CHAPTER 100 INDEX

This chapter covers general items concerning the authority of the departments of Finance and General Services, the ability of directors to reorganize their departments, general statewide office hours, and medical services provided to employees and visitors at State institutions.

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GENERAL POLICY

(Reviewed 12/2013) **0100**

This chapter defines general policy concerning the authority of the departments of Finance and General Services, the ability of directors to reorganize their departments, general statewide office hours, and medical services provided to employees and visitors at State institutions.

TERMS AND DEFINITIONS
(Revised 6/2014) **0101**

DHCS. The Department of Health Care Services.

CalHR. California Department of Human Resources.

DGS. The Department of General Services.

DOF. The Department of Finance.

Staggered work hours. Where employees arrive and leave the work place at different times, by an approved fixed schedule.

Flex-time. Where employees can arrive and leave the work place at different times, but not by an approved schedule, as long as they work their full assigned number of hours.

Panel physician. A physician with whom the employee is preregistered.

DEVELOPMENT AND ENFORCEMENT OF POLICY

(Revised 6/2014) **0110**

DGS develops policies and procedures to ensure effective departmental operations. DGS also enforces its polices, investigates and holds proceedings as it deems necessary to conserve the rights and interests of the State. See Government Code Section 14600.

APPROVAL OF PROPOSALS FOR REORGANIZING A DEPARTMENT 0130

(Reviewed 8/2014)

The director of each department may reorganize the department. This includes arranging and classifying the work of the department and consolidating, abolishing or creating divisions.

Except as provided by law, all organizational plans and changes at the division level or higher require the approval of the Governor. These plans and changes must be submitted through the agency Secretary and DOF. They will make their comments and recommendations to the Governor. It is best to have DOF review a reorganizational proposal as early as possible. In this way problems can be spotted and addressed promptly.

All reorganizations that may change the level of expenditures, including those below the division level, must be reflected in the Governor's budget. They must also be compatible with the programs authorized by the Legislature and with legislative intent. If new or revised programs are proposed, the Legislature must be informed. This can be done by a revised presentation in the Governor's budget, a DOF Letter, or a Section 28 Letter.

This SAM Section covers only reorganizations initiated by the director of a department. Other types of reorganizations are Executive Reorganizations pursuant to Government Code Sections 12080 through 12081.2, and those resulting from changes in laws.

REPORTS TO DEPARTMENT OF FINANCE AND/OR DEPARTMENT OF GENERAL SERVICES 0150

(Reviewed 8/2014)

DOF and DGS are authorized to require State agencies to submit operating reports. The reports required, forms used, and time and method of submittal are discussed in other sections of this manual. See Government Code Sections 13291, 13292, 14618 and 14746.

REQUESTS FOR APPROVAL 0170

(Reviewed 8/2014)

DOF and DGS are responsible for generally supervising all matters concerning the financial and business policies of the State. Unless exempted, all State agencies must have their contracts and agreements approved by DGS. Changes in financial and business policies must be approved before negotiations are started. See SAM Section 1200.

OFFICE HOURS 0180

(Revised 12/2013)

Government Code Section 11020 requires all state agencies to be "open for the transaction of business" from 8:00 a.m. to 5:00 p.m. every day except Saturdays, Sundays, and legal holidays. The legal holidays are listed in Government Code Sections 6700 through 6709.

Any state agency or administrative unit may stay open at other times, as long as the rules and laws and labor agreements about employee hours of work are not broken.

MEDICAL AND HOSPITAL SERVICES PROVIDED BY STATE INSTITUTIONS 0190

(Revised 3/2014)

State agencies are responsible for carrying out the policies of this SAM Section.

Extensive medical and hospital services should only be provided to the inmates, wards, patients, members or students for whom the State-operated medical facilities were established. This is because of physical and policy limitations.

