



PROTOCOLL[™]

“Caring With a Smile”

HEALTHCARE STAFFING SERVICES Orientation Manual

WELCOME,

You have joined one of the areas most innovative and fastest growing companies.

Protocall takes pride in both the service we provide and the people we hire. This Orientation Manual was created to help you learn more about Protocall and its related corporations, Flex-Nurses, Inc., Protocall-NJ, Inc., Protocall Inc., and FAZ-90, Inc. (hereinafter “Protocall”) and the clients we serve.

As part of our company, the quality of service you deliver is as important as your attitude. All our employees practice sound initiative, judgment and sensitivity when working with our clients and co-workers.

We believe that each employee contributes directly to Protocall’s growth and success. We are confident you will take pride in being a member of our team. Your experience here will be challenging, diversified and rewarding.

Protocall provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, gender, sexual orientation, national origin, age, disability, marital status, amnesty, or status as a covered veteran in accordance with applicable federal, state and local laws. Protocall complies with applicable state and local laws governing non-discrimination in employment in every location in which the company has facilities. This policy applies to all terms and conditions of employment, including, but not limited to, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training.

Protocall expressly prohibits any form of unlawful employee harassment based on race, color, religion, gender, sexual orientation, gender identity, national origin, age, disability, or veteran status. Improper interference with the ability to Protocall's employees to perform their expected job duties is absolutely not tolerated.

Assignments are as varied as the clients we serve. They can be for a single day, a week or for months at a time. If we call for an assignment, you are free to accept it or not. Just keep in mind that last-minute cancellations inconvenience both the client and us. If you accept an assignment, make sure you get all the facts you need to report promptly.

You are a very important part of our organization. The quality of service you deliver when working for this organization is important to our image. Equally important are attitude, punctuality and attendance. The better the performance of our employees, the more jobs there will be available to them. Violation of any standards and procedures may result in termination of employment.

HISTORY AND VISION

For over forty years, Protocall has been helping companies solve their staffing needs. Protocall has worked with organizations of all sizes, providing them with productive and efficient temporary personnel.

Protocall currently has seven offices throughout Southern New Jersey and in Philadelphia, Pennsylvania. These offices provide healthcare personnel for home healthcare and healthcare facilities as well as temporary personnel for all office/clerical, light industrial positions. Protocall is one of the largest Temporary Personnel Services in the Delaware Valley area.

Protocall markets personnel to business, industry, government and healthcare facilities as well as to individuals at home. Protocall complies with The Joint Commission Accreditation of Health Care Organizations standards. Ensuring consistent operating policies and procedures is critical to the clients we serve.

Below is a summary of the type of healthcare personnel we hire:

Medical Administrative: Administrative Assistants, Front Desk Receptionists, Medical Billers, Medical Records Clerks and Unit Clerks.

Clinical: Registered Nurses, Licensed Practical Nurses, Certified Home Health Aides, Companions, Nursing Assistants, Respiratory Therapists and a variety of Allied Health Professionals.

Keeping both employee and client happy is our goal. We must be aware of the needs of our clients so that they are fully satisfied with every assignment for which we are responsible. Our growth is evidence that we do this well. We have retained clients who have been with us from the very inception of our business. The longevity of the temporary personnel we employ presently is another example of the confidence and loyalty that has remained consistent for more than three decades.

GENERAL INFORMATION

This Orientation Manual is intended to provide employees with a general understanding of our personnel policies and procedures. Employees are encouraged to reference the contents of this Manual, for it will answer many common questions concerning employment. This Manual cannot anticipate every situation or answer every question about employment however addresses key job expectations. Please contact your supervisor at Protocall if you are ever unsure of how to handle a situation or need to seek clarification about a policy or procedure.

In order to retain necessary flexibility in the administration of policies and procedures, Protocall reserves the right to change, revise or eliminate any of the policies and/or benefits described in this Manual.

Protocall Healthcare Branch Office Locations and Telephone Numbers:

1 Mall Drive - Suite 105
Cherry Hill, NJ 08002
Telephone Number: (856) 227-1900 or (215) 592-7400
Fax Number: (856) 227-1907 or (215) 592-0393

The Bourse Building
111 South Independence Mall East - Suite 640
Philadelphia, PA 19106
Telephone Number: (215) 592-7400
Fax Number: (215) 627-1475

50-51 Central Square
Linwood, NJ 08221
Telephone Number: (609) 601-1372
Fax Number: (609) 926-9563

2801 West Chester Pike - Suite 200
Broomall, PA 19008
Telephone Number: (610) 356-4340
Fax Number: (610) 356-4393

Branch Office Hours

The branch offices are open Monday through Friday from; 7:30am to 5:30pm. After 5:30pm the offices are staffed by On-Call Personnel. During those hours, On-Call staff will respond to call outs, address interruptions of service and or emergency situations. Any questions relating to payroll, etc., must be addressed during normal business hours. Additionally, a Clinical Case Supervisor will respond to any homecare client issues that require immediate attention.

An On-Call staffing coordinator may be contacted by calling the Protocall office telephone number. If your call is directed to a voice mail, leave a detailed message and a return telephone number. If you do not receive a return call within fifteen (15) minutes of leaving a message, call the office telephone number again. Please do not assume your message was received until you receive a return telephone call.

Employee Relations

Protocall believes that the work conditions, wages and benefits it offers to its employees are competitive with those offered by other employers in this area and in this industry. If employees have concerns about work conditions or compensation, they are strongly encouraged to voice these concerns openly and directly to their supervisors.

Our experience has shown that when employees deal openly and directly with supervisors, the work environment can be excellent, communications can be clear and attitudes can be positive. We believe that Protocall amply demonstrates its commitment to employees by responding effectively to employee concerns.

