

**HEALTHCARE EMPLOYEE HANDBOOK**

**EMPLOYEE HANDBOOK**

**TABLE OF CONTENTS**

[WELCOME 3](#_Toc103584362)

[ADMINISTRATIVE BASICS 4](#_Toc103584364)

[Holiday Pay 4](#_Toc103584365)

[Paid Time Off 4](#_Toc103584365)

[Lunch Break Policy 5](#_Toc103584366)

[Orientation 5](#_Toc103584367)

[Clinical Supervision 5](#_Toc103584368)

[Floating Policy 5](#_Toc103584369)

[ORIENTATION 5](#_Toc103584370)

[CODE OF BUSINESS ETHICS 6](#_Toc103584371)

[STANDARDS OF CONDUCT 7](#_Toc103584372)

[EMPLOYEE RESPONSIBILITIES 7](#_Toc103584373)

[DRESS CODE/FINGERNAIL POLICY 9](#_Toc103584374)

[CLIENT SERVICE 10](#_Toc103584375)

[SUBSTANCE ABUSE: DRUGS IN THE WORKPLACE 11](#_Toc103584376)

[SEXUAL AND OTHER UNLAWFUL HARRASSMENT 11](#_Toc103584377)

[PHYSICAL ASSAULT/WORKPLACE VIOLENCE 12](#_Toc103584378)

[COMPLAINT RESOLUTION (STAFF AND CLIENT) 12](#_Toc103584379)

[HUMAN RESOURCES: EMPLOYMENT APPLICATION PROCESS 13](#_Toc103584380)

[PERFORMANCE IMPROVEMENT PROGRAM 16](#_Toc103584381)

[Employee Performance Review 16](#_Toc103584382)

[Disciplinary Action 17](#_Toc103584383)

[Do Not Send/Progressive Discipline Policy 17](#_Toc103584384)

[REPORTING ANY ISSUES 18](#_Toc103584385)

[CLINICAL INCIDENTS AND SENTINEL EVENTS 19](#_Toc103584386)

# WELCOME

Welcome to the IDR Healthcare, LLC (“IDR HC" or the “Company”) Team! We are looking forward to an exciting and rewarding career opportunity in working with you. This handbook will serve as your point of reference for standards, policies and procedures that IDR HC healthcare employees are expected to follow.

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

This handbook, however, is not a contract and it does not limit or alter your at-will employment relationship in any way. IDR HC has the right to terminate employment of its employees, with or without notice or cause, at any time.

**WHY YOU WILL LOVE IDR HC:**

# We will always provide the personalized service you expect from a service based firm. When you call IDR HC, you'll speak to a human being. When you send us a message, we'll contact you promptly. We are committed to an open and timely communication with every one of our clients and employees.

Also, IDR HC and its parent company are owned primarily by their employees through an employee stock ownership plan, a fact of which we are proud and which contributes to our success. By continuing your employment with IDR HC, you can become a participant in the ESOP too. The terms for participating in the ESOP are contained in the ESOP’s Summary Plan Description and Plan document.

# ADMINISTRATIVE BASICS

Availability of IDR HC Office Staff

The IDR HC office, located in Alpharetta, GA, is open Monday through Friday from the hours of 8:00 AM – 5:00 PM EST. Our local telephone number is (770) 671-0040 ext 7. Outside of normal business hours and in the event of an emergency, please contact us at (770) 241-5525. IDR HC’s on call staff will be available to assist you.

In the event of an emergency, natural disaster or other uncontrollable event, IDR HC will continue to provide service to you through our network from a location where phones and computers are functional. IDR HC 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.

Proof of Identity

In accordance with the Joint Commission, the Company requires that every employee bring certain documents with them on the first day you report to your assignment. The documents required include a valid picture ID issued by a state, federal, or regulatory agency, original nursing license (if applicable), and required credentials for the assignment (as applicable).

Work Related Injuries and/or Exposures

IDR HC provides Workers’ Compensation insurance for its employees as required by law. It is our philosophy that if an employee is injured while at work, we intend to assist that employee to return to work as soon as possible. The employee is obligated to report a work-related injury to IDR HC 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 is reported will determine where a physician will see the employee.

