



2025

# Field Employee Handbook

MIDAS MANAGEMENT AND RESEARCH  
DALLAS, TX

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## **1. About this Handbook**

### **1.1 Company Mission**

### **1.2 Our Vision:**

### **1.3 Our Mission:**

### **1.4 Purpose of the Employee Handbook**

This Employee Handbook ("Handbook") is for your information and guidance and to acquaint you with Midas Management and Research ("Midas Management and Research" or the "Company"), the Company's philosophies and approaches to work, and the Company's employment policies and procedures. It is intended to provide general information on key policies, but it is not an exhaustive list of all employee expectations or Company policies. Additional information may be provided by various notices. We expect you to familiarize yourself with the policies contained herein and comply with them during your employment. Failure to do so may result in disciplinary action, up to and including termination of employment.

The Company reserves the right to revise, supplement, modify, or rescind any or all these policies, plans, procedures, or benefits. Although we will attempt to give adequate notice of any such changes, the Company reserves the right to revise, supplement, modify, interpret, or rescind any or all these policies, plans, or procedures as it deems appropriate, in its sole and absolute discretion, with or without prior notice.

While this Handbook sets forth some of the policies, procedures, work rules, and benefits, it should not be construed as a guarantee that your employment will continue for any specified period or end under certain conditions. THIS HANDBOOK IS NOT A CONTRACT OF EMPLOYMENT, EITHER EXPRESS OR IMPLIED. ALL EMPLOYEES ARE "EMPLOYEES AT-WILL." AS SUCH, EITHER THE EMPLOYEE OR THE COMPANY MAY END THE EMPLOYMENT RELATIONSHIP AT ANY TIME AND FOR ANY LAWFUL REASON, OR NO REASON AT ALL. NOTHING IN THIS HANDBOOK ALTERS THE EMPLOYMENT-AT-WILL RELATIONSHIP BETWEEN YOU AND THE COMPANY.

ADDITIONALLY, NO MANAGER, SUPERVISOR, OR REPRESENTATIVE OF THE COMPANY HAS THE AUTHORITY TO ENTER INTO ANY AGREEMENT CONTRARY TO THIS HANDBOOK OR FOR EMPLOYMENT FOR ANY SPECIFIED TIME, AND ANY SUCH AGREEMENT OR TERMS WILL BE UNENFORCEABLE, UNLESS THEY ARE IN A WRITING SIGNED BY THE EMPLOYEE AND THE APPROPRIATE COMPANY REPRESENTATIVE.

If you have any questions or comments regarding the contents of this Field Employee Manual, please contact your Company representative.

## **2. Code of Conduct**

### **2.1 Code of Business Ethics**

People who work together have an impact on each other's performance, productivity, and personal satisfaction in their jobs. In addition, how our employees act toward coworkers, customers, and vendors will influence whether those relationships are successful for the Company. Because your conduct affects many more people than just yourself, we expect you to act in a professional manner towards coworkers, customers, and vendors whenever you are on the Company's property, conducting the Company business, or representing the Company at business or social functions.

Although it is impossible to give an exhaustive list of everything that professional conduct means, it does, at a minimum, include the following:

- following all the rules in this Handbook that apply to you.
- treating coworkers, customers, and vendors with patience, respect, dignity, and consideration.
- deliver quality patient care and service unrestricted by concerns of personal attributes and without discrimination.
- protect confidences entrusted to them during professional practice, respecting the right to privacy of the patient, client company, and employer; revealing confidential information only as required by law to protect the welfare of the individual or community; and,
- being courteous and helpful to customers, and any third party who comes in contact with the Company

Individuals who act unprofessionally towards coworkers, customers, vendors, or any third parties will face discipline up to and including termination of employment.

#### **Self-Disclosure and Possible Known Conflicts of Interest**

Management and employees will ensure an ongoing competitive environment by avoiding any activities or circumstances that could create any perception of conflict of interest. These policies are designed to prevent any actual or perceived conflicts of interest. Actions that may involve a conflict of interest must be avoided both in business and personal relationships and activities. Every employee of the Company is required to disclose any conflict of interest which they may have regarding any dealings involving any relationship with any vendor or customer and agrees to exclude themselves from all matters involving said vendor or customer.

Examples of situations that may influence a staffing firms' operations and placement of staff may include, but is not limited to:

- Receiving gifts from vendors
- Accepting cash or cash equivalents from a patient, resident, or a member of their family
- Placing a clinician who is not fully credentialed
- Discussing bill/pay rates

If you feel that you have a conflict of interest, please contact your Company as soon as the conflict is known. Depending upon the conflict, the Company may be required to take certain reasonable steps to avoid and/or report the conflict of interest.

## **2.2 Compliance with Laws, Rules, and Regulations**

Obeying the law, both in letter and in spirit, is the foundation on which the Company's ethical standards are built. In conducting the business of the Company, employees shall comply with applicable local, state and federal laws or regulations.

