# 2026

# Campus Safety and Security Report

Conemaugh School of Nursing and Allied Health Education Programs

Conemaugh
Memorial Medical Center

School of Nursing & Allied Health Programs

**1086 Franklin Street**
**Johnstown, PA 15905**

*Message from the Director*

Greetings Students,

Welcome to Conemaugh Memorial Medical Center's School of Nursing and Allied Health Programs.

One of our biggest commitments to our students is their safety. This is our updated 2026 Campus Safety and Security Report. We want you to have access to this information so you can familiarize yourself with the services we provide as well as the valuable resources available to you.

Remember, you are one of our biggest priorities and we want you to feel free to share any ideas you may have. You have an important role in helping us maintain a safe and secure campus.

Again, welcome to our campus and may you have an enriching education experience with us.

Warm regards,

## Heather Vitko, PhD, RN, CNL, CCRN, TCRN, CHSE

*Director of the Conemaugh School of Nursing and Allied Health Programs*

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# Quick Reference Resources:

**Emergency:** 9-1-1 or 2-2-2 if inside Hospital

**Non-Emergency, Conemaugh Security Department**: 814-534-9730

**Johnstown Police Department**: 814-472-2100

**Johnstown Fire Department**: 814-539-0889

**Director of Conemaugh School of Nursing and Education Programs Heather Vitko, PhD, RN, CNL, CCRN, TCRN, CHSE:** 814-534-9480

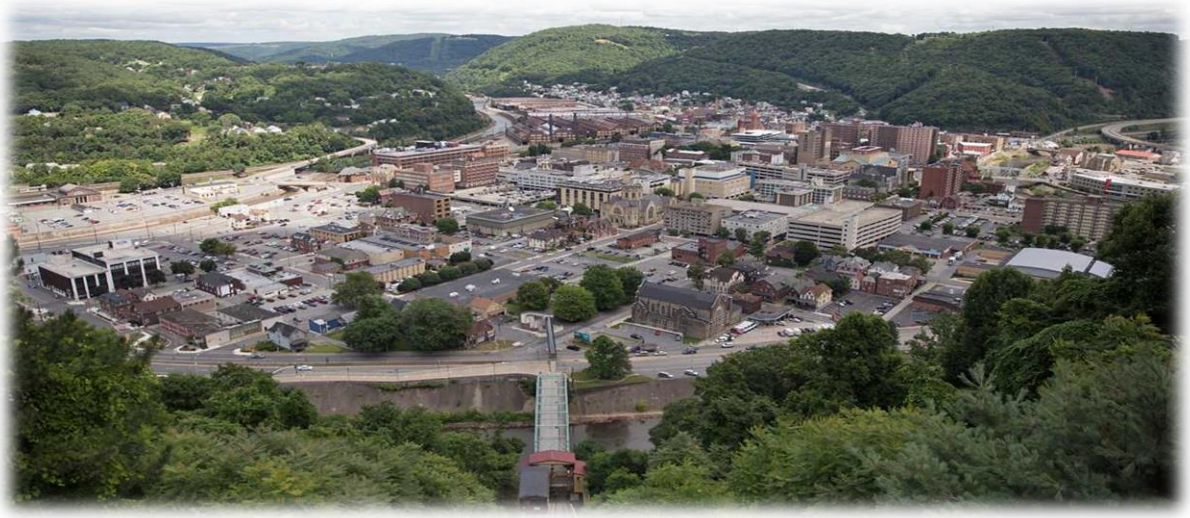
**Health and Student Services Coordinator, Patricia Huber-Smith, BSN, RN**: 814-534-9485

**Title IX Anonymous Reporting:** 814-534-9776

**Conemaugh School of Nursing and Education Programs, Main Office:** 814-534-5844

**Hospital Support Center Ethics Line:** 1-877-508-5433

**Conemaugh People Services (Human Resources)**: 814-534-9114



## Introduction

This Conemaugh Memorial Medical Center School of Nursing and Allied Health Education Programs (herein referred to as "School," "Conemaugh" or "Institution"). The 2026 Campus Safety and Security Report (CSSR) is published in compliance with the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act ("Clery Act") and the State of Pennsylvania Campus Security Enhancement Act. The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, as amended by the Violence Against Women Act (VAWA), (collectively referred to as the "Clery Act"), requires colleges and universities to disclose certain timely and annual information about campus crime, and security and safety policies.

All members of the School community are encouraged to read the CSSR. We hope that you will use the information to help foster a safe environment for yourself and others. It is important to stress that safety is a shared responsibility. The School relies on every community member to contribute to safety and security on campus by reporting crime and suspicious activities in a timely manner, and by using common sense when going about daily activities.

This report includes statistics for the previous three years concerning reported crimes that occurred on campus; in certain off-campus buildings or property owned or controlled by Conemaugh Memorial Medical Center; and on public property within or immediately adjacent to and accessible from school property. The report also includes institutional policies on Conemaugh security concerning alcohol and drug use, crime prevention and the reporting of crimes. The report also includes institutional policies concerning sexual assault and other matters. The statistics are gathered from reported crimes to campus security and the Johnstown Police Department. The Conemaugh Security Manager prepares the statistics.

Each year, notification is sent to all enrolled students, faculty, and staff. The notification provides information on how to access the Annual Security Report online. Copies of this report may also be obtained from the Associate Director of the School at 1086 Franklin Street, Building F, Johnstown, PA 15905.

We encourage members of the Conemaugh community to use this report as a guide for safe practices on and off campus. The full text of this report is also available online at www.conemaugh.org .

## Conemaugh Security Department

Located in the main hospital, next to the Emergency Department, Security operates 24 hours a day, 365 days a year. The telephone number for non-emergency calls is extension 9730 on campus or call 814-534-9730 from off campus. Please dial 222 for Emergency calls when on campus or dial 911.

Conemaugh Security ensures that all students enrolled in the Education Programs of Conemaugh will receive campus security protection 24 hours a day.

Provisions for campus security including off-campus parking areas are:

1) 24-Hour Security Base Dispatcher on duty
2) 24-Hour Security Officer foot and vehicle patrols
3) 24-Hour alarm/CCTV monitoring
4) Two-way radio communications
5) Communication system with the local police authority
6) Monitor all electronic lock systems on all doors

Upon the need for assistance, the Security Base Dispatcher may be contacted via telephone extension 9730. For emergency conditions utilize the Hospital Emergency Extension 222 and an officer will be dispatched immediately to assist the student and/or conduct a complete investigation of the incident.

Conemaugh policy requires that each security officer be well versed and trained in the Laws of Pennsylvania. All Security Officers hired (after July 1981) are certified as municipal police officers under PA Act 120 or PA Act 235.

All criminal activities under the categories of: Murder, Rape, Robbery, Aggravated Assault, Burglary, Motor Vehicle Thefts and Arson will be reported on an annual basis to the student population as a whole. If an incident in the above categories occurs, the students will be notified immediately. This alert is to reinforce utilization of safe practices to enhance personal safety.

**Access to Campus Facilities**

Conemaugh Memorial Medical Center is considered a 24-hour health care facility operation. Public access to a majority of the hospital areas occurs from 5am to 8pm Monday through Friday. The main entrances to the hospital are accessible from 5am to 8pm. Entrance to the hospital after 8pm is via the Department of Emergency Medicine. The School of Nursing entrances are accessible with a valid Conemaugh ID badge after normal business hours.

To monitor safety of the entrances and exits to the School of Nursing a CCTV surveillance system is applied for 24-hour observation of buildings F and G. Access to secured areas of the School of Nursing building must be made through Conemaugh Security Department. Only currently enrolled students of the educational programs are provided building access to the campus areas. Security has the right to challenge anyone entering or leaving any campus area. All trespassers who cannot be appropriately identified on their need to be present will be detained for the local police. The Security Department issues keys and padlocks for all areas of Conemaugh. The Security Department handles repairs to all lock hardware.

**Apprehension and Investigation**

The Conemaugh Security Department and Campus Security Authorities (outlined on page 8) work closely with the Johnstown Police Department and all criminal activities will be reported to them promptly. When a subject is apprehended, only enough force, which is necessary to make the apprehension, is permitted. The apprehended person is detained and the local police department is notified.

Students are to report all criminal activities to the Security Department. Each incident is fully documented and the Security Department Investigation Section conducts a follow-up investigation.

**Student Orientation to Hospital Security**

An orientation to all educational programs of Conemaugh Memorial Medical Center is conducted yearly. The following information is included in this program:

1) Function of the Conemaugh Security Department.
2) Security Office location and hours of operation.
3) Available services to students.
4) Personal Safety/Security.
5) Vehicle Safety.
6) Escort Service.
7) Emergency responses, telephone numbers to call etc.
8) Parking of campus, shuttle program etc.
9) Prevention of rape and other sexual offenses.

## Conemaugh Geography

The School must disclose statistics for reported *Clery Act* crimes that occur (1) on-campus, (2) on public property within or immediately adjacent to the campus, and (3) in or on non-campus buildings or property that Conemaugh Health Systems owns or controls. Please see pages 13-14 for Crime Statistics.

### On-campus

The School has determined the following as "On Campus" areas:

MMC main campus buildings:

- 1086 Franklin Street
- 1111 Franklin Street
- 1017 Franklin Street
- E, F, G, M and P Buildings
- Clinical Pavilion
- Good Samaritan
- Wessel Building

Parking:

- North Garage
- South Garage
- Surf 'n Turf Lot
- BiLo Lot/Wagner Lot
- Warehouse Lot
- Habits Lot
- Emergency Lot

### Public Property

The institution has identified the public property associated with each of these campus buildings, generally: sidewalks and streets immediately adjacent to campus property. Public property does not include anything beyond the second sidewalk. (If there is not a second sidewalk, it does not include anything beyond the street.)

**Non-campus Buildings or Property**

The Clery Act definition of non-campus buildings or property is:

Any building or property owned or controlled by a student organization that is officially recognized by the institution; or any building or property owned or controlled by an institution that is used in direct support of, or in relation to, the institution's educational purposes, is frequently used by students, and is not within the same reasonably contiguous geographic area of the institution.

The School has determined the following non-campus buildings/property:

- Conemaugh East Hills
- Ebensburg Outpatient Center
- Conemaugh Memorial Medical Center - Lee Campus
- Conemaugh Miners Medical Center
- Conemaugh Nason Medical Center
- Conemaugh Meyersdale Medical Center
- Richland Care Center
- Conemaugh Ebensburg Outpatient Center
- Somerset Outpatient Center
- Conemaugh Physician Group - Medical Park
- UPMC Health Care System
- Chan Soon-Shiong Medical Center at Windber
- Indiana Regional Medical Center
- Hershey Medical Center
- Southern Alleghenies EMS Council

## Campus Security Authorities (CSAs)

While the institution encourages all campus community members to promptly report all crimes and other emergencies directly to the Conemaugh Security Department at 814-534-9730 or to 911, we also recognize that some may prefer to report to other officials. The Clery Act recognizes certain school officials as Campus Security Authorities (CSAs). The Act defines these individuals as "an official of an institution who has significant responsibility for student and campus activities, including but not limited to student discipline and campus judicial proceedings. An official is defined as a person who has the authority and the duty to take action or respond to particular issues on behalf of the institution."

- Conemaugh Security Department
- Title IX Coordinator
- Corporate Compliance
- School of Nursing Director
- School of Nursing Associate Director
- Allied Health Education Program Directors
- Allied Health Clinical Coordinators/Staff
- Faculty
- Employee Health Office
- Emergency Department
- Clinical Site Contacts for non-campus locations
- Grievance Committee Mediator

While the institution has identified several CSAs, we officially designate the following offices as places where campus community members should report crimes:

| Official | Campus Address | Phone Number |
|---|---|---|
| Conemaugh Security Department | 1086 Franklin Street<br>Johnstown, PA 15905 | 814-534-9730 |
| Title IX Coordinator | 1086 Franklin Street<br>Johnstown, PA 15905 | 814-534-9485 |
| Corporate Compliance | 1086 Franklin Street<br>Johnstown, PA 15905 | 877-508-5433 (off campus)<br>866-519-4767<br>814-410-8421 |

**Pastoral and Professional Mental Health Counselors**

According to the Clery Act, pastoral and professional mental health counselors who are appropriately credentialed and hired by Conemaugh to serve exclusively in a counseling role are not considered CSAs. As a matter of policy, the institution encourages pastoral and professional mental health counselors to notify those whom they are counseling of the voluntary confidential reporting options available to them.

## Reporting Criminal Offenses & Other Emergencies

In order to facilitate a comprehensive and accurate annual report and to aid in providing timely warnings notices to the community; all students, faculty, staff, and guests of Conemaugh School of Nursing and Allied Health Education Programs are encouraged to report emergencies, crimes, and suspicious persons in an accurate and timely manner. Please make the report to the Conemaugh Security Department at **814-534-9730** or to the appropriate local police department by calling **911**.

You may also report in person at the Conemaugh Security Department located in the Emergency Department lobby or by approaching a security officer on duty. The department will conduct a thorough investigation of reported incidents when deemed appropriate. All felonies and misdemeanor offenses of the Pennsylvania Crimes Code will be reported to the appropriate local police agency. Summary offenses are reviewed by School officials and may be handled internally. Incident reports involving students are forwarded to the Director for review and potential action by the student conduct system.

The School monitors and records, through local police agencies, any criminal activities that students engage in at off-campus locations during recognized student organization functions.

Any additional information obtained via the investigation will also be forwarded to the Director of the School of Nursing and Education Programs. If any crime shows evidence of being hate related, the incident will be categorized as such. A hate crime is defined as an incident where the victim is intentionally selected because of the victims' actual or perceived race, gender, religion, sexual orientation, national origin, gender identity, ethnicity, or disability.

Title IX offenses are to be reported to the Title IX Coordinator. See Conemaugh's Title IX Policy on Page 14.