Business Ethics and Conduct

The successful business operation and reputation of Protocall is built upon the principles of fair dealing and ethical conduct of our employees. Our reputation for integrity and excellence requires careful observance of the spirit and letter of all applicable laws and regulations, as well as a scrupulous regard for the highest standards of conduct and personal integrity.

The continued success of Protocall is dependent upon our customers' trust and we are dedicated to preserving that trust. Employees owe a duty to Protocall, and its customers, to act in a way that will merit the continued trust and confidence.

Protocall will comply with all applicable laws and regulations and expects its directors, officers and employees to conduct business in accordance with the letter, spirit and intent of all relevant laws and to refrain from any illegal, dishonest or unethical conduct.

In general, the use of good judgment, based on high ethical principles, will guide you with respect to lines of acceptable conduct. The attitude and commitment demonstrated while working on any temporary assignment should be regarded no differently than full time employment. Displaying this type of professional conduct will afford you continued employment and greater personal satisfaction.

Explanation of Compensation & Payroll Process

Protocall compensates employees on an hourly basis for work performed in compliance with wage and hour regulations. The pay rate is based on the following: previous work experience; length of employment; and job duties.

It is necessary to document all hours worked on a time ticket. Your time ticket is your “bill” for hours you work. A separate time ticket must be completed for each client on a weekly basis. Safeguard it. It is the most important document you will use as an employee. Make sure that all entries are accurate and authorized by the client. An unauthorized time ticket will delay payment until authorization is obtained. It is against the law to forge another individual’s signature and or change hours authorized. Therefore, anyone found in violation will be subject to employment termination and legal action.

The payroll period begins each Monday and concludes with Night Shift on Sunday. The payment of wages shall be weekly and is based on hours worked within the previous week. Time tickets must be sent to the office weekly for all hours worked, payroll deadline is every Monday at 12:00PM Noon for receipt of hours worked from the previous week.

When assigned to a homecare case, all nursing and/or activity notes must accompany the completed time ticket. The office must have all original nursing and/or activity notes. Failure to submit original documentation may result in paycheck being held. As a reminder, meal breaks are required when duration of assignment is six (6) hours or more and is unpaid. Please document on your time ticket accordingly.

You may mail, drop off and/or fax time tickets directly to the branch office. Please call to confirm receipt when faxing.

Post Employment Health Screening Requirements

Upon job offer, employee must submit the following documentation prior to placement:

- Proof of a physical exam that has been performed within the past twelve (12) months of hire date.
- Baseline PPD (Mantoux) skin test and or Chest X-Ray. For employees who have not had a documented negative PPD test result during the preceding twelve (12) months, the baseline PPD testing will be done by the two-step method.
- Proof of immunity to Rubella and Rubeola. If results of titers reveal non-immunity status, employee must submit proof of immunization.

Every year thereafter, PPD testing must be repeated annually. Your health records will be secure and protected in compliance with Federal/Regulatory guidelines.

Hepatitis B Vaccination Information

The Hepatitis B Vaccine is recommended to healthcare employees who provide direct patient care who are considered at risk for exposure to blood or body fluids of a patient. The employee will be required to complete a Physical Exam Report that indicates his/her intent to complete the Hepatitis B Vaccine series. The vaccine is given in three (3) stages. Details will be provided by your Physician. The vaccine is voluntary and will be offered free of charge. If the employee refuses the vaccine, he/she may request vaccination at a later date while still employed. An employee who has previously received the Hepatitis B Vaccine series will be required to submit evidence of vaccination.

Attendance and Punctuality

To maintain a productive work environment, Protocall expects employees to be reliable and to be punctual in reporting for scheduled work. Absenteeism and tardiness place a burden on the clients we serve, its employees and on Protocall. In the rare instances when employees cannot avoid being late to work or are unable to work as scheduled, notify Protocall prior to the start of the scheduled workday. If you choose to contact the client due to lateness and or callouts you are still obligated to call Protocall. Protocall maintains ultimate responsibility to serve its clients. Excessive lateness or call-outs will result in termination.

Disciplinary Model

The best disciplinary measure is the one that does not have to be enforced and comes from good leadership, adherence to policies and fair supervision at all employment levels. It is our goal to address and resolve performance issues in a manner that is mutually beneficial. While it is impossible to list every type of behavior that may be deemed a serious offense, this manual includes examples of incidents that may result in warning or termination of employment.

JOB PERFORMANCE EXPECTATIONS

1. Contact the branch on a weekly basis to report availability, verify work schedule or request work assignments. Failure to contact the Branch weekly will be considered a voluntary quit.
2. Contact Protocall whenever there is a change in working hours and/or the duration of the work assignment.
3. Hours submitted by staff members must coincide with the service request unless previously arranged in order for time ticket to be processed.
4. Accept work assignments only if there is certainty that the dates, hours and duration of the assignments can be fulfilled.
5. Advance notice is required if you are unable to report to work due to an unforeseen event such as illness, injury or emergency situations. At a minimum, four (4) hours notice is considered acceptable. You must speak directly to On-Call personnel when canceling after hours.
6. Be on time for scheduled work assignments. If an emergency or any situation should arise causing you to be more than ten (10) minutes late, you must notify Protocall immediately. Do not contact the client directly. Failure to notify Protocall may result in termination.
7. On the first day of a new work assignment, report for work early to allow for orientation/training to job duties. You are expected to arrive on time for all assignments that you have accepted; however if an emergency or any situation should arise causing you to be ten (10) minutes or more late or totally absent from the assignment, you must notify Protocall immediately. NO CALL/NO SHOW failure to notify Protocall that you CANNOT report to work after being scheduled to work will result in termination. Eight (8) hours of cancellation must be given at all times.
8. Never walk off an assignment. Contact your Staffing Supervisor immediately regarding the circumstances surrounding the issue/incident and he/she will facilitate a resolution. If you are dissatisfied with the resolution, the Branch Manger will intervene.
9. Staff members must represent Protocall to the client in a professional manner.
10. Client satisfaction will be elicited regarding performance of assigned personnel. Protocall will aid and assist you to improve performance.