The Company will comply with all laws that are applicable to the Company's business activities, and expects that all officers, directors, and employees acting on behalf of the Company will obey the law. Specifically, the Company is committed to:

- Maintaining a safe and healthy work environment.
- Promoting a workplace that is free from discrimination or harassment based on race, color, religion, sex, or other factors that are unrelated to Moxie's business interests.
- Supporting fair competition and laws prohibiting restraints of trade and other unfair trade practices; and
- Complying with all applicable local, state, and federal laws and regulations.

## **2.3 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).

## **2.4 Healthcare Provider Responsibilities**

Company clinical staff is and shall be duly licensed to practice his/her profession in any State they are assigned and shall always maintain current professional standing. Evidence of such licensing shall be submitted to Company prior to commencing the assignment. Clinical staff agrees to give immediate notice to Company 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.

Clinical employees agree to submit to Company, before commencing any assignment, all requested documentation necessary to comply with the Joint Commission, Client and Company expectations 10 days prior to assignment start date in assignment detail.

Clinical employees agree to and shall observe and comply with the applicable policies, procedures, rules and regulations established by the Client.

Clinical employees agree to work all scheduled shifts as directed by Client (including weekends and holidays).

Clinical employees agree 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. Clinical employees agree to accept both clinical and operational supervision from his/her immediate supervisor.

Clinical employees agree patient records and charts shall always remain the property of the Client. Clinical employees agree to maintain the confidentiality of all information related to patient records, charges, expenses, quality assurance, risk management or other programs derived from, through or provided by clients and all information related to this agreement.

Clinical employees agree to immediately provide written notice to Company as to any legal proceeding instituted or threatened, or any claim or demand, made against Clinical employees or Company with respect to Clinical employee's rendering of services under this agreement.

Clinical employees agree to notify client of any unscheduled absence at least two (2) hours prior to beginning a shift and to notify Company within twenty-four (24) hours to report the unscheduled absence.

Any injury or illnesses suffered by Clinical employees must be reported to the Company representative within 24 hours of the incident. If injury occurs while working, notify your supervisor immediately, and if applicable, seek appropriate medical attention and follow the client's specific injury procedures.

Employee agrees not to disclose any Company trade secrets or any confidential or proprietary information of Company, Company employees, clients, or patients of clients.

### **3. Hiring and Employment Policies**

#### **3.1 Summary of Required Documents**

##### **Application & Submittal Documents**

- Resume – including 7 years of healthcare work history. If candidate has less than 7 years of experience, then all healthcare experience up to their education and/or initial licensing is required.
- Application & Disclaimer – including a release for health records. This disclaimer must be signed annually.
- Skills Checklist – appropriate to your specialty, must be updated annually.
- 2 References - both must be from individuals you have worked with in the past 2 years. Reference name, title, dates worked, and the facility name must all be included.
- License Verification - Proof of current licensure and/or certification verified by the primary source for each.

##### **Testing & Certifications**

- Certifications - Includes proof for BLS certification for every employee, regardless of unit or specialty. Additional certifications will be supplied as required by the facility (client specific) for each specialty.
- Annual Core Testing – Testing for competency on HIPPA, OSHA, and National Patient Safety requirements. These must be updated annually and have a score higher than 80%. Each test may only be retaken twice (3 total times).
- Unit Specific Competency Exam – Testing for clinical competencies in the area of specialty. These must be updated annually and have a score higher than 80%. Each test may only be retaken twice (3 total times).

##### **Medical Records**

- Health Clearance – A physical or statement of good health signed by a physician that must be updated annually.

- MMR Vaccinations or proof of immunity – Proof of documentation of two MMRs at least 28 days apart; or Serological proof of immunity for rubella, rubeola, and mumps (titers).
- Varicella Vaccinations or proof of immunity – Proof of documentation of two Varicella vaccinations at least 28 days apart; or Serological proof of immunity (titer).
- Hep B Declination, proof of immunity, or vaccinations – Proof of immunity (titer) or 3 Hep B vaccine series. A signed declination is also accepted. Hep B Declinations must be updated annually.
- Negative TB Test or Chest X-ray – 1 Negative PPD Skin Tests within the last year or a T-spot or a QFT Gold Titer. TB Tests must be updated annually. Some facilities may require a 2-step TB. If you have a history of a positive PPD, please provide a copy of your positive PPD report, a report for a recent chest X-ray showing no active signs of TB and a chest X-ray within 12 months.
- Tdap Vaccine – Proof of a Tdap vaccination
- Flu Vaccination/Declination – Seasonal requirement based on CDC recommendations for receiving the flu shot. Flu Shot Declinations are allowed, but understand that if it is a condition of employment by the facility, it must be administered.
- COVID Vaccination/Declination – In accordance with recent CDC guidelines.
- Urine Drug Screen – 10 Panel Drug Screen Testing for: Amphetamine, Barbiturates, Benzodiazepines, Methadone, Cocaine, Marijuana (as a national agency, we follow federal guidelines with marijuana laws which requires a negative test regardless of the state the employee is living or working in), Methaqualone, Opiates, Phencyclidine (PCP), Propoxyphene, Meperidine, Oxycodone. Drug Screen must be updated annually.