## Crime Log

A daily crime log is available for students, faculty, staff, and visitors upon request. This electronic log is kept and maintained by the Conemaugh Security Office, with multiple staff trained in recording and upkeep of the log.

All Clery Act crimes as well as other non-Clery Act crimes are detailed in the electronic log. Crimes are recorded by the date and time they are reported and categorized by the nature of the crime and where it occurred. The crime log is backed up on a regular basis by the Conemaugh Information Systems Department.

If students should want to view the crime log, please contact Conemaugh Security at 814-534-9730.

## Timely Warnings

Conemaugh will issue a timely warning when it receives a report of a crime that represents a serious or continuing threat to the safety of members of the campus community.

Conemaugh may also issue a warning to the community when other instances pose a safety concern.

### *Initiating Timely Warnings*

**First responders and essential personnel in the Conemaugh Security office are responsible for initiating timely warnings. Those responsible include, but are not limited to**:

- Conemaugh Security Manager
- Security officer on duty
- Risk Management Department
- Environmental Safety Committee

**The School in conjunction with various campus offices will distribute timely warning announcements when there appears to be a threat to the safety and security of persons on campus for the following crimes:**

- Aggravated assault
- Arson
- Burglary
- Negligent manslaughter
- Motor vehicle theft
- Murder/non-negligent manslaughter
- Robbery
- Sexual offenses
- Domestic violence, dating violence, and stalking
- Violations of liquor law, drug law, or weapons possession law
- Any other crime in which the victim was chosen on the basis of race, gender, gender identity, religion, disability, sexual orientation, ethnicity, or national origin.

**Decisions concerning whether to issue a timely warning will be made on a case-by-case basis using the following criteria:**

- Nature of the crime;
- Continuing danger to the campus community;
- Possible risk of compromising law enforcement efforts

If the threat is sudden and serious, a warning will be issued immediately and will be continually updated until the threat is contained or neutralized. If a threat is less immediate, the warning will be fully developed and distributed after that point in time.

**Crimes that could constitute a continuing threat include, but are not limited to:**

- Serial crimes that target certain campus populations such as sex crimes or race-based crimes in which the perpetrator has not been apprehended, and
- Ongoing criminal activity in which there is no apparent connection between perpetrator and victim.

**Crimes that would not constitute a continuing threat include, but are not limited to:**

- Crimes in which the perpetrator has been apprehended, thereby eliminating the threat, and
- Crimes in which an identified perpetrator targets specific individuals to the exclusion of others, such as domestic violence.

## Emergency Notification

The School is committed to ensuring the campus community receives timely, accurate, and useful information in the event of a significant emergency or dangerous situation on campus or in the local area, which poses an immediate threat to the health and safety of campus community members. The School will immediately notify the campus community upon confirmation of an emergency or dangerous situation. The School uses the communication tool REMIND to provide alerts via SONAH ALERT. SONAH ALERT is a notification service available to students, faculty, and staff. SONAH ALERT is an opt-in system that all students, faculty, and staff are encouraged to utilize. SONAH ALERT can be used to send emergency messages within minutes of the occurrence of an incident. The student, faculty, and staff receive emergency messages via text and/or email as set up.

### Notification Methods

**The following methods may be used to notify the campus community of various emergencies that may affect the campus community:**

- SONAH ALERT
- Email
- Outdoor warning sirens
- Official Conemaugh website
- Local media
- Phone or Hospital Intercom System
- Targeted communication – posters, letters, group meetings, etc.

**Confirming the Existence of a Significant Emergency or Dangerous Situation and Initiating the Emergency Notification System:**

The Conemaugh Security Department and/or other Campus Security Authorities (CSA's) may become aware of a critical incident or other emergency that potentially affects the health and/or safety of the campus community. Generally, CSA's become aware of these situations when they are reported to Conemaugh Security or directly to a School employee. A CSA, in conjunction with Conemaugh Security, evaluates whether or not a particular event requires an emergency notification and determines if such a notification would compromise the efforts to contain the emergency. A CSA and Conemaugh Security will also determine if a message should be sent to benefit the health, safety, and well-being of the campus community for situations that do not pose a significant emergency or dangerous situation.

Once first responders verify that an actual emergency or dangerous situation exists—posing an immediate threat to the health or safety of some or all members of the campus community—they will inform Conemaugh Security and School Administration to initiate an emergency notification. The institution will, without delay, and taking into account the safety of the community, determine the content of the notification and initiate the notification system, unless issuing a notification will, in the professional judgement of Conemaugh Security, compromise efforts to assist a victim or to contain, respond to or otherwise mitigate the emergency.

**Determining the Appropriate Segment or Segments of the Campus Community to Receive an Emergency Notification:**

Campus and/or local first responders on the scene of a critical incident or dangerous situation will assist those preparing the emergency notification with determining what segment or segments of the campus community should receive the notification. Generally, campus community members in the immediate area of the dangerous situation (i.e., the building, adjacent buildings, or surrounding area) will receive the emergency notification first. Conemaugh Security and School Administration will continually evaluate the situation and assess the need to notify additional segments of the campus population.

**Determining the Contents of the Emergency Notification:**

Speed and accuracy of the information are of utmost importance in issuing emergency notifications. The goal is to ensure people are aware of the situation and they know the steps to take to stay safe. Conemaugh Security and School Administration along with first responders will determine how much information is appropriate to disseminate at different points in time.

**Procedures Used to Notify the Campus Community:**

In the event of a situation that poses an immediate threat to members of the campus community, the campus has various systems in place for communicating information quickly. Some or all of these methods of communication may be activated in the event of an emergency. These methods of communication include the communication system SONAH ALERT, through the application REMIND, which may include text message and/or email. We may also use verbal announcements within buildings, public address systems, fire alarms, and posting to the School's website.

**Procedures for Disseminating Emergency Information to the Larger Community (i.e., individuals and organizations outside the campus community):**

If the campus activates the emergency notification in response to a situation that poses an immediate threat to members of the campus community, the appropriate offices at the campus will notify the larger community about the situation and steps the campus has taken to address the emergency. Primarily, the Hospital Communications Director is responsible for maintaining communications with news outlets, distribution of press releases, and scheduling of press conferences.

**Enrolling in REMIND SONAH ALERT:**

We encourage employees, students, parents, and other interested parties of the campus community to enroll in REMIND. All employees and students will be provided access information at the beginning of each school year. While this is an opt-in system, it is highly encouraged as it is an immediate means of notification. You can find more information at www.remind.com.

## Crime Statistics at On-Campus, Public Property and Non-Campus Locations

It is the policy of Conemaugh Security to maintain and report statistics for the three most recent calendar years, with the help of the local police agents and designated Campus Security Authorities, in relation to criminal activities at on-campus locations as well as public property and non-campus locations frequented by the student population.

The specific crimes referred to as "Clery Crimes" are listed below.

### Clery Crimes

1. Criminal homicide
    a. Murder and non-negligent manslaughter
    b. Negligent manslaughter
2. Sexual assault
    a. Rape
    b. Fondling
    c. Incest
    a. Statutory rape
3. Dating violence or domestic violence
4. Stalking
5. Robbery
6. Aggravated assault
7. Burglary
8. Motor vehicle theft
9. Arson
10. Arrests for liquor law violations, drug law violations and illegal weapons possession.
11. Referrals for disciplinary actions for liquor law violations, drug law violations and illegal weapons possession.
12. Hate crimes associated with any of the crimes listed in points 1 – 10, any crime involving bodily injury or associated with a larceny-theft, simple assault, intimidation, or destruction/damage/vandalism of property. A hate crime is defined as an incident where the victim is intentionally selected because of the victims' actual or perceived race, gender, religion, sexual orientation, national origin, gender identity, ethnicity, or disability.

***In the event of an occurrence, The School will specify whether each of the crimes recorded occurred:**

- On Campus (OC)
- In or on a non-campus building or property (NC)
- On Public Property (P)

The statistical report states:

*Reported Criminal Activities- Includes On Campus, Non-campus & Public Property:*

| | 2023 | 2024 | 2025 |
|---|---|---|---|
| **1. Murder/Non-negligent manslaughter** | 0 | 0 | 0 |
| **2. Negligent manslaughter** | 0 | 0 | 0 |
| **3. Forcible Sexual Offenses** | 0 | 0 | 0 |
| **4. Rape** | 0 | 0 | 0 |
| **5. Fondling** | 0 | 0 | 0 |
| **6. Non-forcible Sexual Offenses** | 0 | 0 | 0 |
| **7. Incest** | 0 | 0 | 0 |
| **8. Statutory Rape** | 0 | 0 | 0 |
| **9. Aggravated Assault** | 0 | 3 | 0 |
| **10. Burglary** | 0 | 0 | 0 |
| **11. Robbery** | 0 | 0 | 0 |
| **12. Motor Vehicle Theft** | 0 | 0 | 0 |
| **13. Arson** | 0 | 0 | 0 |

*Reported Hate Crimes- Includes On Campus, Non-campus & Public Property:*

| |
|---|
| **There were no reported Hate Crimes for 2023, 2024, and 2025.** |

*Arrests and Referrals for Disciplinary Actions-Includes On Campus, Non-campus & Public Property:*

| | 2023 | 2024 | 2025 |
|---|---|---|---|
| **1. Liquor Law Violations** | 0 | 0 | 0 |
| **2. Drug Abuse Violations** | 0 | 0 | 0 |
| **3. Weapon Possession** | 0 | 0 | 0 |

## The Violence Against Women Act

It is the policy of the School to comply with the federal Violence Against Women Act amendments to the Jeanne Clery Disclosure of Campus Security Policy and Campus Crimes Statistics Act, and the accompanying regulations, which became effective on July 1, 2015 (collectively referred to as VAWA).

VAWA imposes additional duties on universities and colleges to investigate and respond to reports of sexual assault, stalking, and dating or domestic violence, and to publish policies and procedures related to the way these reports are handled. Conemaugh School of Nursing and Allied Health Education Programs has directed its Title IX Coordinator to coordinate the School's compliance with VAWA and to respond to reports of violations, and its Security Manager to coordinate the School's compliance with the Clery reporting related VAWA requirements.

### Forcible or Non-forcible Sexual Assault

Conemaugh Security Department will provide information concerning the prevention of rape, acquaintance rape and other sexual offenses. Upon notification of a reported sexual assault, guidance will be provided to the individual in the preservation of evidence, reporting to local police agents and mental and physical health services available.

### VAWA OFFENSES- Includes On Campus, Non-campus, and Public Property

| | 2023 | 2024 | 2025 |
|---|---|---|---|
| **1. Domestic Violence** | 0 | 0 | 0 |
| **2. Dating Violence** | 0 | 0 | 0 |
| **3. Stalking** | 0 | 0 | 0 |

### Registered Sex Offenders

Information on registered sex offenders, who might be present or near campus, can be found by going on to the website www.pameganslaw.state.pa.us.

## Title IX Policy: Non-Discrimination, Harassment, and Retaliation on the Basis of Sex

Conemaugh School of Nursing and Allied Health Programs are committed to providing a workplace and educational environment that are free from sex discrimination that includes discrimination based on sex stereotypes, sex characteristics, pregnancy or related conditions, sexual orientation, and gender identity; harassment, and retaliation and promotes personal integrity, civility, and mutual respect. This policy also prohibits discrimination based on pregnancy, childbirth, termination of pregnancy, lactation, related medical conditions, or recovery, parental, family, or marital status, including providing reasonable modifications for students, reasonable break time for employees for lactation, and a clean, private lactation space. Conemaugh School of Nursing and Allied Health Programs considers sex discrimination in all its forms to be a serious offense. To ensure compliance with federal and state civil rights laws and regulations, Conemaugh School of Nursing and Allied Health Programs has developed internal policies and procedures that provide a prompt, fair, and impartial process for those involved in an allegation of discrimination or harassment on the basis of sex, and for allegations of retaliation. These procedures apply equally to both parties, whether the party is a student, faculty, staff member, or other individual participating or seeking to participate in an education program or activity.

Conemaugh School of Nursing and Allied Health Programs values and upholds the equal dignity of all members of its community and strives to balance the rights of the parties in the grievance process during what is often a difficult time for all those involved. Conemaugh is committed to fostering an environment free from sexual or gender-based harassment or misconduct. The School is also committed to providing support to those who may have been impacted by

incidents of sexual or gender based harassment or misconduct and may provide various resources and support services to individuals who have experienced one of these incidents.

**What is Title IX?**

*"No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving federal financial assistance."*

Title IX is a federal law that prohibits discrimination based on sex in educational programs or activities that receive federal financial assistance. All forms of sexual or gender-based harassment, including but not limited to, hostile environment harassment, quid pro quo harassment, dating and domestic violence, stalking, and sexual assault are violations of Title IX. Title IX protects individuals of all genders and sexual orientations and applies to students, faculty, staff members, and other participants in educational programs and activities.

The U.S. Department of Education's Title IX regulations recognize that sexual harassment, including sexual assault, is unlawful sex discrimination. The Final Rule requires a prompt response to reports of sexual harassment. The Final Rule improves the clarity and transparency of the requirements for how schools must respond to sexual harassment under Title IX so that every complainant receives appropriate support, respondents are treated as responsible only after receiving due process and fundamental fairness, and school officials serve impartially without bias for or against any party.

For the purpose of this policy, the following definitions apply:

- "Education program or activity" includes locations, events, or circumstances over which the institution exercised substantial control over the accused student and the context in which the harassment occurs, as well as any buildings owned or controlled by an officially recognized student organization.
- "Deliberate indifference" is defined as a response to sexual harassment that is clearly unreasonable in light of the known circumstances.
- "Actual knowledge" occurs only if a school official with the authority to institute corrective measures receives notice of sexual harassment.
- "Complainant" means an individual who is alleged to be the victim of conduct that could constitute harassment or discrimination on the basis of sex, or retaliation for engaging in a protected activity.
- "Respondent" means an individual who has been reported to be the perpetrator of conduct that could constitute harassment or discrimination on the basis of sex; or retaliation for engaging in a protected activity.
- "Formal Complaint" is defined as a document filed by a complainant or signed by the Title IX Coordinator alleging sexual harassment against a respondent and requesting that the school investigate the allegation of sexual harassment.
- "Supportive Measures" is defined as individualized services reasonably available that are non-punitive, non-disciplinary, and not unreasonably burdensome to the other party while designed to ensure equal educational access, protect safety, or deter sexual harassment.