Employees. Limited care and treatment of employee injuries and illness is permitted. In this case the medical staff, equipment, materials, and hospital services may be used. The illness or injury must be reported to arise out of and occur during the course of State employment. They also must be within the scope of the State's liability as defined by Workers' Compensation and Safety Laws. The following are considered to be reasonable services:

1. First aid treatment.
2. First medical treatment of a work injury.
3. Diagnosis and prognosis of conditions connected with work.
4. Arrangement for further treatment.
5. Evaluation of the physical ability of an injured employee to return to work.
6. Pre-employment and periodic physical exams for fitness and ability to safely perform arduous and hazardous tasks.
7. Preventive measures such as chest x-rays, lab tests, immunization and other measures that will minimize hazards of exposure to contagious diseases while at work.

Medical treatment of industrial injuries should be limited to the initial visit and any follow-up visit that would be considered first aid. Additional visits should be handled according to the applicable workers compensation guidelines. In the case of an injury that will results in temporary disability or a permanent disability, or will require hospitalization, employees should be directed to an appropriate physician in accordance with applicable workers' compensation guidelines. See SAM Sections 2581.4 through 2581.6 for procedures on reporting employee work injuries.

(Continued)

(Continued)
MEDICAL AND HOSPITAL SERVICES PROVIDED BY STATE INSTITUTIONS **0190** (Cont. 1)
(Revised 3/2014)

Visitors. First aid is the only medical service that should be given to visitors who become ill or are injured while on state property. Medical personnel must be certain that one of the following has occurred before the visitor is discharged:

1. The visitor has been transferred to another physician.
2. A friend or relative has accepted responsibility for further care.
3. The visitor can properly take care of himself or herself if no further medical attention is needed.

When outside physicians or ambulances are called, it should be made clear to the visitor that the visitor, and not the state, is responsible for the costs of all medical care, treatment, and other provided services.

When the visitor alleges injury or was involved in an accident on state property, Accident Report form, STD. 268 *must* be filled out. See Appendix A-1. SAM Section 2460.1 explains the reporting procedures.

Records. Complete records must be kept of all first aid services rendered at state medical facilities. The records must fully identify:

1. The person treated.
2. The date of the injury or illness.
3. The full diagnosis.
4. The reason the treatment was needed; i.e., a description of the accident, etc.
5. The services rendered, including drugs and supplies used.

Print Clear

STATE OF CALIFORNIA

ACCIDENT REPORT

(Other than Motor Vehicle)

STD. 268 (REV. 11/2007) Page 1 of 2

This report shall be completed and forwarded to the Attorney General's Office within 48 hours of the incident. Attach any photos or diagrams. Reports of serious injuries and/or death shall be reported to the Attorney General's Office within 24 hours of the incident.

CONFIDENTIAL

ATTORNEY/CLIENT PRIVILEGED DOCUMENT/WORK PRODUCT

This is a CONFIDENTIAL report requested by, prepared for and retained by the Attorney General's Office. Under no circumstances should this document be provided to anyone except the Attorney General's Office or their agent.

INCIDENT DATE	LOCATION *(Describe specific location on reverse)*	TIME

INJURED PARTY INFORMATION

INJURED PARTY'S NAME *(Last, First, M.I.)*	BIRTHDATE	DRIVER'S LICENSE NUMBER
INJURED PARTY'S MAILING ADDRESS *(Street, City, State, Zip)*	HOME TELEPHONE *(Area Code + No.)*	WORK TELEPHONE *(Area Code + No.)*

NATURE AND EXTENT OF APPARENT / CLAIMED INJURY *(Describe incident in detail on reverse)*

PHOTOGRAPHS TAKEN	IF YES, BY WHOM:	FIRST AID GIVEN	IF YES, BY WHOM:
☐ YES ☐ NO		☐ YES ☐ NO	

PROPERTY DAMAGE/LOSS INFORMATION

PROPERTY OWNER'S NAME *(Last, First, M.I.)*	HOME TELEPHONE *(Area Code + No.)*	WORK TELEPHONE *(Area Code + No.)*
PROPERTY OWNER'S MAILING ADDRESS *(Street, City, State, Zip)*		