11. Fulfill the job requirements according to the job description, duties and essential job functions. If you are unable to perform the assigned job duties and or job duties are drastically different than described, contact the Staffing Supervisor immediately.
12. The use of client's office equipment such as computers cannot be for personal use.
13. Adhere to the following professional business attire standards in dress and appearance:
 - ◆ Maintain personal hygiene, appearance of dress shall be neat and conservative
 - ◆ Casual clothes; e.g., T-Shirts, jeans, etc., is not considered business attire.
 - ◆ Uniform must be cleaned and pressed.
 - ◆ For Women: Wear skirt hemlines at knees length; pant hemlines at ankle length; comfortable enclosed toe and heel shoes; stockings or socks must be worn.
 - ◆ For Men: Wear pant hemlines at ankle length; comfortable enclosed toe and heel shoes, suit and/or sport jacket and shirt and tie should be worn when working in an office setting.
 - ◆ Wear your personal Protocall identification badge while working on assignment.
 - ◆ Fingernails must be clean; nail length must be conservative (if nails are sculptured, there can be potential for injury and infection).
 - ◆ Protective gloves must be worn when providing direct patient care.
 - ◆ Wear jewelry sparingly; for example, a ring and small earrings (long dangling earrings are prohibited since they can cause injury).
 - ◆ Hairstyle and color must be conservative.
14. All information about Protocall's corporate customers and individual clients must be kept strictly confidential. You are prohibited, both during your employment by Protocall and for a period of six (6) months after termination of your employment from Protocall, from seeking or accepting employment from any Protocall customer to whom you have been assigned. You are prohibited from working directly for a Protocall client or indirectly by working through another staffing company that services Protocall's client for a period of six (6) months. In some cases, a client has an agreement with Protocall to hire you directly in a period of time less than six (6) months. If a client does approach you regarding employment, please contact Protocall immediately.
15. If an employee decides to voluntarily terminate employment while working on an assignment, you are required to give a minimum of one (1) week notice. The notice allows time for Protocall to locate and assign replacement personnel.
16. Do not use slang or foul language.

17. Do not accept gifts or money from clients, employees etc...
18. Maintain a calm and reassuring attitude in crisis situations.
19. Be tactful in manners and attitudes when dealing with clients and other persons.
20. Do not take family members and or friends to work.
21. Do not use client's telephone or remove client property for personal use.
22. Safety in the workplace is a primary concern. Always perform assigned tasks in a safe and proper manner. *(See Safety Bingo for additional incentives)* If you sustain a work related injury, you must immediately notify the client and the Staffing Supervisor. *(See Work Related Injury Procedure)*
23. Protocall has a "NO DRUG POLICY". The use of drugs and/or alcohol in the workplace is prohibited. Your signature below serves as consent to submit to drug testing upon request. Failure to comply with this policy is grounds for immediate termination.
24. Smoking is prohibited in client's home and client facilities.
25. Do not witness signatures on any papers or legal documents.
26. Do not violate client confidentiality.
27. Conduct yourself in a friendly, cooperative and professional manner with everyone.
28. Ask for clarification when job duties are not understood.
29. Do not discuss salary or payroll issues with clients or staff members. Address questions and concerns to Protocall directly.
30. Turn off cell phones during working hours. An appropriate time to make a telephone call and/or check messages is during a break period.
31. Health care staff members must keep professional licenses updated. Proof of current license must be sent to Personnel Department prior to expiration.
32. Advise the Personnel Department of any changes regarding your personal status, such as home address, telephone number and number of exemptions, job title and/or additional job skills.
33. Sleeping while on duty will result in termination. Any medications you are taking which may cause drowsiness should be avoided while working.

34. In the event you are unable to perform the essential job functions outlined in the job description for any reason, you will be required to notify a Protocall Staffing Supervisor immediately. A physician note will be required prior to future job offers and/or reassignment of job duties.
35. A physician note is required when an employee calls out from work due to an injury sustained outside of the work place.
36. Altering the client office appearance and/or workspace is not acceptable; this includes changing computer screen savers, displaying personal photographs, etc.

SEXUAL AND OTHER UNLAWFUL HARASSMENT

PROTOCOL is committed to providing a work environment that is free of discrimination and unlawful harassment. Actions, words, jokes, or comments based on an individual's sex, race, ethnicity, age, religion, or any other legally protected characteristic will not be tolerated. As an example, sexual harassment (both overt and subtle) is a form of employee misconduct that is demeaning to another person, undermines the integrity of the employment relationship, and is strictly prohibited.

Any employee who wants to report an incident of sexual or other unlawful harassment should promptly report the matter to his or her Staffing Supervisor. If the Supervisor is unavailable or the employee believes it would be inappropriate to contact that person, the employee should immediately contact the Branch Manager. Employees can raise concerns and make reports without fear of reprisal.

Anyone engaging in sexual or other unlawful harassment will be subject to disciplinary action, up to and including termination of employment.

AUTHORIZATION TO LEAVE MESSAGES

Since our main form of contact with our employees is the telephone, we sometimes find it necessary to leave detailed messages on answering machines when we are unable to speak directly with you. Typical messages we would leave would include information regarding an assignment. If you prefer that we do not leave detailed messages on any message machines, please notify us in writing.