**Title IX Definition of Sex-based Harassment**

Sex-based harassment is a form of sex discrimination and means sexual harassment and other harassment on the basis of sex when it takes the form of:

- Quid pro quo harassment (e.g., when an employee conditions a benefit on a person's participation in unwelcome sexual conduct);
- Specific offenses (e.g., sexual assault, dating violence, domestic violence, and stalking);
- Hostile environment harassment.

The final regulations define hostile environment harassment as unwelcome sex-based conduct that, based on the totality of the circumstances, is subjectively and objectively offensive and is so severe or pervasive that it limits or denies a person's ability to participate in or benefit from the recipient's education program or activity.

Other policies that may apply to situations involving sexual harassment, non-discrimination, and retaliation that do not fall under the Title IX policy include:

- Conemaugh Health System Non-Harassment Policy
- Conemaugh Health System Problem Reporting and Non-Retaliation Policy
- Conemaugh School of Nursing and Allied Health Programs Code of Conduct
- Conemaugh School of Nursing and Allied Health Anti-Hazing Policy

**Title IX Contact Information**

The School of Nursing and Allied Health Programs encourages those who have experienced any form of sex discrimination, harassment, and/or retaliation to report the incident promptly and to seek all available assistance. The school takes complaints very seriously and will work with the complainant and respondent to ensure their safety and to remedy the situation.

The Health and Student Services Coordinator serves as the Title IX Coordinator along with assistance from the Director and Associate Director of the School of Nursing and Allied Health Programs and any other necessary Conemaugh Memorial Medical Center departments (e.g., People Services (Human Resources), Administration, and other departments that assist to resolve the complaint). The Title IX Coordinator along with administration of the Conemaugh School of Nursing and Allied Health Programs oversees implementation of the Title IX Policy on Non-Discrimination, Harassment, and Retaliation on the Basis of Sex. Other responsibilities include coordinating efforts in a non-biased and equitable manner for the complainant and respondent related to the intake, investigation, resolution, and implementation of supportive measures to stop, remediate, and prevent discrimination, harassment, and retaliation prohibited under this policy.

The following person has been designated to handle inquiries regarding the Title IX Policy:

**Patricia Huber-Smith, BSN, RN, Health and Student Services Coordinator**
Conemaugh School of Nursing and Allied Health Programs
1086 Franklin Street
Johnstown, PA 15905
Phone: 814-534-9485
Office Location: Education F Building, Office F122
E-mail: phubersm@conemaugh.org

Conemaugh School of Nursing and Allied Health Programs has classified all employees as Mandated Reporters or Campus Security Authorities (CSAs) as per the Clery Act of any knowledge they have that a member of the school community is experiencing harassment, discrimination, and/or retaliation under this policy. Mandated Reporters must promptly share with the Title IX Coordinator all known details of a report made to them in the course of their employment.

Complainants should carefully consider whether to disclose personally identifiable information to Mandated Reporters, as such details are required to be reported to the Title IX Coordinator.

The Clery Act defines these Campus Security Authorities individuals as "an official of an institution who has significant responsibility for student and campus activities, including but not limited to student discipline and campus judicial proceedings. An official is defined as a person who has the authority and the duty to take action or respond to particular issues on behalf of the institution."

- Conemaugh Security Department
- Title IX Coordinator
- School of Nursing Director
- School of Nursing Associate Director
- Allied Health Programs Directors
- Allied Health Programs Clinical Coordinators/Staff
- Faculty
- Employee Health Office
- Emergency Department
- Clinical Site Contacts for non-campus locations that are providing an educational opportunity for students
- Grievance Committee Mediator

Complaints may also be discussed with the following:

**People Services (Human Resources) Department**
Conemaugh Memorial Medical Center
1086 Franklin Street
Johnstown, PA 15905
814-534-9114

**Corporate Compliance Department**
Conemaugh Memorial Medical Center
1086 Franklin Street
Johnstown, PA 15905
814-410-8421
Corporate Compliance Hotline: 866-519-4767
877-508-5433 (off campus)

**Office for Civil Rights**
U.S. Department of Education
400 Maryland Avenue, SW
Washington, D.C. 20202-1100
Toll-free: 800-421-3481
TDD toll-free: 877-521-2172
email: OCR@ed.gov
Web: http://www.ed.gov/ocr

**Confidential Resources**

If a Complainant would like the details of a sexual harassment incident to be kept confidential without automatically triggering a report to the Title IX office and coordinator at the Conemaugh School of Nursing and Allied Health Programs, the Complainant may speak with:

- Off-campus Counselor (non-employees)
- Licensed professional counselors and other medical providers
- Local rape crisis counselors
- Domestic Violence resources
- Clergy/Chaplains
- Victim Services
  638 Ferndale Avenue
  Johnstown, PA 15905
  814-288-4961
- Women's Help Center
  809 Napoleon Street
  Johnstown, PA 15901
  814-536-5361

All of the above listed individuals will maintain confidentiality when acting under the scope of their licensure, professional ethics, and/or professional credentials, except in extreme cases of immediate threat of danger of abuse of a minor, elder, individual with a disability, or when required to disclose by law or court order.

**How to report/file a complaint of Discrimination, Harassment, and/or Retaliation**

Reporting and providing notice are different from filing a complaint. A report is defined as notification of an incident of sexual misconduct to the Title IX Coordinator/designee by any responsible employee or reporting person. Filing a complaint initiates the formal resolution process.

Notice or complaints of discrimination, harassment, and/or retaliation may be made using any of the following options:

a) File a complaint with, or give verbal notice to, the Title IX Coordinator or a CSA as listed above.
Such a report may be made at any time (including during non-business hours) by using the telephone number or email address, or by mail to the office address, listed for the Title IX Coordinator.

b) Reporting via Conemaugh Intranet website: "SIM Safety Incident Management" Professional Conduct: http://lifevwprls01.lpnt.corpad.net/RL6_Prod/Homecenter/Client/Login.aspx

c) Title IX Reporting Hotline 814-534-9776

d) To report anonymously, use the Conemaugh Intranet SIM Safety Incident Management website or the Reporting Hotline.

## Procedures for institutional disciplinary action in cases of a Title IX Violation.

Conemaugh School of Nursing & Allied Health will act on any formal or informal notice/complaint of violation of the policy on Non-Discrimination, Harassment, and Retaliation on the Basis of Sex ("the Policy") that is received by the Title IX Coordinator or any other Official with Authority by applying these procedures.

The procedures are detailed in the *"Resolution Process for Alleged Violations of the Policy on Non-discrimination, Harassment, and Retaliation on the Basis of Sex*" which can be found on the School's Title IX webpage: https://www.conemaugh.org/title-ix. The Title IX Coordinator also gives students the information each year during required education. The procedures apply to qualifying allegations of sexual harassment (including sexual assault, dating violence, domestic violence, and stalking, as defined below) involving students, staff, administrators, and faculty members.

Upon receipt of a complaint or notice to the Title IX Coordinator of an alleged violation of the Policy, the School will begin a prompt, initial assessment to determine the next steps needing to be taken by Conemaugh School of Nursing & Allied Health.

The School will initiate any of these responses:

1. Offering supportive measures for the complainant and respondent to restore or preserve each person's access to the education program or activity. These supportive measures cannot be unreasonably burdensome and cannot be imposed for punitive or disciplinary reasons.
2. An informal resolution that includes voluntary participation;
3. A Formal Grievance Process including an investigation and a hearing
4. Take appropriate prompt and effective action to ensure that sex discrimination and harassment does not continue or reoccur within the education program or activity.

The investigation and grievance process will determine whether a violation of the Policy has occurred. If a violation is found, Conemaugh will promptly implement effective remedies to ensure it is not deliberately indifferent to the harassment or discrimination, its potential recurrence, or its impact.

**Education Requirements**

1. Conemaugh Memorial Medical Center students and employees will be educated regarding:
    A. The Substance Abuse Policy, including:
        - Danger of abusing drugs and alcohol in the workplace
        - Medical treatment available for persons who seek treatment and counseling
        - Action that Conemaugh will take when students violate the Substance Abuse Policy
    B. Crime Prevention, including:
        - Suggestions to maintain personal safety
        - Reporting of incidents
    C. Campus security policies
    D. Title IX Policy
    E. Anti- Hazing Policy
2. Education is provided to students by varying individuals at the annual orientation, Class Association meetings, and online learning modules. Faculty and staff receive education on this subject matter through LifeTalent, Faculty Organization meetings, Staff meetings, and Allied Health Meetings. This policy will be updated and reviewed annually.

## Conemaugh Non-Harassment Policy

**SCOPE**: This policy applies to Conemaugh Health System entities.

**PURPOSE**:

To comply with federal, state, and local laws regarding harassment on any protected basis (i.e., color, race, gender, age, religion, national origin, disability, genetic information, gender identity, sexual orientation, veteran's status, etc.)

**POLICY:**

**I. Harassment**

In accordance with applicable law, Conemaugh Health System prohibits sexual harassment and harassment because of color, race, gender, age, religion, national origin, disability, genetic information, gender identity, sexual orientation, veteran's status or any other basis protected by applicable federal, state, or local law. All such harassment is prohibited and will not be tolerated.

**II. Sexual Harassment**

A. It is unlawful to harass a person (an applicant or employee) because of that person's sex. Harassment can include "sexual harassment" or unwelcome sexual advances, requests for sexual favors, and other verbal or physical harassment of a sexual nature.

B. Harassment does not have to be of a sexual nature, however, and can include offensive remarks about a person's sex.

C. Both victim and the harasser can be either a woman or a man, and the victim and harasser can be the same sex.

D. Although the law doesn't prohibit simple teasing, offhand comments, or isolated incidents that are not very serious, harassment is illegal when it is so frequent or severe that it creates a hostile or offensive work environment or when it results in an adverse employment decision (such as the victim being fired or demoted).

E. The harasser can be the victim's supervisor, a supervisor in another area, a co-worker, or someone who is not an employee of the employer, such as a vendor, patient or other visitor.

F. Applicable state and federal law defines sexual harassment as unwanted sexual advances, request for sexual favors, or

visual, verbal, or physical contact of a sexual nature when:

a. Submission to the conduct is made a term or condition of employment; or

b. Submission to or rejection of the conduct is used as basis for employment decisions affecting the individual; or

c. The conduct has the purpose or effect of unreasonably interfering with the employee's work performance or creating an intimidating, hostile or offensive work environment.

G. Sexual Harassment includes many forms of offensive behavior. The following is a partial list of prohibited behaviors:

a. Unwanted sexual advances;

b. Offering employment benefits in exchange for sexual favors;

c. Visual conduct such as leering, making sexual gestures, or displaying sexually suggestive objects, pictures, cartoons or posters;

d. Dissemination through e-mail or other electronic communication material that contains sexual suggestive content;

e. Verbal conduct such as making or using derogatory comments, epithets, slurs, sexually explicit jokes, or inappropriate comments about any employee's body or dress;

f. Verbal sexual advances or propositions;

g. Verbal abuse of sexual nature, graphic verbal commentary about an individual's body, sexually degrading words to describe an individual, or suggestive or obscene letters, notes or invitations;

h. Physical conduct such as unwanted touching, assault or impeding or blocking movements; and

i. Retaliation for reporting harassment or threatening to report harassment.

H. It is unlawful for males to sexually harass females or other males, and for females to sexually harass males or other females. Sexual harassment by a subordinate or manager, or harassment by persons doing business with or for Conemaugh Health System.

**III. Other Types of Harassment**

A. Prohibited harassment on the basis of color, race, gender, age, religion, national origin, disability, genetic information, gender identity, sexual orientation, veteran's status or any other basis protected by applicable federal, state, or local law, includes behavior similar to sexual harassment, such as:

a. Verbal conduct such as threats, epithets, derogatory comments or slurs;

b. Visual conduct such as derogatory posters, photographs, cartoons, drawings or gestures;

c. Dissemination of offensive/inappropriate e-mail or other electronic communication;

d. Physical conduct such as assault, unwanted touching, or blocking normal movements; and

e. Retaliation for reporting harassment or threatening to report harassment.

**IV. Complaint Procedure**

A. All employees are responsible for helping to avoid unlawful harassment. If employees feel that they or another applicant or employee have been harassed in violation of this policy, they should report their concerns to their supervisor, a member of Senior Management or to Human Resources and/or file a formal complaint in accordance with the Complaint Filing and Investigative Procedures policy. The employee may also voice complaint by calling the Hospital Support Center Ethics Line at 1-877-508-5433. Any Supervisor who becomes aware of conduct in violation of this policy shall report such conduct to Human Resources immediately.

B. The Company will not allow retaliation against anyone who expresses a concern about harassment or who

participates in any investigation.

**V. Corrective Action/Liability for Harassment**

A. Any employee of the health system, whether a co-worker or manager, who is found to have engaged in prohibited harassment or retaliation is subject to corrective action, up to and including discharge from employment.

B. Any employee who engages in prohibited harassment, including any manager who knew about the harassment but took no action to stop it, may be held personally liable by the court or other agency for monetary damages.

C. Conemaugh Health System does not consider conduct in violation of this policy to be within the course and scope of employment or the direct consequence of the discharge of one's duties. Accordingly, to the extent permitted by law, Conemaugh Health System reserves the right not to provide a defense or pay damages assessed against employees for conduct in violation of the policy.

Nothing in this policy is intended to restrict whatever rights you may have under Federal, State, or local laws.