* In the case of an emergency situation, the employee is advised to go to the emergency room. If it is not an emergency situation, IDR HC 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 employee’s return to work.

### Holiday Pay:

IDR HC observes the following Holidays:

* New Year’s Day - 24:00 – 23:59
* Memorial Day - 24:00 – 23:59
* Independence Day - 24:00 – 23:59
* Labor Day - 24:00 – 23:59
* Thanksgiving Day - 24:00 – 23:59
* Christmas Day - 24:00 – 23:59

Holidays are paid at 150% the regular W2 rate. Holiday Pay shall only be paid for hours worked by the Employee. Except where otherwise required by applicable state or local law, Employee will be paid one flat rate of 150% the regular rate for all hours worked on a Holiday including any overtime hours worked that fall on a Holiday. If the Employee begins work or ends work on a non-holiday, the Employee will only be paid the Holiday rate for the hours worked during the Holiday. *Example: If a shift begins on Christmas Eve at 19:00 PM and ends on Christmas Day at 19:00 AM, only the hours worked on Christmas Day shall be paid at the Holiday rate*. If IDR HC’s Client Facility has a more favorable Holiday policy, IDR HC will honor the Client Facility’s policy. *Example: If the Client Facility observes Presidents Day, the Employee will be eligible for Holiday Pay for all hours worked on Presidents Day.*

### Paid Time Off

Effective July 1, 2022, IDR HC has designed a paid time off (“PTO”) plan that incorporates vacation, personal and sick leave into one program. The Employee will accrue 1 hour of PTO for every 30 hours worked and can accrue and use up to 72 hours of PTO in one given calendar year. Unused PTO will roll over to the following year. Unless otherwise required by such law, PTO can be used after 90 days of employment and accrued unused PTO will not be paid out at termination of employment. PTO must be pre-approved in writing by IDR HC or Client Facility.

Employee may use PTO for cancelled shifts by the Client Facility. PTO will be paid out at the confirmed W2 hourly rate defined in the Employee’s Assignment Agreement. Since the payment of per diems is not compensation for hours worked, PTO will not cover per diem expenses. Other than a missed shift caused by a Client Facility’s shift cancellation, per diem shall be reduced as follows:

(a) If Employee was scheduled to work 3 shifts and uses one day of PTO, the weekly per diem payment shall be reduced by one-third. PTO would be paid out at the W2 rate for the missed shift;

(b) If Employee was scheduled to work 4 shifts and uses one day of PTO, the weekly per diem payment shall be reduced by one-fourth. PTO would be paid out at the W2 rate for the missed shift;

(c) If Employee was scheduled to work 5 shifts and uses one day of PTO, the weekly per diem payment shall be reduced by one-fifth. PTO would be paid out at the W2 rate for the missed shift;

(d) In the event no work is performed during any week of an assignment, PTO will be provided at the W2 rate and per diem allotment will not be paid for that week (as Employee’s expenses would not be incurred for the benefit of IDR HC).

### Lunch Break Policy

Employees must 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 that an employee work her lunch period due to patient care and safety, the employee must obtain her supervisor’s written approval on the sign-in sheet in the Facility office.

### Orientation

Facility orientation information or requirements will be provided to employee prior to assignment start by a representative of the Facility.

### Clinical Supervision

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

### Floating Policy

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

The following procedures should be followed for employees who are assigned to an area in which they do not feel competent:

* The employee should immediately notify IDR HC.
* The employee should inform the Facility of his/her professional limitations based upon the Nurse Practice Act standards and client contract specifications as they relate to the assignment.
* The Compliance Manager or Clinical Liaison will work within the bounds of each discipline’s Professional Association or State Governing Body and the client contract to resolve the issue.
* IDR HC will pay the employee for hours worked up until the end of his/her shift.

# ORIENTATION

The Company will provide all new healthcare employees with an orientation to the company’s policies and procedures.  Each healthcare employee will receive a copy of this Healthcare Employee Handbook.