## **Background Checks**

- Background Check – 7-year County Criminal, National Criminal, Sex Offender, Level 3 Healthcare Sanctions, and SSN Trace + Associated Counties. Background Check must be updated Annually.
- OIG & EPLS (GSA / SAM) – Clearance from the OIG and EPLS (GSA) Exclusions Databases. These must be checked quarterly (every 3 months).
- Education Verification – Verification of education internally or by means of third-party verification. Attaining a copy of a Diploma or Transcripts or is also acceptable, but verification through source is preferred.

## **HR Documents**

- Driver's License – A copy of your Driver's license or state photo identification.
- Social Security Card and/or Passport and/or Birth Certificate – A copy of your social security card, birth certificate, or passport.
- Annual Agency Forms – All of which are to be updated or confirmed annually
  - Background Check Authorization Form
  - Release Form
  - Employee Handbook Acknowledgement Form stating the employee agrees to our standards, policies, and procedures
  - Permanent Tax Home Form
  - Emergency Contact Form
  - HIPAA Acknowledgement Form stating that you have received training in the confidentiality of protected healthcare information and that they shall maintain the confidentiality of information in compliance with the Health Insurance Portability and Accountability Act of 1996.
  - TB Questionnaire showing no evidence of pulmonary tuberculosis or contagion
- New Hire HR Forms



- Federal w-4
- State w-4 (for the state the candidate will be working in)
- I-9
- Direct Deposit Form
- Job Description – Healthcare provider job description appropriate to your classification. Acknowledgement of the job description must be updated annually. Our job descriptions can be found as part of this Field Employee Handbook.
- E-Verify + i9
- Work Agreement – Employee's signature on a copy of the Assignment Contract, stating details of their contracted position, must be attained before their start date.

### **3.2 Equal Employment Opportunity**

The Company is an equal opportunity employer and does not discriminate against employees or applicants for employment based on an individual's race, color, religion, creed, sex, national origin, ancestry, age, disability, marital status, pregnancy, genetic testing information, sexual orientation, gender identity, military or veteran status, or any other status or basis protected by applicable local, state, or federal law. This policy applies to all terms, conditions and privileges of employment, and all employment decisions and practices of the Company, including recruitment, hiring, placement, job assignment, compensation, access to benefits and training, promotion, discipline, and termination. It is the Company's policy to select the most qualified person for each position in the Company, whether that is a new hire, a transfer to another position, or a promotion.

Any employees with questions or concerns about any type of discrimination or harassment in the workplace are encouraged to bring these issues to the Company's attention immediately by reporting them in the manner outlined in the Reporting Harassment, Discrimination, and/or Offensive Conduct Policy, set forth below. Employees can raise concerns and make reports without fear of reprisal. Anyone found to be engaging in any type of discrimination will be subject to disciplinary action, up to and including termination of employment.

### **3.3 Anti-Harassment and Anti-Discrimination Policy**

Neither harassment nor discrimination will be tolerated. Consistent with its Equal Employment Opportunity Policy, the Company prohibits discrimination and harassment based on race, color, religion, creed, sex, national origin, ancestry, age, disability, marital status, pregnancy, genetic testing information, military or veteran status, sexual orientation, gender identity, or any other status protected by local, state, or federal law.

Each employee has the right to work in a professional atmosphere that promotes equal employment opportunities and is free from discriminatory practices, including without limitation, harassment. Statements or actions that you make regarding fellow employees, whether done jokingly or otherwise, may create feelings of ill will and interfere with productivity. The desired standard of employee behavior is one of cooperation and respect for each other, despite any differences.

In general, statements, slurs, jokes, and other verbal or physical conduct relating to any of the protected classes, characteristics, or bases listed above, constitute unlawful harassment when they unreasonably interfere with the person's work performance or create an intimidating work environment. Prohibited

conduct includes sexual harassment but extends far beyond that. Prohibited conduct may include, but is not limited to the following:

- Epithets, racial “jokes”, slurs or negative stereotypes, intimidating or hostile acts based upon protective classification, and/or written or graphic material that denigrates or shows hostility or aversion to persons of a protected class that is posted or circulated on Company property.
- Verbal harassment and unwelcome discussions relating to or motivated by a person’s protected characteristic or class.
- Unwelcome requests or demands for sexual favors. This includes subtle or blatant expectations to engage in sexual relations and pressures for dates, especially when submission to such conduct is a condition of employment, or when submission or rejection of such conduct is used as a basis for employment decisions affecting the individual.
- Unwelcome or unwanted sexual advances, such as patting, pinching, brushing up against, hugging, cornering, kissing, fondling, sexual flirtations, or any other similar contact.
- Using coercive sexual behavior to control or affect the career, salary, or performance review of another employee.
- Verbal harassment or unwelcome kidding of a sexual nature, such as telling “dirty” jokes and comments about body parts, appearance, or clothing, where such comments go beyond mere courtesy or are unwelcome.
- Making threats of reprisal a term or condition of employment (explicitly or implicitly).