## Conemaugh Anti-Hazing Policy

**SCOPE**:

This policy applies to Conemaugh Health System entities.

**PURPOSE:**

The purpose of the Anti-Hazing Policy is to enumerate the obligations of this institution as outlined in the amendment to Title 18 of the Pennsylvania Consolidated Statutes via Senate Bill 1090. These amendments, also known as the "Timothy Piazza Anti-Hazing Bill" define hazing as follows:

Intentionally, knowingly, or recklessly, for the purpose of initiating, admitting, or affiliating a student into or with an organization, or for the purpose of continuing or enhancing a student's membership or status in an organization, causes, coerces or forces a student to do any of the following:

Hazing

- Violate Federal or State Criminal law.
- Consume any food, liquid, alcoholic liquid, drug, or other substance, which subjects the student to a risk of emotional or physical harm.
- Endure brutality of a physical nature, including whipping, beating, branding, calisthenics, or exposure to the elements.
- Endure brutality of a mental nature, including activity adversely affecting the mental health or dignity of the individual, sleep deprivation, exclusion from social contact or conduct that could result in extreme embarrassment.
- Endure any other forced activity, which could adversely affect the health and safety of the individual.
- Endure brutality of a sexual nature.
- Endure any other activity that creates a reasonable likelihood or bodily injury to the student.

Aggravated Hazing

- A person commits aggravated hazing if the person commits a violation of hazing that results in serious bodily injury or death to the minor or student and:

(1) The person acts with reckless indifference to the health and safety of the student; or,
(2) The person causes, coerces, or forces the consumption of an alcoholic liquid or drug by the student.

Organizational Hazing

- A student organization commits organizational hazing if the organization intentionally, knowingly, or recklessly promotes or facilitates a violation of hazing or aggravated hazing.

For purposes of these hazing definitions, any activity as described in the definitions upon which the initiation, admission into, affiliation with, or continued membership in an organization is directly or indirectly conditioned shall be "presumed to be 'forced' activity, the willingness of an individual to participate in such activity notwithstanding." This policy applies to all Conemaugh School of Nursing and Allied Health Program organizations, groups, students, faculty, and staff. This is equally applicable for all school related activities that occur on and off campus. The School is also committed to providing support to those who may have been impacted by incidents of hazing or misconduct and may provide various resources and support services to individuals who have experienced any of these incidents.

**REPORTING:**

- Conemaugh School of Nursing and Allied Health Programs has classified all employees as Mandated Reporters or Campus Security Authorities (CSAs) as per the Anti-Hazing Policy. Any knowledge that a CSA receives that a member of the school community is experiencing hazing activities, they must promptly share with the school Administration known details of the report made to them in the course of their employment.
- Students and others are encouraged to report incidents by any of the following methods. Compliance Line Hotline (1.877.508.5433)
- Lifepoint Health Ethics and Compliance: WWW.YOURVOICEMAKESUSBETTER.COM
- In person to any CSA
- RL Solutions SIM Incident Reporting: http://lifevwprls01.lpnt.corpad.net/RL6_Prod/Homecenter/Client/Login.aspx
    - Select Conemaugh from the dropdown menu, enter your username and password, and select professional conduct.
    - Under specific event type select “other,” specify other by typing in “hazing,” and type of person affected select “visitor.”
    - You can also submit your report anonymously instead of entering your username and password.
    - Title IX number: 814-534-9776

**INVESTIGATION:**

- Any alleged act of hazing brought to the attention of school administration will be fully investigated and adjudicated in accordance with the Code of Conduct, Non-Harassment Policies, and Non-Retaliation Policies. The school administration will investigate each hazing report with all the parties involved and will provide immediate safety actions as deemed necessary. Part of the investigation by school administrators will include distinguishing hazing from legitimate feedback and remediation that a student receives as part of their education.
- Some disciplinary actions may be implemented during the investigation of hazing to include but not limited to include rotation reassignment, remediation plans, and temporary or permanent removal from units and/or clinical partners.
- Documentation of the hazing incident and investigation will be kept with school administration in a locked area and kept confidential.
- Parties involved will be notified within ten business days at the conclusion of the investigation.

**DISCIPLINARY SANCTIONS:**

- Anyone found in violation of this policy will be subject to disciplinary sanctions. These sanctions may include, but are not limited to, warnings, probation, removal from leadership/organizations, loss of clinical placement, suspension, and/or dismissal. The severity of the sanctions will depend upon the circumstances surrounding the violation. Disciplinary action will be in addition to any penalties imposed by law, for violations of state law and may include expulsion from the school and/or the revocation of an organization's permission to operate as a student-recognized organization.
- Leniency in sanctioning will be considered for those that have acted in good faith to report violations or seek medical attention for another. Hazing may also be considered a criminal act in the Commonwealth of Pennsylvania.

**FOLLOW UP:**

On October 1, 2025, an initial report of all incidents that have occurred during the previous five years that meet the definition of this policy will be reported on the school’s website. This report will be updated on October 1 and May 1 of every year and will not include any personally identifiable information.

Yearly education will be provided to students, faculty, and staff.

**Findings:**

October 1, 2025 - Conemaugh School of Nursing and Allied Health Programs have received zero reports of Hazing over the past five years.

May 1, 2026 - Conemaugh School of Nursing and Allied Health Programs have received zero reports of Hazing over the past five years.

October 1, 2026 - Conemaugh School of Nursing and Allied Health Programs have received zero reports of Hazing over the past five years.

## Conemaugh Violence in the Workplace

**Anti-Violence Policy**

The safety and security of patients and individuals working in the Facility is of vital importance to the Facility. Therefore, the Facility has adopted a zero-tolerance policy concerning work-related violence. Threats or acts of violence —including intimidation, bullying, physical or mental abuse and/or coercion will not be tolerated.

It is our goal to have a work environment free from acts or threats of violence and to respond effectively in the event that such acts or threats of violence do occur.

Work-related violence is any intentional conduct that is sufficiently severe, abusive, or intimidating to cause an individual to reasonably fear for their own personal safety or the safety of their family, friends and/or property such that workplace conditions are altered or a hostile, abusive or intimidating work environment is created for one or several individuals. The conduct prohibited by this policy applies to conduct by all persons involved in our operations, including coworkers, supervisors, managers, temporary or seasonal employees ("employees"), agents, clients, vendors, customers, contract staff (including any non-employed physicians) or any other third party interacting with the Facility ("third parties").

Examples of work-related violence include, but are not limited to:

- Threats or acts of violence occurring on Facility premises, regardless of the relationship between the parties involved in the incident;
- Threats or acts of violence occurring off Facility premises involving someone who is acting in the capacity of a representative of the Facility;
- Threats or acts of violence occurring off Facility premises involving an individual who works at the Facility if the threats or acts affect the business interests of the Facility;
- All threats or acts of violence occurring off Facility premises, of which an individual who works at the Facility is a victim, if we determine that the incident may lead to an incident of violence on Facility premises; and
- Threats or acts of violence resulting in the conviction of an employee, agent of the Facility, or an individual performing services for the Facility on a contract or temporary basis, under any criminal code provision relating to violence or threats of violence when that act or the conviction adversely affect the legitimate business interests of the Facility.
- Examples of conduct that may be considered threats or acts of violence under this policy include, but are not limited to:
- Threatening physical contact (including sexual misconduct) directed toward another individual;
- Threatening an individual or the individual's family, friends, associates, or property with harm;
- The intentional destruction or threat of destruction of the Facility or another's property;
- Menacing or threatening phone calls;
- Stalking;
- Veiled threats of physical harm or similar intimidation; and/or
- Communicating an endorsement of the inappropriate use of firearms or weapons.

Work-related violence does not refer to work environment arguments or debates that are zealous or impassioned, provided there is no resort to any form of coercion. Discussions about sporting activities, popular entertainment or current events are not considered work-related violence when there is no threat of violence being directed at the work

environment or any individual connected with it. Rather, work-related violence refers to behavior that demonstrates an intention to engage in violence, condones violence in our work environment, or targets any individual with acts or threats of violence.

All individuals should help maintain a violence-free work environment. To that end, individuals are encouraged to immediately report any incident that violates this policy to a supervisor or manager.

This policy in no way prohibits individuals from engaging in activities that are protected under applicable state and federal laws, including but not limited to any activity that is protected under Section 7 of the National Labor Relations Act, which includes the right of individuals to speak with others, engage in debates and protest about their terms and conditions of employment. No provision of this policy statement or any other provision in this policy alters the at-will nature of employment with the Facility. The appropriate entity of the Facility will make the sole determination of whether and to what extent, threats or acts of violence will be acted upon by the Facility. In making this determination we may undertake a case-by-case analysis to ascertain whether there is a reasonable basis to believe that work-related violence has occurred.

**Weapons**

To maintain a safe and secure work environment for everyone, firearms, knives, pepper spray or other weapons or destructive devices are prohibited on Facility property. No individual may bring weapons onto parking lots used by our sites except where state law permits storage of firearms in locked vehicles and even in such situations, employees must comply with all requirements. Firearms may not be removed from the vehicle or carry a weapon on their person. The term “weapon” is to be construed broadly and inclusively to safeguard patients, employees, and others. This policy excludes law enforcement officers acting in the course and scope of their duties.

Bringing weapons to work, using weapons at work, or assisting someone else in doing so is a violation of Facility policy and grounds for discipline, up to and including termination or action on staff membership and/or clinical privileges status. Individuals who observe weapons in the workplace should immediately report the incident to Security, a supervisor, People Services or the Ethics and Compliance Hotline at 1-877-508- LIFE (5433).

The Facility reserves the right to conduct a search or inspection to the extent permissible under applicable law to ensure compliance with this policy.

Individuals who violate this policy may be denied access to, or be removed from, Facility premises. Employees who violate this policy may also be subject to disciplinary action, up to and including separation of employment. Individuals who are not employed but have been granted any sort of clinical privileges may face corrective action.

**Reporting Requirement**

All individuals should immediately report any workplace situation, incident or activity that appears threatening or violent or that appears to be a violation of the Anti-Violence Policy to Security, a member of management, People Services or the Ethics and Compliance Hotline at 1-877-508- LIFE (5433). In the event of emergency, call 911. The Facility will take reasonable steps to ensure safety and security, including investigating all potential incidents, disciplining those responsible for misconduct, summoning law enforcement or assisting in the prosecution of criminal activity.

**No Retaliation**

No individual will be retaliated against for reporting a possible violation of the Anti-Violence Policy or for assisting or participating in a complaint investigation.

## Conemaugh Problem Reporting & Non-Retaliation

**STATEMENT OF POLICY:**

Conemaugh Health System recognizes that a critical aspect of its compliance program is the establishment of a culture that promotes prevention, detection, and resolution of instances of conduct that do not conform to federal, state, and private payer healthcare program requirements, as well as the organizations ethical and business policies. To promote this culture, CHS has established a problem resolution process and a strict non-retaliation policy to protect employees, who report problems and concerns in good faith, from retaliation. Any form of retaliation can undermine the problem resolution process and result in a failure of communication channels in the organization.

**REQUIREMENTS:**

1. **GENERAL**
   a. All employees are responsible for reporting misconduct, including actual or potential violations of law, regulation, policy, procedure, or the Common Ground Code of Conduct.
   b. An open-door policy will be maintained at all levels of management to encourage employees to report problems and concerns.
   c. Employees will be encouraged to proceed up the chain of command or communicate with the Human Resources Department if their problems or concerns are not resolved.
   d. Employees may also utilize the Compliance Line Hotline (1-877-508-5433) if they wish to remain anonymous. Employees are strongly encouraged to report problems and concerns via the chain of command or Human Resources Department before resorting to the Compliance Line. However, this communication channel is always available if special circumstances exist or the issue is not being properly addressed.
   e. Any form of retaliation against any employee who reports a perceived problem or concern in good faith is strictly prohibited.
   f. Any employee who commits or condones any form of retaliation will be subject to discipline up to, and including, termination.
   g. Employees cannot exempt themselves from the consequences of their own misconduct by reporting an issue, although self-reporting may be taken into account in determining the appropriate course of action.

2. **ALL EMPLOYEES**
   a. Knowledge of misconduct, including actual or potential violations of law, regulation, policy, procedure, or the Code of Conduct must be immediately reported to management, the Corporate Compliance Officer, or the Compliance Line Hotline.
   b. Knowledge of a violation or potential violation of this policy must be reported directly to the Corporate Compliance Officer or Compliance Line Hotline.
   c. Concerns regarding any issue should be addressed to management in the following order:
      - Immediate Supervisor
      - Department Manager
      - Department Director
      - Senior Management
   d. Employees may also report problems or concerns to the Human Resources Department.
   e. If an employee concern or problem cannot be satisfactorily resolved, or special circumstances exist, the employee should report to the Corporate Compliance Officer or Compliance Line Hotline.

3. **MANAGEMENT AND CORPORATE COMPLIANCE OFFICER**
   a. Management-- Senior Management must respond appropriately to ensure that subordinate management personnel support this policy and encourage the reporting of problems and concerns. At a minimum, the following actions should be taken and become an ongoing aspect of the management process:

b. Meet with subordinates to discuss main points within this policy.
c. Provide all subordinates with a copy of this policy.
d. Post a copy of this policy on employee bulletin boards.
e. Post this policy in the organizational policy manual on the intranet.
f. Corporate Compliance Officer

1. The CCO will be responsible for the investigation and follow-up of any reported retaliation against an employee.

2. The CCO will report the results of an investigation into suspected retaliation to the appropriate VP or President.

**RESPONSIBILITY**: The Corporate Compliance Officer is responsible for coordinating the implementation of this policy. Directors/Managers are responsible for ensuring implementation in their areas of responsibility.

