



dean's professional services - Smith & Dean, Inc.

# 2023-2024 Team Member Handbook

Dean's Professional Services (dps) is an Equal Opportunity Employer



# Office Locations & Hours of Operation

**Corporate Location:**

1250 Wood Branch Park Drive, Suite 650  
Houston, TX 77079

**Phone Number:**

713-785-7483 (local)  
800-805-9318 (toll free)

**DPS Business Hours:**

Monday - Thursday - 8am - 5pm  
Friday - 8am - 4pm

**Team Member Phone Line:**

24 hours a day, 7 days a week - 713-785-7483

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We extend a warm welcome to you at Dean's Professional Services. We are thrilled that you have chosen to join our team and eagerly anticipate a mutually advantageous partnership.

We've brought you on board because we see the potential in your skills and believe you can contribute to our Company's success. Your commitment to effectively completing your assigned tasks is greatly valued. We're confident that your dedication and hard work will not only benefit the Company but also instill in you a sense of pride and achievement.

Welcoming you as a valued member of our team brings us great joy. Each associate plays a crucial role in our operations, and we hold in high regard the expertise, experience, and background that you bring to the table. Your services form the backbone of our customer offerings, paving the way for our growth and the creation of new opportunities in the years ahead.

Your success is a priority for us, and we're here to provide all the support you need. Don't hesitate to reach out to any member of the branch staff if you require assistance or guidance.

Once again, a warm welcome to our extended family. We're excited to have you on board and look forward to achieving great things together!

Please note that these policies are not intended to establish an employment agreement, employment contract, or a legally binding document, either directly or indirectly. Nothing contained in this document, or any other materials provided to you as a team member, should be construed as a guarantee of continued employment or benefits for any specific duration.

This handbook serves as a point of reference and offers guidance on essential employment matters.

# INTRODUCTION

The Smith & Dean, Inc dba Dean's Professional Services (DPS) Team Member Handbook serves as a repository for the latest company policies and procedures related to team member conduct and operations within DPS and for their clients. Team members are expected to familiarize themselves with and comprehend the principles outlined in this handbook.

## **Several key points about this handbook should be kept in mind:**

- It provides general information and guidelines, and its scope is not intended to be all-encompassing or to address every potential application of, or exception to, the general policies and procedures described.
- If you have queries regarding your eligibility for a specific benefit or the applicability of a particular policy or practice to your situation, please direct your questions to the Human Resources department.
- Neither this handbook nor any other company documentation confers a contractual right, whether expressly or implicitly, to maintain employment with DPS.
- Furthermore, it does not guarantee fixed terms and conditions of employment. Your position is not tied to a predetermined period and can be terminated at the discretion of DPS, with or without cause and without prior notice.
- Alternatively, you retain the right to resign for any reason at any time. No representative of DPS, except the President, possesses the authority to establish an employment agreement for a specified duration or to make any agreement contrary to the terms.

We honor each team member's individual right to identify their gender as male, female, or nonbinary. To ensure inclusivity across our workforce, we have chosen to use plural pronouns such as "they," "their," and "them," which do not align with specific gender designations. This approach aims to eliminate any potential confusion in this regard.

Please be aware that the information contained in this handbook may undergo changes periodically. When such revisions occur, we will make every effort to keep you well-informed through appropriate communication channels.

A woman with long, wavy brown hair, wearing black-rimmed glasses and a bright orange blazer over a white top. She is smiling warmly at the camera. The background is a soft, out-of-focus grey.

# About Dean's Professional Services

## Who we are

Dean's Professional Services (DPS) operates as a staffing, team member development, and consulting firm headquartered in Houston, TX. Founded by Mrs. Jennifer Dean in 1993, DPS emerged with a vision and fervor to establish a "full-service solution," introducing a fresh and innovative perspective to the staffing industry.

***DPS is NOT an agency; rather, we serve as your "career home-base" and foundation for your career journey.***

Within the DPS community, our commitment revolves around ensuring your success in finding and growing your career. Our goal is to facilitate a match between you and our clients, one that aligns not only your skills and personality but also your career goals.

Beyond our staffing offerings, we extend a range of educational services, motivational workshops, seminars, as well as IT and networking solutions to our esteemed clients. DPS has garnered renown for delivering the most proficient, professional, and exceptionally skilled workforce. Your presence here signifies your successful completion of the application and screening process, endorsing you as one of the finest candidates in the field!

**What we Staff**

- Temporary
- Temporary to Hire (conversion)
- Direct Hire
- Contract or PRN

**Why work for DPS?**

- Access to a wide network of employers
- Industry Insight
- Flexibility - Temporary, Contract and Direct Hire Opportunities
- Recruiter expertise and guidance
- Confidentiality in your search for career opportunities
- Streamline your job search
- NO cost to you as a Candidate for our Job Matching service
- Working Interview for Direct Hire opportunities
- Access to Continuing Education, CPR and other upskill opportunities

**Our Mission Statement**

Our goal is to give 150%, never settling for 100%, always knowing that we can do more to serve our clients. Our clients are the reason we are in business. They are the “boss”, and we dance to the beat of their drum. They come first in all we do. Customer Service is the key to success. Our service starts and the front desk and flows throughout the office. Our business is only as good as our service.

**Healthcare**  
Staffing Solutions

**Direct Hire**  
Staffing Solutions

**Professional**  
Staffing Solutions

**Total Care**  
Staffing Solutions

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# Not sure who to talk to?

Here at Dean's Professional Services, we offer 24/7 access to our staffing experts and leadership team. In our efforts to provide the best service possible, we want to be sure our clients understand our organizational structure as well as who to talk to in certain situations.

## Credentialing / Compliance

*Credentialing, Remediations, Joint Commission Complaints & Investigations*

### Albert Blair

Director of Compliance & Education  
ablair@deansstaffing.com

### Shelly Bell

Compliance Team Lead  
sbell@deansstaffing.com

## Human Resources / Safety

*Disciplinary Action, Work-Related Injuries, Employee Misconduct (Non-Clinical)*

## Education / EdVantage

*Field and Internal Clinical Issues, Remediation, Community Partnerships*

### Gerald Stevens

Director of Operations  
gsevens@deansprofessionalservices.com

### Albert Blair

Director of Compliance & Education  
ablair@deansstaffing.com

## Customer Service / Staffing

*Staffing Customer Service, Sales & Quality, Assurance*

### Marina Franco

Director of Staffing Operations  
mfranco@deansstaffing.com

### DeMar Speller

Staffing Team Lead  
dspeller@deansstaffing.com

### Jacob Simpson

Houston Methodist Project Manager  
jsimpson@deansstaffing.com

### Nancy Diaz

Director of Sales  
ndiaz@deansstaffing.com

## Payroll / Benefits / Finance

*Payroll & Invoicing, Timesheet Issues, Approvals, Benefits, Contracts & Agreements*

### Trinetta Cruse

Payroll & Billing Supervisor  
tcruse@deansstaffing.com

### Ruben Romero

Finance & Accounting Director  
rromero@deansstaffing.com

## DPS Executive Team

### Jennifer Dean

President  
jdean@deansprofessionalservices.com

### Tiffany Wright

Chief Executive Officer  
twright@deansprofessionalservices.com

### Mike Dean

Vice President, IT Director  
mdean@deansstaffing.com

### Shannon Divers

Chief Compliance Officer  
sdivers@deansprofessionalservices.com

### Derrick Moore

Chief Financial Officer  
dmoore@deansstaffing.com

## DPS Corporate Offices

1250 Wood Branch Park Dr.  
Suite 650  
Houston, TX 77079

## deansprofessionalservices.com

713-785-7483 (Local)  
800-805-9318 (Toll Free)

## General Emails:

staffing@deansprofessionalservices.com  
payroll@deansstaffing.com  
compliance@deansprofessionalservices.com

## Program Specific Emails:

dpssolutionpool@deansprofessionalservices.com  
harrishealth@deansprofessionalservices.com  
villageteam@deansprofessionalservices.com



A background image showing two hands holding pens, one in the foreground and one slightly behind it, both pointing towards the right. The image is overlaid with a semi-transparent green filter.

# Employment Policies

## Equal Opportunity (EEO) Statement

Dean's Professional Services (DPS) is committed to fostering an inclusive and diverse workplace environment. We value and celebrate the uniqueness of everyone, regardless of their race, color, religion, gender, gender identity or expression, sexual orientation, national origin, genetics, disability, age, or any other characteristic protected by applicable laws.

DPS provides equal employment opportunities to all team members and applicants, free from discrimination or harassment. Our commitment to EEO extends to all aspects of employment, including recruitment, hiring, training, promotions, compensation, benefits, and working conditions.

We believe that a diverse and inclusive workforce enhances our ability to provide exceptional services to our clients and contributes to our overall success. We are dedicated to creating an environment where everyone feels respected, valued, and empowered to reach their full potential.

If you encounter any situations that go against these principles, we encourage you to report them promptly to our Human Resources department. DPS is firmly committed to investigating and addressing any concerns in a timely and thorough manner.

By upholding these values, DPS aims to create a workplace that thrives on fairness, respect, and equal opportunity for all.

## At Will Employment

Your employment with DPS is a voluntary one and is subject to termination by you or DPS “at will,” with or without cause, and with or without notice, at any time. Nothing in these policies should be interpreted to conflict with or to eliminate or modify in any way the employment-at-will status of DPS team members.

This policy of employment-at-will may not be modified by any officer or team member and shall not be modified in any publication or document. The only exception to this policy is a written employment agreement approved and signed at the discretion of the President or the Board of Directors, whichever is applicable.

The basic rule of Texas employment law is employment at will, which applies to all phases of the employment relationship - it means that absent a statute or an express agreement (such as an employment contract) to the contrary, either party in an employment relationship may modify any of the terms or conditions of employment, or terminate the relationship altogether, for any reason, or no particular reason at all, with or without advance notice.

Exceptions: other than statutes and express agreements, the only significant exception to employment at will is the "public policy" exception, i.e., no termination or adverse job action against a team member in retaliation for the team member having refused to commit a criminal act on the employer's behalf.

Thus, in an employment at will state, and to a lesser extent in other states, employers may develop and change personnel policies, reassign team members, and change such things as work locations, schedules, job titles, job descriptions, pay, and other aspects of jobs at will.

Texas is also a right to work state - under the Texas right to work laws ([§§101.052-053](#), Texas Labor Code), employment may not be conditioned or denied based on membership or non-membership in a union.

Source: [https://efte.twc.texas.gov/pay\\_and\\_policies\\_general.html](https://efte.twc.texas.gov/pay_and_policies_general.html)

Nothing in this statement is intended to interfere with, restrain, or prevent concerted activity as protected by the National Labor Relations Act (NLRA). Such activity includes team member communications regarding wages, hours, or other terms or conditions of employment. DPS team members have the right to engage in or refrain from such activities.

