

Tel: 973-759-1494 / 877-268-9100 / 973-393-5545 Fax: 973-759-0557

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Holsman Healthcare

"We put the Caring into Healthcare"

EMPLOYEE HANDBOOK

Effective Date: July 2, 2007



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REQUEST FOR TIME OFF

Name:	Date of Request:	<u></u>
Length of leave requested: Fro (First day off) (Last day off)	om to f)	
PAID LEAVE REQUEST		
Date(s) to be paid:		
and (circle or fill in) hours to be	e paid 4 8 Other	
Type of leave: (Please circle)		
Vacation		
Personal		
UNPAID LEAVE REQUEST		
Type of leave: (Please	e circle)	
Family Medica	al Leave Act (FMLA)	
Leave of abse	nce	
Comments/Description:		
Approved:		
	(Supervisor Signature of Approval)	_
Denied:	(Supervisor Signature of Denial)	
Reason for denial:	(Supervisor Signature of Demai)	_

Note: FMLA — Employees are eligible for up to twelve weeks of unpaid leave, with present level of benefits maintained, after one year's employment or 1250 hours.

Introductory period — New employees are not permitted to take vacation or personal days during the first 90 days of employment. Vacation time accrues during this time and may only be taken after one year of service.



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TUBERCULIN SKIN TEST

This is to state that	has received a two- (2) step Mantoux test
and the results of the test are as follows:	
FIRST TEST:	
Date Administered Site	
Administered By	
Date Read Results in mm	
Results Read By	
·	
SECOND TEST:	
Date Administered Site	
Administered By	
,	
Date Read Results in mm	
Results Read By	
CHEST X-RAY:	
Required if Mantoux test results fare 10mm or more, or	if there is a history of positive Mantaux
results.	ii there is a flictory of positive ivialitoux
Date Results	

SIGNATURE STAMP CANNOT BE ACCEPTED

PLEASE NOTE: If you have previously had a 2-Step Mantoux (TB) and can submit documentation along with your annuals thereafter, we will accept that documentation. However, if you cannot provide proof of this, it is a **Requirement of Employment** with Holsman Healthcare, LLC that the above 2-Step Mantoux (TB) be completed before employment can start.



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Welcome to the Holsman Healthcare team!

This Employee Handbook will serve as your point of reference for any standards, policies and procedures that Holsman Healthcare employees and contractors/associates are expected to follow. We ask that you take a moment to read through the materials and familiarize yourself with who we are. With the publication and distribution of this handbook, we strive to ensure that each new employee/ contractor/associate receives and understands all necessary information in regards to company policies and procedures, OSHA requirements, JCAHO standards, HIPAA regulations, and any other relative guidelines. We require that you review all materials within 48 hours of beginning your first Holsman Healthcare assignment, then complete and return all forms (Job Description, Handbook and Policy Acknowledgement, at the end of this handbook. For your convenience, we have included a checklist of all items required for your continued employment with Holsman Healthcare. Any delay in receiving all required documentation may cause a delay in your assignment until you have completed and returned them. Repeated delays or missing documentation may result in employee discipline up to and including termination and/or ineligibility for future assignments. Holsman Healthcare will maintain all documents you submit for application throughout your employments and keep all records available to you at all times.

Company Contact Information

Office Hours: Monday through Friday 8:30 am to 4:30 pm ET

Address: 710 Mill St. Unit H3 Belleville, NJ 07109

Phone: 877-268-9100(office)

973-393-5545(On call) 973-856-3145 (On call)

973-759-0557

Fax:



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General Policies, Protocols, & Procedures

Employment at will: Your employment with Holsman Healthcare is at will and this handbook in no way, shape, or form constitutes a contract for employment. Both the employee and Holsman Healthcare have the right to terminate employment with or without notice or cause at any time.

Wage Policies: Whenever possible, Holsman Healthcare will be consistent with the pay periods and policies of the facility where you are placed. Paydays fall on Friday of every other week, assuming that your time card is received no later than Monday morning by 12:00 pm (noon) Eastern Standard Time. If your timecard is incomplete or late, your paycheck will be delayed until possibly as long as the next pay period.

Employment Relationship: At all times, travelers are employees of Holsman Healthcare and under the supervision of client-approved representatives. Holsman Healthcare will comply with and has sole responsibility for compliance with all applicable federal and state laws and regulations concerning wages, benefits, liability/insurance, and fair employment practices, and any and all other indicia of the employer/employee relationship

Permanent Placement Offers: If at anytime you are offered permanent employment with an assigned Holsman client and you wish to accept, there is no fee to yourself, however, the client will pay us a buy-out fee based on the agreement between Holsman Healthcare and the Client Facility. Please notify our office immediately when such an offer is made.

Resignations/Cancellations: If you accept another job while on assignment or after accepting an assignment for Holsman you are required to fulfill your assignment by completing the term of the agreement. Please alert the office immediately of any such change in plans so that arrangements can be made to find a replacement for the client.

Dependability: Holsman Healthcare reserves the right to terminate any employee on the grounds of undependability, work performance, or attitude that results in complaints from clients, other Holsman employees and/or patients. If for any reason you are dismissed we will provide you with documentation that shows just cause for our decision at your written request.

Authorized Drug and Alcohol Testing: Some of our clients require a negative drug result from within thirty days be provided to them as condition of your placement in their facility. All employees will be provided notice that a screening may be required when discussing the details of accepting an assignment. Employees may be re-tested on an annual basis to maintain current screening results.



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Reasonable Suspicion Testing: In addition to our client's request, we may also require an employee to submit to a screening if Holsman has reasonable suspicion that the employee:

Is under the influence of alcohol or a controlled substance.

Has violated our policy that prohibits the use, possession, sale, or transfer of drugs or alcohol while working on assignment on the premises of our client's facility through Holsman or operating a vehicle leased to Holsman.

Has sustained personal injury or caused another employee or client to sustain personal injury; or

Has caused a work related accident or is operating machinery, equipment or vehicles involved in a work related accident whether helping or solely operating said equipment.

Notice of Results: Once the report has been received from the testing lab, Holsman will inform the associate by telephone of the negative results or if necessary instruct the associate that they have tested positive in a confirmatory test and inform them of their right to request at his or her own expense, a second confirmatory retest of the original sample. In this case, if the retest does not confirm the original result, no adverse personal action may be taken against the associate based on the initial testing.

Withdrawal of Job Offer: If an applicant or employee has received a job offer made contingent on the applicant or employee passing drug and alcohol testing and has elected to pay for a second confirmatory retest which results in the same positive result, offers for placement will be withdrawn.

Confidentiality of Results: All information acquired in the drug and alcohol testing process constitute private and confidential information that will not be disclosed to any third party individual, other employer, government agency, or private organization without the expressed written consent of the associate or applicant tested.

Records Maintenance: Employees are responsible for maintaining current application, medical, employment, and personnel records with Holsman Healthcare throughout the duration of their employment.

Document Expiration & Notification: Those records that require specific scheduled updates during continuous employment with Holsman include:

Copy of current valid PT/OT/SLP licensure for state in which employee takes assignments

Copy of current valid BLS certification if available.

Copy of current valid ACLS, or any skilled certification for those employees working in such units that require respective certification

Copy of signed and dated physician's statement current within the prior calendar year

Copy of dated documentation of Tuberculosis screening current within the prior calendar year for a PPD test or current within the two prior calendar years for a chest x-ray [with documentation of a previously positive PPD] A Holsman Healthcare quality assurance representative will contact employees prior to expiration of documents to request updates. Any delay beyond an expiration date in providing requested documentation might result in disciplinary action, including, but not exclusively, assignment eligibility, employment postponement, or termination.