CLIENT CARE

1. Staff members must function within practice standards set forth by the board of licensure and the client facility. Seek clarification of policy/procedure to client facility's Department Manager or Supervisor where applicable.
2. Communicate to Department Manager or Supervisor any changes in client condition/changes in a timely manner.
3. Do not get involved with clients' family conflicts. Remember that your job is to provide patient care to the client, which does not include "getting involved" with family problems.
4. Do not accept personal gifts from clients or client family members. If a client or family absolutely insists that the gift be taken, inform staffing coordinator of the same so that documentation can be placed in your personnel file. This action shall protect you in the event there is a question as to why you are in possession of the item.
5. Do not transport a client in their automobile unless previously authorized. Transporting a client in your vehicle is prohibited.
6. Unlicensed staff members are prohibited from receiving physician orders.
7. Report suspected abuse and/or harassment or neglect immediately to the Department Manager or Supervisor.
8. Give a verbal and written report of client incident/accidents (e.g., client falls, client missing personal item, medication error) to the Department Manager or Supervisor immediately.
9. Registered Nurses and Licensed Practical Nurses should have the following equipment when assigned to a homecare client:
 - Stethoscope
 - Blood Pressure Cuff
 - Thermometer
10. Documentation on homecare client chart, activity notes must be completed with a black pen. Any changes must be noted with a line through the change and initialed.

One-to-One Hospital Services

Hospitals will request On-to-One service when patients pose a threat and/or danger to his/her self. The following conditions are generally the cause for services: suicide watch, wanderer, disoriented, confused, combative, etc. The role of the aide is to ensure the safety of the patient as directed by the primary nurse.

1. Upon arrival, identify the primary nurse to obtain care plan requirements.
2. Check the patient's room/bathroom for safety precautions. Look for items that may be used to harm self or others, such as razor, knife, and medication.
3. You must stay with the patient at all times. Never leave patient unattended.
4. Do not leave the room for breaks unless staff relief is assigned.
5. Alert the primary nurse if visitors bring gifts/items to the patient.
6. Accompany patients when transported for tests/procedures.
7. Remain in the room while patient is bathing/showering, receiving visitors etc.
8. The primary nurse must give permission for patient to shave, shower or toilet independently.
9. Use the call button if an emergency arises. Do not leave the patient alone.

Overview of Homecare Services

Prior to the start of care, individuals requesting homecare services will meet Protocall's Clinical Supervisor. The purpose of the visit is to determine the medical status of the client and level of care required to establish a treatment plan. The Clinical Supervisor will orient, oversee and monitor the care Protocall's field staff is expected to deliver. It is the field staff's responsibility to maintain ongoing communication with the Clinical Supervisor regarding the condition of the homecare client.

The following homecare client conditions should be reported to the Clinical Supervisor:

- ◆ Pain or discomfort; especially chest, neck, arm, jaw and back
- ◆ Nausea or vomiting
- ◆ Dizziness or faintness
- ◆ Shortness of breath or pain when breathing
- ◆ Change in alertness or response
- ◆ Pain or bleeding at IV spot
- ◆ Temperature >38 degrees
- ◆ Pulse <60 or >110/min.
- ◆ B/P – systolic <90 or >150 diastolic <50 or >90
- ◆ Patient fall or other injury
- ◆ Frequency or burning while urinating
- ◆ Foul smell, discolored urine
- ◆ Diarrhea or constipation
- ◆ Chills or diaphoretic
- ◆ Dressing not intact

Private Duty Services

During a hospital stay, patients can request private duty services during his/her recuperation. In these instances, the patient assumes financial responsibility for the services. The primary function of the caregiver is to provide companionship and assist patient with personal care. Prior to arrival to the assignment, verify reporting instructions. You may be directed to report to the hospital staffing office and or the nurses' station prior to entering the patient's room.

EMPLOYEE BONUS PROGRAM

REFERRAL BONUS

An employee that refers a person who is hired by Protocall is eligible for a referral bonus. The applicant must indicate the referral source at time of interview. When your referral has worked the required hours below within a four week period you will be eligible for the following bonuses outlined.

<u>Healthcare Personnel</u>	<u>40 hours</u>	<u>60 hours</u>	<u>80 hours</u>
Registered Nurse	100.00	150.00	200.00
Licensed Practical Nurse	75.00	100.00	125.00
Technician, Medical Assistant	75.00	100.00	125.00
Certified Nursing Assistant, Certified Home Health Aide	50.00	75.00	100.00

Medical Administrative Personnel

Medical Secretary, Admin Assistant, Billing Clerk, Medical Records Clerk, Receptionist	50.00	75.00	100.00
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CLIENT REFERRAL BONUS

When a new client is serviced as a result of an employee referral recommendation, employee may be eligible for a referral bonus. When client billing reaches one hundred (100) service hours, employee will receive \$100.00.

SAFETY BINGO

Safety Bingo is a program Protocall has implemented to acknowledge and reward our employees for practicing workplace safety.

The program is designed to incentive employees to work injury free and raise the awareness of practicing safety in the workplace. For every workweek the branch office is injury free, a "Bingo Number" will be called and the dollar value of the "Bingo Pot" will increase. In the event an employee is injured on the job the game will terminate immediately. The game will resume when employee returns to work.

A new bingo number will be picked each week and distributed to the employees in the form of a payroll stuffer. Once the employee has bingo, they must notify the office immediately. See the Branch Staffing Supervisor for current details regarding Jack Pot \$\$\$.

***NOTE: Eligible Employees must be compliant and working at time of notification to receive bonuses outlined above.**

PLEASE NOTE:

- ◆ These bonuses supersede all prior notices. All or any of the above may be amended or rescinded by Protocall without notice.
- ◆ To be eligible for the bonuses, you must be employed by Protocall at the time of submission.
- ◆ Payroll Plan employees are NOT eligible. (i.e. Employees hired by our clients and paychecks processed by Protocall.)

SAFETY BINGO FOR EMPLOYEES

RULES & REGULATIONS - INDUSTRIAL & OFFICE STAFFING

BINGO CARDS

1. Before a game begins, each employee will be provided a **Bingo Card**. You may only use the card that you have been given for that particular game. New cards are handed out before the start of every game.
2. Each card has its own identification number which has been recorded with your name. Therefore, you may only win using the specific card that you were given for that game.
3. If a card is lost or stolen, it will NOT be replaced. You must keep your card in a safe place.
4. When your card has a **BINGO**, you must turn it in for verification in order to win the jackpot. All of the numbers on a winning card must be readable.