## Diversity, Equity, and Inclusion (DEI) Policy Statement

Our human capital is the greatest asset we have. At Dean’s Professional Services, we are committed to fostering a diverse, equitable, and inclusive workplace where all team members are valued, respected, and empowered. We believe that embracing diversity in all its forms, including but not limited to race, ethnicity, gender, age, sexual orientation, ability, religion, and background, contributes to our collective strength and innovation.

### Our Commitment:

- **Equal Opportunity:** We provide equal employment opportunities to all individuals without regard to any characteristic protected by applicable laws. Our hiring, promotion, and other employment decisions are based solely on qualifications, skills, and performance.
- **Inclusive Environment:** We strive to create an environment where everyone feels included and able to bring their authentic selves to work. Discrimination, harassment, and bias have no place within our company.
- **Respectful Communication:** We encourage open dialogue and respectful communication among team members. We value diverse perspectives and believe that sharing ideas and experiences enriches our

understanding and decision-making.

- **Professional Development:** We are committed to providing equal access to professional growth and development opportunities for all team members. We support initiatives that promote career advancement, skill-building, and leadership among underrepresented groups.
- **Equitable Policies:** Our policies, procedures, and practices are designed to ensure fairness and equity for all team members. We continuously review and update these policies to eliminate barriers and promote inclusivity.
- **Community Engagement:** We actively engage with our local and broader communities to promote diversity and inclusion. We support initiatives that align with our values and contribute to positive social change.

### Your Responsibility:

As a team member of DPS, you play a vital role in upholding our commitment to diversity, equity, and inclusion. Treat all colleagues with respect and kindness, and actively contribute to maintaining an environment where everyone feels valued and empowered.

### Reporting and Accountability:

If you experience or witness any behavior that goes against our DEI principles, we encourage you to report it promptly. We are dedicated to investigating such reports thoroughly and taking appropriate actions to address any concerns.

Every member of the DPS team is responsible for consistently treating their colleagues with dignity and respect. It is expected that all team members will demonstrate behavior that embodies inclusivity both while working, during work-related functions on or off the premises, and at all company-sponsored and participatory events.

To meet this obligation, every new team member is required to acknowledge our Corporate Diversity, Equity, and Inclusion policy upon being hired.

If any team member is found to have engaged in inappropriate conduct or behavior towards others, appropriate disciplinary measures may be taken.

Team members who believe they have experienced any form of discrimination that contradicts the company's diversity policy and initiatives are encouraged to seek support from either their supervisor or the Human Resources department.

### Conclusion:

Our journey towards diversity, equity, and inclusion is ongoing, and we are dedicated to continuous improvement. Together, we create a workplace that reflects the diverse world we live in, and where every individual has an equal opportunity to thrive.

This policy reflects our commitment to fostering a workplace culture that celebrates diversity, promotes equity, and values inclusion.

## Cultural Diversity

We recognize and celebrate the richness of cultural diversity that our team members bring to the workplace. This policy outlines our commitment to creating an inclusive and respectful environment that values the unique backgrounds, experiences, and perspectives of all individuals. We aim to foster a workplace where every team member feels respected, valued, and empowered, regardless of their cultural, ethnic, or social background.

- **Respect and Inclusion:** We are dedicated to maintaining a workplace that respects and values the cultural differences of our team members. We embrace a culture of inclusivity that recognizes the worth of everyone.
- **Equal Opportunity:** We ensure that all employment decisions, including recruitment, promotions, and assignments, are made based on skills, qualifications, and performance, without any bias towards cultural backgrounds.
- **Work Environment:** We are committed to creating a work environment free from discrimination, harassment, or bias related to cultural or ethnic differences. Inappropriate conduct that goes against our commitment to cultural diversity will not be tolerated.
- **Cultural Sensitivity:** We encourage all team members to be culturally sensitive and considerate in their interactions. This includes respecting diverse traditions, beliefs, and practices.
- **Learning and Education:** We promote continuous learning about different cultures and encourage team members to broaden their cultural understanding. Training and resources will be provided to enhance cultural awareness.

### Implementation

- **Training and Education:** All team members, including new hires and existing staff, will receive training on cultural diversity and its importance in our workplace. This will help create a more inclusive and culturally aware work environment.
- **Open Communication:** We encourage open dialogue and the sharing of diverse perspectives. These foster understanding and collaboration among team members from various cultural backgrounds.
- **Reporting and Addressing Concerns:** Any team member who experiences or witnesses' behavior that contradicts our cultural diversity policy is encouraged to report it through the appropriate channels. Reports will be treated confidentially and investigated thoroughly.
- **Disciplinary Measures:** Any behavior that violates our cultural diversity policy will be subject to appropriate disciplinary action. This ensures that our commitment to cultural diversity is upheld.

### Conclusion

By embracing cultural diversity, we not only enrich our workplace but also enhance our creativity, innovation, and overall success. At DPS, we are dedicated to fostering an inclusive culture that appreciates and values the contributions of every individual, regardless of their cultural background. This policy is a testament to our commitment to creating a harmonious and diverse work environment for all.

### Non-Retaliation Policy

DPS is committed to creating a safe and respectful environment for all team members. This policy outlines our stance against retaliation and emphasizes our dedication to protecting individuals who report concerns, violations, or engage in other protected activities.

Team members should feel secure and empowered when reporting concerns, grievances, or participating in any legitimate action that upholds our values and policies. We endeavor to prevent any form of retaliation against individuals who act in good faith to address issues within our organization. **All team members may report all ethical or clinical issues to proper authorities without the fear of retaliation by DPS.**

- **Retaliation Prohibited:** DPS strictly prohibits any form of retaliation against team members who report concerns, participate in investigations, file complaints, or engage in any activities protected by law or company policies.
- **Protected Activities:** Activities protected under this policy include but are not limited to reporting

discrimination, harassment, unethical behavior, safety concerns, policy violations, or cooperating with investigations.

- **Examples of Retaliation:** Retaliation can take various forms, including but not limited to negative comments, isolation, denial of promotions or opportunities, unwarranted discipline, changes in work conditions, or any action that creates an adverse work environment.
- **Confidentiality:** The confidentiality of individuals who report concerns will be maintained to the extent allowed by law. Disclosures will be made only to those who need to know for investigation or resolution purposes.

### Reporting Retaliation

1. **Reporting Process:** Any team member who believes they are experiencing or witnessing retaliation is encouraged to report it promptly to their supervisor, manager, HR representative, or other appropriate channels outlined in our reporting procedures.
2. **Confidentiality:** Reports of retaliation will be treated confidentially to the extent possible and will be investigated thoroughly and impartially.
3. **No Retaliation for Reporting:** Reporting retaliation will not result in any adverse action against the individual making the report, if the report is made in good faith and without malicious intent.

### Consequences

**Disciplinary Measures:** Any team member found to have engaged in retaliation will be subject to appropriate disciplinary action, up to and including termination of employment.

### Conclusion

DPS is dedicated to fostering an environment where team members feel comfortable raising concerns and participating in protected activities without fear of retaliation. By upholding this non-retaliation policy, we emphasize our commitment to open communication, ethical behavior, and maintaining a respectful workplace for everyone.

### Conflict Resolution

The below provides a process or protocol for a team member to present a complaint regarding wages, hours of work, conditions, performance evaluation, discrimination, disciplinary action and to allow management to either correct or explain the subject of complaint.

1. Staffing Coordinator
2. Management Team
3. Human Resource Operations Manger
4. Executive Management Team/Executive Compliance Committee

### Incident Investigation Participation

At Dean’s Professional Services, we are committed to maintaining a positive, safe and secure work environment for all employees. Part of this commitment includes conducting thorough investigations into workplace incidents, accidents, or safety concerns. We value the cooperation and involvement of our employees in these investigations to ensure that we can prevent similar incidents from occurring in the future.

As part of our commitment to safety and continuous improvement, all employees are required to participate in incident investigations when requested to do so. Timely participation is vital to the effectiveness of these investigations and our ability to identify root causes and implement corrective actions promptly.

Key expectations regarding incident investigation participation include:

1. **Timely Response:** When asked to participate in an incident investigation, employees are expected to respond promptly. This may involve providing relevant information, sharing observations, or participating in interviews with designated investigators.
2. **Honesty and Cooperation:** Employees are expected to provide truthful and accurate information during incident investigations. Cooperation with investigators and a commitment to identifying the facts surrounding the incident are essential.
3. **Confidentiality:** All information shared during an incident investigation will be treated with confidentiality and respect. It is essential that employees respect the privacy and sensitivity of these investigations.

Failure to comply with these incident investigation requirements may result in disciplinary action as we consider participation in investigations a critical aspect of our commitment to a safe workplace.

We appreciate your commitment to professional conduct, safety and your active participation in incident investigations. By working together, we can help prevent future incidents and contribute to a positive, productive and safer work environment for all.

## Code of Conduct and Ethics

DPS is committed to maintaining a work environment that fosters respect, integrity, and professionalism. This Code of Conduct outlines the expectations and standards that guide the behavior and interactions of all team members, ensuring a harmonious and ethical workplace for everyone.

DPS acknowledges the inherent risks associated with conducting business activities. Management is responsible for both implementing policies and procedures to manage these risks and for adhering to them. Team members are expected to familiarize themselves with the risks linked to their tasks and comply with relevant policies and procedures designed to mitigate those risks.

### Compliance with the Law

DPS commits to full compliance with applicable national and international laws, as well as adherence to local guidelines and regulations, including industry-specific rules governing our operations. It is the duty of all DPS team members and managers to ensure awareness of local laws and regulations affecting their business functions, including tax and exchange controls, and to seek professional advice where necessary.

Even in cases where the law doesn't directly apply, the same principles of ethics and morality must be applied to our actions, demonstrating good conduct and responsible citizenship. Team members should avoid situations that might suggest impropriety, even if these circumstances do not explicitly violate the code of conduct.

### Professionalism and Integrity

- **Ethical Behavior:** All team members are expected to uphold and embody the highest ethical standards in their actions and decisions, both within and outside the workplace.
- **Honesty and Transparency:** Communicate truthfully, transparently, and without misrepresentation in all business dealings and interactions.
- **Conflicts of Interest:** Disclose and avoid any personal or financial interests that could conflict with the interests of the company or compromise objectivity.
  - Procurement of DPS services or purchases from suppliers must be based solely on considerations of

quality, performance, price, and value. No inducements, whether monetary or otherwise, should play a role in decision-making.

- Every team member has a responsibility to avoid any personal interest, financial involvement, or relationships that compromise the interests of DPS. Activities suggesting such conflicts should be discontinued unless management deems the activity ethical and appropriate after disclosure. This should not harm DPS's integrity or reputation.

### Respect and Diversity

- **Respectful Treatment:** Treat colleagues, clients, and stakeholders with respect, fairness, and dignity, regardless of their background, role, or status.
- **Harassment and Discrimination:** Zero tolerance for any form of harassment, discrimination, or intimidation based on race, gender, religion, age, disability, or any other protected characteristic.
- **Inclusive Environment:** Create an inclusive and welcoming environment that values diverse perspectives and promotes collaboration.