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Personnel File Non-Expiration Documents: Those records that do not require standard updates, but that may require periodic updates during continuous employment with Holsman, include:

Application for Employment

Employment / Work History

Professional references

Health Information Privacy & Consent Confidentiality Statement

- Documentation of immunity for Rubella, Rubeola, Mumps, Varicella, and Hepatitis B.
- o Immunity for Rubella, Rubeola, and Mumps may be proven with documentation of MMR or MR vaccination or lab titers results with appropriate antibody level readings
- o Immunity for Varicella may be proven with documentation of Varivax vaccination, lab titer results with appropriate antibody level reading, or an immune by history statement with the month and year of infection
- o Immunity for Hepatitis B may be proven with documentation of Hepatitis B three-step vaccination, lab titer results with appropriate antibody level reading, or a declination statement on receiving the immunization

W-4 form

I-9 form with notarized copies of appropriate supplemental documents

Personnel Record

Policy Consent

Disclosure & Release

Permanent Tax Residence Notification

Job Description

• Handbook Acknowledgement: A Holsman quality assurance representative will contact employees prior to and/or during an assignment to request forms and information to complete the employee's personnel file. Any delay in the receipt of required documentation might result in disciplinary action, including, but not exclusively, assignment eligibility, employment postponement, or termination.

Health Information Privacy: With the passage of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), personally identifiable healthcare records came under a new and heightened level of confidentiality. In the regular course of business, Holsman interacts and communicates directly with candidates who may share their personally identifiable information. In turn, we collect, store and process the information electronically and/or manually. With the belief that it is a person's right to have their personal information kept private, Holsman conducts business with respect for and in compliance with all applicable health information privacy laws, including but not limited to HIPAA. We respect our legal obligation to implement privacy procedures and technical security measures to keep personal information private and secure. As we are obligated to give all employees notice of our privacy practices, this statement describes how our staff may use and disclose medical information and how an employee may get access to this information and relative accounting.



Holsman Healthcare LLC

Healthcare Staffing and Consulting Services

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Required Health Information: For employment through Holsman Healthcare, "health information" includes the following items that we request on behalf of our facility clients:

Annual physician's statement

Documentation used to prove immunity to measles, mumps, and rubella [laboratory titers or records of MMR injection(s)]

Documentation used to prove immunity to varicella [laboratory titer, record of Varivax immunization, or immune by history statement]

Documentation used to prove immunity to HBV [laboratory titer or record of HBV immunization series] or a declination statement thereof

Annual tuberculosis screening [PPD test results or chest x-ray reading]

Pre-employment drug screening [conducted by Holsman]

Privacy & Disclosure Consent: Holsman Healthcare representatives cannot use an employee's health information or disclose it outside of our office without written permission. The written permission comes from a completed consent form (Health Information Privacy & Consent Confidentiality Statement) which allows account managers and quality assurance representatives to disclose an employee's health information for purposes of submittal to client facilities, of assignment to job openings at client facilities, and continued employment through Holsman at client facilities. At times, client facilities may request further documentation than the defined "health information" of a candidate's health and immunization records to comply with state or local regulations. At those instances, a Holsman representative will advise an employee of the requirements and request your consent for that additional information be covered under the same consent form already on file.

Access to Personal Health Information: The law gives employees many rights regarding personal health information. An employee may request photocopies of his/her personal health information, an amendment to any incorrect or incomplete information, additional copies of the general notice, or a list of the disclosures made of her/his health information.

Modifications to Privacy Policy: Holsman Healthcare reserves the right to change this statement at any time in compliance with and as allowed by law. If we make any changes, the new policies and protocols will apply to all health information that we already have as well as to such information that we may generate or request in the future. We will send out notices of any changes via mail and post them in our office and on our website.

Confidentiality: Employees shall consider any patient information, client business practices, as well as the terms of an assignment agreement through Holsman strictly confidential. At no time during your assignment should you discuss your rate of pay, bonuses, or any other form of compensation while on the grounds of our client facilities. Any employee of Holsman who violates this policy will be subject to disciplinary action, including possible employment termination.

Facility-specific Policies & Procedures: Since each facility to which you may travel will have its own set of rules and regulations, we ask that you clarify their policies during orientation at their facility. This inquiry will help you to feel more relaxed and make for an enjoyable assignment as well as set the standards you have for future assignments.



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Absence Notification: Any absence should be reported to the appropriate supervisor at your assigned facility at least two hours of advance. You should record the missed time appropriately on your timecard. Calling off sick may result in your inability to be available for your hourly guarantee in which case you will be paid only for hours worked. If you plan to make up hours it must be within that pay period or at the end of your contract and approved by your facility supervisor. This policy ensures that the client is not being over billed for your time and that appropriate arrangements have been made with regards to the cost of paying for additional days spent in housing or making travel changes.

Amenities & Incidentals: Holsman is not responsible for any incidental charges incurred while you are on an assignment. These incidental charges include, but are not limited to, telephone long distance, entertainment, meals, dry cleaning, and damages. You may be required to leave a deposit or credit card for such incidentals when checking into your housing.

Assignment Issues & Concerns: If while on an assignment you experience any difficulties, issues, or concerns, you should first contact Holsman Healthcare and discuss the situation immediately. Holsman Healthcare will address any complaints in a fair and responsible manner. If you have a concern or problem resulting from a misunderstanding or complaints, we encourage you to contact us and discuss the nature of the situation before going to facility personnel. DO NOT WALK-OFF OR LEAVE AN ASSIGNMENT FOR ANY REASON.

Issues & Concern Escalation: In the circumstance where the office manager/staffing coordinator cannot resolve the situation, he/she will then bring it to the attention of the appropriate account manger or other member of management. In the circumstance where you do not feel the office manager/staffing coordinator has dealt with a situation appropriately or completely, please request to speak with a member of management about the situation. DO NOT WALK-OFF OR LEAVE AN ASSIGNMENT FOR ANY REASON.

Assignment Extensions: Often times a client will request an extension of your assignment at their facility. If you choose to accept their offer please alert your recruiter immediately so that any changes in accommodations or travel arrangements can be made in a timely manner.

Customer Service Standard: We want you to feel comfortable and to be equipped with all of the necessary tools to do your work while away from home. If at anytime you have questions that you feel have not been answered to your satisfaction, please do not hesitate to contact Holsman healthcare's staffing coordinator/ office manager or any member of the Holsman team.



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Complaints: We value our reputation for holding a highly moral and ethical standard towards our employees and our clients. Each employee is a reflection of Holsman Healthcare and deserves to be treated with integrity, professionalism, and understanding. We ask that as our representative, each employee avoid activities or situations that would compromise the reputation that each of us has worked so hard to achieve. Complaints about an employee will be required in writing with all appropriate documentation provided accordingly. We will research and discuss the situation with all parties involved and depending on the severity of the incident; an understanding may be reached which could result in:

Termination of all assignments with Holsman, or

Termination of placement with that client, or

An arrangement to resolve the misunderstanding between the client, Holsman Healthcare, and the employee.

