



# HealthCare Talent & Health Talent 2 Clinical Employee Handbook

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**WELCOME**  
**to**  
**HEALTHCARE TALENT (HCT) & HEALTH TALENT 2 (HT2)**

We look forward to working with you and assisting you in achieving exciting and rewarding career opportunities with HCT/HT2. This handbook will serve as your point of reference for any standards, policies and procedures that HCT/HT2 employees are expected to follow.

It is required that you review and return the acknowledgement form located at the back of the handbook. This acknowledgement form will be kept on file for our records.

Your employment is at will and this handbook is in no way, shape or form a contract. You, the employee and HCT/HT2 have the right to terminate employment with or without notice or cause at any time.

**WHY YOU WILL LOVE HCT/HT2:**

We will always provide the personalized service you expect from a small, family-owned firm. When you call HCT/HT2, you'll speak to a human being. When you send us a message, we'll contact you promptly. We are committed to open and timely communication with every one of our clients and employees.

# ADMINISTRATIVE BASICS

## Availability of HCT/HT2 Office Staff

The **HCT office**, located in Lake Forest, CA is open Monday through Friday from the hours of 7:00am – 5:30pm. Our local telephone number is (949) 709-1883. Outside of normal business hours and in the event of an emergency please contact us at the same number listed above. HCT's on call staff will be available to assist you.

The **HT2 office**, located in Commerce, CA is open Monday through Friday from the hours of 7:00am – 5:30pm. Our local telephone number is (323) 888-0014. Outside of normal business hours and in the event of an emergency please contact us at the same number listed above. HCT/HT2's on call staff will be available to assist you.

In the event of an emergency, natural disaster or other uncontrollable event, HCT/HT2 will continue to provide service to you through our network from a location where phones and computers are functional. HCT/HT2 will do everything possible to support you in meeting your needs during crisis situation(s). A copy of our Emergency Management Plan is available upon request.

## Work Related Injuries and/or Exposures

HCT/HT2 provides Workers Compensation insurance for its employees as required by law. It is our philosophy that if an employee is injured while at work, it is our intent to assist that employee to return to work as soon as possible. The employee is obligated to report a work related injury to HCT/HT2 as soon as possible. An Injury Report Form needs to be completed by the employee as soon as possible after the injury.

Depending on the severity of the injury and when the injury was reported will determine where a physician will see the employee.

1. In the case of an emergency situation, the employee is advised to go to the emergency room. If it is not an emergency situation, HCT/HT2 will advise the employee where to seek medical help. The injury will be reported to the worker's compensation insurance provider who will manage the employees' return to work.

## Lunch Break Policy

HCT/HT2 Employee agrees to clock in and out for a minimum of thirty (30) minutes and up to a maximum of one (1) hour for meal periods, unless otherwise specified by facility policy. If the facility requests HCT/HT2 Employee to work their lunch period due to patient care and safety, HCT/HT2 Employee agrees to obtain a supervisor signature from a Client Manager for each applicable shift and to have the supervisor sign off their approval on the sign-in sheet in the nursing office

## Orientation

Hospital orientation information or requirements will be provided to HCT/HT2 Employee prior to assignment start by a representative of the client facility.

## Clinical Supervision

The President or Clinical Liaison provides clinical staff supervision for HCT/HT2's healthcare professionals. The President or Clinical Liaison has an understanding of the scope of services provided by the disciplines supervised. The President or Clinical Liaison utilizes the appropriate practice acts, the professional licensing and certification boards and professional associations as clinical resources, as needed. It is the President or Clinical Liaison's responsibility to identify and report aberrant or illegal behavior to professional boards and law enforcement agencies.

## Floating Policy

HCT/HT2 employees may only be placed in assignments that match the job description for which HCT/HT2 assigns them. If an employee is asked to float to another department with the customer, the department must be a like department or unit and the float employee must have demonstrated previous competency and have the appropriate certifications, credentials for that department/unit. Employees should only be floated to areas of comparable clinical diagnoses and acuties.

The following procedures should be followed for healthcare professionals and nurses in particular who are assigned to an area in which they do not feel competent:

- The healthcare provider will immediately notify HCT/HT2,
- The HCT/HT2 employee is obligated to inform the hospital of his/her professional limitations based upon the Nurse Practice Act standards and upon HCT/HT2 client contract specifications as they relate to the assignment.
- The President or Clinical Liaison at HCT/HT2 will work within the bounds of each discipline's Professional Association or State Governing Body and the client agreement to resolve the issue.
- HCT/HT2 will pay healthcare professional for hours worked up until the end of his/her shift.
- HCT/HT2 will pay nurse for hours worked up until the end of his/her shift.

## **CODE OF BUSINESS ETHICS**

The first element of the Code of Business Ethics is putting the interests of the client facilities and ultimately the patient above our personal and individual interests. It is in the best interest of HCT/HT2 to avoid conflicts of interest between the client hospital, employees and staff.

HCT/HT2 has developed corporate compliance guidelines to supplement and reinforce our client facilities' existing policies and procedures. It is also meant to assist HCT/HT2 comply with all applicable laws, rules and regulations.

- All employees are responsible for conducting their jobs in a manner reflecting standards of ethics that are consistent with accepted criteria for personal integrity
- Preserving HCT/HT2 reputation for integrity and professionalism is an important objective. The manner in which employees carry out their responsibilities is as important as the results they achieve.
- All activities are to be conducted in compliance with both the letter of the law and spirit of the law, regulations, and judicial decrees.
- No employee should, at any time take any action on behalf of HCT/HT2, which is known or should be known to violate any law or regulation.
- Information about healthcare provider's medical condition and history is required during the hiring process. HCT/HT2 recognizes this health information and electronic information must be held securely and in confidence. It is the policy of HCT/HT2 that clinical staffs' specific information is not to be released to anyone outside of HCT/HT2 without a court order, subpoena of applicable statute.
- Marketing materials, regardless of medium, shall accurately describe the services, facilities and resources of HCT/HT2
- To maintain high standards of performance, HCT/HT2 employs only those individuals it believes are most qualified without regard to race, color, religion, sex, age, national origin, handicap or disability in compliance with all federal and state laws regarding discrimination.
- HCT/HT2 is committed to maintaining a work place environment in which employees are free from sexual harassment.
- HCT/HT2 will not tolerate violence or threats of violence in the workplace, including but not limited to abusive language, threats, intimidation, inappropriate gestures and/or physical fighting by any employee. These actions are strictly prohibited and may lead to severe disciplinary action up to and including termination.
- HCT/HT2 recognizes that its employees and clinical staff are its most valuable assets and is committed to protecting their safety and welfare. Employees are required to report accidents and unsafe practices or conditions to their supervisors or other management staff. Timely action will be taken to correct unsafe conditions.
- Employees that are licensed or certified in any profession shall follow all applicable rules and professional codes of conduct pertaining to that profession, in addition to the rules stated herein.
- HCT/HT2 prohibits the use or possession of illegal drugs and alcohol abuse on HCT/HT2 property or while engaged in company activity.
- HCT/HT2 is committed to providing initial and ongoing education for all employees regarding their responsibilities to uphold the code of business ethics and this set of HCT/HT2's Corporate Compliance guidelines.
- HCT/HT2 prohibits field staff to discuss bill rates of hospitals or special rates of HCT/HT2 with other healthcare providers.
- HCT/HT2 prohibits field staff to discuss personal or business affairs of any employee (field or office staff) with any individual not directly involved with the said personal or business affair.
- HCT/HT2 is committed to protecting the privacy, confidentiality and security of personal (education, employment and health) information of its employees. This policy is designed to assure compliance with applicable state and federal laws and regulations.

- HCT/HT2 is committed to protecting its own and its client's trade secrets, proprietary information and other internal information.
- It is the desire of HCT/HT2 to provide authorized third parties with information whenever requested while committing to our responsibility to control the release of information to protect the privacy and confidentiality of the employee and/or corporate information.
- Employees are not authorized to issue any statement, written or oral, to any news media representative or grant any public interview pertaining to the company's operations or financial matters.