### Confidentiality and Data Security

- **Confidential Information:** Safeguard confidential company information and proprietary data. Do not disclose, share, or misuse such information without proper authorization.
  - Team members must not exploit confidential information obtained during their employment for personal gain, nor disclose such information to any external party during or after their tenure. 'Confidential information' encompasses both information explicitly identified as confidential and information that is evidently confidential based on the context.
  - The term "confidential information" excludes publicly available information, pre-existing knowledge at the time of disclosure, or information mandated to be revealed by law.
- **Data Protection:** Adhere to data protection policies and protocols to ensure the security and privacy of sensitive information.

### Workplace Safety and Respect for Resources

- **Health and Safety:** Follow safety guidelines, protocols, and procedures to maintain a safe work environment for yourself and others.
- **Company Resources:** Use company resources responsibly and efficiently, avoiding misuse or waste.

### Communication and Collaboration

- **Open Communication:** Communicate openly, professionally, and constructively with colleagues, superiors, and clients.
- **Collaboration:** Foster teamwork and collaboration, valuing the input and contributions of others.

### Compliance with Laws and Regulations

DPS unequivocally opposes bribery and corruption in all forms. Offering gifts or entertainment is permissible only if consistent with local business norms and modest in value, devoid of inducements. Doubtful cases should be consulted with Management or the Executive Management Team. No inducements should be extended to third-party organizations or their representatives, including government agencies. *Recruiting team members from another facility during a work cycle is strictly prohibited in the healthcare field.*

- **Legal Compliance:** Adhere to all applicable laws, regulations, and industry standards in the course of your work.
- **Anti-Bribery and Corruption:** Never offer, accept, or solicit bribes, kickbacks, or any form of unethical advantage.

## Social Media and Online Behavior

- **Online Representation:** When using social media or representing The Company online, maintain a respectful and professional demeanor, and avoid sharing confidential or harmful content.

## Political contributions

DPS does not make contributions to political parties. There are no exceptions to this policy.

## Customer Relationships

Establishing a foundation of trust and confidence between DPS and its clientele holds paramount importance. Every member of our team is expected to consistently uphold standards of service excellence and value delivery. This involves not only meeting customer expectations but also anticipating their evolving needs.

## Competition

While DPS is committed to robust competition, our approach is rooted in fairness and ethical conduct. Our competitive success is predicated on offering genuine value and exceptional service. We maintain a policy of refraining from demeaning competitors. When our team members engage with competitors, they are obliged to abstain from discussing sensitive information. Under no circumstances should there be any endeavor to illicitly acquire trade secrets or other confidential data from competitors.

- Conversations concerning pricing strategies and remuneration, as well as any arrangements conflicting with DPS's or clients' interests, are strictly prohibited.
- Team members are prohibited from recruiting personnel from competitor or client sites while on duty.

## Community Engagement

DPS is unwavering in its commitment to support and contribute to the communities in which we operate. This commitment manifests through charitable fundraising, sponsorship of community initiatives, and voluntary engagement by our team members. Additionally, we endeavor to enrich local communities by providing meaningful employment opportunities and delivering products and services that serve the public welfare.

## Environmental Responsibility

Our business operations are conducted with high regard for both the communities we are part of and the environment. We actively take measures to mitigate any disturbances our operations might cause to these communities. While we recognize that as a service-oriented organization, our environmental impact is lesser compared to manufacturing industries, we are dedicated to minimizing our footprint. This includes waste reduction, curbing vehicle emissions, and lowering energy consumption across all our operations.

## Reporting Concerns

**Whistleblowing:** If you become aware of any unethical, illegal, or inappropriate behavior within the company, report it through proper channels promptly without fear of retaliation.

## Consequences

Violations of this Code of Conduct may result in disciplinary action, up to and including termination of employment. DPS is committed to upholding these standards and ensuring a workplace that reflects our values of integrity, respect, and ethical behavior.

By adhering to this Code of Conduct, we collectively contribute to a positive work environment, maintaining the reputation of the company, and uphold the trust of our clients and stakeholders.



## Harassment Policy Statement

At DPS, we are dedicated to fostering a respectful, inclusive, and collaborative work environment for all team members. Harassment in any form is completely contrary to our values and will **not** be tolerated. We are committed to providing a workplace free from any behavior that can be considered harassing, discriminatory, or disrespectful.

Harassment includes but is not limited to **unwelcome** verbal, written, physical, or visual conduct based on an individual's race, color, religion, gender, gender identity or expression, sexual orientation, national origin, age, disability, marital status, veteran status, or any other protected status. This applies to interactions between team members, as well as interactions with clients, customers, vendors, and any other individuals associated with our organization.

*Examples of prohibited harassment may include:*

- offensive jokes
- slurs
- derogatory comments
- or any conduct that creates a hostile, intimidating, or uncomfortable environment.
- gestures
- pictures

### Sexual Harassment

Sexual harassment involving team members, managers, or other parties is against the law and strictly enforced. Any unwelcome verbal or physical sexual advance, requirement of sexual favor or any other type of verbal or physical conduct of a sexual nature constitutes sexual harassment when:

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

Harassment can occur in various forms, including face-to-face interactions, digital communication, or through third-party channels.

### **Team member complaints, whistle blowing and suggestions.**

If any team member experiences or witnesses' harassment, we encourage them to promptly report the incident to their Staffing Coordinator, Human Resources, or any designated reporting mechanism available within the company. All complaints will be treated seriously, confidentially, and investigated promptly. Retaliation against anyone who reports harassment or participates in an investigation is strictly prohibited.

Team members can expect that DPS will give due consideration to their constructive suggestions and will provide a considered and objective review of genuine concerns and complaints. Such concerns include fraud, misrepresentation, theft, harassment, discrimination and non-compliance with regulations, legislation, policies, and procedures.

Concerns must be investigated impartially so that the team member's rights are protected. Team members who have concerns about potential unethical behavior should advise their Staffing Coordinator/Executive Management / Executive Compliance Committee or President in the first instance. To ensure that confidentiality is maintained, team members should not discuss such concerns with colleagues or other third parties, unless specifically authorized or unless it is a legal requirement.

Upon substantiation of harassment claims, appropriate corrective action will be taken, up to and including disciplinary measures that may range from education and counseling to termination, as warranted by the circumstances. Our commitment to maintaining a harassment-free workplace is unwavering, and we rely on the cooperation of all team members to uphold this commitment.

If the whistleblower is dissatisfied with the response to the concern which they have raised, or if the concern relates to a matter of exceptional gravity or sensitivity, they can contact the President and or any other regulatory agency in accordance Complaint Reporting policy.

By working together to prevent harassment and foster a culture of respect, we can ensure that DPS remains a safe and inclusive place for everyone.

## HIPAA Violation Policy

The Health Insurance Portability and Accountability Act (HIPAA) mandates strict confidentiality and security standards for protected health information (PHI). This policy outlines the measures, responsibilities, and consequences associated with preventing and addressing HIPAA violations within Dean's Professional Services.

DPS is fully committed to complying with HIPAA regulations to safeguard the confidentiality, integrity, and availability of PHI. Any unauthorized use, disclosure, access, or breach of PHI constitutes a violation of this policy and will be addressed with appropriate actions.

This policy applies to all team members, contractors, volunteers, and business associates who handle, access, or encounter PHI in the course of their work at Dean's Professional Services.

### Policy Guidelines

#### 1. Use and Disclosure:

- a. PHI should only be accessed, used, or disclosed as necessary to perform job responsibilities and as permitted by HIPAA regulations.
- b. Unauthorized disclosure of PHI is strictly prohibited.

#### 2. Access Controls:

- a. Access to PHI must be restricted to authorized individuals who require the information for legitimate purposes.
- b. Users must log out of systems containing PHI when not in use to prevent unauthorized access.

#### 3. Security Measures:

- a. PHI must be stored, transmitted, and disposed of securely to prevent unauthorized access or disclosure.
- b. Encryption and password protection should be utilized when transmitting PHI electronically.
- c. Physical security measures should be in place to prevent unauthorized access to PHI stored in physical formats.

#### 4. Reporting Violations:

- a. Any suspected or confirmed HIPAA violations must be reported immediately to the HIPAA Privacy Officer or designated responsible party.
- b. Whistleblower protections are in place for those who report violations in good faith.

#### 5. Investigation and Response:

- a. Reported violations will be promptly investigated by the designated personnel.

- b. Appropriate corrective actions will be taken based on the severity of the violation, including retraining, disciplinary action, and legal actions as necessary.

#### **6. Breach Notification:**

- a. In the event of a breach of unsecured PHI, affected individuals and regulatory authorities will be notified as required by HIPAA regulations.
- b. Breach mitigation measures will be implemented to prevent further unauthorized access or disclosure.

#### **7. Training and Awareness:**

- a. All individuals handling PHI will receive HIPAA training to understand their responsibilities and the consequences of non-compliance.
- b. Regular awareness campaigns will be conducted to reinforce HIPAA principles.

### **TIPS of HIPAA / PHI Safeguards**

- ✓ Talking so that others cannot easily overhear the conversation about the patient's condition or care.
- ✓ Place patient files in a secure area when not in use.
- ✓ Keep patient files/information from being visible to other patients or the public.
- ✓ When sending a fax ensure that it has a cover sheet with a confidentiality statement.
- ✓ Only disclose "need to know" information to other individuals regarding patient information.
- ✓ Shred all unnecessary documentation with patient information.
- ✓ Protect all patient health information (written and verbal).
- ✓ When releasing patient information for non-therapeutic purposes a signed HIPAA authorization form is needed.
- ✓ Give general condition information to family members and/or friends, i.e., good, fine, and well, etc., after checking the patient medical chart for any notices or indications that there are some restrictions to who may receive patient information.
- ✓ Only give out patient information over the phone to someone after you have checked the patient's medical chart to see if the person is permitted to receive information. If they are, ask them the name of the patient, the patient's date of birth, the social security number of the patient.
- ✓ When in doubt about the safety of the privacy of a patient's information, take reasonable steps to make the situation more secure. Ex: close the curtain in a patient's room; ask extra family members or friends not involved in the direct treatment for the patient to excuse themselves while you discuss the patient's condition.

### **Consequences of Violation:**

DPS will apply appropriate disciplinary actions against members of its workforce (team members, volunteers, and others working under Dean's Professional Services' direct control) who do not comply with the HIPAA Agreement, Confidentiality or Privacy Policies and Procedures or with other requirements relating to the confidentiality of individually identifiable health information.

Violations of this policy may result in disciplinary actions, up to and including termination of employment, legal action, and reporting to appropriate regulatory authorities.

DPS will not apply disciplinary action if the use or disclosure of Protected Health Information action involves one of the following:

1. A whistleblower disclosure made to a health oversight program, DPS or public health authority or to an attorney being retained to represent the person making the disclosure.
2. A limited disclosure by a victim of a crime to a law enforcement official, where the disclosure is about

the suspected perpetrator of the criminal act and the information disclosed is limited to the information that may be disclosed to a law enforcement official in Procedure in the Uses and Disclosures of Protected Health Information in Response to Legal Requests Policy.