GAME PLAY

1. At the beginning of a game and each week thereafter, the **Program Administrator** will bring out the **Bingo Bag** to draw one **Bingo Ball**. The number on the ball picked is then written on the **Master Game Log** and e-mailed to the Program Supervisor and Game Chairperson.
2. The starting jackpot for the first game is \$50.00. For each work week that goes by without a winner, the jackpot increases an additional \$25.00, up to a maximum jackpot of \$500.00
3. A **BINGO** occurs whenever an employee's card has five numbers in a row, either vertically, horizontally, or diagonally. When you have a **BINGO**, immediately notify the **Program Supervisor** in your office. Protocall must be notified by Wednesday at 3:00 PM if you have **BINGO**. Should you not notify the **Program Supervisor** by Friday at 3:00 PM, a new **BINGO** number will then be pulled. In this instance, your late reporting of **BINGO** may result in the sharing of the **BINGO** jackpot with another **BINGO** winner.
4. Once an employee's winning card is verified and announced, **Jackpot** money will be paid shortly thereafter. In case there is more than one winner, the **Jackpot** will be split equally.
5. Once a winner is confirmed and announced, a new game will begin. The previous game's final **Jackpot** becomes the new game's starting **Jackpot**.

SAFETY VIOLATIONS

1. Whenever a supervisor sees you violating any of the Company's safety policies/regulations or rules of common sense, you will be given a **Safety Violation** warning notice.
2. Should you receive a **Safety Violation**, your **Bingo Card** (and **Bonus Card**, if applicable) will be immediately revoked and you will not be allowed further participation until the next game. Serious or repeat violations may have more severe consequence.

3. If you believe there is a reasonable explanation regarding the actions for which you were cited, speak with either the **Game Chairman** or the **Program Supervisor** and the violation will be reviewed.

BONUS CARDS

1. By submitting **Employee Suggestion** forms with safety recommendations during any game, you become eligible for additional **Bonus Bingo Cards** for use in the next game. Each suggestion makes you eligible for one **Bonus Bingo Card**. However, a maximum of three additional **Bonus Bingo Cards** will be allowed per game.

2. At the conclusion of each game, all **Employee Suggestions** that have been submitted during the game are reviewed. **Bonus Cards** for use in the next game are then awarded to those employees whose safety suggestions are considered of significant value.

3. Of those employees who are awarded **Bonus Bingo Cards**, the individuals who have made the best three safety suggestions are also eligible for bonus dollars during the next game. Regardless of what the **Jackpot** is, should one of them get a **BINGO**, that person will win both the **Jackpot** plus one of the following amounts:

1 st Place Suggestion:	\$100.00
2 nd Place Suggestion:	\$ 75.00
3 rd Place Suggestion:	\$ 50.00

In addition, these individuals will be recognized for their contribution by having their names written on the **Master Game Log** along with the bonus money for which they have become eligible.

NOTE: To be eligible to the BINGO number pulled, you must have worked the previous week(s) and be currently working.

IMPORTANT!! *If any temporary employee sustains a lost-time injury in your own branch office (requiring him/her to be away from their current assignment for more than one full workday), the current game's jackpot is automatically reduced to \$50.00. Furthermore, the employee with such an injury becomes ineligible for further game participation. Upon that employee's return to work, he/she may rejoin game play only at the start of a new game. Winning dollars may be taxable.*

Time Tickets Procedure

How to fill out your time ticket

Your time ticket is your “bill” for the hours you work. Safeguard it – it is the most important document you will use as a Protocall employee. And, to be sure of being paid properly and on time, make sure that all entries are accurate and verified by your assignment supervisor. The completed ticket must be turned in by the designated branch deadline following the week you work, in order to be paid Friday. Please read the reverse side of this form for further instructions.

PROTOCOLL™				BRANCH #		WEEK ENDING (SUNDAY)		Employee SS#:	
TIME TICKET						① / /		③	
						Employee Name - Print		Employee Signature	
						②		⑪	
DAY	DATE MO/DAY/YR	START TIME	LUNCH IN OUT	END TIME	TOTAL HOURS FINISHED	AUTHORIZED CLIENT SIGNATURE	Assignment will continue? yes / no (circle)		
MON	④	⑤	⑥ ⑦	⑧	⑨		ACCOUNTING USE ONLY CLIENT CODE:		
TUE									
WED									
THUR									
FRI									
SAT									
SUN									
					⑩	Total Time Worked for Week			
Company Name: ⑫ _____ Dept.: _____ Address: ⑬ _____ City/State/Zip: _____									
Authorized Client Name/Title - Printed: ⑭ _____					Cost Center # _____		Your signature on this time ticket constitutes verification of hours worked by the employee and authorization to be billed accordingly. In addition, client signature agrees to and understands the Terms and Conditions listed on the reverse side of Client Copy.		
Authorized Client Signature: ⑮ _____					Overtime Authorization Initial: _____				
Company Name: _____									
Dept.: _____									

1. Print the week ending date. All weeks end on a Sunday.
2. Print your first and last name.
3. Print your Social Security Number.
4. Indicate all dates you worked that week.
5. Indicate the exact time you started work each day.
6. Indicate the exact time you left for each meal period.
7. Indicate the exact time you arrived back from each meal period.
8. Indicate the exact time you finished work for each day.
9. Indicate the total hours worked each day (meal periods must be deducted).
10. Add up your total hours worked for that week.
11. Your signature goes here.
12. Fill in the name of the Client.
13. Fill in the address of the Client.
14. Ensure the Client/Supervisor prints their name.
15. Be sure to obtain the signature of the Client/Supervisor.