Any employee that becomes aware of any ethical issues or unethical practices must immediately report it to their supervisor. If the supervisor is unavailable or you believe it would be inappropriate to contact that person, because of their involvement in the situation, you should immediately contact the HCT/HT2 Corporate Office or any other member of management. Any employee can raise concerns and make reports without fear of reprisal or retaliation.

All reports and inquiries are handled confidentially to the greatest extent possible under the circumstances. You may choose to remain anonymous, though in some cases that can make it more difficult to follow up and ensure resolution to the situation.

HCT/HT2 wants every employee to report violations of our ethical or other principles whenever you see them or learn about them. In fact, it is a requirement of your employment. If you do not know whether something is a problem, please ask a member of management.

## **STANDARDS OF CONDUCT**

It is the responsibility of every member of HCT/HT2's clinical field staff to exercise appropriate judgment, and conduct themselves in a manner that reflects the highest standards of professional and personal ethics and behavior.

### **EMPLOYEE RESPONSIBILITIES**

HCT/HT2 Employee is and shall be duly licensed to practice his/her profession in any State where HCT/HT2 Field Employee is assigned and shall maintain current professional standing at all times. Evidence of such licensing shall be submitted to HCT/HT2 prior to commencing the Assignment. HCT/HT2 Field Employee agrees to give immediate notice to HCT/HT2 in the case of suspension or revocation of his/her license, initiation of any proceeding that could result in suspension or revocation of such licensing, or upon the receipt of any notice or any other matter which may challenge or threaten such licensing.

HCT/HT2 Field Employee agrees to submit to HCT/HT2, before commencing any Assignment, all requested documentation that is necessary to comply with Joint Commission, Client and HCT/HT2 expectations 10 days prior to Assignment start date in Assignment Detail.

HCT/HT2 Field Employee agrees to and shall observe and comply with the applicable policies, procedures, rules and regulations established by Client.

HCT/HT2 Field Employee agrees to work all scheduled shifts as directed by Client (including weekends and holidays).

HCT/HT2 Field Employee agrees to adhere fully with all quality assurance, peer review, risk management program or other programs that may be established by Client to promote appropriate professional standards of medical care. HCT/HT2 Field Employee agrees to accept both clinical and operational supervision from his/her immediate supervisor.

HCT/HT2 Field Employee agrees that patient records and charts shall at all time remains the property of the Client. HCT/HT2 Field Employee agrees to maintain the confidentiality of all information related to patient records, charges, expenses, quality assurance, risk management or other programs derived from, through, or provided by clients and all information related to this Agreement.

HCT/HT2 Field Employee agrees to immediately provide written notice to HCT/HT2 as to any legal proceeding instituted or threatened, or any claim or demand, made against HCT/HT2 Field Employee or HCT/HT2 with respect to HCT/HT2 Field Employee's rendering of services under this Agreement.

HCT/HT2 Field Employee agrees to notify Client of any unscheduled absence at least two (2) hours prior to beginning a shift and to notify HCT/HT2 within twenty-four (24) hours to report the unscheduled absence.

Any injury or illnesses suffered by HCT/HT2 Field Employee must be reported to a HCT/HT2 representative within 24 hours of the incident. If injury occurs while working, notify your supervisor immediately, and if applicable, seek appropriate medical attention and follow the Client's specific injury procedures.

Employee agrees not to disclose any HCT/HT2 trade secrets or any confidential or proprietary information of HCT/HT2, HCT/HT2 employees, Clients, or patients of Clients. HCT/HT2 Field Employee further agrees not to compete either as a direct competitor or with a competing company at the Client assignment where HCT/HT2 Field Employee has been placed by HCT/HT2

## **GENERAL STANDARDS**

The following set of standards, are to inform and guide, all staff assigned to work in hospital units. The guidelines below include but are not limited to the following:

- Patient care providers are to render care in a manner that enhances the personal dignity and rights of each patient. Any form of patient abuse and/or neglect will not be tolerated and patient care providers are to support HCT/HT2's policies and procedures in this regard.
- Interactions with all hospital patients, visitors, employees, physicians, vendors, etc., must be conducted in a courteous and professional manner at all times ensuring that HCT/HT2 is always presented in the most favorable light.
- The practice of counseling of the patient regarding personal problems and / or participation of the HCT/HT2 patient care provider in conversations with patients about topics not relevant to the plan of care--is discouraged and unacceptable.
- Patients are to be dealt with equally and fairly and the selection of "favorites" is not acceptable
- Appropriate language is to be used at all times when a HCT/HT2 patient care staff member is at a HCT/HT2 client facility, and in any patient care area private and / or public. Abusive, profane, threatening, demeaning, language resulting violation of HIPPA regulations or compromising patient confidentiality can result in immediate termination
- Touching patients, except in the direct delivery of care or by a greeting, is prohibited
- Socializing with patients and/or patient's significant others outside of the facility is unacceptable
- Socializing with patient's and/or patients' significant others after discharge from the Hospital is prohibited. Staff are not to call, date, nor develop personal or social relationships with patients, former patients, or family/significant others of patients, including giving of personal information or residential phone numbers. Staff should discuss with their manager, any matter of concern regarding their contacts with current or former patient/family members of patient's significant others.
- All staff will uphold all rules and regulations related to patient confidentiality in all areas including patient care, public and non-patient care areas. These rules and regulations include but are not limited to the following:
  - Patient care providers are not to divulge to anyone any information or records concerning any patient without proper authorization. Unauthorized release of confidential information may constitute ground for termination and/or civil action.
  - Conversations regarding patients are not to be held in the presence of other patients or any other person not privileged to this communication.
  - Problems of a patient are not to be discussed with another patient.
  - Patients are not to be named or discussed with anyone in or outside of the facility who does not have the legal right to receive information about the patient.
- Personal problems, concerns or personal life information of patient care providers are not to be discussed with any patient, patient group or family/significant others.
- Staff is not to discuss disagreements or criticize other patient care providers or physicians within the earshot of patients/families/significant others. A professional difference of opinion must be discussed in an appropriate private space.
- Behavior in patient areas and at the nurses' station shall be oriented toward patient care. Personal reading and conversations, including personal phone calls, are not to be conducted in these areas.

- Employees must avoid any situation, which involves a possible conflict between their personal interests and those of HCT/HT2 Staff shall not solicit, and are encouraged not to accept gifts or compensation of any kind from any individual or HCT/HT2 outside of HCT/HT2 as a consequence of their position at HCT/HT2
- Any inappropriate interactions between patients and staff, staff and staff, or staff and others within the hospital will be met with investigation and quick response within the framework of HCT/HT2 policy and procedure.
- Employees who are licensed or certified in any profession shall follow all applicable rules or professional codes of conduct pertaining to that profession, in addition to the rules stated herein.
- All HCT/HT2 patient care staff will be expected maintain English proficiency standards and use English exclusively during all paid working hours.
- The client's name badge must be worn at all times while on assignment, above the waist with name and title fully visible.
- While at the hospital, all employees must follow these basic rules:
  - Eating and drinking are only permitted in the cafeteria, designated employee lounges, unit conference rooms and in private offices, when not in use for patient care.
  - Sleeping is not permitted during paid working hours.
  - Personal phone calls on the unit during work time are prohibited, except in emergency situations
  - Assigned duties must be carried out in a timely, efficient manner as directed or delegated.
  - When entering a patient room and/or when greeting a patient, practice the following.
    - Knock before entering
    - Greet the patient by name
    - If it is first contact of the day, introduce yourself by name and title
    - Tell the patient why you are in the room.
  - When exiting a pt room HCT/HT2 patient care staff is expected to:
    - Inform the Patient / Family that you are leaving
    - State time you expect return
    - Ask if there is anything the pt. / family needs before you leave

### **DRESS CODE/FINGERNAIL POLICY**

Dress code policy must be followed at all times while on the hospital premises. The HCT/HT2 dress code includes but is not limited to the following:

- Clothing must be clean, neat, and allow for quick, efficient movement as necessary in the performance of job duties, including emergencies. Professional healthcare attire is acceptable.
- Unacceptable attire includes but is not limited to:
  - Bare midriffs
  - Low cut, tank, tube or sleeveless tops
  - Transparent, provocative, excessively form fitting or revealing clothing
  - Mini skirts
  - Sweat (warm-up) shirts or pants
  - Clothing with printed messages, caricatures or pictorial representations (e.g., university logos, beverage cans, and cartoon characters) applications that have the potential of falling off (e.g. sequins, glitter) shorts. Note: Exception business attire that is identified by small logo (e.g. Polo insignia).
  - Denim jeans (any color).
  - Spandex tights or leggings.
  - Fishnet stockings.
  - Hats (other than nursing caps).