3. Filing a complaint with DPS and/or the Department of Health and Human Services.
4. Testifying, assisting, or participating in an investigation, compliance review, proceeding, or hearing concerning the HIPAA Administrative Simplification provisions (i.e., Privacy, Security, Transaction Code Sets); or
5. Opposing any act or practice that is prohibited by the HIPAA privacy regulations, provided that:
  6. The person has a good faith belief that the practice being opposed is unlawful; and
  7. The manner of opposition is reasonable and does not itself violate the HIPAA privacy regulations.

### Review and Revision:

This policy will be reviewed periodically to ensure its effectiveness and compliance with any changes in HIPAA regulations. Any updates will be communicated to all relevant parties.

By adhering to this HIPAA Violation Policy, DPS strives to maintain the highest standards of PHI confidentiality and security while fulfilling its legal and ethical obligations.

## Base Wage Agreement

At DPS, the base wage is set at the minimum wage level for all team members and is in compliance with the prevailing minimum wage set by state and federal regulations. Beyond this base rate, the hourly wage may vary depending on the specific job role, taking into consideration factors such as your individual skills, training, and experience. It is our commitment to adhere to all applicable labor laws and ensure that our team members receive fair and lawful compensation.

## Applicant Onboarding Requirements

### Background Checks

As part of our applicant onboarding process, DPS conducts criminal background checks. These checks may include searching for felony and misdemeanor records in the state where the applicant resides. Additionally, if specified in a written agreement between DPS and its clients, checks may extend to states and counties of residence/employment for the previous 7 – 10 years. In cases of reasonable suspicion of criminal activity, post-employment background checks may also be conducted. Furthermore, DPS ensures that applicants are not listed in the Office of Inspector General's (OIG) or the Excluded Parties List System (EPLS) databases, or any other exclusion databases relevant to their occupation and client requirements.

### Reference Checking

DPS verifies at least one reference from previous employers, who may provide information related to the applicant's knowledge and applied job skill proficiency or confirm dates of employment.

- **Clinical applicants:** DPS also verifies professional and peer references that may attest to job knowledge, skill proficiency, and dates of employment.

### Pre-Employment Skills and Competency Assessment

To assess the skill levels of non-clinical applicants, they are required to complete skill-based evaluations. These evaluations are scored and measured to demonstrate skill knowledge, and the passing levels may vary depending on the job description. Non-clinical evaluations are typically scored as Entry Level, Intermediate, or Advanced.

Failing to pass these evaluations may result in disqualification from a specific position or client, but not from employment with DPS.

- **Clinical Applicants:** To ensure safe and efficient work in clinical settings, all clinical applicants must complete a competency self-assessment for each unit and specialty they will be assigned to. The results of these assessments are maintained in their personnel files and updated annually. Clinical applicants must achieve a passing score of 80% or a passing Angoff score, as per client requirements. If a clinical candidate does not pass on the first two attempts, they may be subject to remediation or may become ineligible for employment with DPS.

## E-Verify Employment Eligibility Verification

The Company participates in the E-Verify program, an internet-based system operated by the Department of Homeland Security (DHS) and the Social Security Administration (SSA). E-Verify allows us to electronically verify the employment eligibility of our team members and ensure that we are following federal immigration laws.

As a team member of the Company, you will be required to complete Form I-9, Employment Eligibility Verification, when you join our organization. In addition to the Form I-9 process, we will use E-Verify to confirm your employment eligibility based on the information provided on this form.

To successfully complete the Form, I-9, and E-Verify process, you will need to present specific documents that establish your identity and employment eligibility. Please provide accurate and unexpired documentation as specified in the Form I-9 instructions.

Dean's Professional Service is committed to safeguarding your privacy and maintaining the confidentiality of the information provided during the E-Verify and Form I-9 process. We will securely store this information in accordance with relevant laws and regulations.

If you have any questions or require assistance with the E-Verify and Form I-9 process, please reach out to our Credentialing team. It is essential for all team members to cooperate to ensure that the Company remains in full compliance with E-Verify and employment eligibility verification requirements.

We appreciate your commitment to helping us uphold our legal and ethical employment practices by participating in the E-Verify program.



# On the Job Expectations & Policies

Maintaining a high standard of professionalism is a fundamental aspect of being a member of the DPS team. Our understanding of professionalism encompasses a comprehensive approach that encompasses attire, punctuality, demeanor, and mindset. Every individual associated with DPS is expected to uphold professionalism consistently and without exception. Professional characteristics to be exhibited while working for Dean's Professional Services:

## Professional Conduct

### Communication:

Professional communication is vital. This includes using proper language, tone, and grammar in all written and verbal interactions. All team members are encouraged to communicate openly, transparently, and courteously with colleagues, supervisors, clients, and external parties.

### Service Oriented:

All team members are required to exhibit a combination of qualities and actions that demonstrate a commitment to providing exceptional customer experiences. Below are a few examples of excellent service.

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

## LEAP

**Learn to leap when it comes to a service complaint, OWN IT!** Remember: Customer perceptions are reality. Deliver service the customer/patient wants (not what you think they want).

**L**ISTEN

**E**MPATHIZE

**A**SK QUESTIONS

**P**RODUCE A SOLUTION

## SMART

**Be smart in providing feedback to team members.** Everyone wants feedback. Build positive relationships with co-workers by recognizing their strengths, successes, and opportunities. So Be:

**S**ENSITIVE

**M**EANINGFUL

**A**CCURATE

**R**EINFORCING

**T**IMELY

### Ethical Conduct:

Upholding the highest ethical standards is expected. This includes honesty, integrity, and maintaining confidentiality of sensitive information. Any conflicts of interest should be disclosed promptly.

### Teamwork:

Collaborative teamwork contributes to a positive and productive work environment. All team members are encouraged to actively participate, share knowledge, and support each other's efforts.

### Client and Customer Interactions:

Interactions with clients and customers should reflect the company's values and commitment to service excellence. Courtesy, responsiveness, and professionalism are essential in all client-facing interactions.

### **Adaptability:**

Demonstrating adaptability and flexibility in the face of changing circumstances or new challenges is a mark of professionalism. Embracing change and contributing positively to transitions is valued.

### **Conflict Resolution:**

Handling conflicts in a professional manner is crucial. Team members are encouraged to address concerns directly with colleagues or supervisors, maintain a respectful tone, and seek solutions collaboratively.

### **Continuous Learning:**

Demonstrating a commitment to professional growth by seeking opportunities for skill development and staying updated on industry trends is encouraged. Team members are encouraged to participate in training and development programs.

### **Respect for Diversity:**

All team members are expected to treat each other with respect and consideration, regardless of differences in background, culture, or beliefs. Discriminatory behavior or language is strictly prohibited.

### **Dress Code:**

All team members are expected to adhere to the dress code outlined in the team member handbook. This includes wearing business-appropriate attire that reflects a neat and well-groomed appearance. Clothing should be clean, in good condition, and align with the company's image.

### **Attendance and Punctuality:**

Arriving on time for work, meetings, and other scheduled commitments demonstrates respect for colleagues and the organization's time. Team members are expected to manage their schedules effectively to ensure punctuality.

### **Email Etiquette:**

Emails should be clear, concise, and professional in tone. Team members should check emails regularly, respond in a timely manner, and avoid using company email for personal matters.

### **Social Media Usage:**

When using social media, team members should be mindful of the company's reputation and their own professional image. Avoid making derogatory comments, sharing confidential information, or engaging in any behavior that could reflect negatively on the company.

## **Misconduct and Team Member Improvement Process**

General Rules: The document provides general rules on team members' conduct, serving as a guide for what is considered inappropriate behavior and the possible disciplinary actions that may be taken.

- **Responsibility and Accountability:** Team members are expected to adhere to all company policies, rules, directives, and procedures. They are responsible and accountable for their conduct.
- **Flexibility in Disciplinary Actions:** The company recognizes that it may not be possible to list every possible infraction, so the rules are not all-inclusive. Disciplinary actions can be tailored to the specific circumstances of each case.



### Disciplinary Process:

The primary responsibility for handling disciplinary matters rests with the individual Staffing Coordinator and Human Resource Manager. Disciplinary actions should be determined on a case-by-case basis, considering factors such as the seriousness of the offense and the individual's past record.

### Types of Disciplinary Actions:

1. Verbal Warning: Typically given for first offenses unless the offense is severe enough to warrant a written warning, suspension, or termination.
2. Written Warning: Given for second offenses or initial offenses that are too serious for a verbal warning. The warning includes information about further violations possibly leading to additional disciplinary actions or termination.
3. Termination: Can occur when other disciplinary measures fail, or in cases of serious policy violations. Termination may be considered for a consistent pattern of repeated violations.
4. Discretionary Action: The company reserves the right to take disciplinary action, including termination, even if violations are not explicitly listed.

### Grounds for Discipline or Dismissal:

The document lists various grounds for discipline or dismissal, including violations of company policies, state or federal laws, patient safety issues, theft, falsification of documents, possession of weapons, violation of patient confidentiality, and more.

### Additional Grounds for Licensed or Certified Team Members:

Licensed, certified, or professionally affiliated team members may face additional disciplinary actions related to their professional licenses or certifications for violations.

### Types of Disciplinary Violations:

- Violation of Team member policies and procedures, instructions, or established practice.
- Violation of state or federal law.
- Patient abuse or disregard of safety or patient care practices.
- Unauthorized possession of firearms, explosives or other weapons on company or client property.
- Violation of HIPAA or patient confidentiality (including when the patient also is a team member).
- Violation of the Drug Interdiction Policy. Team members should report to their supervisor, prior to coming to work, that they are taking prescribed medication. DPS decides whether a Team member on such medication may work.
- Unauthorized sleeping on job.
- Using vulgar or unprofessional language.
- Failure to perform assigned duties or follow instructions of your supervisor or insubordination.
- Violation of Attendance policies including but not limited to: No call/no show; excessive absenteeism and/or tardiness.
- Gross misconduct:
  - **Theft or Fraud**: Stealing company or clients, client's customers or team member's property, funds, or the property of colleagues or clients. Theft or abuse of the company or client time.
    - Forgery, embezzlement, or any form of financial fraud. Tampering with financial records or engaging in fraudulent accounting or general practices.
  - **Violence or Threats**: Physically assaulting or threatening violence against a colleague, supervisor, client,

or visitor. Possession or use of weapons, (firearms, explosives, or other weapons) on company or client premises without proper authorization or in violation of company policy.