Harassment may exist when co-workers or even non-employees, such as vendors, suppliers, or customers engage in such conduct, when the conduct unreasonably interferes with an employee’s work performance or creates an intimidating, hostile, or offensive work environment.

Sexual harassment does not have to involve conduct of a sexual nature to constitute improper behavior. For example, abusive, offensive, or demeaning behavior that is directed to members of one gender only (whether male or female) may be deemed a form of sexual harassment, even though the conduct was not motivated by sexual desire or gratification. In addition, harassment of a male by another male, or a female by another female also constitutes a form of sex discrimination. Likewise, disparate treatment motivated by any other protected characteristic is discrimination and will not be tolerated.

If there are questions about whether conduct is permissible under this policy, employees should refrain from the conduct. Anyone found to be engaging in any type of discrimination or harassment will be subject to disciplinary action, up to and including termination of employment.

Any employees with questions or concerns about any type of discrimination or harassment in the workplace are encouraged to bring these issues to the Company attention by immediately reporting the conduct in the manner set forth in the Reporting Harassment, Discrimination, and/or Offensive Conduct Policy, set forth below. Employees can raise concerns and make reports without fear of reprisal.

### **3.4 Reporting Harassment, Discrimination, and/ or Offensive Conduct**

We all have a responsibility to promote equal employment opportunities, and we expect everyone to share this commitment. If you believe you have been subjected to any form of discrimination, harassment, and/or offensive conduct, please take the following action immediately:

1. **STEP 1:** Ask the offending party to stop, unless confronting the offending party would be

uncomfortable or place you in danger.

**-AND-**

2. **STEP 2:** Report your complaint to your Company recruiter. If your recruiter is unavailable or if she/he is the person you believe is responsible for the harassment, discrimination, or offensive conduct, or you believe it would be otherwise inappropriate to contact her/him, you should immediately report the complaint to Nitish Vats, +1 (469) 361-2442.

Please note that the complaint must be reported in accordance with Step 2, even if the offending party is asked to stop. The Company will not know of the discrimination, harassment, or offensive conduct unless you report it, and we cannot correct it if we do not know about it.

The Company will not retaliate against you for filing a complaint in good faith and does not permit retaliation by supervisors, management, employees, or co-workers. In addition, individuals who participate in this complaint process as potential witnesses (other than the alleged harasser) are assured of non-retaliation. You must report acts of retaliation just as you must report acts of discrimination or harassment.

Your complaint will be investigated in a confidential and professional manner, consistent with resolution of the complaint, by a member of management. Disciplinary action will be taken as appropriate.

### **3.5 Job Performance and Reviews**

Once an employee has worked with Company for a period of 12 months, an annual internal evaluation between the employee and Company is required. These evaluations are required annually if employee is continuously employed with the Company.

Facility Evaluations will also be requested from each client (facility, VMS, or MSP) to provide feedback in the form of an evaluation for each employee on each assignment. If the facility does not provide the feedback or evaluation immediately upon request, the Company will reach out a second time. Unfortunately, some clients will not cooperate with the Company in this regard, so the Company follows a competence by exception philosophy. In the absence of client feedback, unless there is evidence of a performance issue, it is assumed that employees are meeting performance expectations. Feedback from clients regarding clinical and/or professional performance is addressed with our employees immediately. When training needs are identified, an opportunity to complete the training will be provided at the earliest possible occasion.

Every health professional employed by the Company will complete an annual skills checklist and competency exams, which apply to each specialty area of work. The Company assesses aspects of employee's competence at hire, during performance evaluations 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. Our Clinical Liaison is responsible to ensure any areas of development are identified and addressed. Our Clinical Liaison is available to our healthcare professionals at any time should the need arise.

### **3.6 Discipline – Do Not Return Policy**

The Company is committed to providing a higher standard of service to our clients and to the delivery of safe, quality patient care. As a Company employee, you play a very valuable role in our success in delivering

excellent customer service and in our ability to achieve Joint Commission Certification. Poor performance by our employees, resulting in a “Do Not Return” status, can negatively impact the Company’s reputation. The Company has implemented a “Do Not Return” policy.

The following point system is used to determine termination because of Do Not Returns:

- 1 Point: Attitude, lack of professionalism and customer service
- 2 Points: Clinical incompetence (poor clinical performance, Poor time management, Medication Error, Documentation Deficiencies.
- 3 Points: Danger to patient.
- 4 Points: Illegal behavior (falsified identity or documentation, use of or distribution of controlled substances, patient. abandonment). When a nurse is under investigation for above behavior they will be considered terminated until exonerated from all accusations.

\*A healthcare professional who receives 3+ points total will be considered for termination. Any healthcare professional 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.

