

## CORPORATE POLICY

**SUBJECT: Identification/Security Access Cards and Door Keys**

**CATEGORY: Human Resources**  
**ORIGINAL DATE: May 26, 2010**  
**REVIEWED DATE: ~~March 29, 2017~~ February 26, 2025**  
**REVISION DATE: ~~April 22, 2020~~ February 26, 2025**

**I. POLICY:**

The Lake County Health Department and Community Health Center (LCHD/CHC) is committed to maintaining a safe and secure workplace. An identification/security access card is issued to all full-time, part-time, flex, temporary, and intern employees contingent workers, and identification cards are required to be worn by employees and contingent workers at all times during their scheduled shifts and during a scheduled shift. Identification cards must be worn and above the waist, in a manner visible to the public to assist in distinguishing between employees and visitors.

Volunteers, students, residents, auditors, and vendors will be issued a visitor badge and/or temporary ID card. It is to be worn at all times during the conduct of LCHD/CHC business.

**II. SCOPE:**

All LCHD/CHC employees, contingent workers, volunteers, students, residents, auditors, and vendors.

**III. PROCEDURE:**

**A. Supervisors Requesting an Identification/Security Access Card**

1. For new hires, Ssupervisors are responsible for completing and submitting an Identification/Security Card Request Form/HD Facility Access Form in Neogov, when they have new staff, or need to change access for existing staff. The form is located on HealthNet, HR, HR Forms.
2. To change access for existing staff, supervisors are responsible for submitting the HD Facility Access form via email to the HealthHumanResources@lakecountyiil.gov/Health Human Resources inbox. The form is to be completed digitally, saved, and emailed to healthhumanresources@lakecountyiil.gov. The form is located on HealthNet/HR/HR Forms.
3. The submitting supervisor will be contacted by the HR receptionist/Principal Program Assistant if the form is incomplete or for any questions.

**B. Requesting an Identification/Security Access Card for Central Permit Facility (CPF)**

1. The supervisor fills out the HD Facility Access/Identification/Security Card Request Form in Neogov to request the new hire's identification card and relevant security access to LCHD/CHC buildings.
2. The Environmental Health Services Office Manager will coordinate with Lake County Facilities to obtain a card with security access to Central Permit Facility (CPF).

**B.C. Issuing an Identification/Security Access Card**

## CORPORATE POLICY

1. ~~New Hires are responsible for completing and submitting the~~ At orientation all new employees will receive a New Hire Orientation Packet. In the packet is a Lake County Identification Card Form through Neogov. which they are to complete immediately.
2. ~~On the first day of orientation, the HR Principal Program Assistant will take the new hire's photo. Upon completing the form they will have their and create their identification/security access card. picture taken.~~
3. Healthcare Providers (MD, DO, DMD, DDS, Psy.D, APRN, PA) and Registered Nurses (RN) have the option of having their credentials added to their identification/security access card.
4. Upon being issued their new photo ID, the new employee will be required to sign a Receipt of Identification Card/Secure Access Card form to acknowledge they understand the rules regarding their issued Identification/Security Access Card.
5. ~~The HR receptionist then uploads the photos and creates an identification/security access card for each new employee.~~

### D. 24/7 Building Access Alarm Code

1. Supervisors are responsible for completing the ID Card & Facility Access Form to request an alarm code for building work location.
2. 24/7 requests should only be made for BHS residential program staff, Executive level Directors, Program Managers, Program Coordinators, authorized maintenance and IT staff.
3. There are limited staff who need 24-hour access, therefore when requesting this option, the supervisor must provide a legitimate business reason for the request.

### G-E. Activation of Identification/Security Access Card

1. The HR ~~Principal Program Assistant~~receptionist will complete the **HR USE ONLY** portion of the Identification/Security Access Card Form, scan the form, and email it to the Facilities Manager.
2. The Facilities Manager will review the form, authorize employee access as requested by the supervisor, and enter the employee's name and ID number into the Edge access database.
3. The Facilities Manager will then complete the **FACILITIES USE ONLY** portion of the form and place the form in the Facilities ~~ir~~-files. The new card will be active within 24 hours.

### D-F. Issuing Building and Office Keys

1. Supervisors are responsible for completing and submitting a *Door Key Request Form* when they have new ~~staff, or staff or~~ need to change access or request a replacement key for existing staff. ~~The form is located on HealthNet/, HR/, HR Forms. -~~For new hires needing door or cabinet keys, the supervisor must complete the key portion of the HD Facility Access form in Neogov.
2. For current employees, the form is located on HealthNet/HR/HR Forms. The form is to be completed digitally, saved, and emailed to [healthhumanresources@lakecountyl.gov](mailto:healthhumanresources@lakecountyl.gov).
3. The submitting supervisor will be contacted by the HR ~~receptionist~~Principal Program Assistant if the form is incomplete or for any questions.
4. The HR ~~Principal Program Assistant~~receptionist then submits the form to the Facilities Manager who will review the form, authorize the request, and have a

## CORPORATE POLICY

~~F. facilities staff member distribute the appropriate key(s) delivered to the to the employee or hiring manager. HR receptionist. The Facilities Manager will keep record of issued keys.~~

~~The HR receptionist will notify the employee that their key is ready and can be picked up at the 3<sup>rd</sup> floor reception desk. Upon picking up their new key,~~

5. Once the employee receives their key, they will be required to sign a form indicating that they have received it.

~~5. If it the key has been issued as a replacement for a lost key, the employee is responsible for paying the lost key fee.~~

### E.G. Separation of Employment

1. Upon separation of employment/rotation/assignment, an employee must return their identification/security access card, all keys, and any other items belonging to the agency, to their supervisor, ~~or to HR during their exit interview.~~ Volunteers, students, residents, auditors, or vendors will return their temporary ID to their preceptor ~~or Education Coordinator.~~ The supervisor is expected to return any office keys, including (noting the departing employee or contingent worker's name and employee ID number) to the Facilities Manager.

~~2. Return employee identification card to Human Resources—3<sup>rd</sup> floor, 3010 Grand Avenue, Waukegan, IL 60085.~~

### F.H. Replacement of Identification/Security Access Card or Keys

1. When an identification/security access card or keys are lost or stolen, immediate action shall be taken by contacting HR to ~~insure~~ensure the security of our facilities. HR will take the steps necessary to deactivate or replace the card or keys. ~~The employee is responsible for paying any fees associated with the replacement.~~

2. Employee requests for a replacement identification/security access card due to updated picture, credentials, title, etc. will be charged an appropriate fee.

3. Employees can email [HealthHumanResources@lakecountyil.gov](mailto:HealthHumanResources@lakecountyil.gov) to make arrangements to obtain a new identification/security access card.

### G.I. Violation of Policy

1. The identification/security access card and keys issued to an employee will be solely used by that employee. Any swapping, selling, duplication or misuse will be subject to disciplinary action.

2. In some instances, the identification card may need to be used by designated employees as a swipe card to record time clock punches. Employees caught violating this process will be recommended for termination.

3. All employees are expected to promptly report any violations of this policy or security violations to their Supervisor, appropriate Director and/or Human Resources Director.

## IV. REFERENCES:

None

## V. AUTHORS/REVIEWERS:

Designated Review Team, Corporate Policy and Procedure Committee, Executive Team, and Lake County Board of Health Personnel Committee



## CORPORATE POLICY

**VI. APPROVALS:**  
Lake County Board of Health President

Signature: \_\_\_\_\_ Date: \_\_\_\_\_