Note: Exceptions to these rules may be made with the written approval of the manager when the job expectations demand different attire.

- Jewelry is to be kept at a minimum and be in keeping with the general safety and infection control practices for the employee and the patient. Long dangling earrings, large or excessive necklaces and/or bracelets and sharp rings are not acceptable.
- Fingernails must be kept short, clean and natural; no artificial applications are to be worn.

- Hair must be neat and well-groomed.
- Shoes must be clean, in good repair, provide good support and protection and allow for quick and efficient movement as necessary in the performance of job duties, including emergencies. Heels should not be more than two-and-a-half inches high. Open-toed and open-back shoes are not permitted. Socks or stockings must be worn at all times.

## **CUSTOMER SERVICE**

It is important for all HCT/HT2 nurses to promote our culture of service excellent while on assignment at a client facility. Every time you interact with a customer and patient, you are representing HCT/HT2

### Behaviors of Exceptional Customer Service

1. Take pride and joy in creating a positive experience
2. Smile and be friendly.
  - a. Make eye contact
  - b. Give a genuine warm greeting, using patient/customer name when possible
  - c. Be positive, talk positively
  - d. Respect patients and co-workers
  - e. Take ownership: you are responsible for safety, cleanliness and confidentiality

### Standards of Service Excellence

1. Use L.E.A.P: if you receive a patient complaint, OWN IT!
  - a. L- Listen
  - b. E- Empathize
  - c. A- Ask questions
  - d. P- Produce a solution
2. Customer perceptions are reality: Deliver service the customer wants (not what you think they want)
3. Provide SMART feedback to team members. Everyone wants feedback. Build positive relationships with coworkers by recognizing their strengths, successes and weaknesses. Be:
  - a. S- Sensitive
  - b. M- Meaningful
  - c. A- Accurate
  - d. R- Reinforcing
  - e. T- Timely

## **TELEPHONE COURTESY**

Telephone courtesy guidelines include but are not limited to:

- Answering the phone, preferably by the third ring
- Identify yourself by giving your department and name.
- Identify the caller and what they are requesting
- When leaving the line, before placing the caller on hold, ask the caller if he/she can hold the line and wait for the caller's response
- When returning to the line, thank the caller for waiting
- When you give the call to another person, inform them both that they have a call and who the caller is.
- Try not to leave the caller holding for more than thirty (30) seconds. If you have to handle several calls at the same time or are unable to find the requested information or person quickly, ask if the caller would prefer to wait or to be called back.
- If the person receiving the call is not available, advise the caller of this and offer the options of speaking with someone else or leaving a message
- After taking a message, repeat the message to the caller to confirm that you have taken it down correctly and thank the caller.

- When transferring a call, let the caller know that you are transferring the call and why. Also, identify the extension to which you are transferring in case the caller is inadvertently disconnected.
- Allow your voice to reflect courtesy and a smile. What and how you say what you say makes a difference.
- Employees are to seek guidance from their manager when there are questions, concerns or problems with these rules or any other part of their employment.

**Any violations of the Code of Conduct will be investigated and may result in Disciplinary action up to and including termination, per HCT/HT2 Policy and Procedures.**

## **SUBSTANCE ABUSE: DRUGS IN THE WORKPLACE**

HCT/HT2 believes that maintaining a workplace that is free from the effects of drug and alcohol abuse is the responsibility of all persons involved in our business, including HCT/HT2 employees and clients.

The use, possession, sale or transfer of illegal drugs or alcohol on company property, in company vehicles, or while engaged in company activity is strictly forbidden. Also, being under the influence of drugs or alcohol, while on company property, in company vehicles, or while engaged in company activities is strictly forbidden. A violation of this policy will result in disciplinary action up to and including termination. Depending upon the circumstances, other action, including notification of appropriate law enforcement agencies, may be taken against any violator of this policy. In accordance with the Drug-Free Work-Place Act of 1989, as a condition of employment, patient care providers must comply with this policy and notify management within five (5) days of conviction for any use of, or distribution of a controlled substance. Failure to do so will result in immediate termination of employment pending the outcome of any legal investigation and conviction.

For the protection of our employees, the public and to insure an environment as free from the influence of illegal drugs as is reasonably and practically possible, the company requires a pre-employment drug screen, annual drug employment screen and reserves the option to conduct a “for cause” drug screen for the presence of illegal drugs under certain conditions. Consent to the testing program will be a condition of further employment of each and every employee. If any director, manager, supervisor or other company officer or client representative has any suspicion that an employee under his or her supervision may be affected by or under the influence of illegal drugs, the employee under suspicion will be asked to undergo a laboratory test to determine the presence of illegal drugs. Refusal to take the test will subject the employee to immediate termination. Additionally, consistent with the law, drug and alcohol screening tests will be given after accidents or near misses, or upon reasonable suspicion of alcohol or drug use, when a client requires pre-assignment testing, or upon any other circumstances which warrant a test.

## **SEXUAL AND OTHER UNLAWFUL HARRASSMENT**

HCT/HT2 is committed to providing a work environment that is free from all forms of discrimination and conduct that can be considered harassing, coercive, or disruptive, including sexual harassment. Actions, words, jokes, or comments based on an individual's sex, race, color, national origin, age, religion, disability, sexual orientation, or any other legally protected characteristic will not be tolerated.

Sexual Harassment is defined as unwanted sexual advances, or visual, verbal, or physical conduct of a sexual nature. This definition includes many forms of offensive behavior and includes gender-based harassment of a person of the same sex as the harasser. The following is a partial list of sexual harassment examples.

- Unwanted sexual advances—verbal and/or non-verbal.
- Offering employment benefits in exchange for sexual favors
- Making or threatening reprisals after a negative response to sexual advances.
- Visual conduct that includes leering, making sexual gestures, or displaying of sexually suggestive objects or pictures, cartoons or posters.
- Verbal conduct that includes making or using derogatory comments, epithets, slurs, or jokes.
- Verbal sexual advances or propositions.
- Verbal abuse of a sexual nature, graphic verbal commentaries about an individual's body, sexually degrading words used to describe an individual, or suggestive or obscene letters, notes, e-mails or invitations.

- Physical conduct that includes touching, assaulting or impeding or blocking movements.

Unwelcome sexual advances (either verbal or physical), requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute sexual harassment when:

- Submission to such conduct is made either explicitly or implicitly as term or condition of employment;
- Submission or rejection of the conduct is used as a basis for making employment decisions, or
- The conduct has the purpose or effect of interfering with work performance or creating an intimidating, hostile, or offensive work environment.

Upon experiencing or witnessing sexual or other unlawful harassment in the workplace, report it immediately to your supervisor. If the supervisor is unavailable or you believe it would be inappropriate to contact that person, you should immediately contact the HCT/HT2 Corporate Office or any other member of management. You can raise concerns and make reports without fear of reprisal or retaliation.

All allegations of sexual harassment will be quickly and discreetly investigated. To the greatest extent possible, the alleged victim's confidentiality, that of any witnesses, and the alleged harasser will be protected against unnecessary disclosure. When the investigation is completed, the alleged victim will be informed of the outcome of the investigation.

Any supervisor or manager who becomes aware of possible sexual or other unlawful harassment must immediately advise the President or any member of management so the allegation can be investigated in a timely and confidential manner. Anyone engaging in sexual or other unlawful harassment will be subject to disciplinary action, up to and including termination of employment.