### **3.7 Cell Phone Usage**

To ensure the highest level of service at our client facilities, to our patients, families, and fellow employees we must ensure proper use of personal cell phones while at work. This policy is intended to limit the excessive use of and provide guidelines for personal cell phones and other electronic communication devices while working at the client facility.

Personal cell phone use, including, but not limited to, talking, texting, or browsing/surfing the internet, is prohibited in and/or when:

- Employee is punched in and on the clock, not on lunch or a break.
- Public areas of the facility or areas with direct public observation, including, but not limited to, any business offices, clinics, and nurse’s station.
- Any clinical patient service area, including, but not limited to, lab, x-ray, physical therapy, cardiac rehab, or any clinical exam rooms.
- There is not a legitimate business need.
- It is not approved by your immediate supervisor.

Client facilities recognize that use of personal cell phones and other electronic communication devices may be needed at certain times. Use of these technologies is restricted in the following circumstances and conditions:

- Technologies of any kind cannot be used for discriminating, harassing, or obscene

communications, chain letters, solicitation for outside interests, or other similar purposes as this is illegal and/or against other hospital policies.

- Technologies cannot be used in any way that may violate the privacy and confidentiality of our patients.
- Camera phones may not be used to photograph, film, record, or video any person, document, or activity that in any way involves client facility, employees of client facility, patients, visitors, or any other individual with whom client facility is doing or intending to do business in any capacity. Only client facility provided cameras are to be used for this purpose and only when appropriate consents/authorizations are signed.

Cell phones may be used for personal business, only during breaks and lunch periods in designated break areas, including the nursing break rooms, clinic break rooms, outside the facility, and other private areas not occupied by patients and/or families.

While driving a vehicle for work purposes, client facility discourages using a cell phone without a hands-free device. Client facility prohibits sending or receiving e-mails or texts while operating a vehicle for work purposes. In the event of a serious situation that would warrant the availability of a cellular phone, approval by your immediate supervisor, in advance is required. When personal calls disrupt workflow and/or productivity of the department, disciplinary action may be taken, up to and including termination.

### **3.8 Social Media**

Social media (including, but not limited to, personal and professional web sites, blogs, chat rooms and bulletin boards; social networks such as Facebook, LinkedIn, Twitter, etc.; video-sharing and picture-sharing sites such as YouTube and Instagram; and e-mail and messaging applications) are a common means of communication and self-expression. Because online postings can conflict with the interests of the Company and its customers, owners, and employees, the Company has adopted the following policy which applies to all employees, regardless of position or location. Breach of this policy may result in legal action and/or disciplinary action, including termination of employment.

Ultimately, an employee is solely responsible for what he/she posts online. Before creating online content, employees should consider the risks and rewards that are involved. Keep in mind that any conduct that adversely affects the employee's job performance, the performance of co-workers, or otherwise adversely affects customers, vendors, suppliers, or the Company's legitimate business interests may result in disciplinary action up to and including termination of employment.

#### ***Media Contacts***

Unless designated as a Company spokesperson, employees should not speak to the media on the Company's behalf. All such inquiries should be referred to [admin@midasconsulting.org](mailto:admin@midasconsulting.org).

#### ***For More Information***

If you have questions or need further guidance, please contact Human Resources.

### **3.9 Dress Code**

The dress code at each facility is different. The Company asks every healthcare provider to adhere to the dress code of the facility that he/she is contracted to work at. The best time to ask about the dress code for your facility is during orientation on your first day at work.

You may wish to contact your unit manager prior to your first day to determine appropriate attire. If you do not have the opportunity to speak with your manager prior to starting your assignment, the Company recommends that all healthcare providers show up on their first day wearing clean, solid-colored scrubs.

If scrubs are not appropriate for the unit or setting that you are working or if you will not be doing clinical work on your first day, then we recommend dressing as if you were attending a job interview. It is better to be overdressed and make a good impression than to be under dressed on your first day at a new assignment.

Some facilities may have unusual dress code requirements. The following is a list of some dress code requirements that some facilities may have. Please keep these in mind until you know for certain what is/isn't acceptable at your facility:

- Some facilities may not allow Visible Tattoos
- Some facilities may not allow Facial Piercings
- Some facilities may not allow Excessive Piercings
- Some facilities may not allow Ripped/Tattered scrubs
- Some facilities may not allow Excessive Makeup
- Some facilities may not allow Cartoon Scrubs
- Some facilities may not allow Floral Scrubs

### **Artificial Fingernail Policy**

It is the Company policy that all healthcare providers follow the Joint Commission guidelines pertaining to acrylic nails and the prevention of disease. Please refer to the safety section of this manual for more information about our fingernail policy.

## **4. Health, Safety, and Security Policy**

### **4.1 Resolution of Complaints (From Staff and Customers)**

A Customer Service Complaint is any complaint and/or concern from one of our valued healthcare professionals, client facilities, or internal employees regarding a situation or incident resulting in dissatisfaction. The purpose of our complaint policy is to:

- To have a positive impact in improving customer service and satisfaction.
- To understand the causes underlying a complaint and to focus on making changes to systems and processes to reduce the probability of a similar complaint in the future.
- To prevent potentially compensable events and to protect corporate financial resources potentially jeopardized by customer dissatisfaction.