NATURE AND EXTENT OF DAMAGE/LOSS *(Describe incident in detail on reverse)*

WITNESS INFORMATION

1. NAME *(Last, First, M.I.)*	WORK ADDRESS *(Street, City, State, Zip)*	WORK TELEPHONE *(Area Code + No.)*
DRIVER'S LICENSE NUMBER	HOME *(Street, City, State, Zip)*	HOME TELEPHONE *(Area Code + No.)*
2. NAME *(Last, First, M.I.)*	WORK ADDRESS *(Street, City, State, Zip)*	WORK TELEPHONE *(Area Code + No.)*
DRIVER'S LICENSE NUMBER	HOME *(Street, City, State, Zip)*	HOME TELEPHONE *(Area Code + No.)*
3. NAME *(Last, First, M.I.)*	WORK ADDRESS *(Street, City, State, Zip)*	WORK TELEPHONE *(Area Code + No.)*
DRIVER'S LICENSE NUMBER	HOME *(Street, City, State, Zip)*	HOME TELEPHONE *(Area Code + No.)*

REPORTING AGENCY NAME

REPORTING EMPLOYEE'S NAME AND TITLE *(Print or Type)*	TELEPHONE NUMBER *(Area Code + No.)*

REPORTING EMPLOYEE'S SIGNATURE

REPORTING EMPLOYEE'S SUPERVISOR'S NAME AND TITLE *(Print or Type)*	TELEPHONE NUMBER *(Area Code + No.)*

DISTRIBUTION: ORIGINAL–ATTORNEY GENERAL'S OFFICE, TORT UNIT, P. O. BOX 944255, SACRAMENTO, CA 94244-2550 WITHIN 48 HOURS.
COPY–RETAINED BY THE LEGAL OFFICE OF THE REPORTING AGENCY/DEPARTMENT.

STATE OF CALIFORNIA

ACCIDENT REPORT

(Other than Motor Vehicle)

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USE ADDITIONAL SHEETS AS NECESSARY

DESCRIBE SPECIFIC LOCATION OF INCIDENT:

DESCRIBE THE INCIDENT IN DETAIL:

EMPLOYEE PHYSICAL EXAMS 0191

(Revised 6/2014)

When physical examinations are required for pre-employment or as a condition of employment, the state will provide or pay for them. The applicant must pay for any more studies or exams beyond the approved level.

The California Department of Human Resources (CalHR) is responsible for ensuring the uniformity of health questionnaires and exam forms. CalHR's Medical Officer must approve any job classification's requirement for all tests or procedures. The description of all special or extensive tests or procedures must also be approved by the Medical Officer.

The DHCS sets the dollar amount that the State will pay for all exams and related medical services. This amount may be changed by a Memoranda of Understanding applicable to rank and file employees or by CalHR regulations that apply to employees excluded from collective bargaining. The State will also pay for required diagnostic services or special tests when they are not commonly performed as part of the general physical exam. Reimbursement for physician services will be based on the proper unit value listed in the "1974 California Relative Value Studies".

A copy of the 1974 California Relative Value Studies is kept by the DHCS's Fee-For-Service Rates Development Division, (916) 552-9638.

FEE SCHEDULES, MEDICAL AND RELATED SERVICES 0192

(Revised 3/2014)

Fee schedules. Fee schedules include, but are not necessarily limited to, the following:

1. Medical.
2. Dental.
3. Optical.
4. Hospital.
5. Nursing home.
6. Related services.
7. Drugs.
8. Medical appliances.

These fees are binding on the programs of all agencies except those financed under an insurance principle as in the case of the State Compensation Insurance Fund and the Disability Insurance Program.

DHCS has the primary responsibility for developing fee schedules for medical, dental, and related services. Policy related to priorities, expansion, or contraction of medical care programs is the responsibility of the program agency.

Sections of the schedules of maximum allowances for medical and related services are published and periodically revised by the DHCS. If you need a copy, contact the department.

Advisory Committees. Advisory Committees selected for the administrative and technical staffs of program agencies concerned with medical care will be established. These committees will be created as needed to advise DHCS on a particular problem or group of problems. They will serve until a solution for the problem or issue is developed.