s government position and the outside trade or business;
- (2) Every officer or employee who has a direct or indirect interest in any firm, partnership, business or corporation which contracts with the Government, at the time of submission of bids commencement of negotiations as the case may be, shall file a statement under oath with the Department of Administration for Executive Branch employees, and the Court Administrator for Judiciary employees describing such interest.

Any such statement shall also be given to the department head of such employee and shall also be a public record for all purposes. As used in this Section, interest includes of not less than five percent (5%) of the firm, corporation or partnership or the employee having a position with the said firm, corporation or partnership equivalent to that of officer, manager, or other decision-making position.

- (3) Failure by an officer or employee to comply with any of the provisions of Subsection (e) of this Section shall be grounds for dismissal from government services and the Director of Administration or Court Administrator, as the case may be, shall order the compensation stopped of any officer or employee found to be in violation.
- (4) Any contract entered into involving a violation of Subsection (e) of this Section may be declared null and void of the discretion of the Government.
- (5) No contract may be entered into whereby any officer or employee shall have any administrative, supervisory or directory power over the execution thereof if such officer or employee has any direct or indirect interest in the contractor or in the contract. All contracts entered into in violation of this Subsection are void.”

PROCEDURE:

1. The Hospital Administrator shall devise a form for approval of Outside Employment.
2. All (part and/or full-time status) employees shall complete the Outside Employment form upon hire provided by the Human Resources Department.
3. The Human Resources Department shall maintain the Outside Employment form. The Outside Employment policy and form is made a part of the initial HR new employment processing packet.
4. The Employee must obtain a form for Outside Employment from the Human Resources Department.
5. The Employee must submit for approval the Outside Employment form to their supervisor, department manager and/or division manager.
6. That no employee with a supervisory and/or managerial position may serve in the same capacity/role in his/her outside employment.
7. The Hospital Administrator shall have the final approval of all requests for Outside Employment at the recommendation of the employee’s supervisor and/or division manager.
8. Outside employment shall not be in conflict with the employee’s work assignment and scheduled hours of Hospital employment. Employee shall submit to their immediate supervisor their outside work schedule.
9. To ensure that employees are rested and fit to work their work schedule, the employee shall have a minimum of six (6) hours rest period prior to their assigned shift.
10. The employee may be requested, by the Hospital Administrator, in writing, to terminate their outside employment if it is found to be in conflict with work assignment and scheduled hours of Hospital employment and/or it impacts the work performance at GMHA.

11. Failure of the employee to obtain prior approval from the Hospital Administrator for outside employment may constitute disciplinary action taken against the employee.
12. The Hospital Administrator may review the adequacy of such request and the approval shall be renewed on an annual basis.
13. Outside Employment/Business Activities authorization shall be renewed on an annual basis if you have outside employment. If you have more than one (1) outside employer, you must request approval for each outside employer.
14. The renewal request shall be no less than sixty (60) calendar days prior to the beginning of the new fiscal year. (i.e., renewals are due prior to July 31st of every calendar year, for the following year).
15. When the individual is a regular employee, the completed form shall be filed in the employee's HR official personnel file and a copy provided to the employee's respective department.
16. When the individual is not an employee, but serves as an Officer (board member or an individual assigned to GMH) the acknowledged form is filed with the GMHA Board of Trustees and/or the Procurement Office.
17. Employees found not to be in compliance with personnel rules, regulations, or laws governing outside employment may be subject to disciplinary action.

RELATED POLICIES:

Policy No. A-HR2000, Safe Hours of Work of the Administrative Manual.

RESCISSIONS:

Policy No. 8650-1.217, Outside Employment of the Human Resources Department Manual made effective December 28, 2009.

ATTACHMENTS:

- I. [Request for Approval of Outside Employment and/or Business Activities](#)

ATTACHMENT I

**GUAM MEMORIAL HOSPITAL AUTHORITY
REQUEST FOR APPROVAL OF OUTSIDE EMPLOYMENT
AND/OR BUSINESS ACTIVITIES**

All employees are required to complete this form.