- To analyze and trend data to identify opportunities for organizational performance improvement.

All Company contracted healthcare professionals, clients and internal office staff are entitled to full and equal accommodations, advantages, facilities, privileges, and services provided by the company.

- If any contracted healthcare professional or client wishes to make any complaint to the Company, he/she should contact his/her respective Recruiter or Account Manager at the Company. All clients or staff may also call our **main line at (469) 361-2442** if they are uncomfortable speaking with the Recruiter or Account Manager about the complaint/grievance.
- Once a complaint is received, the person who received the complaint will document and notify the issue report will the appropriate department managers at the Company, and there will be immediate action to resolve the problem.
- Once the complaint/grievance is resolved, the resolution for the complaint will be logged, if applicable, and management will regularly review the issue log to determine new policies and procedures moving forward. The party making the complaint will also be notified of what action was being taken to remedy the situation if applicable.
- Clients and staff members can get the status of any complaint at any time by contacting the Company.

It is the Company's policy not to hold any complaints/grievances against any party that makes a complaint. No complaining parties will be discriminated against or otherwise affected for making a complaint.

## **4.2 Clinical Incidents and Sentinel Events-Reporting Workplace Injuries**

### **Clinical Incident Investigation Procedures**

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

A Clinical Incident is any event or series of events that resulted in or had the potential to result in an adverse patient outcome. Examples of a clinical incident include but are not limited to (Omission of treatment, deviation from policy, medication errors, improper equipment usage, IV of Blood complications, patient fall, inaccurate clinical assessment, patient or physician complaint). Clinical staff should notify the Company of any clinical incidents occurring while on assignment, regardless of an adverse outcome.

An incident investigation will be performed by the supervisor at the location where the accident occurred. The safety coordinator is responsible for seeing that the incident investigation reports are being filled out completely, and that the recommendations are being addressed. Supervisors will investigate all incidents, injuries, and occupational diseases using the following investigation procedures:

- Implement temporary control measures to prevent any further injuries to employees.
- Contact your recruiter to have an accident packet sent to you.
- Review the equipment, operations, and processes to gain an understanding of the accident situation.
- Identify and interview each witness and any other person who might provide clues to the accident's causes.
- Investigate causal conditions and unsafe acts; make conclusions based on existing facts.

- Ask any witnesses to complete a witness report form.
- Complete the accident investigation report, accident checklist, medical information release form, medical treatment request forms (*if applicable*), and acknowledgement of modified duty form (*if applicable*).
- Provide recommendations for corrective actions.
- Indicate the need for additional or remedial safety training.
- Conduct a drug test on any employees involved with the injury/accident to determine if the drugs or alcohol were a factor.

**An accident or incident investigation report must be submitted to the safety coordinator within 24 hours of the accident.**

### ***Sentinel Event Reporting***

A Sentinel Event as defined by the Joint Commission 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.” These events signal the need for immediate investigation and response. The Company adheres to the Joint Commission’s Sentinel Event Policy. If a sentinel event has occurred, we encourage our employees to notify us so we can make sure that the appropriate measures are taken.

## **4.3 Work Related Injuries and/or Exposures**

The management of the Company is committed to providing employees with a safe and healthy workplace. It is the policy of this organization that employees report unsafe conditions and do not perform work tasks if the work is considered unsafe. Employees must report all accidents, injuries, and unsafe conditions to their supervisors. No such report will result in retaliation, penalty, or other disincentive.

The OSH Act of 1970 requires the Secretary of Labor to produce regulations that require employers to keep records of occupational deaths, injuries, and illnesses. Recording or reporting a work-related injury, illness, or fatality does not mean that the employer or employee was at fault, that an OSHA rule has been violated, or that the employee is eligible for workers' compensation or other benefits. An injury or illness must be recorded if it results in: death, days away from work, restricted work or transfer to another job, medical treatment beyond first aid, loss of consciousness, a significant injury or illness diagnosed by a physician or other licensed health care professional.

The management of the Company is committed to providing employees with a safe and healthy workplace. It is the policy of this organization that employees report unsafe conditions and do not perform work tasks if the work is considered unsafe. Employees must report all accidents, injuries, and unsafe conditions to their supervisors. No such report will result in retaliation, penalty, or other disincentive.



Employee recommendations to improve safety and health conditions will be reviewed and discussed with our client facilities. Similarly, management will take disciplinary action against an employee who willfully or repeatedly violates workplace safety rules. This action may include verbal or written reprimands and may ultimately result in termination of employment.

This policy statement serves to express management's commitment to and involvement in providing our employees a safe and healthful workplace. This workplace safety program will be incorporated as the standard of practice for this organization. Compliance with the safety rules will be required of all employees as a condition of employment. Concerns regarding the quality and safety of patient care may also be reported to the Joint Commission. The Company will not take any disciplinary or punitive action because an employee reports safety or quality care concerns to the Joint Commission.