## **PHYSICAL ASSAULT/WORKPLACE VIOLENCE**

HCT/HT2 is committed to providing a safe and secure workplace and an environment free from physical violence, threats and intimidation. Employees are expected to report to work to perform their jobs in a nonviolent manner. Conduct and behaviors of physical violence, threats or intimidation by an employee may result in disciplinary action up to and including discharge and/or other appropriate action.

HCT/HT2 will not permit employment-based retaliation against anyone who, in good faith, brings a complaint of workplace violence or who speaks as a witness in the investigation of a complaint of workplace violence.

### Definitions

Workplace violence is any physical assault, threatening behavior or verbally abusive remark that is made in the workplace and/or effect the workplace behavior of an employee, which includes but is not limited to:

1. Verbal Abuse: Any verbal expression issued with the intent of creating fear or intimidation in another individual, or group of individuals, or verbal remarks or comments expressed in a loud, harsh or threatening tone of voice or in a joking manner within the workplace.
2. Physical Abuse: Any intentional movement of the body, which may include touching, gestures, pushing, striking, stalking or any unwanted intrusion of "reasonable space" of an employee. Any intentional use of any object toward an individual.
3. Creating a Hostile Work Environment: Any intentional nonphysical action that can be considered intimidating, or harassing with the intent of creating an environment that has the purpose or effect of unreasonably interfering with an individual's performance of where behaviors create hostile or threatening environment.

### Responsibilities

1. Management: Management will foster an environment that is safe and free from workplace violence and will take action immediately to reduce the effects of workplace violence and/or verbal or physical abuse.
2. Employee: Employees will conduct themselves in such a way to reduce the possibility of any conflicts or acts that would create a violent, abusive or unsafe workplace environment for themselves or others. Employees will notify management of workplace violence incidents, which have occurred on or off-site that has the potential of impacting the work

environment. Employees will remove him/herself from any situation that may result in workplace violence. This means that if confronted with a potential situation involving workplace violence, an employee must make a serious attempt to retreat from the situation and report to management.

## **SUSPECTED ABUSE: IDENTIFICATION, TREATMENT AND REPORTING**

### Elder/Adult Abuse

With an elderly person (65 years of age or older) or disabled adult (18 years of age or older), abuse means the willful infliction of injury, unreasonable confinement, intimidation, or cruel punishment with resulting physical harm or pain or mental anguish or the willful deprivation by a caretaker or one's self of goods or services which are necessary to avoid physical harm, mental anguish, or mental illness.

### Signs and Symptoms of Elder/Adult Abuse

- Patient or family member states that abuse is happening in the home
- Explanation for injuries is inconsistent with the injury
- Family or caregiver attempts to conceal injury
- Indications that someone is exploiting patient's finances or property
- Delay in seeking treatment
- Multiple bruises or injuries in various stages of healing
- Human bite marks
- Burns especially on back or buttocks
- Bruises in the shape of a hand or fingers
- Patient's behavior changes in the presence of the family or caregiver

### Child Abuse

With a child (under 18 years of age), abuse includes:

1. Mental or emotional injury that results in an observable and material impairment in the child's growth, development, or psychological functioning;
2. Causing or permitting the child to be in a situation in which the child sustains a mental or emotional injury that results in an observable and material impairment.
3. Physical injury that results in substantial harm to the child or the genuine threat of substantial harm from physical injury to the child
4. Failure to make a reasonable effort to prevent an action by another person that results in substantial harm to the child;
5. Sexual contact, sexual intercourse, or sexual conduct;
6. Failure to make a reasonable effort to prevent sexual contact, sexual intercourse, or sexual conduct.

### Signs and Symptoms of Child Abuse

- Burns on the soles of the feet (from forced standing in hot places)
- Burns on buttocks, thighs, hands or feet (from submersion in hot water)
- Explanation for injury does not match developmental stage (for example, caregiver explains a broken leg by saying the patient fell down, but the patient is too young to stand up)
- Evidence of sexually transmitted disease
- Bruising or tearing around the genital area

### NEGLECT

With an adult, neglect means failure to provide...the goods or services, which are necessary to avoid physical harm, mental anguish, or mental illness.

With a child, neglect includes leaving the child in a situation where the child would be exposed to a substantial risk of harm, i.e., and failure to seek or follow through with medical care, failure to provide food, clothing, or shelter.

### Signs and Symptoms of Elder/Adult Neglect, Including Self-Neglect

- Malnutrition
- Dirty, unkempt
- Unattended medical conditions
- Alcohol or substance abuse by caretakers

### Signs and Symptoms of Child Neglect

- Chronic truancy (caregivers do not send child to school)
- Failure to thrive (unexplained weight loss)
- Unexplained delay in development
- Accidental injuries that suggest poor supervision.

### Spousal/Partner Violence

Spousal/partner violence involves the situation where a victim has been involved in an intimate, romantic or spousal relationship with the perpetrator. It encompasses violence against both men and women and includes violence in same-sex relationships. It consists of a pattern of behaviors that establish power over another adult

### Signs and Symptoms of Spousal/Partner Violence

Signs and symptoms of spousal/partner violence can include the usual signs and symptoms of abuse and neglect. Violence in a relation may not result in physical evidence. For example, the abuser may deny the victim the ability to communicate with friends or relatives. The abuser may abandon the victim in a dangerous place, refuse help when sick or injured or prohibit access to money or other basic necessities.

### Exploitation

The illegal or improper act or process or a caretaker using the resources of an elderly or disabled person for monetary or personal benefit, profit, or gain.

- The treatment team may identify possible history of abuse, neglect, or exploitation
- Any staff member suspecting child and or adult abuse and/or neglect is required to report suspicions according to local law and the rules and regulations of the state's Department of Human Services (DHS) or appropriate agency. If clarification is necessary concerning the criteria for reporting in Adult Protective Supervisor will occur without disclosing the identity of the patient and/or family.
- The report to DHS may be made orally or in writing. It shall include:
  - a) The name, age, and address of the person
  - b) The name address of the person responsible for care
  - c) The nature and extent of the person's condition
  - d) The basis of the reporter's knowledge
  - e) Any other relevant information
  - f) Documentation shall occur in the appropriate section of the patient record.
- If circumstances allow, the reporting procedure will be discussed with the patient and/or family involved, prior to the report being made. Consent will be obtained if deemed appropriately by the treatment team.
- Outside agency personnel requesting information about the family should be referred to the patient's physician or other appropriate staff.
- Any act of omission is reportable. A reportable suspicion includes a child victims or abuse shall be documented in the appropriate section of the medical record.
- Symptoms resulting from abuse will be addressed by the patient's treatment team.
- Documentation of physical marking should include photographic documentation (with appropriate patient identification) and included in the appropriate portion of the patient's medical record.
- Any other evidentiary material of abuse released by the patient will be included in the appropriate portion of the patient's medical record.
- Adult patients shall be given information regarding legal counsel
- Physical injuries requiring medical attention will be treated as deemed necessary by the patient's physician.

### Abuse Reporting

All healthcare practitioners are mandated reporters. Social workers are not on site 24 hours/day, so practitioners need to know appropriate procedures to take when abuse is suspected. Failure to report child, spousal or elder abuse or neglect is a misdemeanor punishable by up to six months in jail and a \$1000 fine. The law requires that the suspected abuse be reported immediately by telephone and followed up with a written report within 26 hours. In order to recognize these situations, it is important to know signs and symptoms of abuse.

Suspected abuse, neglect and/or exploitation should be reported directly to the Nurse Manager/Nurse Director/Charge Nurse and should include:

- a. A description of the incident
- b. To whom the incident happened
- c. When the incident occurred
- d. Where the incident occurred
- e. Who was responsible for the neglect/abuse?

## **COMPLAINT RESOLUTION (STAFF AND CUSTOMER)**

A Customer Service Complaint is any complaint and/or concern from one of our valued customers regarding a situation or incident that results in dissatisfaction of that customer. The purpose of our complaint policy is to:

- To have a positive impact in improving customer service and satisfaction.
- To understand the causes that underlie a complaint and to focus on making changes to systems and processes to reduce the probability of a similar complaint in the future.
- To prevent potentially compensable events and to protect corporate financial resources potentially jeopardized by customer dissatisfaction.
- To analyze and trend data to identify opportunities for organizational performance improvement.