Job Safety Practices and Procedures: A safe attitude means you recognize and appreciate risks. You are aware of potential accidents before they happen and you make sure that they don't! The only person who can keep you safe every day on the job is YOU. Holsman associates have a duty to comply with the following requirements:

Know the Code of Safe Practices for the general work area and for your job.

Comply with working conditions, safe work practices and personal protective equipment requirements for your job and/or assigned client facility.

Report all unsafe conditions or observations of neglect and/or abuse to your unit supervisor immediately.

Upon arrival at assignment, ask for a safety guide for the facility, including safety equipment and evacuation procedures.

Follow all safety and emergency policies and procedures of the facility that you learned in orientation.

Do not undertake a job that appears to be unsafe or use chemicals without understanding their toxic properties.

Do not undertake a job until you have received instructions as to what is required for that position.

Keep cuts and scrapes covered and notify your supervisor if skin rashes, lesions, or dermatitis may prevent you from working with patients or blood and body fluids.

Attend required facility-specific training and education programs.

Code of Safe Practices: This code is general in nature and inclusive of many types of business activities.

All employees will follow these safe practices rules, render every possible aid to safe operations, and report all unsafe conditions or practices to their supervisor.

Supervisors will insist that employees observe and obey every rule, regulation, and order as it is necessary to the safe conduct of the work, and they will take such action as is necessary to obtain compliance.

Employees are not permitted to use alcohol and/or drugs in the workplace. Anyone known to be under the influence of alcohol and/or drugs will not be allowed on the job while in that condition and will be subject to disciplinary action.

No one will knowingly be permitted or required to work while his or her ability or alertness is so impaired by fatigue, illness, or other causes that they might unnecessarily expose that individual or others to injury.

Employees should be alert to see that all guards and other protective devices are in proper places and adjusted, and will report deficiencies promptly to the supervisor.

Approved safety shoes will be worn in specified work areas.

Horseplay and other acts that tend to endanger the safety or well being of employees are prohibited.

Work will be well planned and supervised to prevent injuries when working with equipment and handling heavy materials. When lifting objects, employees should bend their knees and use the large muscles of the leg instead of the smaller muscles of the back.

Employees will not handle or tamper with any electrical equipment, machinery, or air or water lines in a manner not within the scope of their duties.



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Job Safety Considerations: Make these common sense rules a part of your job:

Maintain good housekeeping by keeping your work area clean and clear.

Familiarize yourself with all escape exits and the location of any emergency cutoff valves or switches.

Identify hazards before you start a job or procedure.

Respect all precautions - don't take chances.

Ask your clinical manager or senior staff person when you have questions.

Know in advance what could go wrong, and what to do about it.

Follow all warnings and instructions.

Read labels and MSDS's.

Be aware of your surroundings and others around you.

Use common sense - practice sensible, safe work habits.

In case of fire, call the fire department immediately (#911) or notify a supervisor to do so (emergency numbers are posted). Alert all occupants of the building so that a safe, orderly evacuation may take place. If you're working in a client facility, follow their guidelines for announcing a fire emergency. Be aware of the locations and proper operation for fire extinguishers.

Keep alert and observe all safety signs.

Never make changes on equipment to bypass safety devices. Do not tamper with controls or switches on any equipment unless you're authorized to do so.

Lift with your leg muscles, not your back, and have a firm grasp and footing before lifting anything.

Do not attempt to lift or move anything too heavy. Always ask for assistance if necessary.

Comply with all posted personal protection equipment (PPE) notices.

Refrain from using cellular telephones at work since they may interfere with critical equipment.

Avoid placing carts on both sides of hallways - traffic congestion may lead to accidents.

Wash your hands before entering and after exiting an examination or procedure room.

• Maintain good health and practice good personal hygiene. The foregoing list highlights some of the most important and common safety rules for employees. However, this brief list is not intended as a substitute for the educational sections of this handbook or for the separate individual safety plans that our client facilities employ. These key safety rules are merely meant to emphasize some rules that should always be on the minds of any travel healthcare employees. Each client facility will have an infection control and hazard communications plan. Please refer to each client-specific plan for details.

Job Injury Incident Reporting: Any injury or illnesses suffered by an employee, even a slight one, must be reported to a Holsman representative within 24 hours of the incident. If you receive an injury while on the job, follow the steps as outlined below.

Seek appropriate medical attention and follow the facility-specific injury on the job procedures.

Contact Holsman Healthcare by phone immediately. If during Holsman Healthcare's business hours, call 877-268-9100 and advise our staffing coordinator/ office manager of the situation.

Complete a Job Injury Report form and fax it to our office at 973-759-0557 within 24 hours.

You may be required to submit to a drug screening. If you refuse, you will automatically forfeit any workers compensation benefits and may be released from employment.

Follow up with your recruiter if you lose any work due to the injury.

Failure to report your injury within 24 hours of the incident could affect your eligibility for benefits.

If you are exposed to blood or body fluids wash the exposed skin with soap and water. Flush eyes with at least one (1) liter of water. Always notify your unit supervisor of any exposure incident immediately. You must be evaluated and treated immediately. It is important to seek medical attention within two hours of the incident.



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Personnel Policy: Attendance and Punctuality

Employees are expected to be reliable and punctual in reporting for scheduled work. Absenteeism and tardiness (arriving after the scheduled/ anticipated starting time) place a burden on others and can hurt the quality of service the Company offers.

Therefore, excessive absenteeism, unauthorized absences, tardiness, or any falsifications relating to absenteeism or tardiness will not be tolerated and will lead to discipline, which may include dismissal. The Company reserves the right to require a doctor's excuse or physical examination to limit any possible abuses of this policy.

In the rare instance when employees cannot avoid being late to work or are unable to work as scheduled, they must notify their supervisor as soon as possible in advance of the anticipated tardiness or absence, but at least fifteen minutes before the employee's scheduled starting time. Failure to properly notify the Company of any absence or tardiness may result in loss of compensation during the absence (for non-exempt employees) and may be grounds for disciplinary action, up to and including termination.

Therapists are responsible for developing a plan for treatment coverage and for notifying their co-workers and their work sites of their absence and the plan for treatment coverage. Therapists may be required to make up missed work time later in the week, in accordance with all applicable Medicare/Medicaid reimbursement requirements and work site requirements as treatment demands warrant.



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Personnel Policy: Inclement Weather

At times, travel to some work, sites may be difficult or unsafe due to inclement weather. When weather appears to be inclement, radio and television will provide periodic weather updates. Staff are urged to proceed with due diligence in traveling to work sites in the event of inclement weather. Declaration of a weather emergency in the geographical area of the work site is cause for additional care in travel and /or travel decisions. In an effort to balance professional obligations to facilities and patients with our concern for safety, all staff should observe the following guidelines:

Patient treatments must be administered as ordered and stated in the plan of care/ treatment plan unless there is a declared weather emergency in the area of the nursing facility.

Time or treatments missed due to inclement weather must be made up later in the same day or week by the therapist responsible for the missed treatment or by his or her qualified designee. This is imperative due to Medicare/Medicaid regulations concerning the timeliness of providing therapy services.

If you cannot report to work due to inclement weather, you should follow absenteeism reporting procedures by calling your supervisor as soon as possible prior to your scheduled starting time, and consult with your supervisor to discuss options. This must be done prior to any missed treatments.