## Notice of Non-Discrimination, Equal Opportunity, and Diversity Initiatives

Conemaugh Health System and Conemaugh School of Nursing and Allied Health Education Programs affirm their commitment to nondiscrimination, equal opportunity, and the pursuit of diversity. Conemaugh does not discriminate on the basis of sex or gender or in a protected class which includes the following: race, ethnicity, religion, color, national origin, sex, age (40 years and over), ancestry, individuals with disabilities, veteran status, sexual orientation, height, weight, genetic information, marital status, gender identity, caregiver status or familial status, in the administration of any of its educational programs, activities or with respect to employment or admissions to the Conemaugh School of Nursing and Allied Health Educational Programs and activities operated by recipients of Federal financial assistance.

Sexual harassment, which includes acts of sexual violence, is a form of sex discrimination prohibited by Title IX. Sexual harassment includes unwelcome sexual advances, requests for sexual favors, and other verbal, nonverbal or physical conduct of a sexual nature. Sexual violence refers to physical sexual acts perpetrated against a person's will or where a person is incapable of giving consent due to the victim's use of drugs or alcohol, age, or disability.

This policy is in accordance with local, state, and federal laws, including Title VI of the Civil Rights Act of 1964, Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Age Discrimination Act of 1975. Inquiries regarding these regulations, policies or complaints of discrimination should be referred to Conemaugh Health System Patient Relations 814-534-9000.

**Inquiries or complaints regarding Title IX and the Title IX regulations should refer to the Title IX Coordinator, Patricia Huber-Smith, RN, BSN, at 814-534-9485 or phubersm@conemaugh.org and/or the Director and Associate Director of the School of Nursing.**

## RISK EDUCATION AND PERSONAL PROTECTION

The best defense against assault of any kind is to avoid situations where you are vulnerable. Here are a few suggestions:

- Choose settings for social activities very carefully. The proximity of other people heightens your safety but does not guarantee it.
- Do not walk alone at night. Travel with friends. Keep to familiar, well-traveled and well-lighted areas.
- Do not hitchhike. By doing so you forfeit the ability to change direction and control of your movement.
- Tell someone where you are going and when you expect to return.
- Have your key in hand and ready to unlock your door. This also applies to your vehicle as well.
- Always keep your home and vehicle door locked.
- Examine your own desires and feeling about sex and set sexual limits.
- Be assertive and communicate your limits clearly.
- Alcohol and drugs can compromise your ability to make responsible decisions and are often related to date rape situations. This applies to both potential victims and potential assailants.

**BELOW ARE TIPS THAT CAN ASSIST YOU WHEN YOU ARE BEING PRESSURED**

- Trust Your Instincts
    - You do not need a reason to say no. If something feels off, uncomfortable, or wrong, trust your gut and take steps to protect yourself. You do not owe anyone an explanation.
- Remind Yourself: “This Is Not My Fault”
    - Perpetrators are responsible for their own actions. Nothing you said, did, wore, or implied justifies someone pressuring or coercing you. Blame and shame belong solely to the person crossing the line.
- Use a Code Word
    - Set up a signal in advance with a trusted friend or family member. It could be a text like “311” or a phrase like “I forgot to feed the cat.” When you use it, they will know you are in trouble and can help by calling, interrupting, or coming to get you.
- Know Your Exit Strategy
    - Be aware of your surroundings. Where are the exits? Is there a bathroom you can duck into and make a call? Could you pretend to get a phone call, check on a friend, or step away for a moment to regroup or get help? Safety planning can help you escape a high-risk situation.
- It’s Okay To Lie To Get to Safety
    - If telling the truth feels unsafe, make an excuse. Say you are feeling sick, need to check on someone, or have somewhere to be. You do not owe honesty to someone who is disrespecting your boundaries. Say whatever you need to say to remove yourself from the situation safely.
- Get Support Afterward
    - Even if nothing physical happened, coercion and pressure can be emotionally traumatic. You deserve care, support, and space to process your experience.
        - Talking to a friend, therapist, or advocate can help.

Source: https://rainn.org/strategies-to-reduce-risk-increase-safety/how-to-respond-if-someone-is-pressuring-you/#headline-H2_1

**WHAT TO DO IF YOU ARE A VICTIM OF SEXUAL VIOLENCE**

- Find a safe environment away from the attacker, have a friend stay with you, and understand you are a victim with rights and have done nothing wrong.
- Individuals are encouraged to report the assault to police by calling 911 and/or notify campus administration.
- Preserve all evidence of the assault—avoid changing clothes, using the restroom, combing your hair, bathing, brushing your teeth, eating, smoking, cleaning the scene, or moving anything the perpetrator may have touched. Additionally, it is important to save any text messages, emails, or voicemails related to the incident.
- Seek immediate medical attention and ask the hospital to conduct a sexual assault kit exam to preserve forensic evidence. Identify any risks of sexually transmitted infections or diseases (STIs or STDs) and pregnancy. Request a urine sample be taken if you suspect you were drugged. Examples of STDs include, but are not limited to, Chlamydia, Gonorrhea, Hepatitis, Herpes, HIV/AIDS, HPV, PID, and Syphilis.
- Write down what you recall about the assault and the attacker.
- Remember, what happened is not your fault.
- Allow yourself time to recover from sexual violence.
- Seek professional counseling for assistance.

Source: https://www.rainn.org/get-information/sexual-assault-recovery/tips-for-after-an-attack

**Tips for Intervening in Risky Situations**

Step in and intervene asking friends from both sides to assist either individuals or a group.

Use a distraction to redirect the focus ("Hey, I need to talk to you").

Remember to always:

- Approach everyone as a friend.
- Do not be antagonistic.
- Avoid using violence.
- Be honest and direct whenever possible.
- Recruit help if necessary.
- Keep yourself safe.

If things get out of hand or become too serious, contact the police.

**Police – 911**

## COUNSELING RESOURCES

**National Sexual Assault Hotline**
1220 L. Street NW, Suite 505
Washington, DC 20005
1-800-656-HOPE (4673)

**Cambria County**
Victim Services
638 Ferndale Avenue
Johnstown, PA 15905
814-288-4961

Women's Help Center
809 Napoleon Street
Johnstown, PA 15901
814-536-5361

**Somerset County**
Victim Services
433 W Patriot Street
Somerset, PA 15501
814-443-1555

Women's Help Center
124 N. Ctr. Ave.
Somerset, PA 15501
814-443-2824

## SCHOOL RESOURCES

Contact one or more of the following:

**Title IX Coordinator**

- Patricia Huber-Smith, BSN, RN, Health and Student Services Coordinator

**Title IX Deputy Coordinators**

- Heather Vitko, PhD, RN, CNL, CCRN, TCRN, CHSE, Director Conemaugh School of Nursing & Allied Health
- Nicole C. Itle, Ed.D., RT (R)(MR), Program Director, Radiologic Technology
- John Hoffman, CST AS, Program Director, Surgical Technology
- Melissa Shaffer, MBS, MT (ASCP), Program Director, Medical Lab Science
- Lisa Distefano, BS HT(ASCP)CM, Program Director, Histotechnology
- Richard Steel, NRP FPC, Program Director, Program Director, Emergency Medical Services

**Office of Security and Safety**

- Steven Dunn, Security Manager

## Conemaugh Drug & Alcohol-Free Workplace

(Policy may be found by clicking on the **Human Resources Policy Manuals** on the **Intranet** page.)

**SCOPE:**

This policy applies to Conemaugh Health System entities.

**PURPOSE:**

To promote a workplace that is free from the influence of drugs and alcohol and for the protection of our patients, employees and all other persons working or visiting the health system. To eliminate the potential for substance abuse within the health system and to establish a consistent method for testing candidates and employees in its attempt to ensure a workplace that is free from the influence of drugs and alcohol. Employees, volunteers, students of CHS educational programs and affiliate schools, hereafter referred to as "students," contract personnel, residents, or anyone with access to patients and patient care areas are subject to this policy.

**POLICY:**

**A. Education**

Education will be provided on:

1. The Drug & Alcohol-Free Workplace Policy.
2. The dangers of abusing drugs and alcohol in the workplace.
3. The medical treatment and other resources available for persons who seek treatment and counseling.
4. The nature and benefits of drug and alcohol testing, including post-offer, pre-placement testing and for cause/reasonable suspicion.
5. The action that the Hospital will take when employees, volunteers, students, or contract personnel violate this policy.

Education on the Drug & Alcohol-Free Workplace Policy will be provided at initial orientation by Human Resources, Allied Health Education Programs and Residency Program Directors; and annually thereafter at required education to employees and students. The substance of this policy will be included in the employee handbook and orientation manual. In addition to general employee and student education, supervisor training will occur at hospital-wide orientation and annually.

This will include information on this policy, the effects of substance abuse in the workplace, how to observe and document reasonable suspicion, how to make reasonable suspicion determinations, and how to refer an individual suspected of having substance abuse problems for evaluation and treatment.

**B. Policy**

It is the policy to promote a workplace that is free from the influence of drugs (including marijuana even if medically prescribed) and alcohol. The health system believes that such a policy is in the best interest of all our employees and the patients whom we serve.

The health system's number one priority is providing excellent patient care and for that reason, all of our employees serve in roles that affect the safety of our patients. Being under the influence of marijuana and other drugs in the healthcare setting can negatively affect patient care because drug use may impair the user's physical and/or cognitive functioning. Accordingly, the health system prohibits the use of drugs (see section D

for use of legal medications) and has selected a laboratory with the technological sophistication to conduct Zero Tolerance Drug Testing on all samples submitted for testing.

This policy supersedes all previous drug and alcohol policies of the health system, whether found in an Employee Handbook, Policy, and Procedure Manual, or in any other document or communications. All positive test results will be reported to the applicable licensing board/agency when required by licensed/registered health professionals.

**C. Drugs and Alcohol**

As used in this Policy, the term "drug" means any illegal or illicit drug, any substance or drug (including marijuana even if medically prescribed) producing effects on the central nervous system, or any controlled substance (including all drugs, narcotics, and intoxicants for which possession or misuse is made illegal under federal, state, or local law); and the term "alcohol" means the intoxicating agency in beverage alcohol, ethyl alcohol (e.g., beer, wine, liquor), or other low molecular weight alcohols including, but not limited to, methyl and isopropyl alcohol. In addition, the term "drug" will include legal prescription drugs for which the employee does not have a prescription.

**D. Prohibited Conduct**

The following shall be grounds for termination:

1. Use, sale, attempted sale, manufacture, possession, conveyance, purchase, attempted purchase, distribution, cultivation, transfer, or dispensing, (except as required by your employment or contract) of drugs (illegal or illicit). This policy serves notice to those involved in such activities that CHS reserves the right to refer those involved for prosecution under the Controlled Substance, Drug, Device and Cosmetic Act (PA Act No. 64), or any comparable legislation. Legal sanctions may include probation, fines, or imprisonment;
2. Being under the influence of illegal or non-prescription drugs or alcohol, or having drugs or alcohol:
    a. In one's system, or
    b. On any health system premises or worksites, or
    c. In any area under the control of the health system, (including, but not limited to, the parking area), or
    d. During work time, or
    e. In your possession illegally, or
    f. In or occupying health system property (including, but not limited to, health system vehicles) or property under the control of the health system.
3. Use or abuse of alcohol on or off the job that impairs, to any extent, performance on the job.

**E. Legal Medications**

This Policy does not prohibit the legal use of medications (prescription or over-the-counter), including medications containing alcohol. The health system requires that all employees disclose to Human Resources in advance of working when taking medication containing alcohol or any medication that poses a significant risk of substantial harm to the health or safety of the individual or others, or when taking any medication containing alcohol or any medication that affect the safety of our patients or impairs the user's physical and/or cognitive functioning. When required, the health system will make reasonable accommodations if appropriate (transfer, reassign, place an employee on leave of absence, or take other appropriate action during the time the employee uses medication that may affect the employee's ability to perform safely). It is the employee's responsibility to consult with the employee's licensed healthcare professional to determine if any medication would adversely affect the employee's ability to perform the essential functions of the job safely and requires disclosure to Human Resources.

**F. Employee Assistance Program**

The health system makes available an Employee Assistance Program to assist employees who may have problems with drugs or alcohol; however, this program does not insulate an employee from termination for a violation of health system policy, nor will it insulate any employee after the employee has been requested to participate in a drug or alcohol test. Employees who believe they have a problem with alcohol or drugs (legal or illegal) – are encouraged to seek assistance before the Drug and Alcohol Policy is violated. The EAP is available to employees seeking assistance with drug and/or alcohol related issues. The EAP can provide information regarding the dangers of drug and alcohol abuse, evaluate an employee for possible drug and/or alcohol dependence, and assist an employee to locate appropriate services and rehabilitation programs that emphasize education, prevention, counseling, and treatment. Each request for assistance will be treated as confidential, and only those persons with a "need to know" will be informed of an employee's request.

**G. Designated Social Functions**

The alcohol provisions of the policy shall not apply at health system designated social functions (whether on or off premises), although it is not the policy of the health system to condone alcohol abuse at such functions.

All employees are expected to conduct themselves at all times in accordance with the Code of Conduct and other health system policies. Inappropriate conduct, disruptive behavior or any other inappropriate actions caused by alcohol at designated social functions (whether on or off premises) will be cause for corrective action up to and including termination of employment.

**H. Testing**

**NOTE**: For purposes of this policy, the following will result in termination of employment or no further employment consideration of an applicant:

a) Refusal to undergo or consent to a drug/alcohol test, or

b) When an applicant or employee is unable to provide a urine specimen ("shy bladder"), absent a valid medical reason, within a 3-hour period it will be viewed as a positive result.

1. Pre-Employment Drug Test – all prospective employees and contract/agency personnel (See Section G 8) will be required to undergo a pre-employment drug test and may not begin work prior to review of the test results. This applies to students, volunteers, and auxiliary members. A refusal to undergo the test, or a positive test result, attempt to tamper with, substitute, adulterate, or otherwise falsify a test sample will result in denial of employment (see G11 for consequences of positive test results).