Name of Employee:	Position Title:	Date:
Division:	GMHA Work Schedule: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time # of hrs. ____	Employee Badge ID number:
<input type="checkbox"/> NO OUTSIDE EMPLOYMENT: Stop Here. Sign and date form – return to HR Office		
Signature: _____ Date: _____		
OUTSIDE EMPLOYMENT and/or BUSINESS INTEREST ACTIVITY INFORMATION		
Name of Outside Employer/Business Activity Owner:	Location of Outside Employment/Business Activity:	
Nature of Outside Employment/Business Activity:	Contact Telephone Number(s) of Outside Employment/ Business Activity:	
Outside Employment Work Schedule (Specify Days/and Time(s):	Desired Employment Date (Must not be prior to approval of this request):	
<input type="checkbox"/> Initial Request <input type="checkbox"/> Renewal NOTE TO EMPLOYEE – STIPULATED CONDITIONS		
I understand :		
<ol style="list-style-type: none"> 1. I must receive prior approval of this request <u>before</u> starting my outside employment/business activities. Final approval rests with the Hospital Administrator/CEO. 2. That regular full-time employment with the Authority is considered my <u>primary employment</u>, and that my outside employment/business interest activities request does not conflict with Authority employment. 3. I shall not work more than 20 hours per week with the outside employment job. 4. Approval of this “Outside Employment and/or Business Interest Activities” authorization may be cancelled by the Hospital Administrator/CEO or authorize designee, upon ten (10) calendar days of written notice to me should my job performance fall below satisfactory level as documented by my immediate supervisor and/or division head. 5. That I agree to submit to a verification of hours worked or other evidence such as check stub to be provided upon the request of management. Failure to submit documents in a timely manner may result in the Hospital Administrator/CEO revoking my outside employment authorization. 6. That I agree that upon request I submit a copy of my outside work schedule when requested by my immediate supervisor. I agree that I shall have no less than six (6) hours of rest prior to my scheduled work shift. 7. Upon termination of outside employment and/or business interest activities, a written notification to the Human Resources Division is required. 8. Annual review of this request authorization is required, or when there is substantial change in hours worked. 9. That my outside employment must be suspended if my work status with GMHA is sick leave, Leave Sharing, FMLA leave, Maternity/Paternity Leave, Worker’s Comp. Leave or on ADA/restricted/Light duty and/or reduced hours. 10. That I am prohibited from requesting annual leave for the purpose of working my Outside Employment. 11. Agree that I shall not be employed in a supervisory capacity in another hospital and/or healthcare facility which may or may not be in conflict with my employment with GMHA. 12. That I may not release any information on our clinical practice and/or operational functions of GMHA. 13. That using GMHA equipment or materials for outside employment is strictly prohibited. 		
I, the undersigned employee, certify that the above information in true and correct and that I have read and understand the Stipulated Conditions. Failure to comply with the policy could result in disciplinary action up to and including termination of employment.		
_____ Employee Signature		_____ Date
Recommend: <input type="checkbox"/> Approval <input type="checkbox"/> Disapproval	REMARKS/COMMENTS:	
_____ Immediate Supervisor’s Signature Date		
Recommend: <input type="checkbox"/> Approval <input type="checkbox"/> Disapproval	REMARKS/COMMENTS:	
_____ Department/Division Head Signature Date		
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	REMARKS/COMMENTS:	
_____ Hospital Administrator/CEO Date		

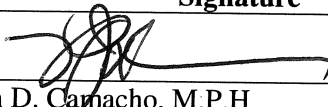
**GUAM MEMORIAL HOSPITAL AUTHORITY
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledge that they have reviewed and approved the following:

Submitted by: Human Resources Department

Policy No.: A-HR1900

Policy Title: Outside Employment

Reviewed/Endorsed:	Date	Signature
Name:	Elizabeth Claros	
Title:	Personnel Services Administrator	
Reviewed/Endorsed:	Date	Signature
	02/13/17	
Name:	Peter John D. Camacho, M.P.H.	
Title:	Chairman, Executive Management Council	

*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer.