



Field Employee Handbook

The policies and procedures in this manual are not intended to be contractual commitments by Health Specialists and employees shall not construe them as such.

The policies and procedures are intended to be guides to management and are merely descriptive of suggested procedures to be followed. Health Specialists reserves the right to revoke, change or supplement guidelines at any time without notice.

No policy is intended as a guarantee of continuity of benefits or rights. No permanent employment or employment for any term is intended or can be implied from any statements in this manual.

Table of Contents

Employment Policies.....	3
Communicating with Health Specialists	3
Employment Eligibility Verification — Form 1-9	3
Reference Checks	4
Immigration Law Compliance	4
Equal Opportunity	4
Confidentiality of Company Information	4
Disability Accommodation	5
Access to Personnel Files	5
Inquiries / References on Current or Former Employees	5
Background Checks	6
Job Descriptions	7
Make a Good Impression	7
Clinical Supervision	9
Grievance/Complaint Procedure	9
Do Not Return Policy	10
Payroll.....	11
Equal Pay	11
Payroll Deductions	11
Timekeeping	11
Payday.....	12
On-Call/Call Back Coverage	12
Workplace Guidelines	13
Clinical Incidents & Sentinel Events	13
Orientation	13
Employee Safety	14
Injured on the Job.....	14
Emergency Instructions.....	15
Employee Privacy.....	16
Appearance and Courtesy.....	16
Code of Conduct	16
Drug and Alcohol Policy	20
Drug Testing.....	21
Attendance	21
Sexual Harassment	21
Workplace Violence.....	22
Guidelines for Handling Violent Situations	22
Concealed Weapon Policy	23
National Patient Safety Goals 2014	24
Continuing Education	25
Employee Performance Review.....	25
New Health Insurance Marketplace Coverage	26
Floating Policy.....	27
Identification Policy.....	28
Candidate Referral Bonus Program	28
Appendix A:	
Patient Safety Events & the Hazard and Vulnerability Assessment Tool.....	29

Employment Policies

Communicating with Health Specialists

There may be times that a situation arises, and you need to talk with an agency representative. Call our main phone number, 913-438-6337 any time – night or day – and the phone take your voice mail and send to staff. Health Specialists has someone to respond to phone calls 24/7. If you have a business-related issues, such as payroll, please make those calls during business hours, 8:00 am – 5:00 pm. However, the on-call personnel can reach management in the event of an emergency or sentinel event. Please call the normal office number if you have any questions.

The following is a list of some of the situations you should report right away:

1. Any sentinel event at the facility (regardless of whether the incident results in an adverse patient outcome.
2. Any work-related injury or illness
3. If you are expected to float to an area where you are not trained to work
4. Witnessing any aberrant or illegal behavior
5. Any conflict of interest
6. Any situation in which you do not feel comfortable
7. Any security incidents (including property damage) that occur while working

Per Diem

Unless you are told otherwise, you will be notified if you have been confirmed or cancelled. Facilities are required to provide that information to Health Specialists at least two hours before the shift. Some facilities do not confirm shifts and if you are scheduled to work, they will expect you to report at the appropriate time. Your recruiter will let you know which to expect.

Contracts

Contract shifts do not require confirmation. However, if your schedule or unit has changed outside the scope of your contract, please notify your recruiter at once. Also, please notify the office if you are sick or have asked off, or if the facility has sent you home early. This directly affects your pay so make sure you document who sent you home, why (such as low census) and have your time slip signed by a supervisor.

Employment Eligibility Verification — Form 1-9

The employee will fill out and execute the top of **Form I-9**. The hiring manager will complete **Form I-9** after examining the employee's documentation of identity and employment eligibility. Each document examined will be photocopied and the copy maintained in the employee's personnel file folder.

E-Verify is an Internet-based system that compares information from an employee's Form I-9, Employment Eligibility Verification, to data from U.S. Department of Homeland Security and Social Security Administration records to confirm employment eligibility. All employees will have e-verify confirmation of legal employment.

Reference Checks

To ensure that individuals joining the company are qualified and have the potential to be productive and successful, Health Specialists will check the employment references of all applicants. Every offer of employment is contingent upon the appropriate completion of a reference check.

Immigration Law Compliance

Health Specialists is committed to employing only United States citizens and aliens who are authorized to work in the United States and does not unlawfully discriminate on the basis of citizenship or national origin.

In compliance with the Immigration Reform and Control Act of 1986, each new employee, as a condition of employment, must complete the Employment Eligibility Verification Form I-9 and present documentation establishing identity and employment eligibility. Former employees who are rehired must also complete the form if they have not completed an I-9 with Health Specialists within the past three years, or if their previous I-9 is no longer retained or is invalid.

Employees may raise questions or complaints about immigration law compliance without fear of reprisal.

Equal Opportunity

Equal Opportunity is Health Specialists policy. It is our policy to select the best-qualified person for each position within the organization.

No employee of the company will discriminate against an applicant for employment or a fellow employee because of race, creed, color, religion, sex, national origin, ancestry, age, or other physical or mental disability. No employee of the company will discriminate against any applicant or fellow employee because of the person's veteran status.

This policy applies to all employment practices and personnel actions including advertising, recruitment, testing, screening, hiring, selection for training, upgrading, transfer, demotion, layoff, termination, rates of pay, and other forms of compensation or overtime.

Confidentiality of Company Information

It is the responsibility of all Health Specialists employees to safeguard sensitive company information. The nature of our business and the economic well-being of our company are dependent upon protecting and maintaining

proprietary company information. Continued employment is contingent upon compliance with this policy.

Every company supervisor/manager bears the responsibility for the orientation and training of his or her employees to ensure enforcement of company confidentiality. Sensitive company information is defined as trade secrets or confidential information relating to products, processes, know-how, customers, designs, drawings, formulas, test data, marketing data, accounting, pricing or salary information, business plans and strategies, negotiations and contracts, inventions, and discoveries.

Disability Accommodation

Health Specialists is committed to complying fully with the Americans with Disabilities Act (ADA) and ensuring equal opportunity in employment for qualified persons with disabilities. All employment practices and activities are conducted on a non-discriminatory basis.

Health Specialists will provide reasonable accommodation to the known disabilities of any employee, if such accommodation is required in order for the employee to perform their job's essential functions and this accommodation would not cause undue hardship. All employment decisions are based on the merit of the situation in accordance with defined criteria, not the disability of the individual.

Qualified individuals with disabilities are entitled to equal pay and other forms of compensation (or changes in compensation) as well as equal treatment in job assignments, classifications, organizational structures, position descriptions, and lines of progression.

Health Specialists is also committed to not discriminating against any qualified employees or applicants because they are related to or associated with a person with a disability. Health Specialists will follow any state or local law that provides individuals with disabilities greater protection than the ADA.

This policy is neither exhaustive nor exclusive. Health Specialists is committed to taking all other actions necessary to ensure equal employment opportunity for persons with disabilities in accordance with the ADA and all other applicable federal, state, and local laws.

Access to Personnel Files

All office personnel files maintained are private and confidential. Except as specifically provided in this policy, no person (other than the employee accessing his or her own file) shall be permitted any access to these files.

Only the following individuals will be permitted access to the personnel files:

- Recruiting Managers for field employees only
- Chief Operating Officer
- President and Vice President

Inquiries / References on Current or Former Employees

Health Specialists receives occasional requests for references on current or former employees from individuals or company representatives outside of (and unaffiliated with) Health Specialists. Health Specialists has adopted a company-wide reference procedure in order to provide, consistently, the most quantitative and unbiased references possible.

The information that Health Specialists provides is neutral and limited to verification of employment dates and position held. Information on matters such as salary, home address, and telephone number will only be provided with written release from the employee, or to comply with legal requirements.

Background Checks

Health Specialists desires to provide its staff and customers with a reasonably safe and secure environment and to provide reasonable protection for the financial and material assets of Health Specialists and its client facilities. It is appropriate in the employment process to screen persons on the basis of specific criminal conviction records that raise a reasonable doubt as to an individual's fitness for a particular position.

This policy outlines the procedure for employee background checks. The procedure is intended to insure the privacy of individuals while meeting the purpose of conviction record checks. This procedure will be followed with all field employees. This procedure may also be followed in other situations where its use is reasonable and deemed relevant to a specific employment decision. All newly-hired field staff will be subject to an employee background check.

Guidelines

When the use of criminal conviction records is appropriate, within the scope of the policy stated above, any such information must be reviewed and evaluated by the recruiter as to its relevance to the specific employment decision to be made. This evaluation shall consider, but is not necessarily limited to, the following factors:

- Falsification of application
- Date of conviction and subsequent employment record
- Length of company service and work performance (for transfers and internal promotions)
- Number and gravity of the conviction(s) in relation to the nature of the work to be performed
- The potential opportunity through abuse of work-related functions or situations to cause loss or harm to staff or to the financial or material property of Health Specialists

Notification of Applicants

Applicants will be notified by the recruiting manager of the policy of checking criminal conviction records at the time of the initial application and all potential employees must sign a release of information before the offer of employment

Procedures

- After a mutual interest of employment has been established, a background check will be ordered. This may include a social security number trace, criminal background checks for each state

and county where applicant has lived or worked. This may also include searches with OIG, SAM (formerly EPLS), Sex Offender Agency, EDL, NPDB and E-Verify.

- If the record check indicates a record of conviction(s), the recruiting manger will meet with the Chief Operating Officer to review the information.
- The supervisor/manager will review the conviction record with the employee. Once the information has been discussed and verified, the final course of action will be determined.
- All information relating to a criminal conviction record check will be treated confidentially. Copies of criminal conviction records and any notes or documentation relating to a conviction record will be maintained in a locked file cabinet.

Job Descriptions

All job descriptions shall include the following information:

- Title of position
- Job summary or overview
- Position qualifications (essential qualifications including job experience, skills, and education)
- Major duties and responsibilities

You will be given a description which is applicable to your specialty or job.

Management reviews all clinical position descriptions annually to ensure equity and consistency within and across job families and functional lines.

Position descriptions are used to determine employee selection, job requirements, performance appraisals, organizational structure, and the relative worth of jobs in relation to each other.

Company management annually reviews all company positions to ensure equity and consistency in our human resource system.

Make a Good Impression

1. Be on time to all shifts. Be 30 to 45min early, arriving to the floor, when working at a hospital for the first time. To ensure being on time, preparation begins the night before, or day of your night shift. Have clothes, nursing tools, lunch etc. prepared before sleeping. Get to bed early to ensure 8 hours of sleep. Awake early enough to eat before you leave for shift. Make sure you have accurate directions and facility phone number before you begin driving to the shift.

Do not sign in and out at the same time!

Rationale: Arriving early allows the Agency nurse to familiarize themselves with the unit, get organized, meet the Charge Nurse and make a positive first impression. Signing in and out at the same time is fraud.

2. If you are a nurse or therapist, take a detailed report. Head to toe, system by system, Neuro to Skin. Review your patient's charts, (ten to twenty minutes per chart) after report, and before lunch.

Rationale: This is of paramount importance! Sets the tone for the start of the shift, provides the foundation for the plan of care, focus of initial assessments and interventions. Taking a detailed report and reviewing the patient's chart during the first half of your shift also prepares the agency caregiver to give a knowledgeable, relevant report.

3. Show Initiative. Find the Charge nurse, introduce yourself, ask to be shown around, and inquire who your resource person may be for the shift (if initial shift @ facility), if not the Charge nurse. Communicate early and often any relevant information to the Charge nurse such as: changes in patient condition, difficulty with or questions about; assignment, staff, equipment or documentation tools.

Rationale: Allows Charge nurse to make adjustments or provide assistance in a timely manner, in order to provide the safest patient care and prevent a delay in patient treatment.

4. Avoid handling personal business during shift. Talking on mobile phones or using facility information systems for personal use (other than in an emergency or away from the patient care area during breaks) is a sure way to make an impression that will reflect poorly on the Agency nurse.

Rationale: This behavior often leads to directly to "Do Not Return's".

5. *When in Rome...* Make every attempt to do things, the way the Facility you are working in, does things. Please respect all our facilities policies and procedures, without complaint or argument. However, if you have been asked to perform a task or procedure you feel will place a patient in danger or feel unqualified to perform, contact your immediate supervisor and/or go up the chain of command until you feel you have been able to express your concern professionally and respectfully. If you encounter a situation in which you feel obligated to challenge a request, to maintain the safest patient care environment. It is of vital importance that you:

6. Communicate with Health Specialists

7. Document the incident in your own words before leaving the facility. Furnish signed and dated, copies of your documentation of the incident to Health Specialists, the Nursing Supervisor of the facility in which you were working and retain a copy for yourself.

Rationale: Knowledge of, and compliance with each facilities policies and procedures are fundamental elements of professionalism, providing safe patient care and creating an impression that makes a facility ask for a Agency nurse by name.

8. If you are a nurse, practice the 5 rights of medication administration.
 - a. Right Patient
 - b. Right Medication
 - c. Right Dose
 - d. Right Time
 - e. Right Route

If an agency nurse is confused regarding any aspect of the medication administration process, clarification with the physician and/or becomes an immediate priority, to ensure safe medication administration.

Rationale: Medication errors are serious, and can lead to negative patient outcomes, extended hospitalization, severe injury and death. Most importantly for a careful,

knowledgeable, and conscientious agency nurse, medication errors are almost always preventable.

9. Be conscious of JCAHO National Patient Safety Goals in our practice.
 - a. Improve the accuracy of patient identification.
 - b. Improve the effectiveness of communication among caregivers
 - c. Improve the safety of using medications.
 - d. Reduce the risk of health care-associated infections.
 - e. Accurately and completely reconcile medications across the continuum of care.
 - f. Reduce the risk of patient harm resulting from falls. Etc.

A complete and current set of National Patient Safety Goals is listed in this handbook.

Rationale: "The mission of Joint Commission on Accreditation of Healthcare Organizations is to continuously improve the safety and quality of care provided to the public" through the "support of performance improvement in healthcare organizations."

10. Ask the Charge nurse or resource person to Audit your charting a few hours before end of shift. Having the charge nurse/ resource person review our documentation, within a couple of hours of the end of our shift, displays exceptional accountability, reduces the healthcare provider and facility's exposure to liability. Thorough documentation also helps convey important information to the following shift and ensures the necessary facts will be available when and if the chart is reviewed in the future.

Rationale: Complete documentation, is an essential component of effective, efficient patient care. Since many agency personnel work in multiple facilities in a short period of time, it is not an easy task to dot every "i" and cross every "t", without help from a knowledgeable source.

11. Practice excellent customer service. Customer service extends further than our patients and their families; it includes every person we come onto contact with while we are working. Our customers are every nurse, pharmacist, physician, respiratory care practitioner, etc. Every time we interact with another human being at work it is imperative that we greet that person with a friendly and helpful attitude.

Rationale: Treating our patients, their families, our colleagues and interdisciplinary team members with friendliness, respect and kindness creates an environment where being helpful and taking the extra step to solve someone's problem is not the exception but the "norm".

Clinical Supervision

Health Specialists relies on facility supervising personnel to supervise our employees. The supervisors utilize the appropriate practice acts, the professional licensing and certification boards and professional associations as clinical resources, as needed.

Grievance/Complaint Procedure

A grievance is defined as any dispute or complaint arising between an employee and the company. All formal complaints must be reported immediately. A copy of this form is in your orientation packet or you can contact your recruiter and they will forward you a form to complete in writing. This form is also found on our website under "Employee's Corner". This information will be reviewed by management, investigated (if necessary) and a resolution will be sought **immediately**.

No employee will be subjected to coercion, discrimination, reprisal, or unreasonable interruption of services for voicing complaints or recommending changes. We welcome your comments, openly, at any time. All common problems can be reported to your Recruiter at any time. We will do our best to accommodate you.

General Grievance Procedure

- Step 1** The employee should complete the appropriate form and send to his or her recruiter within a reasonable time. The employee will receive a written answer within five working days.
- Step 2** If the grievance is not settled in Step 1, the grievance may, within five working days after the answer to Step 1, be presented to the Chief Operating Officer or a designee. The grievance, at this time, shall be reduced to writing and signed by the grievant. As in Step 1, the employee shall receive a written answer within five working days.
- Step 3** If the grievance is not settled in Step 2, the employee may present it to the President or Vice President or a designee. The employee will receive a written answer within five working days.

Do Not Return Policy

Do not return or DNR designation can be for professional or clinical reasons. While we do our best to accommodate both parties, we recognize that sometimes it may just be a bad fit. However, we are committed to providing a higher standard of service to our clients and to the delivery of safe, quality patient care.

As an employee of Health Specialists, you play a very valuable role in our success in delivering excellent customer service and in our ability to achieve and maintain Joint Commission Certification. Poor performance by our staff, resulting in a DNR status, can negatively impact our reputation. The following is a guideline we've adopted to determine termination:

1 Point Attitude / lack of professionalism / customer service

2 Points Clinical incompetence – poor clinical performance, Poor time management, Medication Error, Documentation Deficiencies

3 Points Danger to patient

5 Points Illegal Behavior; which includes false identity, falsified documentation, use of or distribution of controlled substances, etc. and Patient Abandonment. When a nurse is under investigation for above behavior they will be considered terminated until exonerated from all accusations

A healthcare professional who receives 5 points will be considered for termination.

Any healthcare professional involved in illegal activity will be terminated immediately

Payroll

Equal Pay

Health Specialists will not pay wages to any employee at a rate less than the company pays employees of the opposite sex for work that is substantially equivalent and requires comparable skills. Our pay is also based on other criteria, such as experience and education.

This policy is to be construed in accordance with applicable federal and state laws and regulations.

Payroll Deductions

The following mandatory deductions will be made from every employee's gross wages: federal income tax, Social Security FICA tax, and applicable Medicare and state taxes.

Every employee must fill out and sign a federal withholding allowance certificate, IRS Form W-4, on or before his or her first day on the job. This form must be completed in accordance with federal regulations. The employee may fill out a new W-4 any time his or her circumstances change. Employees who paid no federal income tax for the preceding year and who expect to pay no income tax for the current year may fill out an Exemption from Withholding Certificate, IRS Form W-4E. Employees are expected to comply with the instructions on Form W-4. Questions regarding the propriety of claimed deductions may be referred to the IRS in certain circumstances.

Other optional deductions include the portion of group health insurance not paid by the company, which is deducted from each payroll check. Other voluntary contributions, such as credit union and pension plan, are also deducted each pay period.

Timekeeping

Keeping accurate record keeping of time worked is the responsibility of every Health Specialists employee. Please see the examples in the attachment. Federal and state laws require the company to keep an accurate record of time worked to calculate employee pay and benefits. Time worked is defined as all the time spent on the job performing assigned duties.

All employees should accurately record the time they begin and end their work. They should also record the beginning and ending time of any split shift or departure from work for personal reasons. This information should be transferred to their timesheet for submission to Payroll. If the facility requires the swiping of cards in a system such as Kronos or other time keeping mechanism, the employee is responsible for doing so. In the event of an error or omission, the employee must report this information to the supervisor or manager in charge as soon as possible.

Altering, falsifying, or tampering with time records or recording time on another employee's time record may result in disciplinary action, up to and including termination of employment.

Employees should report to work no more than 15 minutes prior to their scheduled starting time nor stay more than 15 minutes after their scheduled stop time without expressed prior authorization from their facility supervisor/manager.

All employees taking "On Call" or "Call Back" shifts must clearly record these shifts as such on their time slips. If the employee uses a Kronos type time keeping system, please ask the supervisor/manager at the facility how to account for these hours.

If you are on contract and are sent home, make sure to either have the supervisor/manager sign the time sheet as such or to enter the guaranteed hours into the time keeping system. Employees failing to do so may not be paid for the guaranteed hours. If housing is paid by Health Specialists and all hours are not accounted for, pay may be reduced accordingly.

It is the employee's responsibility to sign their time records to certify the accuracy of all time recorded. The supervisor/manager will review and then initial the time record before submitting it for payroll processing. In addition, if corrections or modifications are made to the time record, the supervisor/manager must verify the accuracy of the changes by initialing the time record.

Overtime work must always be approved by the supervisor/manager before it is performed.

Payday

Our pay period runs from Sunday to Saturday. Employees are paid every week, 52 times annually. Timecards are to be submitted to your supervisor/manager by 12:00 am Monday morning for the previous workweek. Paychecks are distributed on the following Friday. If the employee elects to use direct deposit, the funds will be in the chosen institution on the following Friday as well.

On-Call/Call Back Coverage

If you are a per diem employee taking call, you must follow the facility guidelines for response time. Usually, you must be able to respond within 30 minutes. You will be paid for the time you are on call at a different rate. You will be notified what this rate is before you are scheduled.

If you are a contract employee taking call, the guidelines are in your contract, but the same basic premise applies. You can't be paid for working a regular shift while you are on call. Please make sure your start and end times are correct and noted on your time slip.

If you are called back into the hospital, your call-back rate kicks in. It is typically 1 ½ of your regular hourly pay unless otherwise noted in your agreement or contract. Please make sure your in and out times are correct.

Workplace Guidelines

Clinical Incidents & Sentinel Events

Clinical staff must recognize the importance of following effective procedures and are encouraged to speak up if something has compromised or might compromise patient safety and quality.

A Clinical Incident is any event or series of events that resulted in or had the potential to result in an adverse patient outcome. Examples of a clinical incident include but are not limited to (Omission of treatment, deviation from policy, medication error, improper equipment usage, patient fall, inaccurate clinical assessment, and patient or physician complaint). Clinical staff should notify Health Specialists of any clinical incidents that occur while on assignment, regardless of an adverse outcome. The clinical incident, including investigation and resolution will be documented on the Incident Report

A sentinel event is an unexpected occurrence involving serious physical or psychological injury or death or the risk thereof. These events must be reported to Health Specialists within 24 hours of the occurrence. The Client facility will conduct a Root Cause Analysis for all sentinel events, to identify the causes of the error. Health Specialists will work closely with any staff involved in an error, including supporting them through the difficult time, facilitate communication between the clinical staff and the customer about the event, and based on the root cause analysis, plan for improvement activities.

In the event of deviation of practice according to the professional practice act, fraudulent behaviors, narcotic abuse or deviation and/or other aberrant or illegal behavior, each event is documented, and a report is made, which includes information from the customer. Health Specialists reports each situation according to the guidelines of the appropriate professional association or licensing board.

Orientation

Health Specialists will provide all new caregivers with an orientation to the company's policies and procedures. Each field employee will receive a Field Employee Handbook. All new field staff are required to sign an Employee Handbook Acknowledgement Form.

Health Specialists provides a comprehensive and thorough pre-employment orientation and training that reflects current compliance and promotes safe healthcare delivery. The program provided through Prophecy Healthcare includes, but is not limited to the following:

- Body Mechanics/Ergonomics
- Emergency Management Preparedness
- Environmental Safety
- Fire Safety
- Hazardous Chemicals
- HIPAA
- Infection Control/Bloodborne Pathogens

- Age Specific
- Cultural Diversity
- Ethics for Healthcare
- National Patient Safety Goals
- Patient Rights

Healthcare facilities require some form of orientation. The amount of time required by each facility varies. Some facilities require computer training classes and orientation prior to the first shift worked. Your recruiter will explain required orientation before scheduling first shift with a facility.

When reporting to the healthcare facility for the first time, it is essential that the caregiver produce evidence of identity; a picture ID that verifies their identity.

Employee Safety

Safety is a joint venture at Health Specialists. Field employees will be provided with an orientation at each facility. Each employee is entitled to work in an environment which is clean, hazard free, healthy, and safe in accordance with the Occupational Safety and Health Act of 1970. As an employee, you are expected to take an active part in maintaining this environment. You should observe all posted safety rules, adhere to all safety instructions provided by your supervisor and always use safety equipment where and when required. Your work place should be kept neat, clean and orderly. All field employees will be required to do annual reviews and tests on OSHA, HIPAA and National Patient Safety Goals.

In each facility, it is the responsibility of the employees to learn the location of all safety and emergency equipment, as well as the appropriate safety contact phone numbers.

All safety equipment will be provided by the facility, and employees will be responsible for the reasonable upkeep of this equipment. Any problems with or defects in, equipment should be reported immediately to management.

As an employee, you have a duty to comply with the safety rules of Health Specialists, assist in maintaining the hazard free environment, to report any accidents or injuries - including any breaches of safety - and to report any unsafe equipment, working condition, process, or procedure at once to a supervisor.

Employees may report safety violations or injuries anonymously to the designated safety individual if they are not the injured or violating party. No employee will be punished or reprimanded for reporting safety violations or hazards.

All work-related accidents are covered by Worker's Compensation Insurance pursuant to the laws of the various states in which we operate.

Injured on the Job

If you are injured in the job, notify Health Specialists and your supervisor immediately. You/your supervisor must then contact the appropriate

personnel for that facility. You must also complete an incident report. A form is provided in this handbook, or you may download one from our website. If you require medical attention, contact your supervisor or another manager prior to going to a medical care provider.

Provide both your supervisor and Health Specialists with medical documentation of your initial work status and any subsequent changes to it. Your authorized medical care provider must support, in writing, all injury-related time away from work.

Contact your supervisor daily or according to a schedule established by the supervisor in order to keep him/her informed about your treatment and recovery.

Attend all of your scheduled medical appointments. Failure to do so may result in disciplinary action up to and including termination.

When the medical care provider permits you to return to work, you must be willing and available to return to the workplace (regardless of your assigned limitations or restrictions).

Emergency Instructions

Hazards Vulnerability Analysis

Hospitals are required to conduct and annually review their Hazard Vulnerability Analysis (HVA). The HVA provides a systematic approach to recognizing hazards that may affect demand for the hospitals services or its ability to provide those services. The risks associated with each hazard are analyzed to prioritize planning, mitigation, response and recovery activities. The HVA serves as a needs assessment for the Emergency Management program. This process should involve community partners and be communicated to community emergency response agencies. The HVA grid outlining events and severity is located in Appendix A

General rules in the event of an emergency:

- When the fire alarm sounds (or earlier, if instructed to do so) stop work and leave the building immediately.
- Follow instructions, avoid panic, and cooperate with those responding to the emergency.
- Proceed to the designated or nearest exit.
- Close desk drawers and turn off computers, equipment, fans, etc.
- Do not delay your exit from the building by looking for belongings or other people.
- When leaving the building, go to a clear area well away from the building. Do not obstruct fire hydrants or the responding fire/rescue workers and their equipment.
- Do not re-enter the building until instructed to do so by your supervisor or fire/rescue worker.

Periodic fire emergency drills may be conducted. Your life and the lives of others will depend on your cooperation.

Employee Privacy

Health Specialists recognizes our employees' right to privacy. In achieving this goal, the company adopts these basic principles:

1. The collection of employee information will be limited to that which the company needs for business and legal purposes.
2. The confidentiality of all personal information in our records will be protected.
3. All in-house employees involved in record keeping will be required to adhere to these policies and practices. Violations of this policy will result in disciplinary action.
4. Internal access to employee records will be limited to those employees with an authorized, business-related need-to-know. Access may also be given to third parties, including government agencies, pursuant to court order or subpoena.
5. The company will refuse to release personal information to outside sources without the employee's written approval, unless legally required to do so.

Appearance and Courtesy

Employees are expected to maintain high standards of personal cleanliness and to present a neat, professional appearance at all times. Employees should follow departmental guidelines in regard to professional dress standards. Health Specialists is confident that each employee will use his or her best judgment in following acceptable cleanliness and dress standards. Employees who choose to wear fragrances in the workplace are highly encouraged to be aware of the sensitivities or allergies of their coworkers.

Individual departments have the authority to define appropriate professional dress standards for their employees. Some positions may require employees to wear special clothing or uniforms. You should have no visible tattoos.

Code of Conduct

One essential goal of Health Specialists is to uphold high ethical standards in all of our company activities. The purpose of this Code of Conduct is to strengthen the company's ethical climate and to provide basic guidelines to all employees for many situations that may arise. However, standards of conduct cannot provide guidelines for every situation that occurs and, when in doubt, discuss your ethical issues with the appropriate parties within the company.

Health Specialists strives to do business with customers and suppliers of sound business character and reputation. This company will not knowingly support any public or private organization which practices discriminatory

policies or practices. All employees of Health Specialists are expected to perform their work with honesty, objectivity, truthfulness and integrity.

It is the policy of this company to comply with all applicable laws including, without limitation, employment, discrimination, health, safety, antitrust, securities, and environmental laws.

Each employee of Health Specialists is responsible for compliance with this Code of Conduct. If employees have questions about any section of this Code of Conduct, they should consult their recruiter.

Conflicts of Interest: A conflict of interest may arise in any situation in which an employee's loyalties are divided between business interests that, to some degree, are incompatible with the interests of the company. All such conflicts should be avoided. The company demands absolute integrity from all its employees and will not tolerate any conduct that falls short of that standard. The company expects that no employee will knowingly place himself or herself in a position that would have the appearance of being, or could be construed to be, in conflict with the interests of the company. Managers of Health Specialists have a responsibility to inform subordinates as is appropriate regarding the confidentiality of information acquired in the course of their work and monitor their activities to assure the maintenance of that confidentiality.

Some of the more sensitive areas of conflicts of interest and the company's related guidelines are as follows:

Accepting Gifts and Entertainment: The company's aim is to discourage givers of gifts from seeking or receiving special favors from company employees (for guidelines concerning the giving of gifts to, or entertainment of customers and others by company employees, employees are referred to paragraphs below) Accepting any gift of more than nominal value or entertainment greater than a routine social amenity can appear to be an attempt to influence the recipient into favoring a particular customer, vendor, consultant, or the like. To avoid the reality and the appearance of improper relations with current or prospective customers, vendors and consultants, employees should observe the following guidelines when deciding whether or not to accept gifts or entertainment:

- **Gifts:** Gifts such as merchandise or products, as well as personal services or favors, may not be accepted unless they have a value of less than \$50. This dollar limit is intended to serve as a guideline, and employees are urged to consult with the Compliance Officer before accepting any gifts of more than nominal value. Gifts of any amount may never be solicited; a gift of cash or securities may never be accepted.
- **Entertainment:** Normal business entertainment such as lunch, dinner, theater, a sporting event is appropriate if of a reasonable nature and in the course of a meeting or another occasion, the purpose of which is to hold bona fide business discussions or to foster better business relations. All such entertainment should be reported (in advance, if practical) by the employee to his or her supervisor/manager. No employee may accept tickets or invitations to entertainment when the prospective host will not be present at the event along with the employee.

Outside Activities: An employee is not allowed to have a "free-lance" or "moonlighting" activity that has any of the following attributes:

- Materially encroaches on the time or attention which should be devoted to the employee's duties.
- Adversely affects the quality of work performed; competes with company activities.
- Implies sponsorship or support by the company of the outside employment or organization; or
- Adversely affects the good name of the company.

All free-lance or moonlighting activities require the prior written approval of the employee's supervisor/manager. Employees who free-lance or moonlight may not use company time, facilities, resources, or supplies for such work.

Interests in Other Businesses: Unless approved in advance by an employee's supervisor/manager, neither an employee nor his or her spouse, domestic partner, or any other member of the employee's immediate family may directly or indirectly have a financial interest (whether as an investor, lender, employee, or other service provider) in a competitor, or in a customer or supplier.

Use of Company Property and Information: All employees are responsible for the proper use of the company's physical resources and property, as well as its proprietary and other confidential information. Unless otherwise prohibited by an employee's supervisor/manager, reasonable incidental use of a company telephone, computer, or other equipment is permitted.

Company Properties and Facilities: Company property, facilities, or physical resources may not be used for solicitation or distribution activities which are not related to an employee's services to the company, except for charitable activities that have been approved, in writing, in advance by the company.

Under no circumstances may an employee disturb the work of others to solicit or distribute literature to them during their working time. Persons not employed by the company may not solicit employees for any purposes on company premises.

Any employee found to be engaging in or attempting theft of any property of the company, including documents, equipment, intellectual and personal property of other employees, cash or any other items of value will be liable to immediate summary dismissal and possible criminal proceedings against them. All employees have a responsibility to report any theft or attempted theft to the company's management.

Bribery, Kickback and Fraud: No funds or assets of the company shall be paid, loaned, or otherwise disbursed as bribes, "kickbacks", or other payments designed to influence or compromise the conduct of the recipient; and no employee of the company shall accept any funds or other assets (including those provided as preferential treatment to the employee for fulfilling their responsibilities) for assisting in obtaining business or for securing special concessions from the company.

Company employees should conduct their business affairs in such a manner that the company's reputation will not be impugned if the details of their dealings should become a matter of public discussion. Employees must not engage in any activity that degrades the reputation or integrity of the company.

Employment Policies: The company is committed to fostering a work environment in which all individuals are treated with respect and dignity. Each individual should be permitted to work in a business-like atmosphere that promotes equal employment opportunities and prohibits discriminatory practices, including harassment. Therefore, the company expects that all relationships among persons in the workplace will be business-like and free of unlawful bias, prejudice, and harassment. It is the company's policy to ensure equal employment opportunity without discrimination or harassment on the basis of race, color, national origin, religion, sex, age, disability, or any other status protected by law.

It is company policy to comply with all applicable wage and hour laws and other statutes regulating the employer-employee relationship and the workplace environment.

No employee may interfere with or retaliate against another employee who seeks to invoke his or her rights under the laws governing labor and employee relations. If any employee has questions about the laws or company policies governing labor and employee relations, he or she should consult the divisional intranet, employee handbook, or contact the Human Resources Department, Compliance Officer, or Legal Department.

The company is committed to providing a safe workplace for all employees. In addition, several laws and regulations impose responsibility on the company to safeguard against safety and health hazards. For that reason, and to protect the safety of themselves and others, employees and other persons who are present at company facilities are required to carefully follow all safety instructions and procedures that the company adopts. Questions about possible health and safety hazards at any company facility should be directed immediately to the employee's supervisor/manager.

Compliance with the Code of Conduct: All employees have a responsibility to understand and follow the Code of Conduct. In addition, all employees are expected to perform their work with honesty and integrity in any areas not specifically addressed by the Code of Conduct. A violation of this Code of Conduct may result in appropriate disciplinary action including the possible termination from employment with the company without additional warning.

The Code of Conduct reflects general principles to guide employees in making ethical decisions and cannot (and is not intended to) address every specific situation. As such, nothing in this Code of Conduct prohibits or restricts the company from taking any disciplinary action on any matters pertaining to employee conduct, whether they are expressly discussed in this code. The Code of Conduct is not intended to create any expressed or implied contract with any employee or third party. Nothing in this document creates any employment contract between the company and any of its employees.

Drug and Alcohol Policy

Health Specialists strives to provide a safe work environment and encourages personal health. Concerning this, the company considers the abuse of drugs or alcohol on the job to be an unsafe and counterproductive work practice. It is, therefore, company policy that an employee found with the presence of alcohol or illegal drugs in his/her system or in possession of, using, selling (or offering for sale), or trading illegal drugs or alcohol during working hours will be subject to disciplinary action including discharge.

Company sponsored activities which may include the service of alcoholic beverages are not included in this provision. Discretion should be exercised by the employee to not overindulge in the consumption of alcohol.

Substance Abuse includes the possession, use, purchase, or sale of drugs or alcohol on company premises (including the parking lots). It also includes reporting to work under the influence of drugs or alcohol. An employee reporting for work visibly impaired is unable to properly perform required duties and will not be allowed to work. If possible, the supervisor/manager should first seek another supervisor's/manager's opinion of the employee's status. Then the supervisor/manager should consult privately with the employee with the observation, to rule out any problems that may have been caused by prescription drugs. If, in the opinion of the supervisor/manager, the employee is impaired, then the employee should be sent home or to a medical facility by taxi or other safe transportation alternative – if necessary, depending on the degree of the observed impairment, accompanied by the supervisor/manager or another employee. An impaired employee should not be allowed to drive.

Prescription drugs prescribed by the employee's physician may be taken during work hours. The employee should notify the supervisor/manager if the use of properly prescribed drugs will affect the employee's work performance. Abuse of prescription drugs will not be tolerated. It is the responsibility of the company's supervisor/manager to counsel with an employee whenever they see changes in performance that suggests an employee problem.

Employees will be required to submit to drug and/or alcohol testing at a laboratory chosen by the company if there is a cause for reasonable suspicion of substance abuse. Employees who refuse substance testing under these circumstances will be terminated. Circumstances that could be indicators of a substance abuse problem and considered reasonable suspicion are:

1. Observed alcohol or drug abuse during work hours on company premises
2. Apparent physical state of impairment
3. Incoherent mental state
4. Marked changes in personal behavior that are otherwise unexplainable
5. Deteriorating work performance that is not attributed to other factors
6. Accidents or other actions that provide reasonable cause to believe the employee may be under the influence
7. As required by any government programs such as the US Department of Transportation

If the test results are positive, then termination will result. Employees who refuse substance testing under these circumstances will be terminated.

Drug Testing

Health Specialists is committed to providing a safe, efficient, and productive work environment for all employees. Using or being under the influence of drugs or alcohol on the job may pose serious safety and health risks. To help ensure a safe and healthful working environment, all job applicants may be asked to provide body substance samples (such as urine and/or blood) to determine the illicit or illegal use of drugs and alcohol.

Employees and applicants who operate company owned vehicles, equipment, and machinery may be required to demonstrate that they are drug and alcohol free.

Employees involved in work related accidents that involve vehicles may also be subject to drug or alcohol tests.

Attendance

Any employee who fails to report to work without notice to his or her supervisor/manager will be assumed to have resigned and abandoned the job. In this case, the employee will be terminated.

Sexual Harassment

Health Specialists will not allow any form of sexual harassment or any such conduct that has the purpose or effect of interfering with an individual's work performance or creating an intimidating, hostile, or offensive work environment.

Such conduct, when experienced or observed, should be reported immediately to the supervisor/manager or personnel department. The Human Resources Department will investigate and will be required to report the findings to the supervisor's office or his or her appointed representative. The privacy of the employee filing the report and the employee under investigation shall be always respected consistent with the obligation to conduct a fair and thorough investigation.

Any intentional sexual harassment is a major violation of company policy and will be dealt with accordingly by corrective counseling and/or suspension or termination, depending upon the severity of the violation.

It is the intent of Health Specialists to provide a work environment free from verbal, physical, and visual forms (e.g., signs, posters, or documents) of sexual harassment and an environment free of harassment, intimidation, or coercion in any form. All employees are expected to be sensitive to the individual rights of their co-workers.

Displaying sexually explicit images or text on company property is a violation of company policy. Employees are not allowed to download, archive, edit, or manipulate sexually explicit material from the Internet while using company resources. Any sexually explicit material sent by a fellow employee or received from outside sources should be given to your supervisor/manager.

Workplace Violence

We are committed to preventing workplace violence and making Health Specialists a safe place to work. This policy explains our guidelines for dealing with intimidation, harassment, violent acts, or threats of violence that might occur during business hours or on our premises at any time.

You are expected to treat your co-workers, including supervisors and temporary employees, with courtesy and respect at all times. You should not fight, play tricks on others, or behave in any way that might be dangerous to other people. We do not allow firearms, weapons, and other dangerous or hazardous devices and substances on the premises of Health Specialists.

Health Specialists does not allow behavior at any time that threatens, intimidates, bullies, or coerces another employee, a customer, or a member of the public. This includes off-duty periods. We do not permit any act of harassment, including harassment that is based on an individual's sex, race, age, or any characteristic protected by federal, state, or local law.

Employees who commit any violent acts, threaten violence, or violate these guidelines in another way will be subject to disciplinary action up to and including termination of employment.

If you are having a dispute with another employee, we encourage you to talk it over with your supervisor. Health Specialists wants to help you work out problems before they become more serious and possibly violent. We will not discipline you for bringing these types of problems to our attention.

Guidelines for Handling Violent Situations

Reporting

Any employee who witnesses an act of violence – or witnesses a potential act of violence, in its preliminary stages – should call 911 as soon as possible. Employees who are witnesses to or victims of an act of violence (or potential act of violence) should also notify their supervisor as immediately after the incident as they are able. Supervisors receiving a report of a violent act should contact the Department of Human Resources immediately. If the aforementioned supervisor is the perpetrator of the act, an employee witness should proceed up the chain of command. Employee witnesses may also report the violent or potentially violent incident directly to Human Resources.

All non-emergency situations should be reported to the employee witness's immediate supervisor before 9-11 is dialed. The employee witness should proceed up the chain of command if the aforementioned supervisor is the perpetrator of the act. The employee witness may also report the non-emergency situation directly to Human Resources.

Employees must not attempt to physically intervene if an act of violence is occurring or imminent. Instead, employees should call for help and, if able, take measures that will aid in later assembling an accurate record of the situation. Such measures include listening to what is happening and making notes later, as well as compiling a list of the names of all witnesses and other parties involved.