All HCT/HT2 patient care providers and internal office staff are entitled to full and equal accommodations, advantages, facilities, privileges and services provided by the company.

HCT/HT2 accepts complaints from persons who believe that they have experienced a violation of their rights. The following guidelines shall be followed in resolving complaints.

- Complaints must be filed within 30 days of the alleged act.
- The complaint is the written document that describes the occurrence and why the person filing the complaint believes the action or incident was in violation of his/her rights.
- An individual seeking to file a complaint needs to contact HCT/HT2 management. An intake interview or phone interview will be conducted with the complaining party.
- After a careful screening process, the complaint is investigated to determine if there is sufficient evidence to support the allegation. The complaint documentation must contain a claim which constitutes a violation of the complaining person's rights.
- A complaint may be settled at any time after it is filed. Opportunities will be given to all parties involved to ask questions, provide information, and suggest witnesses in order to resolve the complaint.
- As the investigation proceeds, individuals will be interviewed and pertinent records and documents will be reviewed.
- The person filing the complaint must cooperate fully by providing accurate information and by supplying documents to support the allegations.
- All information gathered in the course of an investigation is subject to disclosure unless otherwise protected by the individual's right to privacy (e.g. medical records).
- If the complaint is substantiated, a reconciliation conference to settle the complaint will be scheduled. Settlement terms may require:
  - Restoration of previously denied rights.
  - Compensation of any out-of-pocket losses incurred by person filing complaint
  - Correction of other harm(s) resulting from the violation(s).

- Modification of practices that adversely affect persons protected under law
- Other actions to eliminate the effects of violation of rights.

Our goal is to always provide you with a consistent level of service. If for any reason you are dissatisfied with our service or the service, we encourage you to contact the HCT/HT2 Management to discuss the issue. HCT/HT2 has processes in place to resolve complaints in an effective and efficient manner. If the resolution does not meet your expectation, we encourage you to call the HCT/HT2 corporate office at (949) 709-1883. A corporate representative will work with you to resolve your concern. Any individual that has a concern about the quality and safety of patient care delivered by HCT/HT2 health care professionals, which has not been addressed by HCT/HT2 management, is encouraged to contact the Joint Commission at [www.jointcommission.org](http://www.jointcommission.org) or by calling the Office of Quality Monitoring at 630.792.5636. HCT/HT2 demonstrates this commitment by taking no retaliatory or disciplinary action against employees when they do report safety or quality of care concerns to the Joint Commission.

## **HUMAN RESOURCES: EMPLOYMENT APPLICATION PROCESS**

In keeping with our standard of excellence, HCT/HT2's initial application process and ongoing quality assurance initiatives are designed with the primary goal is to provide the highest quality of nursing professionals possible. Our objectives include:

- To recruit and employ those professionals who are dedicated to quality care with proven skill histories.
- To provide a thorough orientation for each nurse so that he/she may perform his/her work in a safe and effective manner.
- To provide consistent opportunities for staff education via our in service training and staff development program.
- To monitor the quality of nursing performance through regular on-site evaluations
- To work closely with clients while modifying our service concepts to meet their needs.

Each applicant undergoes a stringent screening process to verify skills and commitment to nursing excellence.

### Proof of Citizenship or Ability to Work as Required by Law

HCT/HT2 verifies eligibility to work in the United States. The U.S. Immigration and Naturalization Service require that employees show proof of citizenship/eligibility to work by completing an Employment Eligibility Verification Form (I-9). Failure to produce the necessary proof according to the applicable laws will result in the postponement of employment.

### Background Checks

HCT/HT2 may perform criminal background checks on applicants, which may include a felony and misdemeanor search in the state the applicant resides, and may also include states and counties of residence/employment for the previous 7 years when specified in the written agreement between HCT/HT2 and its clients. Criminal background checks can also be conducted post-employment based upon a reasonable suspicion of criminal activity.

In addition, HCT/HT2 verifies that applicants are not included in the Office of Inspector General's (OIG) or the Excluded Parties List System (EPLS) databases of excluded providers.

### License/Certification/Education Verification

Applicants may be required to provide valid, original professional licenses to practice their profession in the state of the assignment, Basic Cardiac Life Support (BCLS) certification and any other professional certifications required for the practice of their specialty when specified in the written agreement between HCT/HT2 and its clients. HCT/HT2 conducts primary source verification of professional licenses in all states where HCT/HT2 Inc. is employing the provider or offering placement for the provider, with the appropriate licensing bodies to verify issue date, expiration date, active status of license and to determine if a license has ever been suspended, revoked, restricted, reprimanded, sanctioned or disciplined. Any disciplinary action on a professional license can be terms for non-employment with HCT/HT2 and falsification of any documentation will render applicant completely ineligible for employment with HCT/HT2

Positions that require a specific educational requirement and/or certification must have verification of such. Where education and licensure are required, but the license may not be obtained without meeting the education requirements, it is not necessary to confirm education, but only to verify the license (Specific example would be an RN where state licensure is required and completion of an approved nursing program or completion of a certain number of continuing education units. In this case, the individual may not obtain state licensure or renewal without completion of an approved program or continuing education units, therefore only license verification would be required. If the position requires state licensure as an RN and a Master's degree, then both the licensure and the education would need to be verified).

It is the employee's responsibility to maintain a current valid license. Failure to do so will result from removal from duties and progressive discipline. Employees are required to immediately notify HCT/HT2 if a license/certification is suspended or revoked prior to education.

### Reference Checking

HCT/HT2 verifies at least one reference from previous employers or from clinical peers that may provide information related to the applicant's knowledge and applied job skill proficiency or confirm dates of employment.

### Pre-Employment Skills and Competency Assessment

To ensure that work is performed safely and efficiently in the hospital setting, all applicants are required to complete a competency self-assessment for every unit and specialty to which they will be assigned. All current competency assessment tools are maintained in their personnel file.

Applicants must also complete a competency examination for every specialty to which they would like to be assigned and receive a passing score of at least 70%. Any applicant not receiving a passing score on their first time will be given one additional opportunity to re-take the competency exam and pass. Failure to achieve a passing score of at least 70% within the first two attempts is automatically ineligible for employment with HCT/HT2 in addition, all staff must complete a Pharmacology examination and receive a passing score of at least 70%. Any applicant not receiving a passing score on their first time will be given one additional opportunity to re-take the Pharmacology exam and pass. Failure to achieve a passing score of at least 70% within the first two attempts is automatically ineligible for employment with HCT/HT2

### Health Screening

Applicants may need to go through a screening process when specified in the written agreement between HCT/HT2 and its clients, to demonstrate that they are free from communicable disease and are free from any health impairment that is of potential risk to the patient, caregiver, other employees, or that may interfere with the performance of duties. All applicants may need to provide:

- Clearance for Work: are only required when specified in the written agreement between HCT/HT2 and its clients. If required, the applicant will submit a written clearance for work conducted within the last twelve months prior to hire date. The Clearance for Work shall include whatever specifications are in the written agreement between HCT/HT2 and its clients, which may or may not include a medical history, physical examination, laboratory work as indicated, and a written report to indicate that the employee is physically and medically qualified to perform the duties to be assigned. In addition, annual physicals are required thereafter
- Tuberculosis Test: are only required when specified in the written agreement between HCT/HT2 and its clients. TB tests if required may need to be conducted within the last twelve months prior to hire date. The TB test may show a negative result. Applicants who test positive as a tuberculin reactor are required to submit documentation of a negative chest x-ray showing no abnormalities and/or provide proof of prophylactic antibiotic therapy. One clear chest x-ray is required for individuals following a positive skin test or documented history of positive skin test, repeat chest X rays thereafter are not required for those who present positive skin results, repeat chest x rays are only required when specified in the written agreement between HCT/HT2 and its clients. Applicants with positive TB results must also complete a TB questionnaire upon hire and annually thereafter when specified in the written agreement between HCT/HT2 and its clients.
- Vaccinations: are only required when specified in the written agreement between HCT/HT2 and its clients. If required the applicant will Submit proof of exposure to or immunization to Rubella, Rubeola, mumps, and Varicella zoster.