- **Harassment or Discrimination:** Engaging in severe and persistent harassment, bullying, or discrimination based on race, gender, religion, age, disability, or other protected characteristics. Creating a hostile work environment through inappropriate or offensive behavior.
  - **Intoxication or Substance Abuse:** Reporting to work under the influence of alcohol, illegal drugs, or unauthorized prescription medication. The unauthorized sale, distribution, or possession of drugs or alcohol on company premises.
  - **Safety Violations:** Reckless disregard for safety protocols, endangering the safety of oneself, colleagues, or clients. Deliberate sabotage of safety equipment or procedures.
  - **Dishonesty or Falsification:** Providing false information on job applications, resumes, or during company investigations.
    - Altering or falsifying company records, timecards, or other documentation.
      - Transmitting false information, including omission of relevant information.
        - **Unauthorized Access or Data Breach:**
          - Unauthorized access, theft, or dissemination of sensitive company or client information, including data breaches.
          - Hacking or attempting to gain unauthorized access to company systems or networks.
- **Sexual Misconduct:**
  - Engaging in sexual harassment, sexual assault, or any form of non-consensual sexual activity.
  - Creation, distribution, or possession of explicit or inappropriate content on company premises or using company resources.
- **Sabotage or Vandalism:**
  - Deliberate destruction or vandalism of company property, equipment, or facilities.
  - Sabotaging work processes or intentionally disrupting operations.
- **Violation of Legal Obligations:**
  - Engaging in activities that violate applicable laws and regulations, such as insider trading or other white-collar crimes.
  - Failure to report illegal activities or unethical behavior to appropriate authorities.

## Attendance Policy

Consistent attendance is essential for maintaining operational efficiency, meeting client expectations, and fostering a positive work environment. This policy outlines the expectations and guidelines related to attendance.

### Regular Attendance:

All team members are expected to report to work punctually and be present during their scheduled work hours. Regular attendance is vital for the smooth functioning of teams and the overall success of the organization.

### Scheduling and Notification:

If a team member needs to be absent or arrive late, you must notify your Staffing Coordinator and Client site if required, IMMEDIATELY. This notice should include the reason for the absence and the expected duration. In cases of planned absences (such as medical appointments), advance notice is highly encouraged.

**If you are going to be late or absent, you must CALL 713-785-7483 24 HOURS 7 DAYS per week. NO EMAILS OR TEXTS will be accepted.**

- Late Arrival: If you are at all unsure about your arrival at the assignment on time, either due to sickness, weather conditions and traffic, etc. you must notify your DPS Staffing Coordinator immediately.

- Tardiness affects productivity and can disrupt team dynamics. Team members should make every effort to arrive on time for their scheduled work hours. Habitual tardiness will be addressed through appropriate channels, including counseling or disciplinary action.
- **Call off:** If you are unable to complete an assignment, it is your responsibility to notify your Staffing coordinator with as much advance notice as possible (at least 24 hours).
  - Unscheduled absences disrupt workflow and can impact colleagues and clients. If a team member is unable to come to work due to unforeseen circumstances, they must notify their supervisor as soon as possible on the day of their absence.
- **Emergency / Weather Related:** In the event of an emergency, please notify DPS team members as soon as possible.
- **Failure to contact DPS:** regarding missing an assignment will result in disciplinary action up to and including termination:

### Medical Absences:

Medical documentation may be required for extended absences to return to work. Communication with Human Resources and your Staffing Coordinator with updates regarding the absence is required.

### Walk Off / No Call No Show / Job Abandonment

- **Job Abandonment:** If you DO NOT complete the full shift, walk off or abandon any work assignment, it will be considered job abandonment and accepted as your resignation. You will not be eligible for rehire or further assignment unless extenuating circumstances.
  - **Walk off:** Leaving your client assignment or site, without notice and approval from your DPS Staffing Coordinator.
    - If you think the job, you have been assigned is unsafe or you have a problem or concern, call the office. DO NOT walk off the job.
    - If you have a problem or concern, notify your Staffing Coordinator, and stay on the job until your work is completed.
    - DPS and your Staffing Coordinator will contact the client and you to diagnose/discuss the issue and will call you with directions.
  - **No Call No Show:** Failure to report to your designated assignment without providing notice of absence is considered job abandonment.

Unless there are extenuating circumstances for any of the above, you will not be considered for rehire or future assignments.

### Consequences of Poor Attendance:

Excessive absenteeism or tardiness may lead to counseling, progressive discipline, or other corrective actions. Continual failure to meet attendance expectations may result in suspension or termination as outlined in the company's disciplinary policy. Maintaining good attendance not only reflects dedication to your role but also demonstrates respect for your colleagues, clients, and the organization.

The below attendance occurrences will result in disciplinary action up to and including termination.

- No Call No Show (Missing work without notice) = automatic termination
- Job Abandonment / Walk Off (with or without notice)
- Unexcused absence (with or without notice)
- Late Calls with or without notice

- Three (3) or more tardies
- Three (3) or more absences (excused or unexcused)
- Any three occurrences on any given assignment may result in automatic termination.

## Personal Appearance

Maintaining a polished, professional appearance contributes to a positive company image, fosters confidence among colleagues and clients, and upholds our organization's standards.

### 1. Badge:

DPS Badge and Client badge must be always worn and visible.

### 2. Clean and Appropriate Attire: Clothing should be free from stains, wrinkles, and tears.

#### a. Business Attire:

All team members are required to wear business attire that is appropriate for a professional office environment. This includes suits, dress shirts, blouses, slacks, skirts, and dresses. **NO JEANS.**

#### b. Scrubs and Uniforms:

- If required by Client: Uniforms must be worn as required by the client and should not be altered in any way.
- If provided by Client: These must be worn in accordance with departmental guidelines and should not be altered in any way.

#### c. Fits and Lengths:

Clothing should fit well and be of an appropriate length. Avoid clothing that is too tight, too short, or overly revealing.

### 3. Footwear:

- Business: Closed-toed, polished, and comfortable footwear is expected. Shoes should be clean and in good condition. Avoid overly casual or sporty footwear.
- Clinical / Hospitality: Closed-toed, comfortable, and non-slip footwear is mandatory to ensure safety and prevent accidents. Shoes should be clean and well-maintained.

### 4. Hair and Grooming:

- No extreme or unnatural hair colors are acceptable.
- Clinical: Hair should be clean and neatly groomed. Long hair should be tied back if it poses any risk of contamination.
- Hospitality: Hair restraints, such as hairnets, hats, or caps, are mandatory for all team members handling food. This prevents hair from encountering food and maintains a hygienic environment.
- Beards and mustaches should be well-trimmed and clean.

### 5. Nail Care:

Team members with long nails should keep them trimmed and clean. Nail polish and artificial nails are not allowed in clinical or food service areas due to hygiene concerns. Nail polish should be professional and neutral in color. Polish should be in good condition and free of chips. (See Infection Control: (Hand Hygiene and Fingernails))

### 6. Jewelry and Accessories:

- Minimal jewelry is recommended to prevent contamination of food and maintain food safety. Team members should refrain from wearing excessive jewelry that could potentially pose a risk.
- Clinical: Minimal jewelry is recommended to reduce the risk of infection transmission and maintain a professional appearance. Avoid wearing excessive jewelry that could potentially interfere with clinical duties.

## 7. Hygiene and Fragrances:

- a. **Business:** Team members should use subtle fragrances or avoid them altogether to maintain a professional environment that is respectful of colleagues and clients.
- b. **Clinical:** Maintain personal hygiene to uphold a sterile environment. Avoid wearing strong fragrances, colognes, or perfumes that could cause discomfort to patients or colleagues.
- c. **Hospitality:** Team members should avoid wearing fragrances that could affect the aroma of the food.

## 8. Tattoos and Piercings:

### Tattoos

Visible tattoos should be covered or minimized in professional, hospitality, clinical settings.

- a. **Visibility:** Tattoos that are visible while on duty should be minimal and inoffensive. Visible tattoos that contain offensive or inappropriate content are not permitted.
- b. **Size:** Large tattoos that may be considered distracting or disruptive should be covered while on duty or, if possible, reduced in size or modified.

### Piercing

- a. **Ear Piercings:** Should be limited to a reasonable number and type. Excessive or overly distracting facial piercings are discouraged.
- b. **Facial Piercings:** Facial piercings (e.g., nose, lip, eyebrow) are not acceptable.
- c. **Body Piercings:** Piercings on other parts of the body should be discreet and not interfere with a team member's job responsibilities or safety.

### Jewelry:

- a. Jewelry worn in piercings should be professional and not overly extravagant. In cases where safety is a concern, team members may be required to remove certain piercings during work hours.

### Cultural or Religious Accommodations

- a. The company respects and accommodates cultural or religious practices related to tattoos and piercings. Team members may request reasonable accommodation based on their beliefs.

## 9. Exceptions and Modifications:

- a. **Clinical:** may have specific dress code requirements due to the nature of the work. In such cases, team members are expected to follow the guidelines provided by their department.
- b. **Business:** In some cases, specific business functions or departments may have different dress code requirements. Team members should follow guidelines provided by their department.

## 10. Personal Protective Equipment (PPE):

Wear required PPE when working in areas with potential exposure to hazardous materials, infectious agents, or biohazards.

### Clinical:

#### a. Lab Coats and Protective Clothing:

In specific clinical areas, lab coats or other protective gear may be required. These items must be worn as instructed and properly stored when not in use.

#### b. Gloves:

The use of gloves in healthcare settings is crucial to prevent the spread of infections and maintain a high standard of hygiene. Team members should not wear damaged or torn gloves. If gloves become compromised during use, they should be replaced promptly.

### Hospitality:

- a. **Aprons and Protective Clothing:** Aprons should be worn to protect clothing from spills and splatters. Protective clothing may be required in certain areas, such as in food preparation or cooking stations.

#### b. **Gloves and Hand Protection**

Gloves should be worn when handling ready-to-eat foods to prevent cross-contamination. Team members must change gloves regularly, especially when switching tasks or handling raw foods. In areas

with exposure to hot surfaces or potential hazards, team members must wear appropriate PPE, such as heat-resistant gloves or safety shoes. If gloves become compromised during use, they should be replaced promptly.

### Exceptions:

In some cases, specific business functions or departments may have different dress code requirements. Team members should follow guidelines provided by their department.

### Personal Expression:

While maintaining professionalism is essential, team members are encouraged to express their personal style within the boundaries of the dress code.

### Consequences:

Team members are expected to adhere to the business professional dress code during work hours, including any events or meetings that require their presence. Failure to adhere to the dress code may result in corrective actions, such as counseling or further disciplinary measures.

## Non-Smoking Policy

Smoking is strictly prohibited while on the client site's premises. This policy applies to all team members, including temporary staff. We kindly request your full cooperation in adhering to this no-smoking policy to maintain a healthy and safe work environment for all individuals on-site. Violation of this policy may result in disciplinary action.

## Availability Communication

### Commitment:

At DPS, we engage team members for a range of assignments with varying durations. Prior to accepting any assignment, we encourage you to review your calendar for any pre-existing commitments.

It's important to understand that our clients expect workers to fulfill each assignment, regardless of a short or long-term nature. Your commitment to completion is crucial in maintaining the trust of our clients and ensuring successful assignments.

### Availability:

For DPS to consider placing you in a temporary, temporary-to-direct hire, or direct hire assignment, it's important for us to have insight into your schedule. However, please note that indicating your availability or call time doesn't guarantee assignments or priority status.