2. Post-Accident Drug Test – Employees involved in a work related "accident" will be required to undergo a drug test as state law allows (see HR State Law Addendum) if there is a reasonable possibility that employee impairment contributed to the accident. The hospital Director of Human Resources or designee shall review the circumstances of all work related "accidents." Typically, an "accident" is any event, incident, or judgment in which the employee's acts, or failure to act, appear to have caused or contributed to the accident, which resulted in:

a. Bodily injury (including a needle stick and a blood splash) to an employee that requires medical attention other than first aid/one-time treatment for minor scratches, cuts, burns, splinters, etc.
b. Death to any person
c. Damage to any property

At the discretion of management, employees who are required to undergo a post-accident drug test will be placed on leave pending the results of such test provided reasonable suspicion exists. If the results are positive, the employee will be terminated retroactive to the date of the accident. A refusal to undergo the test, positive test results, attempt to tamper with, substitute, adulterate, or otherwise falsify a test sample will be grounds for termination. The test should be administered as soon as practicable following the work-related incident (before the employee leaves the work location, but no later than the following day).

If the health system believes that there is a reasonable possibility that employee impairment has caused or contributed to a work-related accident and there are objective signs that the involved employee may have used alcohol (i.e., slurred speech, staggering gait, odor of alcohol), the employee will be required to submit to a blood alcohol test in addition to the urine drug test.

3. Voluntary Disclosure – An employee's decision to seek assistance under this policy will be considered voluntary only if the employee seeks assistance before the employee's alcohol or drug-abuse problem lead to a violation of this or another health system policy justifying corrective action and before being asked to take a drug and/or alcohol test. If an employee voluntarily discloses that he/she has a drug/alcohol problem and requests assistance, then the employee will be referred to the EAP and will be required to follow the Voluntary Disclosure Procedure outlined below:

a. The employee will be referred to the Employee Assistance Program (EAP) and the appropriate Licensing Board, as applicable, for counseling and development of a treatment program, and will be placed on a leave of absence as appropriate.

b. The employee will be required to sign an Authorization for Release of Confidential Information form in order for the counselor(s) to report his/her findings and recommendations to the Human Resources Director or designee.

c. The employee will be allowed to return to work, whether from an in-patient or outpatient treatment, after undergoing a drug/alcohol test conducted under health system policy with a negative result, provided he/she is released and able to perform the essential functions of his/her position with or without a reasonable accommodation. If the employee is unable to perform the essential functions of his/her previous position, then he/she may be placed in another available position (at the appropriate pay rate for the new position) for which he/she is qualified and for which he/she can perform the essential job functions with or without a reasonable accommodation. If a suitable position is not available, then the employee will be terminated in accordance with the established leave of absence policy.

d. The employee will be required to undergo a minimum of twelve (12) unannounced drug/alcohol test within a twelve (12) month period following the return to duty test. This period may be extended for up to sixty (60) days.

e. The employee will be required to cooperate with, to follow the recommendation of the counselor, including satisfactory completion of any prescribed rehabilitative program, and to submit to further tests. Failure to do so will result in termination.

f. If at any time the employee tests positive during this process, the employee will be terminated.

**NOTE:** Entering a drug and/or alcohol assistance program will not protect any employee from the consequences of substandard work performance, misconduct, or policy violations.

4. Reasonable Suspicion Drug and Alcohol Test – If the health system has reasonable suspicion to believe that an employee or group of employees are violating this policy, the employee(s) will be required to undergo a drug and alcohol test.

Reasonable suspicion Testing requires the approval of Human Resources Director. If reasonable suspicion exists, the employee will be placed on administrative unpaid leave pending the results of the testing and investigation.

Reasonable suspicion may include, but not limited to, the employee's behavior or conduct, physical manifestations, evidence that an employee has caused or contributed to a work-related accident, there are objective signs that the involved employee may have used alcohol (i.e., slurred speech, staggering gait, odor of alcohol), reports from others, work related "accident," missing or unaccounted for patient medications, speech, etc.

The health system will document information supporting the Reasonable suspicion testing (see Observation Checklist, Warning Signs of Chemical Dependency and Testing Referral forms). In the event of suspected diversion of medications, an internal investigation should be conducted and appropriate licensing boards notified as required by law (see Diversion Prevention tips). In the event of a suspected diversion of drugs, it may be necessary to test a group of employees. In this event, the employees may remain on duty unless an employee(s) appears to be in an altered state, then the employee(s) will be placed on administrative unpaid leave pending drug test results.

If the reasonable suspicion drug/alcohol tests are positive, the employee will be terminated. If the reasonable suspicion drug/alcohol tests are negative, the employee should be compensated for the period of unpaid leave.

In the event the reasonable suspicion drug test is negative, upon return to work any performance or conduct issues that formed the basis of the reasonable suspicion drug or alcohol test will be addressed through the corrective action process.

5. Other Drug or Alcohol Test – The health system will require any employee to undergo any drug or alcohol test required by law and may require any employee to undergo any drug or alcohol test not prohibited by law.
6. Drug Testing of Students – Students with access to patients and patient care areas are subject to this policy. The Human Resources Department should work in conjunction with the management team and school officials to ensure that the contractual agreement includes a statement that delineates the party responsible for the provision of drug screens prior to student assignment to the health system. Human Resources would be responsible to monitor compliance.
7. Drug Testing of Volunteers– Volunteers with access to patients and patient care areas are subject to this policy and should be tested prior to starting their assignment.
8. Drug Testing of Contract/Agency Personnel – All entities that provide contract and agency personnel (including contact/agency physicians) that provide patient care, treatment and services must provide the Human Resources Department with evidence of drug testing and results prior to contract staff starting assignment.
9. False Information – Any employee or applicant who provides false information when completing paperwork required or responding to required questions for an alcohol or drug screen test will be terminated and/or their application will be withdrawn from hiring consideration.
10. Consequences of a Positive Test – An employee or applicant, whose drug or alcohol test is positive, regardless of the reason for the test, is considered to be in violation of health system policy and will be terminated. Employment will be terminated for a confirmed positive test, even for a first offense. An employee or applicant whose drug or alcohol test is positive will be ineligible for rehire for a minimum of one year.
11. Refusing a Test/Tampering – If an employee attempts to avoid or refuses to submit to drug and/or alcohol testing, the action will be considered insubordination and the employee will be terminated. Attempts to tamper with, substitute, adulterate, or otherwise falsify a test sample are considered refusals to submit to testing. Applicants that refuse to submit to drug and alcohol testing will be withdrawn from consideration for employment. Employees and applicants that refuse to submit to the drug and alcohol test will be considered ineligible for rehire and will not be considered for future employment with the health system.
12. Consent – No alcohol test will be administered, sample collected, or drug test conducted on any sample without a signed chain of custody form of the person to be tested.

    However, testing is a condition of employment and a person's refusal to submit to a proper test will be viewed as insubordination, which will result in termination of employment. The health system will pay the costs of all drug and/or alcohol tests it requires of job applicants and employees.
13. Collection and Chain-of-Custody – Persons being tested will be asked to provide a test sample by the collection site person. Procedures for collection of urine specimens will allow for reasonable individual privacy. Urine Samples will be tested for temperature and may be tested for adulterants or subject to other

validation procedures, as appropriate. The collection site person and the person being tested will maintain chain-of-custody procedures at all times.

14. Testing Methods – All urine samples will be screened using an immunoassay technique and/or mass spectrometry technique and all presumptive positive tests will be confirmed using mass spectrometry (MS) or other equally sensitive methodology. All confirmatory tests will be performed by a laboratory certified by the federal Substance Abuse Mental Health Services Administration (SAMHSA) for federal workplace testing (see Attachment A for list of current testing profiles).

    A blood-alcohol test will be used to detect the presence of alcohol. An alcohol test will be considered positive if it shows the presence of a 0.02 percent or more alcohol in an individual's system. All blood-alcohol samples will be screened by Gas Chromatography and all presumptive positive tests will be confirmed using by Gas Chromatography/Flame Ionization Detection.

    Tests will seek information about the presence of drugs and alcohol in an individual's system and will not test for any medical condition.

15. Notification & Review of Positive Results – Any individual whose test is positive for the presence of an illicit drug or drugs will be notified by an independent Medical Review Officer ("MOR") (a medical doctor with an expertise in toxicology), and given an opportunity to provide the MRO, in confidence, with any legitimate explanation he or she may have that would explain the positive drug test (all documentation must be sent to the MRO no later than five business days after notification).

    If the individual provides an explanation acceptable to the MRO that the positive drug test result is due to factors other than illicit drugs (such as a prescription for the drug detected), the MRO will order the laboratory to disregard the positive test and will report the test as negative to the health system.

    Upon request, the Human Resources Director or designee will provide the individual with a copy of his or her own positive test report. In addition, an individual who tests positive for drugs may request within 72 hours of notification that his or her second container from the split specimen collection be sent to an independent laboratory for a second confirmatory test at the individual's expense.

    The individual shall choose from a provided list of independent laboratory certified by the federal Substance Abuse Mental Health Services Administration (SAMHSA) for federal workplace testing for the second confirmatory test. The health system will suspend the individual pending the results of any such re-test. If the retest is negative, the health system will reimburse the employee the cost of the second test.

    All test results will be treated as confidential and shared within the health system only on a need-to-know basis. Test results will not be released outside the health system without the written consent of the tested individual, except as required by law or to defend the health system in any threatened or actual legal action. Any individual may request a copy of his or her results at any time. Test results will be stored separately from employee personnel files in a secure location.

16. Compliance With All Applicable Laws – The health system will implement this Policy, including the drug- and alcohol-testing provisions, in a manner that complies with relevant federal, state, and local laws.

**I. Searches**

The health system reserves the right, at all times and without further notice, to have health system representatives conduct searches and inspection of any or all health system premises to enforce the Policy or determine if this Policy has been violated.

All vehicles and containers, including bags, backpacks, boxes, purses, and lunch containers, brought onto health system premises may be searched if the health system has a reasonable suspicion that the employee has brought drugs or alcohol onto health system premises.

Employees are expected to cooperate in any searches, and consent to a search is required as a condition of employment. A refusal to consent to a search will result in termination, even for a first refusal.

J. **Other Action Safety of Employee and the Public**

When an individual subject to this policy is sent home or referred for drug or alcohol testing, the supervisor will help him/her get home safely.

**Nothing in this policy is intended to restrict whatever rights you may have under Federal, State, or local laws.**

## Drug Free School

**STUDENTS AND FACULTY OF THE CONEMAUGH SCHOOL OF NURSING & ALLIED HEALTH EDUCATION PROGRAMS:**

In compliance with Federal Regulations set forth by Drug Free Workplace Act of 1989, and the Drug Free Schools and Communities Amendment Public Law 101-226 and subsequent amendments: which requires all institutions of higher learning to adopt and implement a program that prohibits, prevents, and educates pertaining to the illegal possession, distribution, or use of illicit drugs and alcohol by students and faculty. This document is prepared to disseminate information about drug and alcohol abuse, its prevention, and the consequences related to use and abuse of such substances.

The Drug and Alcohol-Free Workplace Policy established by Conemaugh Health System requires all students and faculty to be physically and mentally fit, free of impaired behavior that adversely affects safety and performance. Conemaugh Health System prohibits the unlawful manufacturing, possession, use, dispensation, or distribution of any illicit drugs and/or alcohol on its property by employees, students, volunteers, and contracted personnel. Anyone found to be in violation of these standings as set forth by the Substance Abuse Policy and Drug and Alcohol-Free Workplace Policy will be subject to disciplinary action, including suspension or termination. A referral may be made for counseling or rehabilitation. Such action is independent of prosecution by local, state, and / or federal authorities.
In conjunction with the policies set forth by the legislatures and Conemaugh Memorial Medical Center, Conemaugh School of Nursing and Allied Health Programs will inform students and faculty about the dangers involved with the use of illicit drugs and abuse of alcohol, the availability of student/faculty counseling and rehabilitation services/assistance programs, the penalties that may be imposed for the violation of laws and policies set forth and provide information on preventing drug and alcohol abuse.

### *Dangers Associated with the Use of Illicit Drugs and Alcohol*

Dependence on drugs and alcohol is a serious public health problem. Dependency is prevalent in all regions of the country and transcends all ethnic and socio-economic groups. Most individuals who abuse a substance deny their dependency, resulting in conflict and family difficulties. Serious consequences to dependency include mental health illness including paranoia and depression, as well as physical illness including damage to the brain, central nervous system, heart, liver, and kidneys.

All drugs – even over-the-counter and legal prescriptions – have possible side effects that can cause impairments for some people. However, these drugs are regulated and risks are written on the packaging. With illegal drugs, there are no guidelines, and you can never be sure of their strength or purity. Most, if not all, illegal drugs are mixed with impurities. You may not always get what you think you're getting!
Too much alcohol, too fast, can kill you. It is always okay not to drink. If you do choose to drink, make healthy choices. The human brain continues major development through age twenty-five. Drinking during this critical developmental period – especially drinking to the point of getting drunk – may impair brain function for the rest of the person' life. Memory, motor skills, and coordination can be affected. Alcohol consumption causes a number of marked changes in behavior. Repeated use of alcohol can lead to dependence.
All drugs and alcohol will affect how you act and will impair your judgment. The result is an undesirable, uncontrollable outcome of potentially permanent damage and possibly death. Provided is a chart describing drugs of abuse and effects.

Also available is a DEA Resource Guide, Drugs of Abuse, 2020 edition found at;
https://www.getsmartaboutdrugs.gov/sites/default/files/2025-03/Drugs-Abuse-2024.pdf

### *Preventing Drug and Alcohol Abuse*

Preventing drug and alcohol abuse is a difficult task. A personal resolve to never begin using drugs is effective for some individuals, while "Just Say No" or simply being fearful of addiction and the associated problems are enough for others. Many factors are associated with an individual's risk for drug abuse; protective factors can reduce this risk.