Joint Commission Office of Quality  
Monitoring

1-800-994-6610

[complaint@jointcommission.org](mailto:complaint@jointcommission.org)

#### **4.4 Drug Testing Policy**

The Company may require applicants and employees to submit to a drug and alcohol test under the following circumstances:

1. **Post-Employment Offer Testing:** After a contingent offer of employment has been extended, the applicant will be required to submit to a drug test as a qualification to assuming the position. The offer of employment shall be contingent upon the applicant passing the drug test.
2. **Post-Accident Testing:** Where an employee is involved in an incident or accident that causes personal injury to the employee or another person or property damage while on duty, under circumstances where drug and/or alcohol use may have contributed to the incident and for which testing can identify impairment caused by drug or alcohol use, the employee may be asked to submit to a drug and alcohol test.
3. **Reasonable Suspicion Testing:** A drug and alcohol test may be required if there is direct observation of drug or alcohol use, or if significant and observable changes in the employee's performance, appearance, behavior, speech, etc. or if the employee provides reasonable suspicion of being under the influence of alcohol and/or drugs.
4. **Random Testing:** Employees may be required to submit to a drug and alcohol test as part of a random pool of all employees.

The testing shall be conducted in accordance with applicable state law. Submission to testing or examination may come with or without prior notice and is subject to the discretion of management. Any employee who refuses to submit to the testing will be subject to disciplinary action, up to and including the

termination of employment.

## 4.5 Orientation

The Company will provide all new employees with an orientation to the company's policies and procedures. Each employee will receive an 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 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 caregiver at The Company 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 orientation shift and no one is available for orientation. Please take it upon yourself to utilize this time to become familiar with the floor layout and the location of vital items you may need in order to function effectively on your shift. It will be to your advantage to have knowledge of the location of the policy and procedures manual, fire pulls, crash cart, med. room, linen cart, and appropriate exits prior to the onset of your shift.

## **4.6 Floating Policy**

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

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

- The healthcare provider will immediately notify the Company,
- The nurse is obligated to inform the hospital of his/her professional limitations based upon the Nurse Practice Act standards and upon the Company client contract specifications as they relate to the assignment.
- The Clinical Liaison at the Company will work within the bounds of the Nurse Practice Act and the hospital contract to resolve the issue.
- The Company will pay nurse for hours worked up until the end of his/her shift.

## **4.7 Continuing Education**

Ongoing continuing education is the responsibility of the Company employees to ensure all clinical staff has a current knowledge and practice base. The Company maintains information on available resources for BLS, ACLS, PALS, etc. Online education programs are also available for continuing education-please reach out to your Company representative to be set up.

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 the Company with copies of your continuing education certificates.

## **4.8 Clinical Oversight**

The Clinical Liaison provides clinical staff supervision for the Company. The Clinical Liaison has an understanding of the scope of services provided by the disciplines supervised. The Clinical Liaison utilizes the appropriate practices, professional licensing and certification boards and professional associations as clinical resources, as needed. The Company may engage the Clinical Liaison for the following assessment-related activities including but not limited to:

- Determining if clinical staff have the background and experience necessary to fulfill an assignment

- Supporting clinical staff while on assignment
- Assessing and reassessing clinical staff competence
- Developing remediation plans, including the required frequency of reassessment
- Reviewing results of skills assessments
- Reviewing customer-supplied evaluations of clinical performance
- Addressing customer concerns and complaints about performance, both clinical and professional
- Contributing to performance evaluations of clinical staff
- Determining staffing firm's actions in response to clinical staff performance issues

## **4.9 Availability of agency and staff**

The Company's office, located in Dallas, TX, is open Monday through Friday from the hours of 8:00am – 5:00pm. Our telephone number is 469-361-2442. Outside of normal business hours and in the event of an emergency please contact us at 469-361-2442.

## **4.10 Emergency Management Plan**

One of the Joint Commission's requirements is that an emergency preparedness plan be established so that in the event of an emergency, we will have an effective and planned out course of action.

### **Possible Disasters**

In the safety committee's last meeting, we determined that it is possible for the following natural disasters/emergencies to affect us:

- Earthquake
- Hurricane
- Flood
- Fire
- Electrical Brownouts
- Snow/Ice Storms
- Epidemic/Pandemic

### **How Disasters Might Affect our Organization**

If we are affected by any of the above-named natural disasters/emergencies, we could experience any of the following obstacles:

- Loss of Electricity
- Loss of the Building
- Loss of Internet
- Loss of Telephonic Communications

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

## **Global Health Pandemics**

The Company is committed to providing a safe and healthy workplace for all our employees, including our clinical professionals on contract. During a global health pandemic, like COVID-19, it is imperative that The Company, its client facilities, and clinical professionals are all working together to stop the prevent the transmission of COVID-19. OSHA has enacted their [COVID-19 Healthcare ETS](#) (Emergency Temporary Standard) for healthcare worksites. Please ensure you are up to date and comfortable with these measures while on contract. If at any time, you have concerns, please reach out to your contact at The Company.