The Company provides a comprehensive and thorough pre-employment orientation and training that reflects current compliance and promotes safe healthcare delivery, including but not limited to:

|  |  |
| --- | --- |
| Abuse and Neglect | Advance Directives |
| Age Specific Competency | Background Screening |
| Bloodborne Pathogen Infection Control Plan | Body Mechanics |
| Clinical Incidents and Sentinel Events | Complaints and Grievances |
| Compliance with Laws/Credentialing | Cultural Competence |
| Earthquakes | Electrical Safety |
| Ethics | Fire Emergency Safety |
| Hand washing and Elimination of Artificial Nails | Harassment Policy |
| Hazardous Materials/Waste | HIPAA |
| Hospital and Office Security and Safety Program | Hospital Emergency Response Plan |
| TJC “Do Not Use” Abbreviations List | Latex Allergy |
| Medical Equipment | MRSA |
| National Patient Safety Goals | OSHA Standards |
| Pain Management and Assessment | Patient Care/Planning |
| Patient Complaints | Patient Responsibilities |
| Patient Rights | Patient Transfers |
| Performance Improvement Plan/Quality | Physical Restraint Devices |
| Preventing Falls | Respirator Mask Fit Testing |
| Standards of Conduct | Substance Abuse |
| Transmission Based Precautions | Universal Precautions |
| Worker’s Compensation/Risk Management | Workplace Violence |

Some Facilities require a 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 staffing coordinator will explain required orientation to all employees prior to scheduling a 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 their specific pre-employment orientation “packets” be completed by the prospective employee 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 Company employee locate and comply with the Facility policy and procedures manual, locate fire pulls, crash cart, medicine 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 Facility staff has properly verified the time.
* Occasionally, a Company employee may show up early as directed for an 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, medicine room, linen cart, and appropriate exits prior to the onset of your shift.

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

# 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 personal and individual interests. It is in the best interest of IDR HC and its employees to avoid conflicts.

IDR HC has developed these guidelines to supplement and reinforce our client Facilities’ existing policies and procedures and to comply with 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 IDR HC's 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 applicable laws, regulations, and judicial decrees.
* No employee may at any time take any action on behalf of IDR HC which violates any law or regulation.
* Information about a healthcare employee’s medical condition and history is required during the hiring process. IDR HC recognizes this information must be held securely and in confidence. It is the policy of IDR HC that this specific information will not to be released to anyone outside of IDR HC unless in compliance with a court order, subpoena, or applicable statute.
* Marketing materials, regardless of medium, shall accurately describe the services, facilities and resources of IDR HC.
* To maintain high standards of performance, IDR HC 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, state, and local laws regarding discrimination.
* IDR HC is committed to maintaining a work place environment in which employees are free from sexual harassment.
* IDR HC 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.
* IDR HC recognizes that its employees 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.
* IDR HC prohibits the use or possession of illegal drugs and alcohol on IDR HC property or while engaged in company activity.
* IDR HC is committed to providing initial and ongoing education for all employees regarding their responsibilities to uphold this code of business ethics.
* IDR HC prohibits employees from discussing Facility bill rates or rates charged by IDR HC to Facilities.
* IDR HC prohibits employees from discussing personal or business affairs of any other employees unless personally involved in such personal or business affairs.
* IDR HC 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.
* IDR HC is committed to protecting its own and its client’s trade secrets, proprietary information and other internal 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 IDR HC 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 of the situation.

IDR HC 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 employee of IDR HC to exercise appropriate judgment and conduct themselves in a manner that reflects the highest standards of professional and personal ethics and behavior.

### EMPLOYEE RESPONSIBILITIES

Each IDR HC employee is and shall be duly licensed to practice his/her profession in any State where the IDR HC employee is assigned and shall maintain current professional standing at all times. Evidence of such licensing shall be submitted to IDR HC prior to commencing an assignment. Each IDR HC employee agrees to give immediate notice to IDR HC 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.

Each IDR HC employee agrees to submit to IDR HC, before commencing any assignment, all requested documentation that is necessary to comply with Joint Commission, client, and IDR HC requirements prior to the assignment start date.