Drug and alcohol abuse can be prevented when protective factors are integrated into an individual's life. Being involved in extracurricular activities such as exercise, shopping, playing sports or music, or volunteering in community service organizations can provide a healthy direction for an individual's attention. Education is an effective defense to understanding the health risks. Personal effects as well as legal consequences can curtail temptation.

The key to success is a matter of understanding your strengths and weakness. An individual who possesses a strong self-esteem, who had parental involvement with clean, consistent enforcement of limitations have a strong balance of risk and protective factors.
To increase your self-esteem and assist you in remaining drug and alcohol free, surround yourself with positive, like-minded friends, find activities that you enjoy and help you relax, discover a new interest, develop your talents, and learn positive coping mechanisms.

### *Potential Legal Sanctions*

Dependency on illicit drugs and alcohol can lead to a life of complication, misfortune, and regrets. The illegal use or trafficking of such substances and their abuse has an effect on the individual as well as society.

Legal sanctions under local, state, and federal law for unlawful possession, use or distribution of illicit drugs and alcohol include: The Commonwealth of Pennsylvania Controlled Substance, Drug, Device, and Cosmetic Act #64 of April 14, 1972; Monetary fines ranging up to $250,000 and/or imprisonment up to 50 years for violation of its provisions. Under PA Criminal Code Section 6307-6308; and 21 US codes 811, 844, 853, 881, 922; it is an offense if anyone "attempts to Purchase, Purchases, Consumes, Possesses, or Transports Illegal Substances." Punished by provisions of the law. These sanctions are specific to the substances and amount, as well as the offense.

Drugs of Abuse and Federal Trafficking Penalties can be found at Drugs of Abuse, A DEA Resource Guide, 2024 Edition
https://www.getsmartaboutdrugs.gov/sites/default/files/2025-03/Drugs-Abuse-2024.pdf

## DRUG AND ALCOHOL COUNSELING/ASSISTANCE PROGRAMS FOR STUDENTS AND FACULTY

- Have you ever used drugs or alcohol? Before school? To release anger? By yourself? To alleviate stress? To establish friendship?
- Have you lied to family or friends about drug or alcohol use?
- Have your grades at school dropped?
- Have you "blacked out" as a result of drinking or drug use?
- Has your life been taken over by alcohol or substance use?

If you have answered "yes" to any of these questions, be aware that you may have a drug or alcohol problem. If you or someone you know needs help with drug and/or alcohol abuse, you are encouraged to contact the director or student health nurse for referral assistance. All such matters are handled confidentially.

## DRUG AND ALCOHOL TREATMENT LOCAL RESOURCE GUIDE

The following is a list of local agencies for drug and alcohol services, mental health counseling, and domestic violence. Please also contact the Student Health Nurse for other needed resources. Substance Abuse and Mental Health Services Administration co – www.samhsa.gov – has a website that can help locate services for substance abuse and mental health treatment.

The following are a list of local agencies to help:

- Conemaugh Counseling – 814-534-1095
- New Visions Chemical Dependency Program – 814-534-1627
- Women's Help Center – 814-536-5361
- Victim Services – 814-288-4961
- Cambria County Drug and Alcohol Program – 814-536-5388
- Cambria County Drug Coalition – 814-619-4505
- Cambria County Crisis – 1-877-268-9463
- Tobacco and Nicotine Cessation PA Quitline – 1-800-QUIT-NOW
- Alcoholic Anonymous (AA) – 814-283-4772
- Narcotics Anonymous (NA) – 1-800-913-2720
- National Suicide Prevention Lifeline – 988
- Overdose Survivor Hotline – -814-269-4700
- SAMSHA National Helpline – 1-800-662-HELP (4357)

## Possession, Use and Sale of Alcoholic Beverages and Illicit Drugs

It is the policy of Conemaugh that employees and students be physically and mentally fit. The effects of substance abuse, i.e., physical and psychological dependence and impaired behavior, can adversely affect personal safety and performance, as well as become a threat to patient safety. Therefore, Conemaugh will comply with the requirements of the Drug Free Workplace Act of 1988 and Drug Free Schools and Committee Act Amendment of 1988 (Public Law, 101-226, Section 1213).

Conemaugh therefore prohibits the unlawful manufacturing, possession, use or distribution of illicit drugs and alcohol by students and employees on its property or as a part of its activities.

This policy serves notice to those involved in such activities that Conemaugh reserves the right to refer those involved for prosecution under the Controlled Substance, Drug, Device and Cosmetic Act, (PA Act #64), or any comparative legislation. Legal sanctions may include probation, fines, or imprisonment.

## Possession of Weapons Policy

Individuals performing in a student role are strictly prohibited from possessing or carrying firearms, weapons, explosive devices, or making any threat involving such items. This includes implied or direct threats to use a weapon or cause harm.

DEFINITION: A weapon is defined as any firearm, knife, chemical spray or device / object that can be used to cause bodily harm or injury. Students, employees, and visitors are prohibited from the wearing, transporting, storage, or presence of weapons in any CMMC building, vehicle, outdoor area, or parking lot. Students or employees who observe weapons on the premises shall immediately report the incident to Security, a faculty member, or administration. The complete CMMC DLP Weapons Policy can be found ***here***.

Any violation of this policy—whether through possession, use, or threat—may result in immediate disciplinary action,

including suspension or dismissal from the program.

## Fire/Electrical/Infection Control Safety/Disaster Plan/Safety Codes

Identify the locations of fire extinguishers, fire exits, fire alarms, and oxygen shut-off valves.

**Code Red** – **Fire**: Don't shout "fire!" Remove patients from immediate danger. Turn in an alarm from the fire alarm box that is nearest you. Call the operator by dialing 222 and give the exact location of the fire. Close all doors to prevent the spread of smoke. Extinguish the fire using approved techniques. Remain in your area and reassure patients, as necessary.

| | |
|---|---|
| **P**—Pull Pin | **R**—Rescue |
| **A**—Aim | **A**—Alarm |
| **S**—Squeeze | **C**—Contain |
| **S**—Sweep | **E**—Extinguish |

**CODE ACTIVATION—Plain Language Codes**

**Medical Emergency + Location** – Event: Respiratory/Cardiac Arrest: Dial 222, call a Code Blue and state the location. If located in the F building, you must dial 4 to get an outside line, and then dial 9-1-1

**Missing Person + Descriptor + Location** – Event: Infant/Child Abduction: When you hear this code, respond immediately by observing all exits and public areas. Notify Security at 9730 if you see someone with a baby or small child, someone with a large coat or package. Make no assumptions and report relevant information, including a description of the individual. Do not attempt to confront the person. If you observe a situation that could get physical, call 222 and report a Code Green or Code Orange.

**Security Alert + Location** – Event: Patient Uncontrolled Situation: If you find yourself in a potentially violent situation with a patient. Remove yourself from the situation, dial 222, call a Code Green and state the location.

**Evacuation + Location** – Event: Evacuation: Code Amber is usually called due to a Code Red or Brown. Consult your supervisor regarding your department's role in a Code Amber. If you are in an area being evacuated, floor evacuation is always done horizontally, then down.

**Utility Failure + Location** – Event: Utility Failure

**Disaster Alert Chemical/Biological –** Event: Disaster with Chemical or Biological: When called the medical facility will become locked down. No one will be permitted to leave or enter the facility until the code is lifted. A Code White will also be called for chemical spills or any hazmat situation in which the hospital will be receiving patients. If you encounter a person in the hospital who tells you they have been exposed to a chemical agent, close off the area where they are and call Security at 9730.

**Security Alert+ Location** – Event: Combative Patient/Person: If you find yourself in an uncontrollable or potentially violent situation with an employee or visitor, you are asked to call a Code Orange if you suspect any suspicious or aggressive behavior threatening harm to harm to another individual or destroying hospital property. Remove yourself from the situation, dial 222, call a Code Orange and state the location.

**Active Intruder+ Location –** Event: Active Intruder or person perceived threat with a weapon: Move away from the sound. Alert staff that an active shooter appears to be actively engaged in attempting to kill people on hospital property.

The first to identify an active shooter situation should, dial 222; call a Code Grey and state location and description of the person(s) and weapon(s) if known.

Evacuate self, patients, visitors, staff if safe to do so. If a shooter comes into your area: try to remain calm, try not to do anything to provoke the shooter, only if there is no possible escape would the last resort (imminent danger) be a personal choice to attempt to negotiate or overpower the shooter. If the shooter leaves the area, barricade the room, or move to a safer location.

If you are at a distant location from the shooter or you are not able to leave safely: remain calm, warn staff and others to take shelter, go to a room that can be locked or barricaded, turn off lights, close blinds, block windows, turn off cell phones and radios, and other devices that emit sound, keep out of sight and take cover (thick desks, filing cabinets, concrete walls), have one person call 222 and state, "Active shooter in the hospital (give your exact location), gunshots fired." When police arrive, don't make any sudden movements. Wait for police commands before acting.

**Medical Emergency Pediatric + Location** – Event: Cardiac Arrest in person 14 years or younger.

**Disaster Alert Trauma** – Event: Disaster with patient surge: In the event that community (external) disaster occurs, a "Conval" announcement will be made and volunteers are to remain in their assigned areas. If a volunteer would feel unable to continue to assist during a Conval Alert, they are to notify the manager in their department so that they may be reassigned or dismissed. During a campus (internal) disaster, volunteers must follow the directions of their immediate manager or supervisor in their assigned department.

**Rapid Response + Location** – Event: Any deterioration in condition or concern for an inpatient, outpatient, visitor, or employee.

**Stroke Alert+ Location**—Event: Called per the discretion of the ER physician or rapid response team for anyone exhibiting stroke symptoms.

**Trauma Alert + ETA**—Event: Called per the discretion of the ER physician or rapid response team for anyone exhibiting trauma per the guidelines.

**STEMI Alert + Location + ETA**—Event: Called per the discretion of the ER physician or rapid response team for anyone exhibiting cardiac symptoms suggestive of a STEMI.

## Drills

The School will test emergency response and evacuation procedures annually. Drills may be announced or unannounced. Students will follow instructions from faculty as to direction of evacuation based on location in the building. Students are not able to return to building until instructed to do so by School Officials. Fire instructions are in each classroom and near fire extinguisher, outside main entrance of Education Building.

The Johnstown Fire Department conducts an annual walk-through of the Education Building to familiarize fire officials of all entry and exit points as well as to ensure all necessary fire response systems are in working condition.

## Fire Instructions

Know the proper exit routes and the location and operation of fire extinguishers and fire alarm boxes in the education areas and patient areas to which you are assigned.

- Participate in fire drills.
- Be familiar with the proper steps to follow in case of fire.
- In case of smoke, smoke smell or fire:
- Rescue persons in immediate, life-threatening danger.
- Go to the nearest fire alarm box and pull lever down.
- Dial **222** on Hospital telephone. Identify yourself, location, and nature of the emergency.
- If you are in a patient area, follow these precautions:
- Close all windows and doors; clear halls.
- Restrict unnecessary telephone calls and paging.
- Restrict use of elevators.
- Keep patients and visitors calm.
- Follow these steps to control oxygen use:
- Determine which patients are on oxygen and which can safely be removed from oxygen.
- Await further instructions from the Johnstown Fire Department or Nursing Administration.
- If you are in the Education Building, follow these steps:
- Upon hearing the fire alarm, close doors and windows (do not turn out the lights) and leave the building via the nearest exit. Students are to follow the faculty's directions for proper exiting. Do not use the elevator.
- Exit quickly, but do not run.
- Remain outside until permitted to return by a school official.
- Assume that all fire alarms indicate genuine emergencies.
- Extinguishing fires
- The decision to attempt to extinguish a fire must be based on the facts at the time of the fire. The decision should be made quickly.
- Do not attempt to extinguish a fire until after you are sure that all persons are safe from immediate danger, an alarm has been sounded and 222 has been dialed.
- If the fire is too large to put out with a portable fire extinguisher, attempt ONLY to contain the fire by shutting doors and leave the building.

**Various methods of extinguishing fires are:**

- Smothering - use blanket, sheet, etc., to smother fire. This is useful in extinguishing wastebasket fires.
- Dry Chemical ABC Fire Extinguisher - extinguishes all types of fires.
- Carbon Dioxide ($CO_2$) BC Fire Extinguisher - best to extinguish electrical fires.
- All extinguishers must be properly activated to be used. Pull pin or press electrical release lever; hold nozzle firmly; squeeze handle; sweep back and forth slowly, aiming at base of flames. See printed instructions on the extinguisher.

Fire instructions are posted in each classroom and near the fire extinguisher located on the first floor, main entrance of the Education Building.

## Infection Control

Eight types of precautions:

- Standard
- Airborne
- Contact
- Droplet
- AFB (Acid-Fast Bacilli)
- VZV (Varicella-Zoster Virus)
- ESBL (Extended-Spectrum Beta-lactamase)
- Blue Star

## Conemaugh Lockdown Policy

**STATEMENT OF POLICY**:

To provide guidelines regarding lockdown of all or part of the facility in the event of an emergency situation whether internal or external.

**REQUIREMENTS:**

The ability to lock down the medical center is of primary concern in an emergency situation. Establishing a secure perimeter and the routing of foot and vehicular traffic to control entry/exit points that are staffed by security and/or hospital personnel are key elements in controlling and maintaining the integrity of the facility and its surrounding perimeter.

**RESPONSIBILITY:**

The Security Department, Environment of Care Committee and Risk Management Department are responsible for implementation of this policy.

Definitions:

**I. Initiation of Lockdown Procedures**

**TYPE 1 – COMPLETE LOCKDOWN:** The determination to declare and/or initiate a complete or partial lockdown will be at the discretion of the Security Manager/Designee, Administrator-on-call and/or house supervisor of Nursing, Safety Officer and/or Incident Commander (if applicable). Declarations of lockdown may be made in respect to and in conjunction with local or federal public health officials, law enforcement, and/or emergency management. This is the highest level of facility and perimeter security. During a total lockdown, ALL perimeter doors are secured and NO ONE is allowed to enter or exit the facility unless authorized by Security personnel. Security personnel or designees will be assigned to key entrance/exit points.