- To keep us informed of your availability, **you are required to notify DPS every business day between the hours of 8 AM and 5 PM, Monday to Friday.**

*Failure to communicate your availability for more than one week, and your status will be set to inactive. DPS will interpret this as a voluntary resignation, potentially affecting your eligibility for ongoing unemployment benefits.*

### Hours Guarantee

DPS **DOES NOT** guarantee a specific number of hours per shift or assignment. There may be instances where your shift is brief or even canceled for the day due to factors like census variations, production schedules, or temporary company slowdowns.

## Assignment Completion

It's your responsibility to report back to DPS for potential reassignment within 24 hours (1 working day).

Following the conclusion of your assignment, you are accountable for reaching out to DPS and informing your Staffing Coordinator of your continuing availability.

*Failure to meet this requirement or to accept a new job assignment offered without reasonable cause could be viewed as a refusal of available work. This will result in the assumption that you have voluntarily ceased employment with DPS, potentially impacting your eligibility for unemployment benefits.*

### Position Notification (*Position Communication Methods*)

At our company, we utilize various communication methods to keep our team members informed about new job opportunities. We understand that direct calls might not always be the most efficient way to relay information, so we offer the following channels for staying updated on available positions:

- **Email and Job Postings:**

We regularly send out emails and update job postings on our website to notify team members of new openings. Checking your email and visiting our website daily is important to ensure you're aware of any potential opportunities.

- **Text Messaging:**

We understand the convenience of text messaging as a communication method. We offer the option to receive text messages about open positions and allow you to respond with your availability, eliminating the need for a phone call.

- **Automated Calls:**

Periodically, when there are open orders or positions, DPS may send automated calls to our team members. These calls are not intended for solicitation, but rather to provide information about new openings and seek referrals. This is another way we strive to keep you informed about available opportunities.

- **Direct Calls:**

When an assignment aligns with your qualifications, a Staffing Coordinator will reach out to you. Please note that while you wait for such calls, **it's important to continue your daily practice of calling in to report your availability.**

### OPT Out Instructions:

To unsubscribe from any form of DPS Communication, simply click the unsubscribe link or respond with STOP to any communication. You will be removed from the list within 24 hours of your notification.

If you still receive notifications after this period, please reach out to us via email at [marketingteam@deansprofessionalservices.com](mailto:marketingteam@deansprofessionalservices.com) with the subject line "unsubscribe." We believe in transparent and effective communication, ensuring that you have access to the information you need for your career growth within our organization.



# Assignment Guidelines & Details



## Accepting an Assignment

### Accepting an Assignment/Interview:

Upon accepting an assignment or interview, it is your responsibility to ensure you have all the necessary details for a successful engagement. You will receive email confirmation with detailed information. **It is your responsibility to read this confirmation thoroughly!** Once you've received the information, you will be held accountable for the information included. This includes information such as

- Required work hours,
- Address,
- Pay Rate,
- Start and end date,
- On-site supervisor,
- Contact person,
- Parking instructions,
- Dress code,
- Reporting instructions,
- Timesheet information,
- First (1<sup>st</sup>) pay date.

### Location:

We suggest that prior to your assignment, you map or drive the location or route. In case you find yourself lost on the route to a job facility, please avoid driving back home or to the DPS office. Instead, reach out to our office for directions, and we will guide you to the job facility as swiftly as possible.

### First(1st) Day Arrival:

On your first day (Day 1) of any assignment, we kindly request that you arrive 15-20 minutes early and promptly contact your Staffing Coordinator upon reaching your destination.

### Parking, Mileage and Tolls

Please be aware that parking, mileage, and toll road expenses are not covered by DPS. It is your sole responsibility to manage and cover all expenses related to your assignment. This policy is non-negotiable.

- Exception for Travel Positions: For specific roles that entail travel between various sites during your workday, there is a provision for potential mileage expense reimbursement. However, this will only apply when you have obtained written approval from both the client and your Staffing Coordinator. Any potential reimbursement of mileage expenses will be communicated to you prior to the start of your assignment. Please note that this arrangement is exclusive to designated travel positions and requires proper authorization in advance.

### Equipment Possession and Return

It is essential to understand that you are accountable for the proper care of any issued equipment. At the conclusion of your assignment, upon termination, or upon resignation, you are required to surrender all equipment to a member of the on-site management team or a member of DPS. Please note that the client reserves the right to request their equipment back at any given time.

- Permission Requirement: Employees must not accept any equipment, including but not limited to uniforms, keys, cell phones, computers, or any other company-issued items without obtaining express written permission from DPS.
- Written Authorization: To receive equipment, employees must obtain written authorization from the DPS, specifying the equipment, its intended use, and any associated responsibilities. This written permission serves as an official record of equipment assignment.
- Proper Care and Responsibility: Once authorized to receive equipment, employees are responsible for its proper care, use, and maintenance. This includes safeguarding the equipment from loss, theft, damage, or unauthorized use.

- **Unauthorized Use:** The issued equipment is strictly intended for business purposes and should not be used for personal activities. Any misuse of company property or equipment for non-business purposes will result in charges applied to you, the equipment holder.
- **Return of Equipment:** At the end of the assignment or when no longer needed, employees must promptly return all equipment to the company. Failure to return equipment as specified may result in disciplinary action or financial responsibility for replacement costs.
- **Unauthorized Assignment:** Employees are prohibited from lending, transferring, or assigning company equipment to any other individual without the express written consent of the DPS and the client site.
- **Loss or Damage Reporting:** In the event of loss, damage, or malfunction of assigned equipment, employees must report such incidents to the DPS as soon as possible for appropriate action and resolution.

In situations where equipment is lost or damaged due to neglect or use contrary to its intended purpose, you, as the equipment holder, consent to covering all associated repair or replacement costs. These charges will be deducted from your payroll, whether during your employment or upon termination/resignation.

## While on Assignment

### Ongoing Communication – Check Ins

The Staffing Coordinator will contact you throughout the first (1<sup>st</sup> week of your assignment to ensure all is going as expected and answer any questions you may have. Thereafter a member of your staffing team will reach out weekly to check in and see how the assignment is going, check in on any time off request, any concerns, questions, and if we can be of any service to you while on your assignment.

### During your Assignment

Throughout the assignment, please bear in mind that you are a part of the DPS team. If your on-site supervisor makes requests beyond your assigned responsibilities (such as overtime or tasks outside of your specialty), you must promptly inform your DPS Staffing Coordinator for necessary approval.

### Remote Work and Telecommuting Policy

In the event of remote work or telecommuting arrangements, team members are required to maintain their designated work schedule and ensure their availability during official working hours. It's important to note that any remote work must receive prior approval from the respective supervisor.

### Cellular Phone and Personal Electronic Device Usage Policy

To maintain a productive work environment, the use of cellular phones and personal electronic devices is strictly prohibited while you are on your shift. Should you need to have your cellular phone with you, it is imperative that it is set to always vibrate or silent mode.

In the event of needing to make or receive a phone call, you are only permitted to do so during your scheduled lunch break or the allocated 15-minute break.

It's crucial to understand that any violation of this policy will lead to disciplinary measures, which may extend up to and include termination.

### E-mail and Internet Usage

Our team members have been granted the privilege to utilize email and the internet in alignment with their job responsibilities.

Limited personal usage may be permissible during designated personal time, such as breaks. However, it's important to note that such personal usage must adhere to the client site guidelines and should be directly linked to DPS payroll or company-related activities. Ensuring that your actions do not expose our client or DPS to inappropriate or unauthorized liabilities.

It is imperative that all team members strictly refrain from utilizing email or internet services in any manner that may breach copyright, contractual obligations, or license agreements. Engaging in derogatory comments about any individual or entity is strictly prohibited. The viewing, sharing, or engagement with explicit, pedophilic, or offensive content is unequivocally forbidden.

In instances where personal opinions are expressed in emails, it is essential to clearly label them as such. To mitigate the risk of intentionally introducing or disseminating viruses or other harmful software, team members must exercise the highest level of caution and prudence.

### Inspections

Desks, telephones, and computers are the property of either DPS or its Client. Both DPS and the Client retain the right to access or inspect your workspace, including, but not limited to, desks and computer storage devices, with or without prior notice. The fax, copier, and mail systems, including email, are designated for business use exclusively. Personal activities of any kind should not be conducted using these systems.

In certain circumstances approved by management, telephone conversations may be subject to monitoring, and voice mail messages may be reviewed as part of customer service oversight.

Please be aware that any private conversations or messages overheard or accessed during such monitoring, which include threats against individuals, may be used as grounds for immediate termination for cause.

### Client cancellation – No Notice

In the event you travel to a cancelled assignment without being properly notified, you will be reimbursed two (2) hours travel pay at your assignment pay rate. Requests for reimbursements of mileage expenses must be accompanied by supporting documentation (i.e., Yahoo Maps or Google Maps).

### Client Designated Do Not Return Policy Statement

If you are designated as a Client **DNR (Do Not Return)** or **DNU/DNA (Do Not Use or Do Not Assign)** for any reason, your status and the circumstances will undergo review by management. The final determination will be communicated to you.

If, after review, your status is determined to have a negative impact on your continued employment with DPS, you will be classified as NER (Not Eligible for Rehire).

It is important to acknowledge that failure to meet the expected standards at a client facility will result in an automatic DO NOT RETURN designation. Please be aware that no warning will be issued in such instances.

### Ending Assignment

Remember, even though an assignment might be ending, the way you handle your departure can leave a lasting impression. Being professional, courteous, and proactive can lead to positive references and potential future opportunities.

- **Resignation with Notice:** Please provide a minimum of two (2) weeks' notice, when resigning from an assignment.
- **Resignation without Notice:** Failure to provide Dean's Professional Services with a minimum five (5) day notice before leaving a position is considered job abandonment.
- **Assignment Completed:** Client has ended the assignment due to completion of your obligation.
- **Client Released:** Client has ended your assignment without notice and asked that you not return or leave property immediately.

#### When your Assignment has ended

1. Complete and handover any Tasks
2. Collect personal belongings
3. Return any company property
4. Express gratitude
5. Ask your Staffing Coordinator for further information after you have left the client site
6. Call in your Availability.
  - a. Update resume and contact information.
  - b. Add new skills acquired.

In the event of your departure from a client site, regardless of the circumstances, it is of utmost importance to understand that you are expressly forbidden from contacting anyone on the site regarding your employment status or revisiting the site without obtaining explicit written authorization or communication from DPS (Dean's Professional Services). DPS serves as your official employer and will oversee your employment status as well as the retrieval of any company-owned property or personal belongings.

## Benefits

### Vacation Time Off Request

When requesting time off, it's important to adhere to our established guidelines to ensure a smooth process. Time off requests will be considered only for team members who are actively employed at the time of the request.