- Drug Test: are only required when specified in the written agreement between HCT/HT2 and its clients. If required the applicant will submit a drug screen that may screen any or all of the following: amphetamines, barbiturates, benzodiazepines, cannabinoids, cocaine, meperidine, Methadone, Opiates, Phencyclidine, Propoxphene
- Hepatitis B: are only required when specified in the written agreement between HCT/HT2 and its clients. Must provide proof of vaccination to Hepatitis B or sign waiver/declination. The Hepatitis B vaccine and vaccination series shall be made available at no cost to all employees. Employees shall not receive the vaccination if they have previously received the Hepatitis B vaccination series or have antibody resting which reveals the employee is immune or for whom the vaccine is contraindicated for medical reasons.

*\*\*\* Please note that random drug screening and drug screening for cause may occur at any time.*

### Interview and Education

Applicants whose qualifications are in question are interviewed by the President or Clinical Liaison. Interviews are designed to determine applicant's knowledge, competence and skills in specified areas of expertise. Interviews are based on actual events and circumstances that applicants are likely to encounter in the work environment.

Applicants are also oriented to HCT/HT2's general policies and procedures, as well as specific administrative policies on overtime and scheduling. Orientation for select hospitals is also provided, as specified by select client hospitals.

Applicants are also oriented and asked to acknowledge their comprehension of a variety of topics, including, but not limited to:

- Medication: administration, safety and prevention of errors
- Abuse: Child, elder and reporting, SCAN
- Sexual and domestic violence, assault, rape
- Drugs in the workplace, workplace violence
- Safety: electrical, fire, environmental, safety signals
- Hazardous materials
- Infection control and CDC Hand Guidelines
- OSHA and blood borne pathogens
- Dress code and fingernail policy
- JCAHO education, National Patient Safety Goals, List of Abbreviations/Do-not-use
- Patient rights/advance directives
- Emergency preparedness
- End-of-life care
- Code situation policies
- Sentinel event policies and procedures
- Restraints
- Age-specific education
- HIPAA
- Pain Management
- Body Mechanics
- Documentation: of patient care, transcribing of physician orders
- Conscious Sedation
- Patient safety and education
- Fall prevention

The completion of orientation shall be documented and signed by the applicant. And the form will be retained in the employee's personnel record.

### **Maintaining Nursing Personnel Files**

All personnel files are maintained by HR, HR monitors relevant requirements and expirations of any requirements. Requirements are kept current through daily alerts of soon-to-expire or expired requirements.

### **Orientation**

HCT/HT2 will provide all new employees with an orientation to the company's policies and procedures. Each employee will receive an Employee Handbook.

Some 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. The Recruiter will explain required orientation to all employees prior to scheduling first shift with a facility. Orientation time worked at the facility is paid at the orientation rate. (Usually less than regular pay rate)

Some facilities require that their specific pre-employment orientation "packets" be completed by the prospective caregiver at HCT/HT2 before the first shift is worked, and there is no pay for this required activity.

#### The first time you visit a facility the following guidelines should be followed:

- Report approximately one (1) hour early for orientation (it may vary for each facility).
- Carry photo ID for evidence of identity when reporting for assignment
- Take your nursing license and certifications with you
- Report to the appropriate supervisor
- It is expected that the healthcare practitioner locates and comply with the facility policy and procedures manual, locate fire pulls, crash cart, med. room, linen cart, and appropriate exits before your shift starts.
- Always dress in proper attire when working at the facility. Orientation is only paid when the time has been properly verified by facility staff.

Occasionally, a HCT/HT2 employee may show up early as directed for orientation shift and no one is available for orientation. Please take it upon yourself to utilize this time to become familiar with the floor layout and the location of vital items you may need in order to function effectively on your shift. It will be to your advantage to have knowledge of the location of the policy and procedures manual, fire pulls, crash cart, med. room, linen cart, and appropriate exits prior to the onset of your shift.

HCT/HT2 attempts to provide a comprehensive and thorough pre-employment orientation and in service training that reflects current compliance and promotes safe healthcare delivery. The program includes, but is not limited to the following:

- Age Specific
- Disaster Preparedness
- Cultural Diversity
- Environmental Safety
- Hazardous Chemicals
- HIPAA
- Infection Control/Blood borne Pathogens
- Abuse
- Domestic Violence
- Ethics for Healthcare
- Annual National Patient Safety Goals
- Pain Awareness
- Patient Restraints
- Patient Rights
- Workplace Violence

## **PERFORMANCE IMPROVEMENT AND EDUCATION PROGRAM**

The purpose of performance management is to enhance the knowledge, skills and behaviors of all employees. This is accomplished by providing a means of measuring employee's effectiveness on the job; identifying areas of development where

employees are in need of training, growth, improvement and/or additional resources; maintaining a high level of motivation through feedback with management and establishing individual performance goals.

### Initial Assessment

Upon hire, one of HCT/HT2's Recruiters must inform new hires of all the competencies that must be met. For the initial assessment, the competency self-assessments will serve as the baseline assessment. Review and education for errors on any competency exams, pharmacology exams and additional examinations will also serve as areas of improvement.

### Quarterly Assessments

HCT/HT2 has attempted to implement a continuous, systematic and coordinated approach to measure and assess hospital's feedback on all agency personnel being utilized. The following assessments are utilized to ensure employee performance and customer satisfaction:

- Caregivers are assessed by the charge nurse, nurse manager or client designee once during their assignment or at least quarterly. Assessment focuses on professionalism, safety, patient care, compliance, assessment, planning and documentation.

Any unsatisfactory scores will be reviewed and discussed with each nurse and methods for improvement recommended by HCT/HT2's President or Clinical Liaison. For more information on HCT/HT2's Progressive Discipline Program, please see Progressive Discipline Program.

### Periodic Assessments

HCT/HT2's President or Clinical Liaison conducts annual assessments of all staff. Quarterly performance evaluations are solicited via phone calls from to review clinical performance based on client feedback. The President or Clinical Liaison and clients evaluate employee job performance based on the functions and standards as outlines in the job descriptions. The President or Clinical Liaison and employee will identify strengths, accomplishments and areas for improvement and development. All hospital reviews, including initial and random assessments are also incorporated into the ninety-day and annual performance review. Employees will also update their competency self-assessments at this time.

If Performance Improvement is required, written recommendations identifying the performance expected will be created and will be used to gain the employee's commitment to perform to those expectations. The President or Clinical Liaison will provide written coaching, resources and suggestions to assist the employee in working toward the performance expectations established in this phase. In the event that a Performance Plan is created, it is expected that the President or Clinical Liaison conduct Progress Checks, or informal reviews of performance to determine if the agreed-upon goals and objectives are being achieved, to recognize achievements, to discuss developmental needs, and/or to provide assistance in the accomplishment of performance goals.

### Employee Performance Review

- Every healthcare professional employed by HCT/HT2, who is currently working and has worked in the last year, will have an annual performance evaluation carried out by the HCT/HT2, during the month of December or at the anniversary of their date of hire.
- Traveling providers are eligible for annual evaluations if the provider has worked a minimum of one 13-week assignment during the preceding year and are active at during the current year in at the anniversary of their date of hire.
- Per Diem providers are eligible for annual evaluations if the provider has worked a minimum of 8 hours during the preceding year and are active during the current year at the anniversary of the date of hire.
- HCT/HT2 will attempt to obtain feedback from client representatives regarding clinical staff competence and ongoing performance of professional employee. Unfortunately, some clients will not cooperate with HCT/HT2 in this regard, so HCT/HT2 conducts phone solicitation of feedback from its clients.
- Feedback from our clients regarding clinical and/or professional performance is addressed with our employees immediately. Follow-up with our clients is completed within an appropriate time frame.
- Annual skills checklists which apply to specialty area of work will be completed by every health professional employed by

## HCT/HT2

- 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.
- President or Clinical Liaison is responsible to ensure that any areas of development that are identified are addressed.