**TYPE 2 – EMERGENCY DEPARTMENT LOCKDOWN:** This type of lockdown is used to regulate the entry/exit to the Department of Emergency only. All doors will be locked (badge access only) to the interior of the emergency department. In addition, the walk-in ER entrance interior door will be locked. Only patients (and a designated caretaker/guardian) presenting to the ED for treatment will be routinely permitted entry by security personnel unless approved by the ED supervisor. All people entering will be screened as described below with a goal to minimize traffic and increase safety during high-risk situations.

**II. Screening**

Individuals will be screened by Security personnel upon entry and/or exit to the facility. For a complete lockdown, only entrance/exit will be 5th floor of Ashman/Rose pavilion. For a Department of Emergency Medicine lockdown, entrance/exit is at the CP2 Emergency Department. Security personnel and/or designees will check the following:

Hospital identification badges

Driver license/Personal identification cards

Bags

Packages

Equipment

Supplies

**III. Provisions:**

All hospital personnel will report to their respective units/departments to await further instructions from their respective manager. During the lockdown additional hospital personnel may be needed as well as adjustment to normal shift hours. These adjustments will be at the discretion of the hospital administrative team.

In the event of a lockdown, hospital personnel should be in a state of high alert and question any suspicious or incident related circumstances, appearance, and/or condition, until explained, proven and verified to their satisfaction. Documentation of the contract, with basic information, should be maintained while lockdown status is in effect.

At the discretion of the Security Manager or designee, local law enforcement will be contacted to assist in control of the areas on the property as needed.

**IV. Communications:**

A. Upon notification to the switchboard of lockdown the following will occur:

1. Overhead Page of lockdown **except** for Emergency Department (Type 2) lockdown

1. Notification to key personnel via the mass messaging system

2. Notification to the Marketing Department which will assist with all communication with the Media.

**V. Job Assignments:**

In accordance to NIMS job assignments for specific code that may be called.

**VI. Notifications:**

. Notifications to local Emergency Management Agency will occur via phone by Incident Commander/Designee.

. Notifications to local Police Department will occur via phone by Security Manager/Designee.

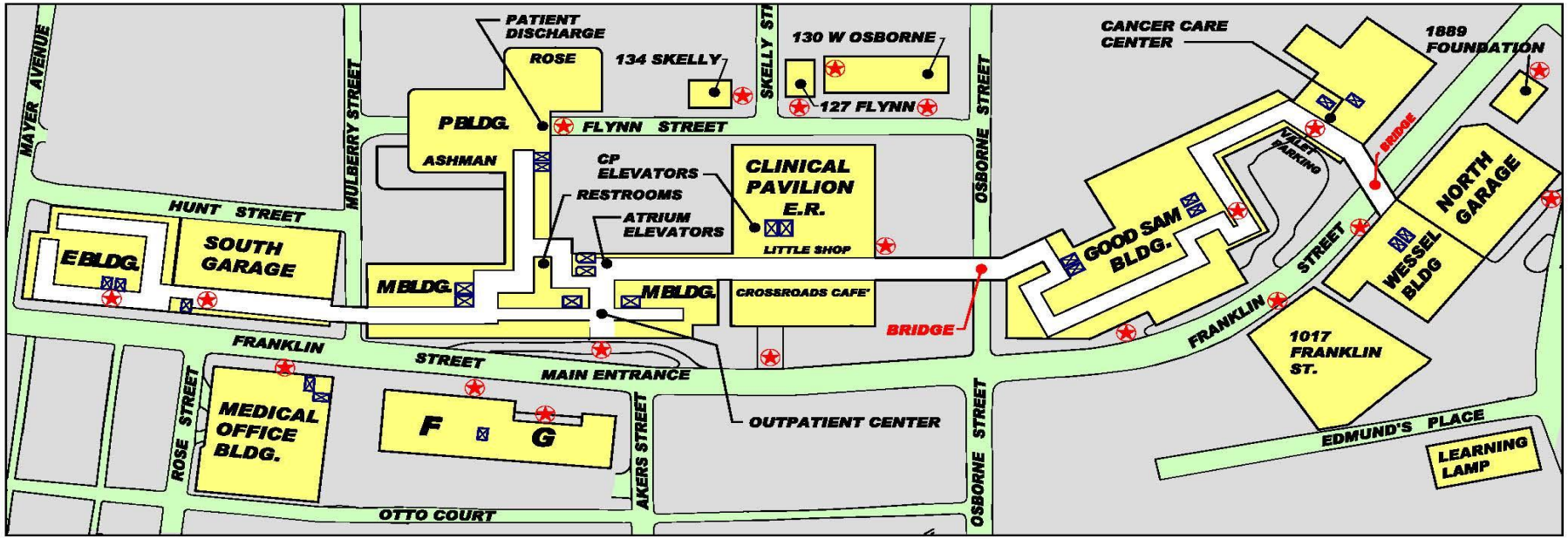
. Notifications to Pennsylvania Department of Health will occur via phone/email by Safety Officer/Designee.

**VII. Return to Normal Operations:**

The determination to terminate or discontinue a total or controlled lockdown will be at the direction of the Administrator-On-Call/house supervisor, Security Manager and/or Incident Commander. Telecommunications will overhead page "Lockdown all clear". Key personnel will assemble in the command center for debriefing and after action reporting.

# MAIN CAMPUS

## INTERIOR WAYFINDING MAP




★ = Street Entry Points

⊠ = Elevator

**Site Plan**
Not To Scale
Architectural Planning and Design
01 January 2016

Conemaugh
Memorial Medical Center

## M BUILDING

### Basement
- Clinical Engineering

### First Floor
- Admissions
- ASU Preregistration
- Atrium
- Cashier
- Coffee Bean
- Information
- Medical Imaging
- Outpatient Center/Reg
- Outpatient Lab

### Second Floor
- Cardiac Cath Lab Pre and Post Holding
- Laboratory Medicine

### Third Floor
- Diagnostic Radiology
- Nuclear Medicine
- Vascular Lab
- Vascular Surgery Clinic
- Skywalkway to S. Garage

### Fourth Floor
- Anesthesia Dept
- G.I. Lab

### Fifth Floor
- Central Supply Dept
- Women Services
- Pediatric Unit

### Sixth Floor
- Ambulatory Services
- Infusion/Blood Donor Svrs.

### Seventh Floor
- Cardiac Surgery
- Med-Surg Inpatient Unit

### Eighth Floor
- Pharmacy

## E BUILDING

### Second Floor
- Family Medical Center

### Third Floor
- Dept. of Medicine
- Internal Medicine Clinic
- Pulmonary Function Lab
- Residents' Quarters
- South Garage Walkway

### Fourth Floor

### Fifth Floor
- Neurosdence/Pain Admin. Suites
- Trauma Admin.
- Rad/Surg Tech Programs

### Sixth Floor
- CDMP

## CP BUILDING

### First Floor
- Conference Rm CP1009
- EKG Dept.
- Emergency Medicine Residency Program
- Pedestrian Thruway

### Second Floor
- CT Scan
- Emergency Medicine
- Security

### Third Floor
- CrossRoads Cafe
- Food & Nutrition Scv.
- Health Information Scv.
- Gift Shop
- Good Sam Bridge
- Patient Resource Library

### Fourth Floor
- Operating Rooms
- Recovery Rooms (PACU)

### Fifth Floor
- Maternity
- Regional Intensive Care Nursery (RICN)

### Sixth Floor
- Heliport

## P BUILDING

### First Floor
- IV Therapy
- Pastoral Care
- Volunteer Services

### Second Floor
- Cardiac Cath Lab

### Third Floor
- Cardiac Diagnostic Ctr.
- MRI Suite
- Vending

### Fifth Floor
- Flynn St. Lobby/ Visitor Parking Lots
- Patient Discharge
- Vending

### Sixth Floor
- Intensive Care Unit (ICU)

### Seventh Floor
- Cardiac / Telemetry Unit

### Eighth Floor
- Intermediate Trauma/Surg. Unit
- Progressive Care Unit

### Ninth Floor
- Joint Replacement Center
- Ortho/Trauma/Surgical Unit

### Tenth Floor
- Neuro/Surgery/Stroke Unit
- Oncology Unit

## GOOD SAMARITAN BUILDING

### Lower Level
- Radiation Oncology

### Ground Level
- Acute Care Rehab Services
- Chapel
- Coffee Cart
- Employee Health
- Hospitalists at MMC
- Medical Oncology
- Primary Care Resource Cntr.

### First Floor
- Administration
- Conemaugh Physician Group / Admin.
- GS1030 / GS1038 / GS1040 Conemaugh Learning Institute
- Marketing Comm
- Med Staff Services
- Medical Skills Learning Ctr.
- Microbiology Lab
- Morgue
- Nursing Administration
- Pedestrian Thruway
- Physician Recruitment
- Skywalk to North Garage

### Second Floor
- Continuing Education
- Control Monitoring
- Courier Services
- Mailroom Distribution
- MIS Classrooms
- Myron C. Williams Conf Rm

### Third Floor
- Behavioral Medicine Administrative Offices
- Cardiac Rehabilitation
- Employee Wellness Center

### Fourth Floor
- Management Info. Systems
- Med-Surg Inpatient Unit
- Palliative Care Inpatient Unit

### Fifth Floor

### Sixth Floor
- Med-Surg Inpatient Unit

### Seventh Floor
- Adult Psych Inpatient Unit

### Eighth Floor
- Aloysia Hall
- Geropsych Inpatient Unit

## G BUILDING

### Basement
- Environmental Services
- Facility Operations
- Student Lockers

### First Floor
- Environmental Services
- Facility Operations

### Second Floor
- Infection Control
- Performance Excellence
- Risk Management

### Third Floor
- Human Resources Department

### Fourth Floor
- Case Management
- Medical Tech Program

## WESSEL BUILDING

### Level G
- Transcription Services

### Level A
- Maharajh, MD, Balkissoon

### Level C
Conemaugh Physician Group Gastroenterology:

### Level D
- Laurel Cardiology, PC Nathartel, MD, Cyril
- Skywalk to Hospital

## F BUILDING

### First Floor
- School of Nursing
- Allied Health Programs

### Second Floor
- Health Sciences Library
- Classrooms

### Third Floor
- Classrooms / Mtg. Rooms

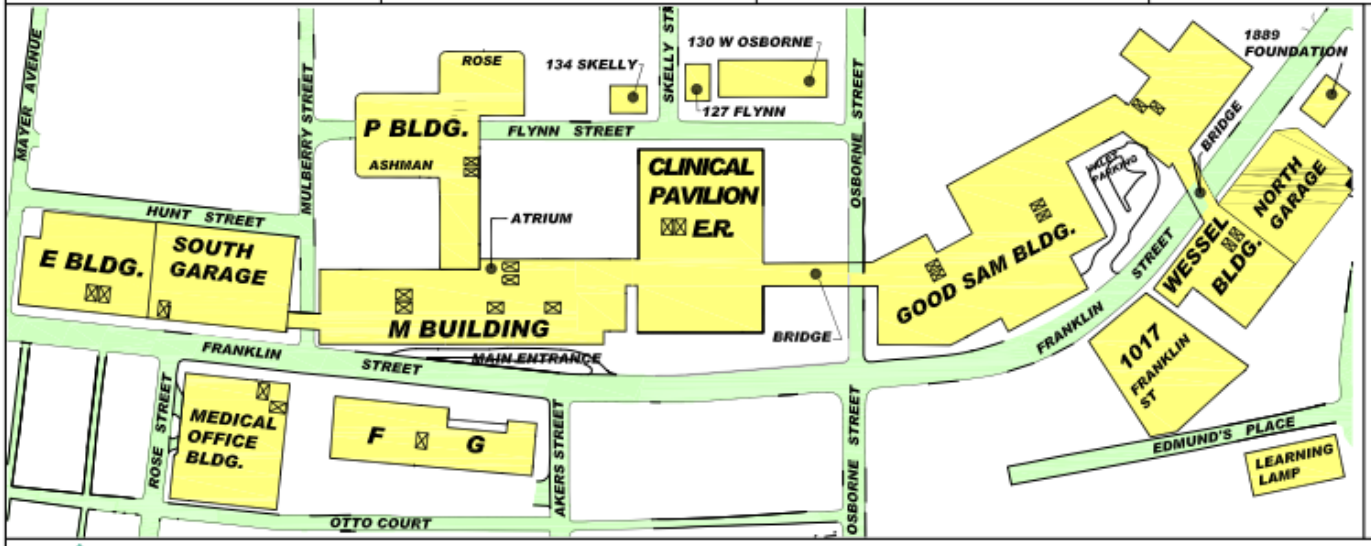
## 130 W. OSBORNE ST.
- Architectural Planning & Design
- Facilities Administration
- Property Management
- Switchboard
- Telecommunications

## 10 VALLEY PIKE
- 1889 Foundation

## 134 SKELLY ST.
- Cath Lab & Cardiac Services On-Call

## 127 FLYNN ST.
- Cancer Registry

## 1017 FRANKLIN ST.
- Management Info. Systems




## MEDICAL OFFICE BUILDING

### Lower Level
- Johnstown Screening & Breast Center

### First Floor
Conemaugh Physician Group Gynecology:

Conemaugh Physician Group Neurosurgery:

- MMC Blood Draw Lab

Women's Center of Memorial Medical Center:

### Second Floor
Conemaugh Physician Group OB/GYN:

- CMMC Ultrasound
- Women's Center of Memorial Medical Center

### Third Floor
Conemaugh Physician Group OB/GYN Associates:

### Fourth Floor
Conemaugh Physician Group Urology:

Conemaugh Memorial Medical Center
A Duke LifePoint Hospital

# MAIN CAMPUS DIRECTORY

Architectural Planning and Design
23 April 2019