Protocall Time Ticket Fax# 856-227-1907 or 215-590-0393

- Your completed time ticket must be received before Monday at 12 noon.
- Please verify with your Protocall branch office as to what time paychecks will be available for pick up. You must show proper identification in order to receive your paycheck.
- Checks will be mailed to employees on Friday at 6:00 PM. Protocall will only mail checks that have not been picked up.
- If you designate someone to pick up your check, they **MUST** present the following:
 - Proper identification
 - Signed permission note from you with your name, social security number, their name and their social security number.

NOTE: NO NOTE AND IDENTIFICATION – NO CHECK!!!

- If you must phone in a request for another individual to pick up your paycheck, the individual picking up your paycheck must show proper identification. If for any reason we feel the identification to be insufficient, Protocall may decline another individual from picking up your paycheck. This is in your best interest and for your protection.

PAYCHECK PROCEDURE: How to Obtain Your Paycheck

DEADLINE

Your completed time ticket must be mailed, dropped off or faxed to the Protocall office by the deadline, which is Monday at 12:00 Noon.

CHECK – CARD PICK-UP

Please verify with your Protocall Branch Office as to what time paychecks will be available for pick-up. You **MUST** show proper identification in order to receive your paycheck.

CHECK-CARDS MAILED

Checks will be mailed to employees on Friday at 5:00 PM. Protocall will only mail checks that have not been picked-up.

OTHERS PICKING UP YOUR CHECK-CARD

If you designate someone to pick up your check, they **MUST** present:

1. Proper identification.
2. A note with your permission, your name and social security number, their name and social security number. This permission note must be signed by you.

NOTE: NO NOTE AND IDENTIFICATION...NO CHECK!

If you must phone in a request for another individual to pick up your paycheck, the individual picking up your paycheck must show proper identification. If for any reason we feel the identification to be insufficient, Protocall may decline another individual from picking up your paycheck. This is in your best interest and for your protection.

WORK RELATED INJURY PROCEDURE

Protocall will investigate all employee injuries that are reported. Both an office representative and the injured employee will complete a written injury report. In the event an employee requires medical treatment, an approved provider will be selected. A written authorization to receive treatment and/or refusal of same will be required.

1. If you sustain an injury while working you must immediately notify this office and the Client.
2. If the injury requires medical treatment, you must seek treatment within twenty-four (24) hours of injury from the panel approved providers enclosed. Transportation may be provided if necessary.
3. If the injury is considered an emergency, employee should seek treatment at the closest hospital emergency room.
4. If you are restricted to return to work you must notify this office immediately and provide a doctor's note from the authorized treating physician stating the length of time you will be out of work.
5. If the physician releases you for Light Duty (modified duty), work may be offered. You must notify this office within twenty-four (24) hours of release. Failure to contact the office for Light Duty will be considered a refusal of work.
6. To ensure payment for medical treatment rendered by panel of approved providers, direct medical bills to this office.
7. Maintain ongoing communication with the staffing supervisor, as directed, regarding the status of work return release.
8. All claims will be subject to an insurance investigation. If a claim is found to be fraudulent, individuals will be subject to legal action.

PROTOCOL WORK-RELATED INJURY PROCEDURE FOR NEW JERSEY EMPLOYEES

I understand that this staffing company takes their responsibility as my employer very seriously, and that they have gone to great length to provide a safe work environment. If I am injured on the job, this staffing company will deal promptly with legitimate claims and has workers' compensation insurance. I also understand that this staffing company has extensive experience investigating claims and will fight fraudulent claims with all available resources. Workplace injuries will be subject to a post-injury drug test.

1. *If you sustain a work-related injury, you must immediately notify the client at the facility you are working, and your supervisor at this company.*
2. *If you need medical treatment, you must see an authorized treating physician (see below) within twenty-four (24) hours from the time the incident occurred.*
3. *If you are going to miss work due to a work-related injury, you must notify this office immediately, and you must have a doctor's note from the authorized treating physician stating the length of time you will be out of work. Light duty (modified duty) work may be available. You must notify this office immediately (within 24 hours) if the physician releases you for light duty work. Failure to contact the Protocall office for light duty work will be considered a refusal of work.*
4. *Tell the authorized treating physician that you want your medical bills and reports released to this office.*
5. *Thereafter, keep this company informed of the time you will be missing from work and your condition on a daily basis, unless otherwise instructed by the Protocall supervisor.*
6. *Any questions regarding injuries should be directed to your Protocall supervisor.*

IN ORDER TO ENSURE THAT YOUR MEDICAL TREATMENT WILL BE PAID FOR, YOU MUST SELECT FROM THE PANEL OF PHYSICIANS BELOW (OTHER PHYSICIAN LOCATIONS ARE AVAILABLE. PLEASE CONTACT US FOR FURTHER INFORMATION). ALL CLAIMS ARE INVESTIGATED THOROUGHLY. MEDICAL TREATMENT FOR EMERGENCIES, WHEN THE BELOW OFFICES ARE CLOSED, SHOULD BE DIRECTED TO THE NEAREST EMERGENCY ROOM.