Time off requests must receive prior approval from the Staffing Coordinator and the Client site team before any time off is taken. **Please remember that submitting a request does NOT guarantee approval.**

#### Time Off Request Instructions:

1. **Submit:** All time off requests through the Dean's Professional Services – Team Member Time Off Request Form. This form is accessible on our company website.  
<https://deaprosv.typeform.com/to/zvNH00?typeform-source=www.deansprofessionalservices.com>
2. **Notice Period:** Requests for time off must be made a minimum of 2 weeks in advance if the requested time off is eight (8) hours or more.
3. **Vacation Time Off:** Please note that time off should not be requested for nonscheduled workdays.
4. **Eligibility for Vacation Pay:**
  - a. You must be actively employed to receive vacation approval and subsequent pay.
  - b. Team members become eligible for one week of vacation after completing 2,080 hours of work within the last 14 months. This is equivalent to one year of full-time employment.
  - c. Your employment record must be free from any client:

- i. DNU – Do Not Use
- ii. DNA – Do No Assign
- iii. DNR – Do Not Return
- d. Vacation pay will not be provided upon termination or resignation.

## Holiday Pay

Our holiday pay policy is designed to provide clarity on holiday entitlement and pay for our team members. Please review the following guidelines:

### Holidays:

The following holidays are considered entitlement holidays for holiday pay:

- New Year's Day
- Independence Day
- Labor Day
- Memorial Day
- Thanksgiving Day
- Christmas Day

### Eligibility for Holiday Pay:

- Team members become eligible for 8 hours of holiday pay after completing 2,000 hours of employment within the 14 months leading up to the holiday.
- To be eligible for holiday pay, team members must have worked 80% of the month preceding the specific holiday in question.
- To qualify for holiday pay, it's necessary to have an active employment status and no "DO NOT RETURNS" (DNR) recorded against your name.

### Work Performed on Holiday:

If you are required to work on a holiday based on the terms of the client contract and the site where you are currently working, you are entitled to receive holiday pay for the hours worked on that holiday.

## Insurance

Medical and Dental insurance are available at a discounted group rate.

### Eligibility:

- Team members must have completed thirty (30) days of employment or 30 completed shifts with an average of thirty (30) hours per week.
- Request for insurance benefits must be completed within thirty (30) days from the start of employment.
- Team members can request insurance information to be sent to them or access it directly from our website under the Team member Section.

Enrollment Process: Team members can set up their insurance enrollment online by visiting <https://www.deansprofessionalservices.com/benefits> **When initiating enrollment, it's recommended to contact the DPS Accounting department for assistance and guidance.**

We are committed to providing accessible and beneficial insurance options to our team members. If you have any questions, require further assistance, or need more information about the enrollment process, please don't hesitate to reach out to us.

# Payroll

## Payroll Policy

To get paid, submit your time via the WebCenter (unless told to use another system) no later than Saturday at Midnight.

To be paid timely, you must follow the below listed procedures:

- Electronic Timesheet: Submittals must be completed by Saturday by Midnight
  - The standard DPS pay period is weekly, with distribution on Fridays only.
- Late Timesheets: All timesheets will be honored the following pay period if not received on Saturday by Midnight.
- Timesheets not received on time will be paid one (1) week late.

### Payroll Notes

- It is your responsibility to make sure your timesheet is submitted on time.
- Do not rely on anyone else to complete your timesheet.
- Payroll will not process your check if your is not submitted.
- Timesheets – Certain clients require that you submit time into their system, but you must also submit time into the WebCenter. You will be notified if this is the case.
- If you do not have a direct deposit, your pay will be deposited onto a pay card to be picked up at the Accounting Office.
- The manager or supervisor must initiate any changes or corrections.
- **If your timesheet is “Rejected” you must log in, correct your timesheet, and then resubmit.**

## Pay Increase Policy:

At Dean’s Professional Services, we believe in recognizing and rewarding our field team members for their hard work and dedication. Please review the following details regarding our pay increase policy:

### Eligibility:

You must have worked a minimum of 720 hours on your current assignment within the past 14 months.

- a. Ineligible - Anyone with a break in Dean’s Professional Services employment lasting 30 days or more.

### Requesting a Pay Increase:

1. Submittal Process: If you wish to request an increase in your pay, you are required to submit a DPS Request for Pay Increase form <https://deaprosv.typeform.com/to/xxOa7l>
2. Review Process: Your pay increase request will be carefully reviewed by our Staffing Coordinator, Client, and Human Resources team. They will consider your performance record along with the request to determine the amount of your increase, if applicable.

We value your dedication and contributions to our team and are committed to maintaining a fair and transparent pay increase process. If you have any questions, need further guidance, or require additional information, please don't hesitate to reach out to our Human Resources team.

3. Evaluation and Feedback:

We evaluate the performance of our field team members based on evaluation reports from the client and your Staffing Coordinator, providing constructive feedback and an objective foundation for salary

recommendations.

### Address Changes

Address Changes must be submitted in writing via fax or by updating your information online by Sunday at midnight to be effective for payroll purposes.

### Payroll Deduction

Upon hire, you authorize DPS to payroll deduct from your earnings for team member endorsed deductions such as insurance, transportation fees, drug testing, replacement of company property that you damaged or lost, to reimburse DPS for documented overpayments, or for standard company bank/payroll processing fees to receive wages earned more frequently than regulation.

### Lost Pay Card Policy

DPS is not responsible for the timeliness of the US Postal Service; we can only replace your pay card, free of charge, after 10 business days of pay date.

If a pay card is lost (missing, misplaced, destroyed, lost in the mail, etc.), the following “Lost Pay Card Policy” will be followed for pay card replacement. Team members must provide a written notification (signed and dated) to DPS Accounting department of the lost pay card.

### Payment Options

DPS team members can receive their pay:

- By direct deposit (your check stub is accessible in your team member profile) OR
- ADP Pay Card
- You must provide DPS with a written, signed, and dated authorization giving permission for someone other than yourself to physically pick up your pay card.
- **Direct Deposit is recommended.** Funds are transferred on Thursday and usually available Friday morning. Changes to direct deposit must be submitted in writing and due Sunday by midnight for the following Friday’s pay.

***PLEASE CONTACT THE PAYROLL DEPARTMENT IF YOU HAVE ANY QUESTIONS OR CONCERNS REGARDING YOUR PAYROLL.***



# Workplace Safety

The safety and well-being of our team members are of utmost importance. This Team Member Safety Policy is established to create a safe work environment, prevent accidents and injuries, and ensure compliance with all applicable safety regulations and guidelines.



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### Team Member Responsibilities

Every team member working for Dean's Professional Services (DPS or The Company) are responsible for:

- Adhering to all safety policies, procedures, and guidelines.
- Reporting any safety hazards, incidents, or near misses to their supervisor or safety officer.
- Using safety equipment and personal protective gear as required.
- Participating in safety training programs and drills.
- Taking reasonable care to prevent accidents and injuries to themselves and others.

### Safety as a Priority

Safety is a constant concern for the company, the organization's commitment to providing a safe workplace is paramount. We require all team members to give serious consideration to safety rules and regulations presented through various means, including posters, discussions with supervisors, and posted department rules.

### Safety Culture

The Company fosters a culture of safety where team members actively contribute to safety improvement initiatives and communicate openly about safety concerns. We encourage all team members to participate in safety committees and initiatives.

### Safety Compliance

Team members are expected to comply with all safety policies, procedures, and guidelines. Non-compliance and willful violations may result in disciplinary actions, up to and including termination.

### Safety Training

DPS is committed to providing ongoing safety training to ensure that team members are aware of potential workplace hazards and know how to mitigate risks. Training programs may include:

- New team member safety orientation.
- Periodic safety refresher courses.
- Specialized training based on job roles and responsibilities.
- Training in the safe use of equipment and machinery.

### Reporting Unsafe Conditions

DPS encourages team members to promptly report unsafe conditions or hazards to their supervisors, fostering a culture of open communication regarding safety concerns.

### Emergency Response

In the event of an emergency, all team members must:

- Evacuate the premises promptly using designated exit routes.
- Follow emergency procedures as outlined in our Emergency Response Plan.
- Seek medical attention as necessary and report injuries to a supervisor.

## Accident Reporting

The provided workplace injury reporting policy is clear and emphasizes the importance of promptly reporting all injuries, regardless of their perceived severity, to ensure the safety and well-being of team members and compliance with workers' compensation regulations. Below is a breakdown of the key points:

### Immediate Reporting

All accidents, injuries, near misses, and safety incidents must be reported to a supervisor or safety officer as soon as possible, regardless of the severity.

### Worker's Compensation

Highlights that failure to report an injury event could affect the team member's eligibility to receive Worker's Compensation benefits, emphasizing the importance of reporting.

### Drug and Alcohol Testing

In the event of a work-related injury, team members may be required to undergo drug and/or alcohol testing. Failure to comply with testing requirements can result in immediate termination and affect eligibility for Worker's Compensation benefits.

### Steps to Take in Case of Work-Related Injury

Outlines the steps to follow if injured on the job, including reporting the injury to both the client company and the DPS On-Call Manager.

- Specifies the 24/7 availability of the DPS On-Call Manager for reporting injuries.
- Requires team members to seek medical treatment from the DPS company approved physician if needed.
- Mandates submission to a drug test.
- Stresses the importance of following the medical advice and treatment prescribed by the DPS approved physician.
- Requires team members to be available for light-duty work if authorized by the physician.

Overall, this policy is designed to create a safety-conscious work environment, ensure proper medical care in case of injury, and adhere to legal and regulatory requirements related to workers' compensation and workplace safety. It's crucial for all team members to be aware of and understand this policy to promote a safe and compliant workplace.

### Hazard Identification and Control

Team members are encouraged to identify and report potential hazards in the workplace. Management will take prompt action to assess and control these hazards to prevent accidents and injuries.

## Specific Safety Guidelines

To ensure your safety, and that of your coworkers, please observe and obey the following rules and guidelines: Observe and strictly adhere to the safety procedures established for your job role.

- **Report Illness or Injury:** In the event of illness or injury, no matter how minor, promptly report it to your supervisor. Under no circumstances should a team member attempt to treat their own injuries or remove foreign particles from the eye.
- **Attire Around Machinery:** Avoid wearing loose clothing or jewelry in the vicinity of machinery, as it may become entangled in moving equipment, resulting in serious injuries.
- **Avoid Distractions:** Refrain from diverting the attention of fellow team members, as it could potentially lead to accidents or injuries. If it becomes necessary to get the attention of another team member, do so when it can be done safely.
- **Personal Protective Equipment:** In situations where required, you must wear appropriate protective equipment such as goggles, safety glasses, masks, gloves, hairnets, etc.

- **Proper Storage:** When stacking materials, skids, bins, boxes, or other equipment, ensure they are positioned in a way that does not obstruct aisles, exits, firefighting equipment, electric lighting or power panels, valves, and other crucial areas.

### Important Locations you need to Know

- Fire extinguisher in your department
- Closest fire-alarm Pull
- Evacuation route
- Fire doors and walls
- Next safe fire zone (smoke compartments)

### Safety Checklist

It is every team member's responsibility to be on the lookout for possible hazards. If you spot one of the conditions on the following list or any other possible hazardous situation report it to your supervisor immediately.