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HOLSMAN HEALTHCARE, LLC PHYSICAL EXAM

This is to certify that		is medically capable
of performing his/her pre	scribed duties and is free of	communicable diseases.
Physician Signature	Date	



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Personnel Policy: Dress Code

Proper attire and personal appearance must be maintained in a dignified and professional manner, during work hours, at all work sites. No specific uniform is required; all employees, however, are expected to present themselves as professionals.

Therefore, the following dress code has been instituted:

Attire should be professional, business casual, or clinical,

depending upon work demands and location.

No jeans, shorts, sweat suits, athletic attire, or skin-tight clothing.

No midriff, tank tops or crop tops.

Nametags are required at all facilities.

Lab coats must be worn at facilities that require lab coats.

All clothing should be clean, pressed, neat, and in good condition.

If "casual days" are permitted or other facility-specific dress requirements are given to employees, they must follow the dress code of any facility to which they are assigned.



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Personnel Policy: Guidelines for Appropriate Conduct

As an integral member of the Company, employees are expected to accept certain responsibilities, adhere to acceptable business principles in matters of personal conduct, and exhibit a high degree of personal integrity at all times. This not only involves sincere respect for the rights and feelings of others, but also demands that employees refrain from any behavior that might be harmful to anyone, or that might be viewed unfavorably by current or potential customers, clients, or by the public at large.

Whenever you are on or off duty, .your conduct reflects on the Company. You are, consequently; encouraged to observe the highest standards of professionalism at all times.

Listed below are some of the prohibited employee conduct of the Company. This list should not be viewed as all-inclusive. Types of behavior and conduct that the Company considers inappropriate and which could lead to disciplinary action up to and including termination of employment without prior warning, at the sole discretion of the Company, include but are not limited to, the following:

- 1. Improper conduct toward our relationships with clients, patients, or other employees;
- 2. Conduct which is inconsistent with professional standards and decorum;
- 3. Falsifying employment and/or Company records;
- 4. Violating the Company's non-discrimination and/or sexual harassment policy;
- 5. Soliciting or accepting gratuities from customers or clients;
- 6. Excessive absenteeism or tardiness or unexplained absence from work;
- 7. Fighting or using obscene, abusive, or threatening language or gestures or threats of violence;
- 8. Theft, embezzlement, or fraud of the employee or the employee's involvement in any scheme or activity pursuant to which the company has lost assets.
- 9. Having unauthorized firearms on Company premises or on Company business.
- 10. Insubordination;
- 11. Failing to maintain the confidentiality of Company information; customer information; or client information;
- 12. Reporting to work intoxicated or under the influence of non-prescribed drugs;
- 13. Incapacity on the job by reason of the use or abuse of alcohol or drugs;



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- 14. Illegally manufacturing, possessing, using, selling, distributing, or transporting drugs;
- 15. Stealing property from co-workers, customers, clients of the Company or the Company;
- 16. Conviction of any felony or of any crime involving moral turpitude;
- 17. Using outside software in the Company's system without prior management approval;
- 18. Violation of any policy or procedure of the Company.

If your performance, work habits, overall attitude, conduct, demeanor, or unacceptable performance becomes unsatisfactory in the judgement of the Company, based upon any of the conduct described above or any other policy, rule, or regulation adopted by the Company, you will be subject to disciplinary action, up to and including dismissal of the sole discretion of the Company. Furthermore, nothing contained in this provision is intended to, or should be interpreted as, altering the employment-at-will relationship between you and the Company.



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Personnel Policy: Disciplinary Procedures

Disciplinary actions may be instituted whenever violations of rules and expected behaviors occur, with the intent being to promote corrective action whenever possible.

Progressive steps, which may be taken for disciplinary action, are as follows:

Verbal warning, which is documented Written warning Unpaid suspension Termination

Notwithstanding from the above, management reserves the right to issue a verbal or written warning, suspend and / or terminate any employee, depending on the severity of the infraction(s). Discipline may begin or end at any of the levels listed above at the sole discretion of management.

All disciplinary action will be noted in the employee's personnel records.

Supervisors will address disputes, disagreements, or concerns directly with the employee or employees involved. Concerns of employees relative to a supervisor or disciplinary action may be addressed to the appropriate Operations Manager. Should this prove to be unsatisfactory, employees may address concerns to the company President or Compliance Director.



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Personnel Policy: Termination of Employment

Employees who do not have a written contract of employment and desire to terminate their employment with the Company are required to notify the employing company at least two (2) weeks in advance of their intended termination. Such notice should be given in writing to your supervisor. Proper notice generally allows the employing company sufficient time to calculate accrued benefits (if applicable) and to include monies in your final paycheck. Employees who do have a written contract are required to refer to their contractual agreement.

Employees who plan to retire are urged to provide the Company with a minimum of two- (2) months' notice. This will allow ample time of the processing of appropriate pension forms to ensure that any retirement benefits to which an employee may be entitled commence in a timely manner.

Upon termination of employment, employees must:

- 1. Return any property which belongs to the company and/or facility of placement, including, but not limited to keys, credit cards, client and staff lists, name tags, manuals, written materials, copies of manuals or written materials, equipment, and pagers;
- 2. Complete all patient documentation or other applicable paperwork;
- 3. Complete Exit interview and/or Exit survey, as requested;
- 4. Refrain from any further use of company forms, clinic paperwork, policies, and the like for any purpose; and
- 5. Declare any and all computer passwords.

The cost for any item not returned on or before the employee's last day of work may be withheld from the employee's final paycheck. The company may also take action deemed appropriate, including legal action, to recover or protect its property.

Some benefits may be continued at the employee's expense if the employee so chooses. The Human Resource Department can provide information about the benefits that may be continued and of the terms, conditions, and limitations of such continuance.

Employment is at-will at all times, unless the terms of the employee's Employment Agreement clearly provides for a different status.



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Personnel Policy: Personal Leave

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Personal leave time may be used for any reason, but it is not intended as vacation. Personal leave time may not be used during the first 90 days of employment or during any probationary period. Please notify your manager within 72 hours when using personal days. Advance notice is always preferred.

Personal leave days may not be carried over from one calendar year to the next. Unused time may be cashed out at the end of the year. Employees with contractual agreement supersedes this policy and must refer to their specific contract.

Personal time may not be used as part of the notice of intent to terminate employment with the Company, or during the last 30 days of work, unless approved by management at its sole discretion. Employees will not be paid for any accrued personal time upon termination.



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Personnel Policy: Vacation

Full time employees are eligible for vacation time after one year of service.

Vacation time must be requested in writing 30 days in advance of the desired time off by submitting the appropriate request for time off. Authorization for vacation time off will be granted solely at the discretion of the employee's manager. Vacation time may not be used during the first year (365 days) of employment or during any probationary period.

Employees cannot carry over vacation time from one calendar year to the next (employee has one year to take the previous year's vacation). Any unused vacation days may be reimbursed for cash (if eligible for paid vacation). Employees with contractual agreement supersedes this policy and must refer to their specific contract.

Vacation may not be used as part of the notice of intent to terminate employment or during the last 30 days of work, unless approved by management at its sole discretion. Employees who change status from full time to PRN will be paid their unused vacation time in their last paycheck. Employees will be paid for accrued vacation time, which they were eligible to use, as part of their final paycheck (must have worked for company for a minimum of one year).

Revised: February 22, 2011



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Personnel Policy: Unpaid Time Off

Unpaid time off is only approved at the Managing Director's/Business Manager's discretion and only after all accrued vacation and personal time is used.