Investigation

Health Specialists will promptly and completely investigate all reports of violent acts or threats of violence, as well as all suspicious people and activities. When practical, the identity of a person who makes a report will be protected. Until a report has been investigated, Health Specialists may suspend an employee, either with or without pay, if it is believed to be necessary for safety reasons or for the investigation.

Health Specialists security will investigate all reported acts of violence separate and independent from any other Health Specialists investigation. A representative from Human Resources will determine the best course of action for investigating reported threats or acts of violence within company work standards. Depending on the seriousness of the act, the Human Resources representative may discuss investigative and counseling strategies with the supervisor of the offending employee. Human Resources may also convene a team to investigate the threat or act of violence of some Level One occurrences. The team will be comprised of up to four members (at least one each from Human Resources and company security).

Managers or supervisors who have the responsibility and authority to take action on the case in question must implement all approved recommendations. The team is a problem-solving resource, not a replacement for appropriate managerial action.

The team has the authority to review personnel files, take statements from relevant parties, and interpret company policies in emergency situations.

Concealed Weapon Policy

Employees may not carry firearms at any time while on any property owned, leased or controlled by Health Specialists, including anywhere that company business is conducted, such as customer locations, client locations, trade shows, restaurants or company event venues.

Weapons include, but are not limited to, guns, knives or swords with blades over four inches in length, explosives, and any chemical whose purpose is to cause harm to another person.

Regardless of whether an employee possesses a concealed weapons permit or is allowed by law to possess a weapon, weapons are prohibited on any company property or in any location in which the employee represents the company for business purposes (including those listed above).

Employees who violate this policy will be subject to disciplinary actions, up to and including employment termination.

Nursing Practice Act and Code of State Regulations

Health Specialists prides itself on the quality of caregivers we employ. As explained in our Code of Conduct, we want our ethics and service to be above reproach. Our expectations are that any caregiver we have chosen to hire will honor the trust that is

placed in their hands. We, the employer, the facility or hospital in which they work and the patients who care rests in their hands, all demand their best efforts. All licensed or registered caregivers also answer to the governing bodies that provide their “certification”.

Nurses, like other licensed professionals, are regulated by various state laws. One important state law that directly affects the practice of nursing is the nursing practice act. Nurse practice acts in each state are laws that define responsibilities of the nurse and “scope of practice” – the range of activities and services as well as the qualifications for practice. The acts are intended to protect patients from harm as a result of unsafe or incompetent practice, or unqualified nurses.

The nurse practice act describes what constitutes unprofessional conduct or misconduct, and investigation and the disciplinary procedures for complaints filed against a nurse. The act also could authorize the board of nursing to describe these parameters through regulation. State boards of nursing ensure compliance with state nurse practice acts.

Nursing practice acts are not checklists. They contain general statements of appropriate professional nursing actions. The nurse must incorporate the nursing practice act with his or her educational background, previous work experience, institutional policies, and technological advancements. The main purpose of nursing practice acts is to protect the public from unsafe practitioners, and the ultimate goal is competent, quality nursing care provided by qualified practitioners.

Do not put yourself, your license or especially your patient at risk. If you find yourself in a situation that does so, contact Health Specialists immediately!

Nurses have an ethical and legal responsibility to maintain the currency of their practice in today’s changing health care system and to be familiar with the nursing practice act. Missouri and Kansas statutes are located in Appendix B. For all other states, please ask your recruiter to provide this if you have any concerns or questions.

To find information on a state nurse practice act from a particular state, go to, <https://www.ncsbn.org/contactbon.htm>, and click on the state.

In the event of an action initiated by you that puts your license or patient at risk, Health Specialists will assess the situation. Please call us as soon as something happens! Do NOT wait until after your shift. If it is a clinical issue, a report will be filed and drug testing will need to happen as soon as possible. After the data and other information is collected, we will report any caregiver to the appropriate licensing body if it’s deemed necessary.

Health Specialists makes every attempt to be knowledgeable about current events relating to healthcare staffing and any legislation that impacts our nurses and other caregivers. We receive several periodicals such as the Kansas City Nursing News, the Kansas Nursing Newsletter and the Missouri State Board of Nursing Newsletter. In addition, the management team receives regular legislative alerts and healthcare staffing updates in electronic newsletter and emails. Prophecy Health Care and Blue Sky Healthcare Staffing Software provide us with advance notice about any impending changes. The National Practitioner Data Base is also a resource for upcoming news.

National Patient Safety Goals 2016

The following goals were developed to help improve patient safety. The goals focus on problems in health care safety and how to solve them. This list is to serve as a reminder. You will be testing annually on the goals.

1. Use at least two ways to identify patients. For example, use the patient's name *and* date of birth. This is done to make sure that each patient gets the correct medicine and treatment.
2. Make sure that the correct patient gets the correct blood when they get a blood transfusion.
3. Get important test results to the right staff person on time.
4. Before a procedure, label medicines that are not labeled. For example, medicines in syringes, cups and basins. Do this in the area where medicines and supplies are set up.
5. Take extra care with patients who take medicines to thin their blood. Record and pass along correct information about a patient's medicines. Find out what medicines the patient is taking. Compare those medicines to new medicines given to the patient. Make sure the patient knows which medicines to take when they are at home. Tell the patient it is important to bring their up-to-date list of medicines every time they visit a doctor.
6. Make improvements to ensure that alarms on medical equipment are heard and responded to on time. Use the hand cleaning guidelines from the Centers for Disease Control and Prevention or the World Health Organization. Set goals for improving hand cleaning. Use the goals to improve hand cleaning.
7. Use proven guidelines to prevent infections that are difficult to treat.
8. Use proven guidelines to prevent infection of the blood from central lines.
9. Use proven guidelines to prevent infection after surgery.
10. Use proven guidelines to prevent infections of the urinary tract that are caused by catheters.
11. Find out which patients are most likely to try to commit suicide.
12. Make sure that the correct surgery is done on the correct patient and at the correct place on the patient's body.
13. Mark the correct place on the patient's body where the surgery is to be done.
14. Pause before the surgery to make sure that a mistake is not being made.

Continuing Education

Ongoing continuing education is the responsibility of employees to ensure that all clinical staff has a current knowledge and practice base. Health Specialist's maintains information on available resources for BLS, ACLS, PALS, etc. The following online education programs are also available for continuing education; however this is not an inclusive list of available resources:

http://www.nurseceu.com/free_nursing_ceus.htm, <http://www.cybernurse.com/ceu.html>,
<http://www.medi-smart.com/freeceu.htm>,
http://www.nursingceu.com/courses/curriculum_nceu_category.html,
http://ceusforfree.com/Free_Nursing_CEU.html,

Evidence of continuing education and annual required in-service education are part of the ongoing competency assessment program and will be maintained in the employee's Blue Sky personnel file. Please provide Health Specialists with copies of your continuing education certificates.

Employee Performance Review

Every field employee who has worked more than 1 year will have an annual performance evaluation carried out by their recruiter, on or around your anniversary date.

Health Specialists will attempt to obtain feedback from client representatives regarding clinical staff competence and ongoing performance of professional employee. Unfortunately, some clients don't cooperate in this regard, so we follow a "competence by exception" philosophy. In the absence of client feedback, unless there is evidence of a performance issue, we assume that our employees are meeting performance expectations.

Feedback from our clients regarding clinical and/or professional performance is addressed immediately. Follow-up with our clients is completed within an appropriate time frame. Every healthcare professional will complete annual skills checklists, which apply to their specialty area of work. When training needs are identified, an opportunity to complete the training will be provided at the earliest possible occasion.

The company assesses aspects of employee's competence at hire, at performance evaluation and as needed or required by state licensing agencies, to ensure that employees have the skills or can develop the skills to perform and continue to perform their duties.

New Health Insurance Marketplace Coverage

Options and Your Health Coverage

PART A: General Information

When key parts of the health care law have taken effect, there will be a new way to buy health insurance: the Health Insurance Marketplace. To assist you as you evaluate options for you and your family, this notice provides some basic information about the new Marketplace and employment based health coverage offered by your employer.

What is the Health Insurance Marketplace?

The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers "one-stop shopping" to find and compare private health insurance options. You may also be eligible for a new kind of tax credit that lowers your monthly premium right away. Open enrollment for health insurance coverage through the Marketplace begins in October 2013 for coverage starting as early as January 1, 2014.