NEW JERSEY PHYSICIANS

AMERICAN WORK CARE	1125 N. Delsea Drive, Glassboro, NJ 08028	856-218-7600
ATLANTICARE	2500 English Creek Ave. – Bldg. 900, Suite 908 Egg Harbor Twp., NJ 08234	609-677-7200
CONCENTRA	210 Benigno Blvd., Bellmawr, NJ 08031	856-931-0691
CONCENTRA	7204 N. Park Drive, Pennsauken, NJ 08109	856-663-7690
PREMIER ORTHOPAEDIC ASSOCIATION	298 S. Delsea Drive, Vineland, NJ 08360	856-690-1616
RIVERFRONT ORTHOPAEDIC ASSOC.	510 Heron Drive, Suite 108, Bridgeport, NJ 08014	856-467-8550
US HEALTHWORKS	1085 Cranbury South River Rd., Jamesburg, NJ 08831	609-409-1900
VIRTUA HEALTH	895 Rancocas Road, Suite 1, Westampton, NJ 08060	609-914-8610
VIRTUA HEALTH – William G. Rohrer	2309 Evesham Road, Suite 104, Voorhees, NJ 08043	856-325-5410
VIRTUA HEALTH – Kyle Will Family Health	1000 Atlantic Avenue, Camden, NJ 08104	856-246-3542
VIRTUA AT WORK	239 Hurffville-Crosskeys Road – Suite 160 Sewell, NJ 08060	856-341-8200
WORKNET OCCUPATIONAL MEDICINE	WORKNET @ Cooper University Hospital 300 S. Broadway & Benson Sts., Suite 101 Camden, NJ 08103	856-338-9136
WORKNET OCCUPATIONAL MEDICINE	9370 Rt. 130 North, Suite 200, Pennsauken, NJ 08110	856-662-0660
WORKNET OCCUPATIONAL MEDICINE	37 South White Horse Pike, Stratford, NJ 08084	856-435-2680
WORKNET OCCUPATIONAL MEDICINE	Ocean Bay Occupational Medicine 368 Lakehurst Rd., Suite 206, Toms River, NJ 08755	732-557-9980

I have read, I understand and I received a copy of the work-related injury procedure:

EMPLOYEE SIGNATURE/DATE

INTERVIEWER SIGNATURE/DATE

PROTOCOL WORK-RELATED INJURY PROCEDURE FOR PENNSYLVANIA EMPLOYEES

I understand that this staffing company takes their responsibility as my employer very seriously, and that they have gone to great length to provide a safe work environment. If I am injured on the job, this staffing company will deal promptly with legitimate claims and has workers' compensation insurance. I also understand that this staffing company has extensive experience investigating claims and will fight fraudulent claims with all available resources. Workplace injuries will be subject to a post-injury drug test.

1. *If you sustain a work-related injury, you must immediately notify the client at the facility you are working, and your supervisor at this company. Failure to do so may delay your benefits or cause you to lose your rights to benefits.*
2. *If you need medical treatment, you must see an authorized treating physician (see below) immediately (within twenty-four (24) hours) from the time the incident occurred. Tell the provider you are authorizing that the medical bills and medical notes be sent to Protocall and/or its insurance carrier.*
3. *If you are faced with a medical emergency, you may secure initial emergency treatment from any of the below mentioned emergency facilities or any other emergency facility.*
4. *If you choose to treat with an out of state provider, you may be subject to balance billing.*
5. *For medical treatment to be paid by your employer, you must:*
 - a) *Select one of the physicians listed below.*
 - b) *You must continue to visit one of the physicians listed below or any specialist to which that provider refers you, if you need treatment, for Ninety (90) days from the date of your first visit. This requirement is in conformance with the Pennsylvania Workers' Compensation Act, Section 306 (F)(1)(i).*
6. *After Ninety (90) days, if you still need treatment, you may continue with the same physician or you may choose to go to another physician or health care provider for treatment. If you decide to go to another provider, you must notify your employer of this action within five (5) days of your visit.*
7. *Your bills will be paid if your physician or healthcare provider reports as required (within ten days after your first visit and at least once a month as long as treatment continues). You must notify the new provider that these reports are to be submitted to the insurance company provided to you by Protocall (please call the office and request this information).*
8. *If you are going to miss work due to a work-related injury, you must notify this office immediately, and you must have a doctor's note from the authorized treating physician stating the length of time you will be out of work. Light duty (modified duty) work may be available. You must notify this office immediately (within 24 hours) if the physician releases you for light duty work. Failure to contact the Protocall office for light duty work will be considered a refusal of work.*
- 9) *Thereafter, keep this company informed of the time you will be missing from work and your condition on a daily basis, unless otherwise instructed by the Protocall supervisor.*
- 10) *Any questions regarding injuries should be directed to your Protocall supervisor.*

IN COMPLIANCE WITH THE PENNSYLVANIA WORKER'S COMPENSATION ACT, I ACKNOWLEDGE THAT I HAVE BEEN INFORMED OF MY RIGHTS AND HAVE RECEIVED A COPY OF THE DESIGNATED HEALTH CARE PROVIDER PANEL. I UNDERSTAND THAT ANY WORK-RELATED INJURY OR ILLNESS IS TO BE IMMEDIATELY REPORTED TO MY PROTOCOL SUPERVISOR AND, WITH THE EXCEPTION OF TRUE EMERGENCY CARE, I AM TO TREAT WITH ONE OF THE PROVIDERS ON THE PANEL FOR THE FIRST 90 DAYS AFTER MY INJURY. I UNDERSTAND THAT IF I TREAT OUTSIDE THIS PANEL WITHOUT PROPER AUTHORIZATION, MY EMPLOYER HAS THE RIGHT TO REFUSE PAYMENT FOR THAT CARE. SHOULD I STILL REQUIRE TREATMENT AFTER 90 DAYS, I UNDERSTAND I MAY CHOOSE A NON-PANEL PROVIDER BUT THAT I MUST NOTIFY MY EMPLOYER WITHIN FIVE DAYS OF THE FIRST VISIT TO THIS PROVIDER. I UNDERSTAND THAT IF SURGERY IS RECOMMENDED, I MAY SEEK A SECOND OPINION WITH A PHYSICIAN OF MY CHOOSING. IF THE SECOND OPINION DIFFERS, I MAY CHOOSE THE COURSE OF TREATMENT I WISH TO FOLLOW BUT THAT TREATMENT IS TO BE RENDERED BY ONE OF THE PANEL PROVIDERS IF I AM WITHIN THE FIRST 90 DAYS AFTER INJURY.