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Company Policy: Holidays

The Company currently recognizes the following holidays as paid holidays:

New Year's Day MLK President's Day Memorial Day Independence Day Labor Day Thanksgiving Day Christmas Day

Full-time employees will be compensated for eight (8) hours for each holiday (eight holidays) listed above. Full-time employees who are on unpaid leave of absence from work for any reason are not eligible for compensation for legal holidays.

Employees may work a holiday in exchange for one other day off with compensation with the approval of their supervisor and of their work site and with the agreement of their patients.

Legal holidays that fall on Saturday or Sunday will be recognized for those staff who work Monday through Friday on the proceeding Friday or subsequent Monday, respectively.



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Personnel Policy: Bereavement Leave

Employees who wish to take time off due to the death of an immediate family member should notify their supervisor as soon as possible. For the purposes of this policy, immediate family is defined as any brother, sister, parent, spouse, or any dependent living, with the employee, guardian, stepchild, step-parent, grandchild, grandparent, mother-in-law, father-in-law, brother-in-law, sister-in-law, daughter-in-law or son-in-law. Up to three days of unpaid bereavement leave may be approved for employees at the discretion of the Company. This period of time may be extended with the approval of the employee's immediate supervisor on an unpaid basis. Employees may use accrued paid leave for the time off, as necessary.



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Personnel Policy: Military Leave

A military leave of absence will be granted to employees, except those occupying temporary positions, to attend scheduled drills or training or if called to active duty with the U.S. Armed Services.

The leave will be unpaid. However, employees may use any available paid time off for the absence.

Employees on two-week active duty training assignments or inactive duty training drills are required to return to work for the first regularly scheduled shift after the end of training, allowing reasonable travel time. Employees on longer military leave must apply for reinstatement in accordance with all applicable state and federal laws.

Every reasonable effort will be made to return eligible employees to their previous position or a comparable one. They will be treated as though they were continuously employed for purposes of determining benefits based on length of service, such as the rate of vacation accrual and job seniority rights.



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Personnel Policy: Jury duty

Employees are encouraged to fulfill their civic responsibilities by serving jury duty when required. Employees may request jury duty leave for the length of absence. This time off will not be paid time off, unless required by law. If desired, employees may use any available paid time off (for example, vacation benefits) while called to jury duty. Employees who are paid for this time off (per state law) will be required to remit to the company any compensation that is received from the court for jury services.

Employees must show the jury duty summons to their supervisor immediately upon notice that they have been called to serve jury duty so that the supervisor may make arrangements to accommodate their absence. Employees are expected to report to work whenever the court schedule permits.

Either management or the employee may request an excuse from jury duty if, in the management's judgement, the employee's absence would create serious operational difficulties.

Benefits will continue to be provided during unpaid jury duty leave.

Every reasonable effort will be made to return eligible employees to their previous positions or comparable ones. They will be treated as though they were continuously employed for purposes of determining benefits based on length of service, such as the rate of vacation accrual and job seniority rights.



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Personnel Policy: Family and Medical Leave Act

Family and medical leave is offered to employees through the federal Family and Medical Leave Act of 1993 (FMLA). The FMLA requires the Company to provide up to twelve (12) weeks of unpaid leave to eligible employees for a variety of reasons related to family and medical care. With some exceptions, the FMLA requires that the Company provides each returning employee with the same position or with an equivalent position with equivalent employment benefits, pay, and other terms and conditions of employment.

I. ELIGIBLE EMPLOYEES

Employees eligible for leave are those who have worked at least twelve (12) months (need not be consecutive), and at least 1,000 hours during the twelve months preceding the start of the leave.

II. BASIC LEAVE PROVISIONS

The law allows eligible employees — male or female - to take up to twelve workweeks for leave, during any twelve- (12) month calendar year:

For the birth of a child (prior to the child's first birthday), or the placement of a child with an employee for adoption or foster care (in the first year of placement)

To care for a spouse, son, daughter or parent with a serious health condition (defined below)

For the employee's own serious health condition (defined below)

a.) Serious health condition defined:

An illness, injury, impairment, or physical or mental condition that involves either inpatient care, meaning an overnight stay in the hospital, hospice, or residential care facility, or continuing treatment by a health care provider for three or more consecutive days.

Any period of incapacity because of pregnancy or prenatal care (even without treatment by a health care provider and even if the absence is less than three days, e.g., morning sickness).

Any period of incapacity due to a chronic serious condition (even without treatment by a health care provider and even if the absence is less than three days, e.g., asthma attack).



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Any period of absence to receive multiple treatments by health care providers for reconstructive surgery after an accident or injury, or for a condition that would likely result in a period of incapacity of more than three consecutive days if left untreated, e.g., cancer (chemotherapy), kidney disease (dialysis).

b.) Use of accrued paid time off/temporary disability pay

Although time taken off from work for FMLA purposes is, by definition, unpaid, employees are required to use accrued paid time off during the time taken off work pursuant to the FMLA.

Paid leave provided under a plan that covers temporary disability is considered sick/medical leave for purposes of FMLA substitution. For example, disability leave for the birth of a child would be considered FMLA leave for a serious condition and is counted in the twelve weeks of leave permitted under the FMLA. The Company is not required to offer the full twelve weeks of unpaid leave after the paid leave is used. In other words, if employee uses six weeks of paid leave, the Company must then offer six additional weeks of unpaid leave to reach the twelve weeks.

c.) Intermittent leave

Leave for adoption, foster care, or the birth of a child may not be taken intermittently or on a reduced schedule unless management and the employee mutually agree in advance to such an arrangement; leave for a serious health condition, whether it is the employee or a family member of the employee, may be intermittent or reduced if medically necessary. If an employee requests this type of

leave, based on planned medical treatment, management may require that the employee transfer temporarily to another job, with equivalent pay and benefits, which better accommodates the employee's need for recurring periods of leave.

d.) Married employees

When both husband and wife work for the Company, the full amount of leave is limited to an aggregate of twelve (12) weeks when the leave is for the birth, adoption, or foster care of a child, or to care for a sick parent.



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III. MEDICAL CERTIFICATION

If an employee requires family or medical leave due to the serious health condition of the employee or a family member of the employee, the Company requires that a request for FMLA leave be supported by a health care provider's certification of the person affected that their condition qualifies as a serious health condition. The certification should include the date on which the serious health condition began the probable duration of the condition, and other appropriate medical facts. Certification must be furnished within fifteen (15) days after the employee is aware of the FMLA-qualifying reason.

Commencement of the leave may be delayed until certification is submitted.

In addition, if the leave is taken in order to care for a family member, the certification should include a statement that the employee is needed to care for the child, spouse, or parent and an estimate of the time that the employee is needed.

If the employee is ill, the certification should include a statement that the employee is unable to perform his or her job. When the certification is for intermittent leave for planned medical treatment, it should include the dates on which the treatment is expected to be given and the duration of the treatment (Sec. 103).

Second opinion. Whenever management has reason to question the original certification, a second opinion will be required, paid for by the Company, from a health care provider chosen by the Company (Sec. 103).

Third opinion. The employee will be required to obtain a third opinion — again at the expense of the Company — when the second opinion differs from the first. The health care provider for the third opinion will be selected jointly between the employee and the Company. This third opinion is considered final and binding on both the Company and the employee (Sec 103).

