

To: [REDACTED]

Date: [REDACTED]

From: Trip Reynolds

Subject: [REDACTED] investigation

The following is a summary of my investigation (from June 23rd through June 26th) of allegations concerning [REDACTED] management of the [REDACTED]

Employee's Who Were Interviewed

Years Years  
w/[REDACTED] - w/[REDACTED]

Employee's Who Have Not Yet Been Interviewed

[REDACTED]

3 years - 3 years  
3 years - 3 years  
3 years - 3 years  
4.5 years - 4.5 years  
8 years - 4.5 years  
14 years - N/A  
19 years - 5 years  
1 month - 1 month  
5 years - 5 years  
5 years - 5 years  
13 years - 5 years  
1.5 years - 1.5 years  
14 years - 5 years  
2 years - 2 years  
7 years - 5 years

[REDACTED]

Summary Consensus

1. [REDACTED] does not spend enough time on the floor. Interviewed staff and peers report that [REDACTED] spends from as little as 5% to no more than 10% of her time with staff and patients. This is consistently reported by employees who expressed that they like, dislike and are ambivalent about [REDACTED] management abilities.
  - a. [REDACTED] staff and her peers are uncertain if [REDACTED] has the technical knowledge and skill to perform routine "hands-on" meds delivery and other patient care responsibilities.

- b. Interviewed staff report that when [REDACTED] does assist with meds she is awkward, slow and that skills appear as though they are not up-to-date.
  - c. [REDACTED] spends too much time off the floor in meetings, of questionable purpose, which appear to have no direct impact on floor operations. Interviewed staff and peers are not routinely informed of the purpose of these meetings.
  - d. Interviewed staff and peers report that the [REDACTED] on other floors spend much more time in direct performance of "hands-on" nursing/clinical duties than demonstrated by [REDACTED] [This investigator did not make any inquiry to Nursing Administration regarding [REDACTED] involvement in meetings, task forces, etc.]
  - e. Interviewed staff and peers question the appropriateness of [REDACTED] using "peer reviews" as a primary method for evaluating the job performance of employees who routinely work night, weekends or during daily periods when [REDACTED] is not available to conduct on-site, hands-on evaluation of employee performance. Interviewed employees report that in many cases they only see [REDACTED] in passing for an exchange of greetings and then, and months later, are faced with [REDACTED] submitting an evaluation of their performance having never or rarely interacted with the employee.
2. Six (6) interviewed staff and peers who were employed prior to [REDACTED] hiring report that [REDACTED] should be credited for improving nursing operations on the [REDACTED] helping with the JCAHO review, and demonstrating solid administrative and organizational skills. However, all interviewed staff and peers report that [REDACTED] is extremely controlling, inflexible or rigid with regard to scheduling work assignments, vacations, developing opportunities for career development and, generally, interpreting compliance to departmental and [REDACTED] policies.
- a. Employee's with military background ([REDACTED]) expressed that [REDACTED] "military" management style was okay for them, that [REDACTED] was accessible enough for them, but that [REDACTED] style might be uncomfortable for some staff members.
  - b. Employee's with a non-military background expressed that [REDACTED] management style is a weakness because it does not motivate staff positively and by default creates negative morale.
3. [REDACTED] does not effectively communicate and explain changes in policy, procedures and work activities to all staff. This is consistently reported by employees who expressed that they like, dislike and are ambivalent about [REDACTED] management abilities.

- a. Five (5) interviewed staff members reported that [REDACTED] had expressed during team meetings that she has discussed "issues" with staff beforehand when, according to them, she had not. These employees believe that communications should be improved and also expressed that [REDACTED]: lies; can not be trusted; is routinely unavailable; accuses staff or wrong-doing unjustly; shares personal information with employees not in the nursing department; pits staff against each other; and is inconsistent with regard to scheduling work assignments, vacations and opportunities for career advancement including recognition and participation in task force groups.
  - b. Eight (8) interviewed staff members reported that [REDACTED] is generally not immediately available on the floor, but they have had no significant problems with [REDACTED] except for her inflexibility on scheduling work assignments, vacations and career development. One employee commented that [REDACTED] has a tendency to only hear the negative and pass it on. These employees have heard rumors but have no direct knowledge that [REDACTED] has treated any staff members unfairly. These employees believe that communications are not always clear and that communications should be improved.
  - c. Two (2) peer members reported that [REDACTED] management style is highly structured and rigid, that she communicates with her staff with some difficulty, but that she is well organized and maintains and complies with policies, procedures and standards for JCAHO.
4. The following is provided with regard to [REDACTED] alleged solicitation, sale or distribution of Amway products to her staff members or peers.
- a. Six (6) interviewed staff members reported that [REDACTED] had engaged in casual office conversations with them regarding Amway products. These general office, non-work related conversations which took place briefly at the nursing station or in the breakroom, were about various household or business interests and were sometimes initiated by the employee, upon which [REDACTED] would mention Amway products. One staff member previously sold Amway products.
  - b. Five (5) interviewed staff members reported that [REDACTED] had engaged in specific office conversations with them regarding Amway products. These non-work related conversations took place while the employee was engaged in the performance of their work. These employees commented:
    1. Buy some soap to get a 5%.
    2. My performance evaluation was reduced because I didn't buy any Amway products.
    3. [REDACTED] kept following me around asking what happened to her Amway books.
    4. She asked me about a year ago, while I was at work, about Amway and I said no. She told me that someday she won't have to deal with this (working at [REDACTED]) because of her Amway business.

5. The unit needed coverage and [REDACTED] told me that she had a business, Amway, and that she could not come in at 10 p.m.
- c. Two (2) peer members reported that [REDACTED] has not engaged them in any conversations regarding the sales or distribution of Amway products.
- d. Two (2) staff members reported that [REDACTED] has not engaged them in any conversations regarding the sales or distribution of Amway products.

### Recommendations

1. [REDACTED] should allocate more time for on-site, hands-on involvement with floor activities.
2. [REDACTED] should be positively acknowledged for her administrative and organizational skills. However, her rigid management style ~~does appear~~ to constrict self-initiative by her staff, and overall, has a negative impact on employee morale.
3. [REDACTED] should re-examine her communication efforts with staff and give particular attention to communicating information consistently to all staff members.
4. [REDACTED] has engaged in the casual and direct discussion of Amway products with members of her staff during work hours and while she and her staff were on break. As established by [REDACTED] policy, [REDACTED] should confine her discussion of Amway products when employees are not engaged in performing their job duties, such as meal periods, break periods, and off-duty periods.