Each IDR HC employee agrees to and shall observe and comply with the applicable policies, procedures, rules and regulations established by client.

Each IDR HC employee agrees to work all scheduled shifts as directed by client (including weekends and holidays).

Each IDR HC 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. Each IDR HC employee agrees to accept both clinical and operational supervision from his/her immediate client supervisor.

Each IDR HC employee agrees that patient records and charts shall at all times remain the property of the client. Each IDR HC 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.

Each IDR HC employee agrees to immediately provide written notice to IDR HC as to any legal proceeding instituted or threatened, or any claim or demand, made against the IDR HC employee or IDR HC with respect to employee’s rendering of services under this Agreement.

For each unscheduled absence, each IDR HC employee agrees to notify client at least two (2) hours prior to beginning a shift and to notify IDR HC within twenty-four (24) hours.

Any injury or illnesses suffered by an IDR HC employee must be reported to an IDR HC 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.

Each employee agrees not to disclose any trade secrets, confidential information, or proprietary information of IDR HC or its employees, clients, or client’s patients. During their employment with IDR HC and for a period of one year thereafter, IDR HC employees agree not to compete either as a direct competitor or with a competing company by performing the same type of services at the same client location as employee performed for IDR HC.

**GENERAL STANDARDS**

The following set of standards are to inform and guide all employee assigned to work in Facilities. The guidelines below include but are not limited to the following:

* IDR HC employees 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 employees are to support IDR HC’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 IDR HC is always presented in the most favorable light.
* The practice of counseling the patient regarding personal problems and/or participation 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 an employee is at a client Facility. Abusive, profane, threatening, or demeaning language, or a violation of HIPPA regulations 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 patients' family members outside of the Facility is unacceptable.
* Socializing with patients and/or patients' family members after discharge from a Facility is prohibited. Employees are not to call, date, or develop personal or social relationships with patients, former patients, or their family members, including providing personal information or phone numbers. Employees should discuss with their manager any matter of concern regarding their contacts with current or former patients or their family members.
* Employees will uphold all rules and regulations related to patient confidentiality. These rules and regulations include but are not limited to the following:
	+ Employees 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 the 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 information of an employee are not to be discussed with any patient or patient family members.
* Employees are not to discuss disagreements with or criticize other patient care providers or physicians in front of patients or their families. 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 IDR HC. Employees shall not solicit, and are encouraged not to accept, gifts or compensation of any kind from any individual as a consequence of their position at IDR HC.
* Any inappropriate interactions of employees within the Facility will be investigated and delt with by appropriate discipline.
* Employees who 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.
* All IDR HC employees will be expected to maintain English proficiency standards and use English exclusively during all paid working hours.
* The client provided name badge must be worn at all times while on assignment, above the waist with name and title fully visible.
* While at a Facility, 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 the first contact of the day, introduce yourself by name and title
		- Tell the patient why you are in the room.
	+ When exiting a patient’s room employees are expected to
		- Inform the patient/family that you are leaving
		- State the time you expect to return
		- Ask if there is anything the patient/family needs before you leave.

## DRESS CODE/FINGERNAIL POLICY

Dress code policy must be followed at all times while on the Facility premises. The IDR HC 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
	+ Miniskirts or shorts
	+ Sweat (warm-up) shirts or pants
	+ Clothing with printed messages, caricatures or pictorial representations (e.g., university logos, beverage cans, and cartoon characters), and applications that have the potential of falling off (e.g. sequins, glitter). Note, business attire that is identified by a small logo (e.g. Polo insignia) does not violate this policy.
	+ Denim jeans (any color).
	+ Spandex tights or leggings.
	+ Fishnet stockings.
	+ Hats (other than nursing caps).

Exceptions to these rules may be made with the written approval of management.

* Jewelry is to be kept at a minimum and must 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.

## CLIENT SERVICE

It is important for all IDR HC employees to promote our culture of excellent service while on assignment at a client Facility. Every time you interact with a client or patient, you are representing IDR HC.