IV. EMPLOYMENT AND BENEFITS PROGRAM

- a.) Job on return. With some exceptions, the law requires that the Company provide each individual with the same position or an equivalent position with equivalent benefits, pay, and other terms and conditions of employment.
- b.) Benefits. Employees who have taken leaves will not lose any benefits that accrued before the leave began.



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- c.) Health and dental insurance. The Company will maintain coverage for employees during leave under a group health plan at the same level and conditions of coverage that would have been provided had the employee not taken leave. The Company also has elected to continue dental coverage on the employee's behalf. During the leave period, the Company and the employee continue to pay their usual respective portions of the premium. If the employee fails to make the necessary payment within thirty (30) days of the due date, the Company will terminate coverage.
- d.) Premium recovery. The Company requires employees to repay the Company's share of the premium if the employee does not return from a leave for reasons other than a continuation, recurrence, onset of a serious health problem, or other reasons beyond the employee's control.
- e.) Docking exempt employees. The FMLA specifically permits deductions from exempt employees' salary for any hours taken at intermittent or reduced FMLA leave within a workweek, without affecting the employee's exempt status.

V. NOTICE REQUIREMENTS

a.) From employee to company. Employees must provide at least thirty (30) days notice when leave is foreseeable, such as for the expected birth or adoption of a child.

When a leave is required for a serious health condition with planned medical treatment, the employee is required to make a reasonable effort to schedule treatment so that disruption to Company operations is minimal (sec. 102).

b.) From Company to employee. When employees request leave, the Company is required to give them notice of their rights. Notice will be given in a language in which the employee is literate, and within a reasonable time period (one to two business days). If leave has already begun, the notice will be mailed to the employee's home and will specify the following:

Whether the leave will count against the employee's FMLA entitlement.

Any requirement to furnish medical certification of serious health conditions.



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Any requirement to furnish reasonable documentation verifying family relationship.

Employee's right to use paid FMLA leave as part of the FMLA entitlement, or whether the Company will require the employee to use up paid leave.

Whether the employee must pay health and dental insurance premiums; and how they should be paid.

Any requirement for the employee to furnish a fitness for duty certificate to return to work.

The employee's right to be restored to the same or an equivalent position.

Any liability to reimburse the Company's portion of health and dental insurance premiums if the employee does not return.

Whether the Company will require periodic reports of the employee's status and intent to return to work.

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Personnel Policy: Confidentiality of Information (HIPAA)

If employees acquire confidential information about the Company and / or clients or patients, such information is to be handled in strict confidence and not to be discussed with outsiders. Employees are responsible for the internal security of such information.

Confidentiality of patients and their clinical records must be maintained at all times. The following steps are in place to ensure the privacy of these documents:

- 1) Access to clinical records is limited to authorized personnel, including all treating Therapists and / or their supervisors, QA personnel. the patient and or his duly Authorized Agent, and Billing Clerks. This information may be exchanged among professionals directly involved with the patient's care when necessary to provide optimal treatment if done in a manner in which privacy is maintained.
- 2) Release of information from the clinical records required the written approval of the patient or his or her duly authorized representative.
- 3) Clinical records must be kept secure at all times. All patient documentation must be recorded and/or filed in the patient's permanent clinical record. These records must be returned to the facility-specific record area at the end of each therapist's shift.
- 4) Do not discuss patient-related information except where necessary to further patient's care.
- 5) Employees are expected to practice confidentiality in relation to his/her own compensation. Compensation discussions between co-workers or facility staff are prohibited by employees of the Company.

Confidential information is also extended to the employer-employee relationship as could relate to: references, past employment, history, private activities, payroll information, company business, performance, activities, etc. Any sensitive subject matter (financial or legal data, personal information about outside contacts, salary information, medical information, staff evaluations, etc.) should be discussed only to carry out an assigned function. All medical information is considered by the company to be privileged and confidential.

Employees may be asked to sign a statement of confidentiality at the time of hire and periodically throughout their term of employment to acknowledge their awareness of, and reaffirm their commitment to, this policy.

Employees found to be violating this policy are subject to disciplinary action, up to and including termination.



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Personnel Policy: Vaccination for Hepatitis B

In keeping with the universal precautions promulgated by OSHA, the Company will remunerate employees with occupational exposure to Hepatitis B Virus for the expense of obtaining the Hepatitis B vaccine series. Occupational exposure is defined as reasonably anticipated skin, eye, mucous membrane, or potential contact with blood or other potentially infectious material that may result from the performance of an employee's duty. Generally, employees with direct patient contact have potential for occupational exposure to infectious material (e.g., Hepatitis B).

All employees shall be required to complete the Hepatitis B Vaccine Employee Waiver form and to indicate their intention with regard to the Hepatitis B Vaccine. The waiver will be kept on file by the Company. Employees are encouraged to consult with their personal physicians regarding Hepatitis B and the benefits and risks of the Hepatitis B vaccine.

Employees are required to make arrangements with their personal physicians to obtain the Hepatitis B vaccine series, if it is desired. The Company will reimburse employees for the reasonable cost of obtaining the Hepatitis B vaccine series upon presentation of a copy of the bill for it from the employee's physician.



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Personnel Policy: Physical Exam and 2-Step Mantoux (TB) Test

Company employees are required to have a physical exam prior to employment. Necessary documentation of it is a physician's certificate of fitness and of the absence of communicable diseases.

Each employee must have a 2-Step Tuberculin (Mantoux) skin test upon employment. No person shall provide personal care services or skilled nursing care until after the results of the first step of the Mantoux test have, been obtained and recorded in millimeters of duration. If the first step is nonsignificant, the second step of the Mantoux shall be performed at least seven but not more than twenty-one days after the first step was performed. Only a single Mantoux is required if the individual has documentation of the two-step and annuals thereafter. Each employee must have the Tuberculin (Mantoux) skin test repeated annually. It is the responsibility of each individual to submit the

completed form by the date his/her current Mantoux expires.

Should it be necessary for a chest x-ray to be done, the employee must submit a statement, signed by the physician, as to the frequency that a chest x-ray may be repeated. The results of the physical exam and TB test may be made available to nursing facility work sites as well as the Company Human Resources Department.



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Personnel Policy: A Drug- and Alcohol- Free Workplace

It is the policy of our company to create a drug and alcohol free workplace in response to the Drug-Free Workplace Act of 1988. The use of controlled substances is inconsistent with the behavior expected of employees, subjects all employees and visitors to our facility to unacceptable safety risks, and undermines the Company's ability to operate effectively and efficiently. Therefore, the unlawful manufacture, distribution, dispersal of, possession, sale, or use of any illegal or illicit drug, alcohol, or other controlled substance in the workplace or while engaged in the Company's business off the Company's premises is strictly prohibited. Such conduct is also prohibited during non-working time to the extent that in the opinion of the Company, it impairs an employee's ability to perform on the job or threatens the integrity of the Company.

The legal use of prescribed drug is permitted on the job only if they do not impair an employee's ability to perform the essential functions of the job effectively and in a safe manner that does not endanger the other individuals in the workplace. Employees with questions or concerns about substance dependency are encouraged to discuss these matters with their Supervisor or the Human Resources Department to receive assistance or referrals to appropriate sources in the community.

Employees with drug or alcohol problems that have not resulted in, and are not the main subject of, disciplinary action may request approval to take unpaid time off to participate in a rehabilitation or treatment program. Leave may be granted if the employee agrees to abstain from the use of the problem substance or substances and abides by all of the Company's policies, rules, and prohibitions relating to conduct in the workplace.