## Education

Ongoing continuing education is the responsibility of HCT/HT2 employees to ensure that all clinical staff has a current knowledge and practice base. HCT/HT2 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: [www.nursetesting.com](http://www.nursetesting.com), [www.nursingspectrum.com](http://www.nursingspectrum.com), and [www.lww.com](http://www.lww.com). Evidence of continuing education and annual required in-service education are part of the ongoing competency assessment program and will be maintained in your personnel file. Please provide HCT/HT2 with copies of your continuing education certificates.

## Disciplinary Action

HCT/HT2 has established workplace standards of performance and conduct as a means of maintaining a productive and cohesive working environment. A positive, progressive approach is taken to solve discipline problems, which appeals to an employee's self-respect, rather than create the fear of losing a job. Our system emphasizes correction of the offensive behavior. If correction of the problem and sustained improvement does not occur, termination may result.

The following may be grounds for disciplinary action, up to and including termination:

- Accepting an assignment and not reporting to work or not notifying us.
- Unauthorized possession, use, or removal of property belonging to HCT/HT2 or any client of HCT/HT2
- Failure to comply with all safety rules and regulations, including the failure to wear safety equipment when instructed.
- Reporting to work under the influence of alcohol, illegal drugs, or in possession of either item on company premises or work sites of client companies.
- Lewd, unacceptable behavior, possession of weapons or explosives and provoking, instigating or participating in a fight is prohibited at HCT/HT2 and/or at its client hospitals.
- Violation of the harassment policy.
- Insubordination of any kind is grounds for immediate termination. (For example, refusal to carry out your supervisor's reasonable works request).
- Leaving an assignment without notice i.e. patient or assignment abandonment.
- Falsifying records, including but not limited to time records or claims pertaining to injuries occurring on company premises or work sites of client companies or personnel records.
- Disclosing confidential information without authorization.
- Disregard for established policies and procedures.
- Excessive cancellations or tardiness.
- Discourtesy to clients or fellow employees.

## Do Not Send Policy and Process

HCT/HT2 is committed to providing a higher standard of service to our clients and to the delivery of safe, quality patient care. As a HCT/HT2 employee, you play a very valuable role in our success in delivering excellent customer service and in our ability to achieve Joint Commission Certification. We are implementing a "Do Not Send" **Prevention** Program.

- Below is the Termination Policy.
- Following the Termination Policy are the Do Not Send Prevention Curriculum and the Do Not Send Prevention Quiz
- **You will be held responsible for the information in the curriculum and quiz in both your clinical and professional / behavioral performances every time you work for HCT/HT2**

- Please take the quiz and return only the answer sheet to us within 14 days in the enclosed self-addressed-stamped-envelope.
- ***When a performance issue arises, HCT/HT2 will use the point system outlined below. As you can see, significant performance issues or ongoing performance issues could result in termination. By implementing this program, it is our goal to reduce the number of performance issues and/or Do Not Sends.***

### Termination Policy

The following point system is used to determine termination as a result of Do Not Sends.

1 Point Attitude / lack of professionalism / customer service

2 Points

- Clinical incompetence – poor clinical performance
- Poor time management
- Medication Error
- Documentation Deficiencies Lack of Compassion

3 Points

- Danger to patient.
- No call No show.
- Departing facility before end of shift secondary to dissatisfaction with assignment.
- Do Not Send from any Travel Assignment regardless of origin

5 Points

- Illegal Behavior (Includes false identity; falsified documentation, use of or distribution of controlled substances etc.)
- Pt. abandonment. When nurse is under investigation for above behavior they will be considered terminated until exonerated from all accusations.
- Error resulting in Pt. Death or Permanent physical or mental damage
- Self-terminating travel assignment without proper notice to facility or Staffing Agency.

A nurse who receives 5 points will be considered for termination.

Any nurse involved in illegal activity will be terminated immediately

Please feel free to contact the HCT/HT2 office, if you have any questions

#### Do Not Send Prevention: Curriculum

Do Not Sends are usually subjective in nature. However, there are things we as Agency nurses can do to avoid Do Not Sends.

#### **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 hrs 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. 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 pt's chart during the first half of your shift also prepares the Agency nurse 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 patient the 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 directly to a Do Not Send.*

## **5. When in Rome... Make every attempt to do things, the way the Facility you are working in, does things.**

Some Facilities want two nurses to sign off on all **insulin** administration, **narcotic** administration and **lab specimens**.

Please respect all of 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 you 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 one of us as agency nurses encounters a situation in which you feel obligated to challenge a request, in order to maintain the safest patient care environment. It is of vital importance that you:

1. Communicate with HCT/HT2
2. Document the incident in your own words before leaving the facility.
3. Furnish signed and dated, copies of your documentation of the incident to HCT/HT2, 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 an Agency nurse by name.*

**6. Practice the 6 rights of medication administration.**

1. Right Patient
2. Right Medication
3. Right Dose
4. Right Time
5. Right Route
6. Right Rate
7. Right Reason
8. Right Documentation
9. Right Assessment
10. Right Education
11. Right Evaluation

If an agency nurse is confused regarding any aspect of the medication administration process, clarification with the physician 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.*

**7. Be conscious of Joint Commission National Patient Safety Goals in your practice.**

1. Improve the accuracy of patient identification.
2. Improve the effectiveness of communication among caregivers.
3. Improve the safety of using medications.
4. Reduce the risk of health care-associated infections.
5. Accurately and completely reconcile medications across the continuum of care.
6. Reduce the risk of patient harm resulting from falls.

A complete and current set of National Patient Safety Goals should be posted or easily accessible on any unit in any Acute Care Facility.

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

**8. Ask the Charge nurse to Audit your Charting a few hours before end of shift.**

Having the charge nurse 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 nursing. Since many Agency nurses 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.*

## **9. Practice excellent customer service.**

Customer service extends further than our patients and their families; it includes every person we come into 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".*

## **10. Take excellent care of your patient(s).**

The reason hospitals exist is because people who are ill, injured or have had major surgery require 24-hour care. The necessity of 24-hour care is the reason why tens of thousands of hospitals across the US continue to operate, often at a loss.

Keep the person you are taking care of clean. Be gentle. Communicate kindly and effectively. Listen carefully. Show respect for your patient's privacy, age, culture, family and human existence. Spend time teaching them, explaining what is happening at any given moment. Explain what you are doing or giving your patients and why.

*Rationale: As direct patient care providers taking good care of our patients what we should expect of ourselves, it is what we are expected to do. It is our ethical obligation. It is our job.*

## **11. Remember This! ... When we are working for a TEMPORARY Staffing Firm "We are PERMANENTLY on PROBATION"**

There are common reasons many of us work for Staffing Firms. We enjoy the flexibility, often making our own schedules, increased pay, getting paid sooner, working in new environments and meeting new people. We also need to be aware that there are trade-offs or things we give away for those benefits.

We are not employees of the facilities in which we are working. We are not "on staff". We are not members of the union. We cannot expect to receive fair treatment. We will almost never get the best assignment. We might be "ganged up" on. We might not get help as soon as we ask for it. If we complain we can expect to be asked not to return. We have to out-perform our colleagues "on staff" every shift. We can never get comfortable.

*Rationale: The key to being "successful" and enjoying our careers as providers who work for temporary staffing firms... is having as many places to work as possible. Having a wide range of choices will allow us to minimize interruptions to income when our favorite places do not need us. The sooner we let go of our expectations of being treated as if we were employees of the facilities we work in, on a TEMPORARY basis the greater chances we have of being successful.*

## **Do Not Send Prevention: Quiz**

1. Its 4:45 a.m. and La Tasha Davis has just been confirmed for the day shift at a Medical Center across town from her. La Tasha lives in across town from and has never been to the Medical Center. Which of the sequences will below provide La Tasha with greatest chances of making a great first impression and having a successful shift?
  - a. Wake up at 6:15 a.m., take a shower, get dressed, hit the road @ and head in general direction of the facility and call for directions from the car.
  - b. Get out of bed at 0500 obtain detailed directions and the nursing office phone number. Eat a small healthy breakfast, shower, dress neatly, gather nursing tools (ID badge, medication book, stethoscope etc.) and be on the road by 0545.