Can I Save Money on my Health Insurance Premiums in the Marketplace?

You may qualify to save money and lower your monthly premium, but only if your employer does not offer coverage, or offers coverage that doesn't meet certain standards. The savings on your premium that you're eligible for depends on your household income.

Does Employer Health Coverage Affect Eligibility for Premium Savings through the Marketplace?

Yes. If you have an offer of health coverage from your employer that meets certain standards, you will not be eligible for a tax credit through the Marketplace and may wish to enroll in your employer's health plan. However, you may be eligible for a tax credit that lowers your monthly premium or a reduction in certain cost-sharing if your employer does not offer coverage to you at all or does not offer coverage that meets certain standards. If the cost of a plan from your employer that would cover you (and not any other members of your family) is more than 9.5% of your household income for the year, or if the coverage your employer provides does not meet

the "minimum value" standard set by the Affordable Care Act, you may be eligible for a tax credit.¹

Note: If you purchase a health plan through the Marketplace instead of accepting health coverage offered by your employer, then you may lose the employer contribution (if any) to the employer-offered coverage. Also, this employer contribution -as well as your employee contribution to employer-offered coverage- is often excluded from income for Federal and State income tax purposes. Your payments for coverage through the Marketplace are made on an after-tax basis.

How Can I Get More Information?

For more information about your coverage offered by your employer, please check your summary plan description or contact the administrator. The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit [HealthCare.gov](https://www.healthcare.gov) for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

PART B: Information About Health Coverage Offered by Your Employer This section contains information about any health coverage offered by your employer. If you decide to complete an application for coverage in the Marketplace, you will be asked to provide this information. This information is numbered to correspond to the Marketplace application.

3. Employer name: Health Specialists, Inc.
4. Employer Identification Number (EIN): 48-1160052
5. Employer address: 12345 W. 95th Street, Suite 215
6. Employer phone number: 913-438-6337
7. City: Lenexa 8. State: KS 9. ZIP code: 66215
10. Who can we contact about employee health coverage at this job? Cheryl Vaught
12. Email address: Cheryl@HealthSpecialists.com

Here is some basic information about health coverage offered:

- As your employer, we offer a health plan to: Some employees: Eligible employees are: Office staff working 30 hours per week or more & temporary staff on contract that works 30 hours per week or more per policy.

- With respect to dependents: We do offer coverage. Eligible dependents are: dependents of employees participating in the plan. This coverage meets the minimum value standard, and the cost of this coverage to you is intended to be affordable, based on employee wages.

** Even if your employer intends your coverage to be affordable, you may still be eligible for a premium discount through the Marketplace. The Marketplace will use your household income, along with other factors, to determine whether you may be eligible for a premium discount. If, for example, your wages vary from week to week (perhaps you are an hourly employee or you work on a commission basis), if you are newly employed mid-year, or if you have other income losses, you may still qualify for a premium discount. If you decide to shop for coverage in the Marketplace, [HealthCare.gov](https://www.healthcare.gov) will guide you through the process

Floating Policy

From time to time you may be asked to float in another department or unit. If you are a contract employee, this will be designated in your employment agreement. If you are a per diem employee, you are not expected to work in any unit unless you have completed an orientation for that unit. You are also not to float to any unit which is outside of your area of experience or competency. Sometimes, additional credentials are required for different units. For example, if you were originally assigned to a Medical/Surgical floor and you are asked to float to ICU, you may not know that ACLS is required. If you are in any doubt about the appropriateness of your assignment, notify Health Specialists as soon as possible. Do not put the care of a patient or your license at risk.

Identification Policy

When reporting for an assignment, all clinical staff must present either a Health Specialists name badge or a valid ID issued by a state, federal or regulatory agency.

Candidate Referral Bonus Program

Health Specialists recognizes that our best employees come from other good employees. Our "candidate referral program" is a valuable recruiting tool and builds goodwill among our staff. If you know someone you would like to refer, here's what you need to know:

1. The new employee must identify who referred them at the time of hiring
2. If the new employee identifies more than one person, the bonus will be split.
3. If the new employee is a nurse or allied professional, the referring employee will receive:
 - a. \$50 after the new employee complete 12 hours of regular duty (non-orientation)
 - b. \$250 if 100 hours are worked within the first 3 months after hire
4. If the new employee is a CNA, the referring employee receives:
 - a. \$50 after the new employee complete 12 hours of regular duty (non-orientation)
 - b. \$100 if 100 hours are worked within the first 3 months after hire

Appendix A:

Patient Safety Systems and the Hazard and Vulnerability Assessment Tool

As healthcare becomes more complex with technology and personnel teams changing, it becomes a real challenge for a traveler to be prepared for patient safety events. Key definitions from Joint Commission are listed below:

- Patient safety event: An event, incident, or condition that could have resulted or did result in harm to a patient.
- Adverse event: A patient safety event that resulted in harm to a patient. Adverse events should prompt notification of hospital leaders, investigation and corrective actions. An adverse event may or may not result from an error.
- Sentinel event: A subcategory of adverse events, a sentinel event is a patient safety event (not primarily related to the natural course of the patient's illness or underlying condition) that reaches a patient and results in any of the following:
 - Death
 - Permanent harm
 - Severe temporary harm
 - Intervention is required to sustain life
- No harm event: A patient safety event that reaches the patient but does no harm.
- Close Call (or "near miss" or "good catch"): A patient safety event that did not reach the patient. Close calls should be tracked and used as opportunities to prevent harm.
- Hazardous (or "unsafe") conditions: A circumstance (other than a patient's own disease process or condition) that increases the probability of an adverse event. Hazardous conditions should be tracked and used as opportunities to prevent harm.

Hazard and vulnerability assessment (HVA) tools are used to prioritize specific and overall relative risks, and are based on mathematical formulas that are either embedded in the document or managed manually. Most facilities will have an HVA in place. Please take the time to become familiar with it. The factors considered in the assessment includes the assumption that the risk occurs at the worst possible time and with a full patient census. The HVA process helps the facility prioritize in the order of criticality. The efforts to decrease the consequences of a possible event can be focused upon including evacuation. Preparedness efforts, plans and resources are directly related to the facilities' HVA. Engineering controls may occur as a result of HVA thus reducing risk for the work force as well as the patient.

When a risk is identified in the HVA that would potentially result in an evacuation, the organization should focus on issues that could impact the need to evacuate or to mitigate the risk. Some examples would be:

- Routes
- Locations
- Personal Protective Equipment (PPE)
- Communication to employees with special needs
- Special situations – management of family on site.

The following pages show HVA tools for naturally occurring events, technologic events, Human related events, an events involving hazardous materials. The facility where you work may have different tools but please become familiar with these.

HAZARD AND VULNERABILITY ASSESSMENT TOOL								
NATURALLY OCCURRING EVENTS								
EVENT	PROBABILITY	SEVERITY = (MAGNITUDE - MITIGATION)						RISK
	Likelihood this will occur	HUMAN IMPACT	PROPERTY IMPACT	BUSINESS IMPACT	PREPAREDNESS	INTERNAL RESPONSE	EXTERNAL RESPONSE	Relative threat*
SCORE	0 = N/A 1 = Low 2 = Moderate 3 = High	Possibility of death or injury 0 = N/A 1 = Low 2 = Moderate 3 = High	Physical losses and damages 0 = N/A 1 = Low 2 = Moderate 3 = High	Interruption of services 0 = N/A 1 = Low 2 = Moderate 3 = High	Preplanning 0 = N/A 1 = High 2 = Moderate 3 = Low or none	Time, effectiveness, resources 0 = N/A 1 = High 2 = Moderate 3 = Low or none	Community/ Mutual Aid staff and supplies 0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 - 100%
Hurricane								0%
Tornado								0%
Severe Thunderstorm								0%
Snow Fall								0%
Blizzard								0%
Ice Storm								0%
Earthquake								0%
Tidal Wave								0%
Temperature Extremes								0%
Drought								0%
Flood, External								0%
Wild Fire								0%
Landslide								0%
Dam Inundation								0%
Volcano								0%
Epidemic								0%
AVERAGE SCORE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0%

*Threat increases with percentage.

RISK = PROBABILITY * SEVERITY
0.00 0.00 0.00

Evaluate potential for event and response among the following categories using the hazard specific scale.