Periodically, employees may be required to take a routine drug test. Such a test of an employee may be triggered by observations of erratic behavior, including being unduly argumentative or threatening, having slurred speech or loss of coordination in movement or incidents of potential harm to patients.

Employees convicted of controlled-substance-related violations in the workplace, including pleas of nolo contendere (i.e. no contest), must inform the Company within five (5) days of such a conviction or plea.



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Personnel Policy: Rights of Nursing Home Residents

To promote respect for the dignity of our patients and in accordance with state and federal law, all company personnel, employees, independent contractors, students and volunteers, are required to adhere to nursing home Residents' Rights laws at all times. A copy of the Federal Nursing Home Residents' Rights laws may be obtained by the administrator or director of nursing at each nursing facility work site. It is the responsibility of each staff member to read and follow the Residents' Rights laws in each state of practice.

Violations of Residents' Rights laws may constitute an incident or a crime, depending on the scope and severity of the offense. Violations of Residents' Rights should be reported in accordance with the Company's Incident Report Policy.



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Personnel Policy: Reporting Patient Abuse

In order to comply with prevailing law and ensure the safety of patients served by the Company and/or contract facilities, any Company employee who witness's actual or suspected abuse of a patient in any facility by anyone must act as follows:

- 1. Ensure the safety of the patient:
- 2. Immediately go to the facility administrator or, if absent, the DON or, if absent, the ADON or, if absent, the responsible charge nurse and advise him/her of the nature of the actual or suspected abuse.
- 3. Advise the Supervisor of the incident. Supervisor not on site can be reached via the corporate office. Advise the office staff that this is an urgent matter and request that the supervisor or other management person be paged immediately.
- 4. Complete incident reports as requested by the facility.
- 5. Participate as requested in any investigations of the actual or suspected abuse.

Employees are required by law and Company policy to report all actual or suspected abuse of patients. This includes verbal, physical, and emotional abuse, such as: yelling, slapping, shoving, punching, kicking, hitting, threats, intimidation, and the like. It is not the employee's responsibility to investigate abuse or make determinations regarding suspect behavior on the part of others.



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Personnel Policy: Incident Reports

Employees must report incidents in facilities in accordance with Company policies. All therapists are expected to know the incident report policies of each facility to which they are assigned.

An incident is defined, as any happening which is not consistent with routine operation or with the routine care of any patient or with the routine experiences of any visitor, employee, therapist, etc. An incident can include an exposure (direct contact with blood or other bodily fluids), an accident or a situation that could result in an accident, or even harassment.. It could involve property as well as individuals.

Upon identification of any incident, the staff must notify the Supervisor of such immediately. If the incident is an actual or potential injury to a patient or employee, the notification to the Supervisor must occur immediately following efforts to secure the patient and / or the employee's safety and care.

Incidents should be reported on the appropriate form, which can be obtained from the Human Resources Department or in the facility Therapy Department. A copy of the incident report must be given to the Human Resources Department within 24 hours. Failure to do so results in delay or declined coverage of the claim, interfering with compensation for insurance and payment.



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Personnel Policy: Violence in the Workplace

In order to provide a safe working environment at the Company, violent acts And/ or threats of violent acts against other employee, patients, and facility employees by a company employee or a person with a Company employee will not be tolerated. Prohibited hostile actions include, but are not limited to, the following:

Physical contact such as grabbing, pushing, shoving, fighting.

Throwing, punching, or kicking objects.

Threats of physical assault and/or threatening attack on personal reputation.

Harassing phone calls, e-mail, and voice mail.

Theft or destruction of property.

Verbal or written insults and/or threats of any nature.

Bringing a weapon to the workplace or threatening to do so.

Violent behavior will result in the immediate removal of the aggressor(s) from the workplace. In the event that a Company employee is being threatened in the workplace by a non-employee such as a family member, friend or another associate of the employee, and it is affecting the threatened employee's work performance. The police will be called, if necessary. Illegal acts such as assault or possession of a weapon at work will be reported to the police.



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Personnel Policy: Threats and Violence Policy

The Company strives to maintain a safe work environment, free from intimidation, threats or violent acts. This includes, but is not limited to, intimidating, threatening, or hostile behaviors, physical assault .or abuse, vandalism, arson, sabotage, use of weapons, carrying weapons onto Company property or at a job site, or any other act, which in management's opinion,. Is inappropriate to the workplace. In addition, bizarre or offensive comments regarding violent events and/or behaviors are not

tolerated. Under no circumstances are the following items permitted on Company property, including parking areas: firearms, knives; dangerous chemicals, explosives (including blasting caps), or any other objects carried or used for the purpose of injuring or intimidating. The exceptions to this policy are: folding knives with blades less than 3 ¼" long, and spray irritants used for personal protection, where otherwise illegal.

Employees who feel subjected to any of the behaviors listed above should immediately report the incident to any Supervisor or Human Resource representative. Complaints will receive attention and the situation will be investigated. Based upon the results of the inquiry, or direct observation, disciplinary action, up to and including termination, will be taken against the offender, if management feels it is appropriate. Law enforcement authorities will be involved as needed.

Employees who observe or have knowledge. of any violation of the policy should immediately report it to Company management. However, for unforeseen emergency events, employees should always contact proper law enforcement authorities, without any need to first inform any level of management, if they believe there is any threat to personal safety.



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Personnel Policy: Employee Harassment

The Company expressly prohibits any form of unlawful employees harassment based on race, color, religion, gender, national origin, age, pregnancy, sexual orientation, illness, disability, or status as a veteran, Vietnam-era veteran, or special disabled veteran, or status of any group protected by state or local law. Improper interference with the ability of employees to perform their expected job duties is not tolerated.

Sexual Harassment — Definition:

With respect to sexual harassment, the Company prohibits the following:

(1) Unwelcome sexual advances; requests for sexual favors; and all other verbal or physical conduct of a sexual or otherwise offensive nature especially where:

Submission to such conduct is made either explicitly or implicitly a term or condition of employment;

Submission to or rejection of such conduct is used as the basis for decisions affecting an individual's employment;

Such conduct has the purpose or effect of creating an intimidating, hostile, or offensive working environment.

(2) Offensive jokes, comments, innuendoes, and other sexually oriented statements.

Prohibited Behavior:

Examples of the types of conduct expressly prohibited by this policy include, but are not limited to, the following:

Touching, such as rubbing or massaging someone's neck or shoulders, stroking someone's hair, or brushing against another's body.

Sexually suggestive touching.

Grabbing, groping, kissing, fondling.



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Violating someone's personal space.

Lurid, off-color, sexually-oriented comments or jokes.

Foul or obscene language.

Leering, staring, stalking.

Unwanted or offensive writings.

Sitting or gesturing sexually.

Offensive e-mail or voice mail messages; internet.

Sexually oriented explicit remarks, including written oral references to sexual conduct, gossip regarding one's sex life, body, sexual activities, deficiencies, or prowess.

Repeated requests for dates.

Sexual favors in return for employment awards, or threats if sexual favors are not provided.

Sexual assault or rape.

And any other conduct or behavior deemed inappropriate by the Company.



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Complaint Procedure:

If you experience any job-related harassment based on your sex, race, national origin, disability, or another factor, or believe that you have been treated in an unlawful, discriminatory manner, promptly report the incident to your Supervisor and to the Director of Human Resources. If you believe that it would be inappropriate to discuss the matter with your Supervisor, you may bypass your Supervisor and report it to the next level of management, to your Compliance Coordinator or to the Director of Human Resources/ Business manager.