Behaviors of Exceptional Client Service

1. Take pride and joy in creating a positive experience.
2. Smile and be friendly.
	1. Make eye contact
	2. Give a genuine warm greeting, using patient/client representative name when possible
	3. Be positive, talk positively
	4. Respect patients and co-workers
	5. 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!
	1. L- Listen
	2. E- Empathize
	3. A- Ask questions
	4. P- Produce a solution
2. Client perceptions are reality: Deliver service the client 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
	1. S- Sensitive
	2. M- Meaningful
	3. A- Accurate
	4. R- Reinforcing
	5. 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 the person both that she has a call and identify the caller.
* 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 the caller if she would prefer to wait or 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.

## SUBSTANCE ABUSE: DRUGS IN THE WORKPLACE

IDR HC 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 IDR HC employees and clients.

The use, possession, sale or transfer of illegal drugs or alcohol on Company or Facility 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 or Facility 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 1988, other applicable law, and IDR HC policy, 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 may result in immediate termination of employment.

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, an 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

IDR HC 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 IDR HC 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 IDR HC management or IDR HC’s human resources director 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

IDR HC 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.

IDR HC 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 or any intentional use of any object toward an individual.
3. Creating a Hostile Work Environment: Any intentional nonphysical action that is intimidating or harassing with the intent of creating an environment that has the purpose or effect of unreasonably interfering with an individual’s performance.

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 have the potential of impacting the work environment. Employees will remove themselves 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 the situation to management.

**Any violations of these Standards of Conduct will be investigated and may result in Disciplinary action up to and including termination.**

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# COMPLAINT RESOLUTION (STAFF AND CLIENT)

A Client Service Complaint is any complaint and/or concern from one of our valued clients regarding a situation or incident that results in dissatisfaction of that client. An Employee Healthcare Complaint is complaint from one of our healthcare employees regarding a situation which violates the safety of patients or applicable safety rules, such of those of the Joint Commission. The purpose of our complaint policy is:

* To have a positive impact in improving client 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 client dissatisfaction.
* To analyze and trend data to identify opportunities for organizational performance improvement.

IDR HC accepts Client Service Complaints and Employee Healthcare Complaints from our clients and employees. The following guidelines shall be followed in resolving complaints.

* Employee Healthcare 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 a violation.
* An individual seeking to file a complaint needs to contact IDR HC 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 either a Client Service Complaint or an Employee Healthcare Complaint.
* A complaint may be resolved 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 an 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:
* Correction of harm(s) resulting from the violation(s).
* Modification of practices.
* Other actions to eliminate the effects of a violation.

IDR HC’s goal is to always provide the client with a consistent level of service. If for any reason the client is dissatisfied with our service, we encourage the client to contact IDR HC Management to discuss the issue. IDR HC has processes in place (other than those listed above) to resolve client complaints in an effective and efficient manner. If the resolution does not meet the client’s expectations, we encourage the client to call the IDR HC corporate office at (770) 671-0040 ext 7. A corporate representative will work with the client to resolve the concern.

Any individual that has a concern about the quality and safety of patient care delivered by IDR HC health care professionals, which has not been addressed by IDR HC management, is encouraged to contact the Joint Commission at [www.jointcommission.org](http://www.jointcommission.org) or by sending correspondence to the Office of Quality Monitoring at One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181. IDR HC 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, IDR HC’s initial application process and ongoing quality assurance initiatives are designed with the primary goal 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

IDR HC 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

IDR HC performs criminal background checks on all 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 of residency.

In addition, IDR HC verifies that applicants are not included in the Office of Inspector General’s or the Excluded Parties List System 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 certification and any other professional certifications required for the practice of their specialty when specified in the written agreement between IDR HC and its clients. IDR HC conducts primary source verification of professional licenses in all states where IDR HC is employing the provider or offering placement for the provider, with the appropriate licensing bodies to verify issue date, expiration date, and active status of license, to determine if a license has ever been suspended, revoked, or restricted, and to determine if the licensee has been reprimanded, sanctioned or disciplined. Any disciplinary action can be grounds for non-employment with IDR HC and falsification of any documentation will render applicant ineligible for employment with IDR HC.