PENNSYLVANIA PHYSICIANS

CONCENTRA	2010 Levick Street, Philadelphia, PA 19149	215-537-4755
TEMPLE UNIVERSITY HEALTH SYSTEM	Occupational Health 3401 N. Broad Street, Philadelphia, PA	215-707-6158
UNIVERSITY OF PENNSYLVANIA	Occupational Medicine Clinic 3400 Spruce Street, Philadelphia, PA 19104	215-662-2354
WORKNET	One Reed Street, Philadelphia, PA 19147	215-467-5800
WORKNET	WORKNET @ Hahnemann University Hospital Broad & Vine Streets, Philadelphia, PA 19102	215-762-8525
WORKNET	WORKNET @ Roxborough Memorial Hospital 5800 Ridge Avenue, Suite 234, Philadelphia, PA 19128	215-487-4540
WORK WELL	Penn Medicine @ Radnor 250 King of Prussia Road, Radnor, PA 19087	610-902-5656

I have read, I understand and I received a copy of the work-related injury procedure:

EMPLOYEE SIGNATURE/DATE

INTERVIEWER SIGNATURE/DATE

***Mandatory In-Service Material
(Attached Separately)***



Orientation Manual Checklist & Acknowledgement

- I. History & Vision
- II. General Information
- III. Job Performance Expectations
- IV. Client Care
- V. Bonus Programs/Safety Rules
- VI. Time Ticket Procedure
- VII. Work Related Injury Procedure
- VIII. Mandatory In-Service Subjects:
 - Client Confidentiality/Patient Rights
 - OSHA & Infection Control
 - Fire & Safety
 - HIPPA

I acknowledge that I have received, read and agree to comply with the policies and procedures contained in the Protocall Healthcare Staffing Services orientation Manual. I understand that, if I do not comply with the policies and procedures set forth in the Orientation Manual, I have voluntarily quit employment.

I UNDERSTAND THAT NOTHING IN THIS ORIENTATION MANUAL IS A CONTRACT OF EMPLOYMENT AND THAT THESE POLICIES MAY BE REVISED BY PROTOCOLL AND THAT MY AT-WILL EMPLOYMENT CAN BE TERMINATED BY ME OR BY PROTOCOLL AT ANY TIME, WITH OR WITHOUT NOTICE AND WITHOUT ANY REASON.

According to the policies of Protocall, an employee must, upon completion of an assignment, contact Protocall and request placement in a new assignment. If such contact is not made, Protocall will consider the employee to have voluntarily quit employment and future assignments may not be offered. In addition, if a claim for unemployment compensation benefits is filed, failure to contact Protocall may affect the employee's benefit eligibility.

Employee Name: _____ Skill: _____
(Please Print)

Employee Signature: _____ Date: _____

Protocall Witness: _____ Date: _____



DISCLOSURE AND CONSENT CONCERNING CONSUMER AND INVESTIGATIVE CONSUMER REPORTS

This form, which you should read carefully, has been provided to you because "Protocall Staffing/Faz-90, Inc. or Flex Nurses, Inc." may request Consumer Reports and/or Investigative Consumer Reports from a consumer reporting agency. The Company will use any such report(s) solely for employment-related purposes.

Consumer Reports or Investigative Consumer Reports will be obtained from CSS Test, Inc. ("CSS Test") located at 400 Laurel Oak Road, Suite 102, Voorhees NJ, 08043. They can be contacted at 856-627-5600. Under the provisions of the Fair Credit Reporting Act, 15 USC, Section 1681 et seq., the Americans with Disabilities Act, the Drivers Privacy Protection Act and all other applicable federal, state, and local laws, I hereby authorize and permit CSS Test, Inc., to obtain a consumer report and/or an investigative consumer report which may include the following: Reports may contain information bearing on your character, general reputation, personal characteristics, mode of living and credit standing. The types of information that may be obtained include, but are not limited to: credit reports, social security number, criminal records checks, public court records checks, including civil, driving records, educational records, verification of employment positions held, workers compensation records, personal and professional references, licensing, certification, etc. The information contained in these reports may be obtained by CSS Test from private or public record sources including sources identified by you in your job application or through interviews or correspondence with your past or present coworkers, neighbors, friends, associates, current or former employers, educational institutions or other acquaintances.

For California residents, under section 1786.22 of the California Civil Code, you may view the file maintained on you by CSS during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at CSS in person or by mail. You may also receive a summary of the file by telephone. The agency is required to have personnel available to explain your file to you and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification.

You are being given a copy of the "Summary of Your Rights Under the Fair Credit Reporting Act" prepared pursuant to 15 U.S.C. section 1681(g)(c). You have the right to request additional disclosures of the nature and scope of the investigation and a statement of your rights by contacting CSS Test.

CONSENT

I have carefully read and understand this Disclosure and Consent form and, by my signature below, consent to the release of consumer and/or investigative consumer reports, as defined above, to the Company in conjunction with my application for employment. I further understand that any and all information contained in my job application or otherwise disclosed to the Company by me before, during or after my employment, if any, may be utilized for the purpose of obtaining the consumer reports or investigative consumer reports requested by the Company. I understand that if the Company hires me, it may request a consumer report and/or an investigative consumer report about me, as defined above, for employment-related purposes during the course of my employment. I understand that my consent will apply throughout my employment, to the extent permitted by law, unless I revoke or cancel my consent by sending a signed letter or statement to the Company at any time. This Disclosure and Consent form, in original, faxed, photocopied or electronic form, will be valid for any reports that may be requested by the Company.

Applicant Last Name _____ First _____ Middle _____

Social Security # _____ Date of Birth (for ID purposes only) _____

Drivers License Number and State of Issue _____

Present Address _____

City/State/Zip _____

Applicant Signature _____

CALIFORNIA, MINNESOTA AND OKLAHOMA APPLICANTS ONLY:

I wish to receive a free copy of any Consumer Report and/or Investigative Consumer Report on me that is requested.

CSS Test, Inc.

400 Laurel Oak Road, Suite 102, Voorhees, NJ 08043 Tel: 1-856-354-9001 Fax: 1-856-627-5699