If you feel that you have been a victim of sexual harassment, make sure to document all harassment: when it happened, where it happened, any witnesses, what was said, and what was your response. Report the incident as set forth above.

The investigation of any complaint of sexual harassment will be dealt with as a confidential matter, to the extent practical.

Any person who has been found by the Company to have engaged in conduct in violation of this policy, will be subject to appropriate corrective action, depending on the circumstance, including, in the case of an employee, disciplinary action up to and including termination of employment.

The Company prohibits any form of retaliation against any employee for filing a bona fide complaint under this policy or for assisting in a complaint investigation. Knowingly making false report of sexual harassment is also a violation of this policy. This is not meant to discourage individuals from making reports. The Company recognizes that, in some situations, it may not be possible to determine whether or not a complaint of harassment is true or false. Employees should not be reluctant to report

information because they are uncertain of who will be believed and whether the allegation can be proved. Company policy prohibits retaliation against employees who make good faith reports of information regarding the enforcement of the Company's policy prohibiting sexual harassment.

However, if, after investigating any complaint of harassment or unlawful discrimination, the Company determines that the complaint is not valid and was not made in good faith or that an employee has provided false information regarding the complaint, disciplinary action may be taken, up to and including termination, against the individual who filed the complaint or who gave the false information.



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Personnel Policy: Reasonable Accommodation

The Company is an equal opportunity employer. Our employment policies are administered without regard to race, creed, color, sex, national origin, age (40 or over), ancestry, disability, pregnancy, sexual orientation membership in the military reserves of National Guard, status as a veteran, or other legally protected condition or status, except as prohibited by law.

The Company does not discriminate against a qualified individual with a disability because of the individual's disability. The policy applies to all phases of the employment process, including recruitment, selection, compensation, benefits, and other terms and conditions of employment. An employee with a disability who needs reasonable accommodation should inform the Company of the need for accommodation and identify the specific job function, which the individual believes should be modified in order to accommodate the individual's disability.



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Personnel Policy: Electronic & Telephonic Communications

All electronic and telephonic communication systems and information transmitted from these systems are the property of the Company and as such, are to be used solely for job-related purposes. The use of any software and business equipment, including, but not limited to, facsimiles, telecopiers, computers, the Company e-mail system, the Internet, and copy machines for private use is prohibited.

All pass codes are the property of the Company. No employee may use a pass code or voice-mail access code that has not been issued to that employee or that is unknown to the Company. Moreover, improper use of e-mail system (e.g., spreading offensive jokes or remarks), including the Internet, will not be tolerated.

To ensure that the use of business equipment is consistent with the Company's legitimate business interests, authorized representatives of the Company may monitor the use of such equipment at times. This includes monitoring Internet usage of any kind. This may also include listening to stored voice-mail messages.

As a general rule, employees may not forward, distribute, or incorporate into another work, material retrieved from a Web site or other external system. Very limited or "fair use" may be permitted under certain circumstances. Any employee desiring to reproduce or store the contents of a screen or Web site should contact an authorized representative of the Company to ascertain whether the intended use is permissible.

Use of the World Wide Web includes all restrictions, which apply generally to the use of Company e-mail and other electronic and telephonic equipment, as noted above. In addition, the following rules apply with respect to Internet usage:

- (1) No downloading of non-business related data: the Company allows the downloading of files from the Internet. However, downloading files should be limited to those, which directly relate to Company business.
- (2) No downloading of application programs: the Company does not permit the download or installation on Company computers of application software from the Internet. Such software may not only contain embedded viruses, but it also is untested and may interfere with the functioning of standard Company applications.
- (3) No participation in Web-based surveys without authorization: when using the Internet, the user implicitly involves the Company in his or her expression, therefore, users should not participate in Web or E-mail based surveys or interviews without authorization.



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(4) No use of subscription-based services without prior approval. Some Internet sites require that users subscribe before being able to use them. Users should not subscribe to such services without the express approval of management.

(5) No violation of copyright: many of the materials on the Internet are protected by copyright. Please do not copy or disseminate material, which is copyrighted.

Employees who violate this policy are subject to disciplinary action, up to and including termination.



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PROTECTION OF EMPLOYER INFORMATION

EMPLOYEE recognizes and acknowledges that his or her services are unique and extraordinary. **EMPLOYEE** further acknowledges that **EMPLOYER'S** files, records, lists, books and other documents and material owned by **EMPLOYER** or used by it in connection with the conduct of the practice shall at all times remain the property of **EMPLOYER**. Upon termination of this **AGREEMENT** or of **EMPLOYEE'S** employment, hereunder, irrespective of the time, manner or cause of such termination, **EMPLOYEE** will surrender to **EMPLOYER** all such files, records, lists and other documents and materials, including but not limited to (i) photographs, and/or films: and (ii) computerized information.

EMPLOYER'S methods and systems, the names and addresses of its clients, and suppliers, prices charged and paid by EMPLOYER, patient charts, evaluation and treatment records, as well as all data base of EMPLOYER and its clients, insurance records of EMPLOYER, technical memoranda, supplies, policies and operating procedures and other information, data and documents now existing or later acquired by EMPLOYEE or EMPLOYER constitute proprietary information and, thus, are not subject to disclosure by EMPLOYEE to any third party. Given the importance of this proprietary information to the EMPLOYER's enterprise, and because said information provides EMPLOYEE with a significant competitive advantage, EMPLOYEE agrees not to disclose, use, cause or aid in the disclosure or use any such proprietary information at any time for whatever reason contemplated, except as required by law or in the normal course of EMPLOYEE's requirement, during or after the termination of EMPLOYEE's employment with EMPLOYER, without the specific written consent of EMPLOYER.

EMPLOYEE is aware that **EMPLOYER** may, from time to time, monitor telephone, facsimile, internal memoranda and any and all other correspondences conducted with **EMPLOYER'S** resources, including but not limited to telephones, computers and typewriters.

Revised: March 9, 2009



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Employee Handbook Receipt and Acknowledgement Form

I acknowledge that I have received the Holsman Healthcare, LLC Employee Handbook, that I have familiarized myself with its contents, and that I will adhere to the standards, terms and conditions, policies and procedures as a condition of my employment. I understand that it is my responsibility to request clarification for any questions regarding the information I have been provided and that at anytime the information in this handbook is subject to change without notice I understand that I will be compensated on an hourly basis by completing and faxing client approved timesheets each week that I am on assignment. I understand that my employment is on an at-will basis, and that the Company or I may terminate the employment relationship at any time for any reason. I understand that no one has the right to alter this at-will employment relationship except the Company Managing Director/President, and then only in writing. I understand the Policy Against Harassment and Alcohol & Other Drug Policy as addressed in the Employee Handbook. I agree to abide by all terms and conditions put forth in the Employee Handbook, knowing that failure to do so may result in disciplinary action up to and including possible termination.

Also, should I ever leave employment, I agree to return all Company property in my possession, including the Employee Handbook, and that the value of any property which I fail to return may be reduced from any pay due and owing to me. I agree not to disclose any confidential or trade secret information I may learn while employed to any third parties at any time without the written consent of the Company President. I further release the Company from any liability for providing a reference about me to any subsequent employer to whom I may apply for employment.

Employee Signature	Date
Employee Name (Please Print)	
Employer Signature	Date