Verifications will also be performed for all positions that require a specific educational requirement and/or certification. 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. A 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 IDR HC if a license/certification is suspended or revoked.

Reference Checking

IDR HC verifies at least two references from previous employers or from clinical peers that may provide information related to the applicant’s knowledge and applied job skill proficiency or to 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 each employee’s 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 80%. Any applicant not receiving a passing score on their first attempt will be given two additional opportunities to re-take the competency exam and pass. Any applicant who fails to achieve a passing score of at least 80% within the first three attempts is automatically ineligible for employment with IDR HC. In addition, all licensed applicants must complete a Pharmacology examination and receive a passing score of at least 80%. Any applicant not receiving a passing score on their first attempt will be given two additional opportunities to re-take the Pharmacology exam and pass. Any applicant who fails to achieve a passing score of at least 80% within the first three attempts is automatically ineligible for employment with IDR HC.

Health Screening

Applicants will be screened for communicable disease and health impairment that are a potential risk to the patient, caregiver, other employees, or that may interfere with the performance of duties. All applicants will need to provide

* Clearance for Work: The applicant will submit a written clearance for work conducted within the last twelve months prior to hire date. Annual physicals are required thereafter.
* Tuberculosis Test: TB tests need to be conducted within the last twelve months prior to hire date. 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 IDR HC and its clients. Applicants with positive TB results must also complete a TB questionnaire upon hire and annually thereafter.
* Vaccinations: The applicant will submit proof of exposure to or immunization to Rubella, Rubeola, mumps (MMR), Varicella zoster, and TDAP.
* Drug Test: The applicant will submit a drug screen including but not limited to amphetamines, barbiturates, benzodiazepines, cannabinoids, cocaine, meperidine, Methadone, Opiates, Phencyclidine, and Propoxphene.
* Hepatitis B: The applicant must provide proof of vaccination for Hepatitis B or sign a waiver/declination. The Hepatitis B vaccine and vaccination series shall be made available at no cost to all employees. Employees are not required to receive the vaccination if they have previously received the Hepatitis B vaccination series, they have antibody testing which reveals the employee is immune, or 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 may be interviewed by a Company representative or Clinical Liaison. Interviews are designed to determine the 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 IDR HC’s general policies and procedures, as well as specific administrative policies on overtime and scheduling. Orientation by client Facilities may also be provided as specified by the Facilities.

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

* Medication: administration, safety and prevention of errors
* Abuse: Child (Suspected Child Abuse and Neglect), elder and reporting
* Sexual and domestic violence, assault, rape
* Drugs in the workplace, workplace violence
* Safety: electrical, fire, environmental, and safety signals
* Hazardous materials
* Infection control and CDC Hand Guidelines
* OSHA and bloodborne pathogens
* Dress code and fingernail policy
* JCAHO education, National Patient Safety Goals, List of Abbreviations/Do-not-use list
* 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: patient care, transcribing of physician orders
* Conscious Sedation
* Patient safety and education
* Fall prevention

**Maintaining Nursing Personnel Files**

All personnel files are maintained by the human resources department (“HR”). HR monitors relevant requirements and expirations of any requirements. Requirements are kept current through daily alerts of soon-to-expire or expired requirements.

# PERFORMANCE IMPROVEMENT 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 IDR HC’s Recruiters will 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

IDR HC has attempted to implement a continuous, systematic and coordinated approach to measure and assess each Facilities’ feedback on all IDR HC employees being utilized. The following assessments are utilized to ensure employee performance and client satisfaction:

* Employees are assessed by the charge nurse, nurse manager or client designee once during their assignment or at least quarterly. Assessments focus on professionalism, safety, patient care, compliance, assessment, planning and documentation.

Any unsatisfactory scores and methods for improvement will be reviewed and discussed with each nurse. For more information on IDR HC’s Progressive Discipline Program, please see the below Progressive Discipline Program. Notwithstanding anything to the contrary in this handbook, nothing in this handbook modifies the at-will employment of IDR HC employees and the right of IDR HC to terminate an employee at any time for any (or no) reason.