## **5. Hours and Compensation Policies**

### **5.1 Payroll/Timesheet Process**

The deadline for timecards is Monday at noon. To ensure accurate payroll, please make sure your timecard gets to us on time. Also, please make sure to have your timecard signed each week by a supervisor. If there is anything questionable on your timecard such as shift bonuses, call-offs, or paid lunches, please have it initialed by a supervisor for approval. Health Care Provider assumes responsibility for the timely transmittal of all time sheets. Failure to submit a completed time sheet in accordance with this section may result in the Health Care Provider not receiving his/her paycheck as scheduled.

Every healthcare facility has a different method of tracking the hours you work. Please contact your Company representative to find out how to track the hours you work at each facility.

Falsifying a timesheet is a reportable offense and will not be tolerated. Falsifying timesheets will result in the termination of employment and will be reported to the appropriate boards which may result in civil liability and/or criminal charges.

### **Pay Periods**

We pay our nurses every Friday. Our pay periods run Sun-Sat. Keep in mind that you are being paid each Friday for the previous week.

### **5.2 Holidays**

Currently, the Company recognizes and compensates for the following holidays: Memorial Day, 4<sup>th</sup> of July, Labor Day, Thanksgiving Day, Christmas Day, and New Year's Day. These holidays are recognized from midnight to midnight. If you work on one of these days, you will be compensated with holiday wages. Please refer to your work order agreement for additional details.

### **5.3 Military Leave**

Employees required to be absent from employment for the purposes of military service, training, and/or examination in the Uniformed Services, as defined by law, will be granted an unpaid military leave of absence in accordance with the law. Employees taking such leave must give the Company advance notice of the need for military leave unless such notice is impossible, unreasonable, or is prevented by military necessity. Continuation of health insurance benefits, if any, is available as required by law based on the length of the leave and subject to the terms, conditions, and limitations of the applicable plans for which you are otherwise eligible.

The Company will comply with all laws regarding the re-employment of employees who serve in the Uniformed Services.

#### **5.4 Jury Duty Leave**

If you are summoned to serve on jury duty, you must inform your Company representative immediately so that arrangements can be made to accommodate your absence if you are unable to reschedule your jury duty. If, after you report for jury duty, you are excused for that day during your regularly scheduled working hours, you should contact your Company representative and be prepared to report to work. The Company reserves the right to request proof of jury service when you return to work.

The Company will comply with applicable state legal requirements regarding pay during jury duty service. Retaliation against employees who request or take leave under this policy is prohibited.

#### **5.5 Voting Leave**

Employees generally have sufficient time off work while the polls are open to vote. If that is not the case, the Company will comply with all state legal requirements regarding voting leave and pay. Retaliation against employees who request leave under this policy is prohibited.

#### **5.6 Employee Benefits**

Where benefits are provided by the Company to eligible employees, all such benefits shall be controlled by applicable plan documents. The information provided in this Handbook is summary only; detailed information on the plans is set forth in plan documents. To the extent there is any discrepancy between plan documents and this Handbook, the plan documents shall control.

Benefits provided by the Company are subject to change and/or termination at any time at the discretion of management or as legally required. Your eligibility for certain benefits may also be restricted by the benefit provider or insurer.

**6. Employee Acknowledgement, Receipt, and Consent**

I have received the Company’s Employee Handbook (“Handbook”) and have either read it or had it read to me carefully. I understand all of its rules, policies, terms and conditions, and agree to abide by them, realizing that failure to do so may result in disciplinary action up to and including termination of employment. I also understand that this Handbook supersedes all previous inconsistent written and unwritten policies, and any previous handbooks.

I acknowledge I have read, am aware, and am responsible for all policies mentioned throughout the Company’s Field Employee Handbook, including but not limited to the Code of Business Ethics, Complaint Management Process, Confidentiality, and Conflict of Interest policies. I understand that the Employee Handbook is available for reference during my scheduled work time.

I have read and understand the Company’s policies and requirements as a Company employee. I understand that if I have any questions and/or need clarification for items addressed in the Company’s Field Employee Handbook, it is my responsibility to contact a member of the Company, Company management or HR to discuss any questions or concerns I may have regarding the content of this manual.

I acknowledge that the Company follows all Joint Commission standards, HIPAA, and OSHA requirements and I have received and reviewed the information in this manual as well as additional trainings the Company has provided.

**I understand and agree that this Handbook is not a contract and does not in any way create an express or implied contract of employment between me and the Company** but rather is intended to foster a better working atmosphere while the employment relationship exists. I understand that, except for employment-at-will status, all policies and practices may be changed at any time by the Company, and the Company reserves the right to change my hours, wages and working conditions at any time. All such changes will be communicated through official notices, and I understand that revised information may supersede, modify, or eliminate existing policies.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