- c. Get out of bed at 0500 go to the gym, come home, shower, get dressed, walk the dog, be on the road at 0705, call the staffing firm and say she got lost.
  - d. Refuse to go to the Medical Center located across town, call the staffing firm at 0730 and ask if the hospital she usually works at has any late call needs.
2. **Lynn Carson RN is alone at the Nursing station in a facility in which she has been working twice a week, for over year, she is faxing a new order to the Pharmacy. Before Lynn leaves the Nursing station the phone rings, and several lines are blinking. Which of the following answers is the best example of excellent customer service?**
- a. Lynn looks around and sees the unit secretary speaking to the charge nurse, the nurse manager, and two executives with hospital badges and wearing suits and yells out to the secretary that the “phones are ringing!” and walks away from the Nursing station.
  - b. Lynn answers the phone lines and politely explains to every caller that she is not the unit secretary and cannot help them before hanging up, and walking away from the Nursing station.
  - c. Lynn finishes faxing her new medication order to the Pharmacy, doesn’t acknowledge any of the phones ringing and walks away from the nursing station.
  - d. Lynn sits down at the nursing station answers all the lines and directs the calls courteously and professionally. Lynn then remains at the nursing station, handling the phones for a few minutes until unit secretary returns. Lynn then passes along all relevant information upon being relieved.
3. **Kenny Slater RN has an extremely heavy assignment working day shift in a very busy Telemetry unit for the first time. Kenny’s patients tell him he has done a great job. However, the night shift Charge Nurse makes Kenny a Do Not Send, stating incomplete documentation as the reason. Which of the options below is the most reliable way to prevent this from happening in the future?**
- a. Kenny could have communicated the condition of his patients, explained how busy he was, asked for help and requested the dayshift Charge Nurse to audit his charts several hours before his shift ended.
  - b. Kenny could have avoided fulfilling his pts requests, not followed up on MD orders, and missing medications and made completing his documentation his first priority.
  - c. Kenny could have stated that his assignment was unfair and unsafe then complained to his patients and their families.
  - d. Kenny could have done nothing more, it wasn’t his fault. It was the hospital’s fault for giving him such a hard assignment and not showing him all the details of the documentation process in the first place.
4. **An MD on a pediatric floor orders .1mg of M.S. prn q 1<sup>o</sup> and a Dig level QD. Please write in the correct versions of the abbreviations used above, which comply with Joint Commission National Patient Safety Goals.**
- a. *0.1mg of Morphine Sulfate prn q 1 hour, Digoxin level daily*
5. **Its 0930 and Ude Amin RN, who also works as a Real Estate agent, is working in the ICU. At the end of her morning break, Ude checks her voice mail. Ude finds out an offer for a 2-million-dollar property, from one of her clients, has been accepted! Which of the following actions would be appropriate?**
- a. Ude tells the Charge RN she has a severe family emergency and leaves the facility immediately.
  - b. Ude excitedly calls the seller’s broker back from the Nursing station, and asks him to fax the counter offer to the ICU, so she can fax it to her client right away.

- c. Ude waits until her lunch break to call the seller's broker back. She uses her mobile phone outside of the hospital.
- d. Ude uses the nursing station computer, logs on to the internet, and prints out pictures of the 2-million-dollar house she just sold. She then borrows another RN's calculator to estimate the commission she expects to earn from the sale.

## REPORTING ANY ISSUES

### Assignment Issues

Issues may arise while an employee is on assignment for HCT/HT2. As a representative of HCT/HT2 and as a responsible and mature nursing professional, it is important that professionalism and integrity are maintained throughout the conflict resolution process and that above all, patient safety is the priority.

Common issues that may arise are:

- Conflict with hospital staff
- Conflict with patient and/or patient family members
- Unfair patient assignments, or "dumping"
- Assignment to a unit for which you are incapable of safely performing your duties

In the event of any of the above events:

1. Contact the nursing supervisor for assistance
2. If escalation is required, contact HCT/HT2 for mediation
3. Complete an incident report at the facility (if required)
4. Complete an incident report at HCT/HT2 (if required)

### Blood Borne Exposure

An exposure incident to blood borne pathogens involves specific eye, mouth, mucous membrane, or parenteral contact with blood or other potentially infectious materials that result from the performance of an employee's duties. All employees involved in direct patient care should be familiar with appropriate decontamination procedures.

In the event of exposure to any blood borne pathogens:

1. Adhere to appropriate decontamination procedures
2. Contact the charge nurse or nursing supervisor for assistance
3. Inform HCT/HT2 immediately of exposure

HCT/HT2 shall make immediately available a confidential medical evaluation and follow-up the exposed individual. Post-exposure follow-up shall be:

- Made available at no cost to the employee
- Performed by or under the supervision of a licensed healthcare professional who has a copy of all relevant information related to the incident.
- Made available at a reasonable time and place.

HCT/HT2's post-exposure and follow-up, shall include the following:

- Documentation of the route(s) of exposure, and the circumstances under which an exposure incident occurred.
- Identification and documentation of the source individual
- Collection and testing of blood for HIV and HBV serological status
- Post-exposure prophylaxis, as recommended by the U.S. Public Health Service
- Counseling

- Evaluation of reported illness

The company maintains confidential medical records for each employee with occupational exposure. Records are kept for the duration of employment plus thirty (30) years. Each record shall contain the employee's name, social security number, hepatitis B vaccine history, and a record of all post-exposure follow-up.

## CLINICAL INCIDENTS AND SENTINEL EVENTS

As a healthcare provider, it is your duty and responsibility to promptly report any unsafe condition, sentinel event or unusual event that can result in a sentinel event. Everyone is expected to participate in maintaining a safe environment for patients, visitors, physicians and their coworkers. This means taking an active role in reporting any and all unsafe conditions, unusual or sentinel events. All such events should always be reported immediately to your charge nurse, nursing supervisor and HCT/HT2's President or Clinical Liaison.

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. Clinical staff should notify HCT/HT2 of any clinical incidents that occur while on assignment, regardless of an adverse outcome.

A sentinel event is an unexpected occurrence involving death or serious physical or psychological injury, or the risk thereof. Serious injury specifically includes loss of limb or function. The phrase "or the risk thereof" includes any process variation for which a recurrence would carry a significant chance of a serious adverse outcome.

Such events are called "sentinel" because they signal the need for immediate investigation and response.

### Examples of Clinical Events

- Omission of treatment
- Deviation from policy
- Medication errors
- Improper equipment usage
- IV or Blood complications
- Patient fall
- Inaccurate clinical assessment
- Patient or physician complaint

### Examples of Sentinel Events

- Any patient death, paralysis, coma or other major permanent loss of function associated with a medication error
- A patient commits suicide within 72 hours of being discharged from a hospital setting that provides staffed around-the-clock care.
- Any elopement, that in unauthorized departure, of a patient from an around-the-clock care setting resulting in a temporally related death (suicide, accidental death, or homicide) or major loss of function.
- A hospital operates on the wrong side of the patient's body.
- Any intrapartum (related to the birth process) maternal death.
- Any perinatal death related to a congenital condition in an infant having a birth weight greater than 2500 grams.
- A patient is abducted from the hospital where he or she receives care, treatment or services.
- Assault, homicide, or other crime resulting in patient death or major permanent loss of function.
- A patient fall that results in death or major permanent loss of function as a direct result of the injuries sustained in the fall
- Hemolytic transfusion reaction involving major blood group incompatibilities

- A foreign body, such as a sponge or forceps that was left in a patient after surgery

#### Joint Commission's Sentinel Event Policy

The Joint Commission has defined a sentinel event policy that you should be aware of. This policy has four goals:

1. To have a positive impact in improving patient care, treatment and services and preventing sentinel events
2. To focus the attention of an organization that has experienced a sentinel event on understanding the root causes that underlie the event, and on changing the organization's systems and processes to reduce the probability of such an event in the future.
3. To increase the general knowledge about sentinel events, their causes, and strategies for prevention.
4. To maintain the confidence of the public and accredited organizations in the accreditation process

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. The President or Clinical Liaison reports each situation according to the guidelines of the appropriate professional association.