Periodic Assessments

IDR HC conducts annual assessments of all employees. Quarterly performance evaluations are solicited via phone calls to the Facility. Company representatives, the Clinical Liaison, and/or Facility evaluate employee job performance based on the functions and standards as outlines in the job descriptions. The Facility or Clinical Liaison will identify strengths, accomplishments and areas for improvement and development. All Facility 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 Facility 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 Facility 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 current IDR HC healthcare employee will have an annual performance evaluation carried out by IDR HC during the month of December or at the anniversary of their date of hire.
* Traveling employees are eligible for annual evaluations if the employee has worked a minimum of one 13-week assignment during the preceding year and are an active employee at the anniversary of their date of hire.
* IDR HC will attempt to obtain feedback from Facility representatives regarding employee competence and ongoing performance. Unfortunately, some Facilities may not cooperate with IDR HC in this regard, so IDR HC conducts phone solicitation of feedback from Facilities.
* Feedback from our Facilities regarding clinical and/or professional performance is addressed with our employees immediately. Follow-up with Facilities 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 IDR HC.
* When training needs are identified, an opportunity to complete the training will be provided at the earliest possible occasion.
* The Company assesses aspects of an 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.
* The Facility 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 IDR HC employees to ensure that all clinical staff has a current knowledge and practice base. IDR HC 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 IDR HC with copies of your continuing education certificates.

### Disciplinary Action

IDR HC 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 immediate termination:

* Accepting an assignment but failing to report to work.
* Unauthorized possession, use, or removal of property belonging to IDR HC or any Facility.
* Failure to comply with safety rules and regulations, including the failure to wear safety equipment when instructed.
* Reporting to work under the influence of alcohol or illegal drugs, or being in possession of alcohol or illegal drugs on Company or Facility premises.
* Lewd or other unacceptable behavior, possession of weapons or explosives, and provoking, instigating or participating in a physical altercation.
* Violation of Company or Facility policies, including but not limited to the harassment policy.
* Insubordination of any kind (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, personnel records, or claims pertaining to injuries occurring on Company or Facility premises.
* Disclosing confidential information without authorization.
* Disregarding established policies and procedures.
* Excessive cancellations or tardiness.
* Discourtesy to clients or fellow employees.

### Do Not Send/Progressive Discipline Policy

IDR HC is committed to providing a higher standard of service to our clients and to the delivery of safe, quality patient care. As an IDR HC employee, you play a very valuable role in our success in delivering excellent client service and in our ability to achieve Joint Commission Certification. We are implementing a Do Not Send/Progressive Discipline Program.

***When a performance issue arises, IDR HC 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.***

***Point System***

The following point system is used to determine termination.

 1 Point

* Attitude/lack of professionalism/client 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 a 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.

Where employees fail to perform as required or otherwise engage in behavior, which is unproductive or in violation of Company policy, the Company will select, in its discretion, the appropriate disciplinary action based upon the circumstances. Appropriate disciplinary action may include, but is not limited to: coaching, CEU attendance, verbal warnings, written warnings, probation, and termination, in no particular order. Notwithstanding anything to the contrary in this handbook, nothing in this handbook modifies the at-will employment of IDR HC employees and the right of IDR HC to terminate an employee at any time for any (or no) reason.

Please feel free to contact the IDR HC office if you have any questions.

# REPORTING ANY ISSUES

Assignment Issues

Issues may arise while an employee is on assignment for IDR HC As a representative of IDR HC 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 Facility 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 IDR HC for mediation
3. Complete an incident report at the Facility (if required)
4. Complete an incident report at IDR HC (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 IDR HC immediately of exposure

IDR HC shall make immediately available a confidential medical evaluation and follow-up with 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.

IDR HC’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 report promptly 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 and unusual or sentinel events. All such events should always be reported immediately to your charge nurse, nursing supervisor, IDR HC’s management and 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. Employees should notify IDR HC 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 development of a patient from an around-the-clock care related setting resulting in death (suicide, accidental death, or homicide) or in a temporary 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 some sponge or forceps that was left in a patient after surgery.

Joint Commission’s Sentinel Event Policy

The Joint Commission has defined the goals for a sentinel event policy:

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