INSTRUCTIONS:	
Issues to consider for probability include to:	Issues to consider for response include
1 Known risk	1 Time to marshal an on-scene response
2 Historical data	2 Scope of response capability
3 Manufacturer/vendor statistics	3 Historical evaluation of response success
Issues to consider for human impact include	Issues to consider for property impact include:
1 Potential for staff death or injury	1 Cost to replace
2 Potential for patient death or injury	2 Cost to set up temporary replacement
	3 Cost to repair
Issues to consider for business impact include:	
1 Business interruption	Issues to consider for preparedness include:
2 Employees unable to report to work	1 Status of current plans
3 Customers unable to reach facility	2 Training status
4 Company in violation of contractual agreements	3 Insurance
5 Imposition of fines and penalties or legal costs	4 Availability of back-up systems
6 Interruption of critical supplies	5 Community resources
7 Interruption of product distribution	
Issues to consider for internal resources include:	Issues to consider for external resources include:
1 Types of supplies on hand	1 Types of agreements with community agencies
2 Volume of supplies on hand	2 Coordination with local and state agencies
3 Staff availability	3 Coordination with proximal health care facilities

HAZARD AND VULNERABILITY ASSESSMENT TOOL								
TECHNOLOGIC EVENTS								
EVENT	PROBABILITY	SEVERITY = (MAGNITUDE - MITIGATION)						RISK
		HUMAN IMPACT	PROPERTY IMPACT	BUSINESS IMPACT	PREPAREDNESS	INTERNAL RESPONSE	EXTERNAL RESPONSE	
	Likelihood this will occur	Possibility of death or injury	Physical losses and damages	Interruption of services	Preplanning	Time, effectiveness, resources	Community/Mutual Aid staff and supplies	Relative threat*
SCORE	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 - 100%
Electrical Failure								0%
Generator Failure								0%
Transportation Failure								0%
Fuel Shortage								0%
Natural Gas Failure								0%
Water Failure								0%
Sewer Failure								0%
Steam Failure								0%
Fire Alarm Failure								0%
Communications Failure								0%
Medical Gas Failure								0%
Medical Vacuum Failure								0%
HVAC Failure								0%
Information Systems Failure								0%
Fire, Internal								0%
Flood, Internal								0%
Hazmat Exposure, Internal								0%
Supply Shortage								0%
Structural Damage								0%
AVERAGE SCORE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0%

*Threat increases with percentage.

RISK = PROBABILITY * SEVERITY			
0.00	0.00	0.00	0.00

INSTRUCTIONS:	
Issues to consider for probability include to:	Issues to consider for response include
1 Known risk	1 Time to marshal an on-scene response
2 Historical data	2 Scope of response capability
3 Manufacturer/vendor statistics	3 Historical evaluation of response success
Issues to consider for human impact include	Issues to consider for property impact include:
1 Potential for staff death or injury	1 Cost to replace
2 Potential for patient death or injury	2 Cost to set up temporary replacement
	3 Cost to repair
Issues to consider for business impact include:	Issues to consider for preparedness include:
1 Business interruption	1 Status of current plans
2 Employees unable to report to work	2 Training status
3 Customers unable to reach facility	3 Insurance
4 Company in violation of contractual agreements	4 Availability of back-up systems
5 Imposition of fines and penalties or legal costs	5 Community resources
6 Interruption of critical supplies	
7 Interruption of product distribution	
Issues to consider for internal resources include:	Issues to consider for external resources include:
1 Types of supplies on hand	1 Types of agreements with community agencies
2 Volume of supplies on hand	2 Coordination with local and state agencies
3 Staff availability	3 Coordination with proximal health care facilities

HAZARD AND VULNERABILITY ASSESSMENT TOOL								
HUMAN RELATED EVENTS								
EVENT	PROBABILITY	SEVERITY = (MAGNITUDE - MITIGATION)						RISK
		HUMAN IMPACT	PROPERTY IMPACT	BUSINESS IMPACT	PREPARED-NESS	INTERNAL RESPONSE	EXTERNAL RESPONSE	
	Likelihood this will occur	Possibility of death or injury	Physical losses and damages	Interruption of services	Preplanning	Time, effectiveness, resources	Community/ Mutual Aid staff and supplies	Relative threat*
SCORE	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 - 100%
Mass Casualty Incident (trauma)								0%
Mass Casualty Incident (medical/infectious)								0%
Terrorism, Biological								0%
VIP Situation								0%
Infant Abduction								0%
Hostage Situation								0%
Civil Disturbance								0%
Labor Action								0%
Forensic Admission								0%
Bomb Threat								0%
AVERAGE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0%
<i>*Threat increases with percentage.</i>		RISK = PROBABILITY * SEVERITY						
		0.00	0.00	0.00				

Evaluate potential for event and response among the following categories using the hazard specific scale.

INSTRUCTIONS:	
Issues to consider for probability include to:	Issues to consider for response include
1 Known risk	1 Time to marshal an on-scene response
2 Historical data	2 Scope of response capability
3 Manufacturer/vendor statistics	3 Historical evaluation of response success
Issues to consider for human impact include	Issues to consider for property impact include:
1 Potential for staff death or injury	1 Cost to replace
2 Potential for patient death or injury	2 Cost to set up temporary replacement
	3 Cost to repair
Issues to consider for business impact include:	Issues to consider for preparedness include:
1 Business interruption	1 Status of current plans
2 Employees unable to report to work	2 Training status
3 Customers unable to reach facility	3 Insurance
4 Company in violation of contractual agreements	4 Availability of back-up systems
5 Imposition of fines and penalties or legal costs	5 Community resources
6 Interruption of critical supplies	
7 Interruption of product distribution	
Issues to consider for internal resources include:	Issues to consider for external resources include:
1 Types of supplies on hand	1 Types of agreements with community agencies
2 Volume of supplies on hand	2 Coordination with local and state agencies
3 Staff availability	3 Coordination with proximal health care facilities
4 Coordination with MOB's	

HAZARD AND VULNERABILITY ASSESSMENT TOOL								
EVENTS INVOLVING HAZARDOUS MATERIALS								
EVENT	PROBABILITY	SEVERITY = (MAGNITUDE - MITIGATION)						RISK
		HUMAN IMPACT	PROPERTY IMPACT	BUSINESS IMPACT	PREPARED-NESS	INTERNAL RESPONSE	EXTERNAL RESPONSE	
	Likelihood this will occur	Possibility of death or injury	Physical losses and damages	Interruption of services	Preplanning	Time, effectiveness, resources	Community/ Mutual Aid staff and supplies	Relative threat*
SCORE	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 - 100%
Mass Casualty Hazmat Incident <i>(From historic events at your MC with >= 5 victims)</i>								0%
Small Casualty Hazmat Incident <i>(From historic events at your MC with < 5 victims)</i>								0%
Chemical Exposure, External								0%
Small-Medium Sized Internal Spill								0%
Large Internal Spill								0%
Terrorism, Chemical Radiologic								0%
Exposure, Internal Radiologic								0%
Exposure, External								0%
Terrorism, Radiologic								0%
AVERAGE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0%
*Threat increases with percentage.								
		RISK = PROBABILITY * SEVERITY						
		0.00	0.00	0.00				

Evaluate potential for event and response among the following categories using the hazard specific scale.

INSTRUCTIONS:	
Issues to consider for probability include to:	Issues to consider for response include
1 Known risk	1 Time to marshal an on-scene response
2 Historical data	2 Scope of response capability
3 Manufacturer/vendor statistics	3 Historical evaluation of response success
Issues to consider for human impact include	Issues to consider for property impact include:
1 Potential for staff death or injury	1 Cost to replace
2 Potential for patient death or injury	2 Cost to set up temporary replacement
	3 Cost to repair
Issues to consider for business impact include:	Issues to consider for preparedness include:
1 Business interruption	1 Status of current plans
2 Employees unable to report to work	2 Training status
3 Customers unable to reach facility	3 Insurance
4 Company in violation of contractual agreements	4 Availability of back-up systems
5 Imposition of fines and penalties or legal costs	5 Community resources
6 Interruption of critical supplies	
7 Interruption of product distribution	
Issues to consider for internal resources include:	Issues to consider for external resources include:
1 Types of supplies on hand	1 Types of agreements with community agencies
2 Volume of supplies on hand	2 Coordination with local and state agencies
3 Staff availability	3 Coordination with proximal health care facilities
4 Coordination with MOB's	