- ⚠ Slippery floors and walkways
- ⚠ Leaks of steam, water, oil, etc.
- ⚠ Tripping hazards, such as hose links, piping, etc.
- ⚠ Blocked aisles
- ⚠ Missing (or inoperative) entrance, exit signs and lighting
- ⚠ Blocked fire extinguishers, hose sprinkler heads
- ⚠ Blocked fire doors
- ⚠ Poorly lighted stairs
- ⚠ Evidence of any equipment running hot or overheating
- ⚠ Loose handrails or guard rails
- ⚠ Evidence of smoking in non-smoking areas
- ⚠ Loose or broken windows
- ⚠ Roof leaks
- ⚠ Dangerously piled supplies or equipment
- ⚠ Directional or warning signs not in place
- ⚠ Open or broken windows
- ⚠ Safety devices not operating properly
- ⚠ Unlocked doors and gates
- ⚠ Machine, guards missing, damaged, loose, or improperly placed
- ⚠ Electrical equipment left operating (coffee makers, etc.)
- ⚠ Open doors on electrical panels

### General Housekeeping Guidelines: Ensuring a Clean and Safe Environment

When on assignment, please consult your supervisor to acquaint yourself with the designated cleaning timetable. In essence, this schedule should encompass the following key aspects:

- **Clean and Orderly Workspaces:** It is imperative that our work locations remain tidy and organized.
- **Clear Aisles:** Keep aisles free from obstructions such as machines, merchandise, boxes, shopping carts, and the like. Promptly address spills, drips, and leaks to prevent slip and fall hazards.
- **Proper Waste Disposal:** Dispose of trash in the designated receptacles. Stock shelves thoughtfully to prevent merchandise from falling over upon contact.
- **Contaminated Surfaces:** Any equipment or work surfaces visibly contaminated with blood or infectious material must be cleaned and disinfected promptly, both during the work shift and at its conclusion, if contamination has occurred since the last cleaning.
- **Protective Coverings:** Remove and replace protective coverings like plastic wrap, aluminum foil, and imperviously backed absorbent paper when they become overtly contaminated or at the end of the shift if contamination has transpired during the shift.
- **Refuse Receptacles:** Regularly inspect and decontaminate all pails, cans, bins, or similar containers intended for refuse that may reasonably become contaminated with blood or other potentially infectious materials. The frequency of these inspections will be determined by the client.
- **Handling Broken Glassware:** Under no circumstances should contaminated broken glassware be handled by hand. Instead, employ mechanical means such as a brush and dustpan, tongs, or forceps for cleanup.
- **Contaminated Sharps:** Do not store or process reusable sharps contaminated with blood or other potentially infectious material in a manner that necessitates reaching by hand into the container where they are placed.

## Fire Safety

In case of a fire remember RACE and PASS for Emergency procedures.

### R A C E

<b>R</b> ESCUE	Remove persons from immediate area.
<b>A</b> LARM	Pull alarm box located by exits.
<b>C</b> ONFINE	Close doors as you leave to confine fire.
<b>E</b> XTINGUISH	Extinguish fire if possible or evacuate.

### P A S S *to use a fire extinguisher.*

<b>P</b> ULL	Pull the pin.
<b>A</b> IM	Aim the hose at the base of the fire.
<b>S</b> QUEEZE	Squeeze the handle.
<b>S</b> WEEP	Sweep back and forth.

### Be proactive and prepared:

- ✓ Keep your work area clean.
- ✓ Running and horseplay are strictly forbidden.
- ✓ Do not block access to fire extinguishers.
- ✓ Do not tamper with electric controls or switches.
- ✓ Do not operate machines or equipment until you have been properly instructed and authorized to do so by your supervisor.
- ✓ Do not engage in such other practices as may be inconsistent with ordinary and reasonable common sense safety rules.
- ✓ Report any UNSAFE condition or acts to your supervisor.
- ✓ HELP TO PREVENT ACCIDENTS.
- ✓ Use designated passages when moving from one place to another; never take hazardous shortcuts.
- ✓ Lift properly--use your legs, not your back. For heavier loads, ask for assistance.
- ✓ Do not throw objects.
- ✓ Clean up spilled liquid, oil, or grease immediately.
- ✓ Wear closed toe shoes and appropriate clothing.

## Drug Interdiction Policy

At DPS, our utmost priority is to maintain a safe, healthy, and efficient working environment for all team members. The use of drugs or alcohol while on the job presents significant safety and health hazards not only to the user but also to everyone working alongside them. Additionally, any involvement in the use, sale, purchase, transfer, or possession of illegal drugs within the workplace is unacceptable and jeopardizes the safety, health, and efficiency of our operations.

DPS firmly believes in its right and responsibility to ensure a secure, healthy, and productive workplace for all team members, as well as to protect the property, information, equipment, operations, and reputation of DPS and our clients. To uphold these principles, DPS reserves the right to conduct random drug screenings of any team member at any time. We recognize our duty to our customers to provide services free from the influence of illegal drugs, and this policy serves as our commitment to delivering drug-free services.

All team members are subject to several types of drug screenings at DPS:

1. **Pre-Employment Screening:** Before joining our team, all prospective team members are required to undergo drug screening.
2. **Random Drug Screening:** DPS conducts random drug screenings on an ongoing basis to maintain a drug-

free workplace. Any team member may be selected for a random drug screening at any time.

3. **Post-Accident Screening:** In the event of a work-related injury, team members will be required to submit to drug and/or alcohol testing as part of the accident investigation process.
4. **Reasonable Suspicion:** In the event of specific observations of the appearance, behavior, speech, or body odors of the team member whose motor ability, emotional equilibrium, or mental acuity seems to be impaired.
  - The Location Manager/HR reports to DPS the issue, providing specific details of the facts.
    - a. The Location Manager will be asked to supply any supporting documentation or risk management documents required by the client site.
    - b. Additionally, the client will inform us of their internal policy.
  - A conference will be held with the onsite manager and the team member, if possible:
    - a. If signs of intoxication or drug use are observed, the team member will be provided a safe ride to the testing facility.
    - b. If no signs of intoxication or drug use were observed, the team member will be given the opportunity to drive to a clinic and is required to report to the nearest clinic.
    - c. If the team member fails to report or refuses, immediate termination will be considered.
  - Drug Screen
    - a. All test results are sent to the lab for further confirmation, regardless of the initial outcome.
    - b. Signs of intoxication or drug use
      - i. Rapid Screen is performed.
      - ii. If the team member tested negative and was sober, transportation will be provided back to their vehicle.
      - iii. If the team member tested positive, transportation home will be arranged.
    - c. No signs of intoxication or drug use
      - i. Lab based screen is performed.
  - The team member may be suspended pending the results of the tests:
    - a. The team member will be required to participate in the investigation process.
    - b. Additional details may be requested from the client.
    - c. The outcome of the test results will determine the team member's eligibility moving forward.

A positive result in any drug screening, whether pre-employment, random, reasonable suspicion, or post-accident, will lead to disciplinary action, which may include termination. This action aligns with DPS's unwavering commitment to fostering a drug-free and safe work environment.

We appreciate your understanding and cooperation in upholding this Drug Interdiction Policy, which is vital in ensuring the well-being of all team members and the continued success of our organization.

## Workplace Violence Policy

Dean's Professional Services expects all its team members to carry out their duties in a safe and productive manner, creating a workplace that is free from any actual, threatened, or perceived violence. Team members are required to abstain from behaviors that may endanger others. The presence of weapons and any form of violence within the workplace is inconsistent with our goals and will not be tolerated. Dean's Professional Services anticipates that all team members will report to work without weapons and will conduct their job without resorting to violence against any individual.

Any conduct that intimidates, threatens, or coerces another team member, customer, vendor, or business associate is unacceptable and will not be tolerated. Dean's Professional Services treats threats arising from abusive personal relationships with the same seriousness as other forms of violence.

Team members are encouraged to report any incidents of indirect or direct threats of violence, actual acts of violence, or any suspicious individuals or activities as soon as possible. This report should be made to your Staffing Coordinator, Human Resources, or a member of Dean's Professional Services Management Team. When reporting a threat or violent incident, team members should provide as much specific and detailed information as possible. However, team members should never place themselves in harm's way or attempt to intervene during a violent incident.

If a team member obtains a protective or restraining order listing the workplace as a protected area, they should promptly inform the Human Resources department. Team members are also encouraged to report safety concerns related to intimate partner violence. Dean's Professional Services will not retaliate against team members who make good-faith reports. We are committed to supporting victims of intimate partner violence by providing referrals to community resources and offering time off for reasons related to intimate partner violence.

Dean's Professional Services will promptly and thoroughly investigate all reports of threats of violence, actual incidents of violence, and any suspicious individuals or activities. The identity of the individual making a report will be protected to the greatest extent possible. To maintain workplace safety and the integrity of our investigation, Dean's Professional Services may suspend team members suspected of workplace violence or threats of violence, either with or without pay, pending an investigation.

Any individual found responsible for making threats of violence, engaging in actual violence, or violating these guidelines will be subject to swift disciplinary action, including possible termination of employment.

Dean's Professional Services encourages team members to bring disputes to the attention of their Staffing Coordinator or Human Resources before situations escalate. We will not penalize team members for raising such concerns.

### Reporting Violations

The following actions are expressly prohibited by Dean's Professional Services, and any team member found in violation of these policies will face disciplinary actions, which may include termination:

- Use, possession, or sale of any weapon as defined above.
- Storing any weapon in a locker, desk, vehicle, lunch box, tool kit, bag, purse, or any other location on client premises.
- Illegal possession, use, or sale of a weapon that potentially endangers one's safety or the safety of others at work.
- Conviction under any criminal statute for the illegal possession of a weapon or for committing a violent act against a person or property. Such cases will be assessed on a case-by-case basis, considering client requirements and state/federal laws.

Team members are expected to cooperate fully in any investigation related to allegations or suspicions of violence or carrying a weapon. Failure to cooperate in such investigations may result in disciplinary action.

### Definitions When Used in this Policy

- **Crime of Violence:** Includes murder, voluntary manslaughter, aggravated rape, rape, mayhem, aggravated

robbery, robbery, burglary, aggravated assault, assault, battery, or any express or implied threat of violence.

- **Weapon:** Encompasses explosives, explosive weapons, devices primarily designed for delivering or shooting explosive weapons, machine guns, rifles, shotguns, handguns, firearm silencers, switchblade knives, or any implement intended to inflict bodily injury or death with no legitimate purpose.
- **On the Worksite:** Covers all property owned or occupied by clients of Dean's Professional Services.
- **Possession:** Includes the presence of a weapon on the team member, in their motor vehicle, lunch box, locker, bag, purse, cabinets, office, etc.
- **Coverage of Policy:** This policy applies to all team members of Dean's Professional Services, including independent contractors or their team members hired or utilized by Dean's Professional Services.
- Please note that if a team member is injured while participating in or initiating a fight, their entitlement to workers' compensation benefits may be denied. Dean's Professional Services may, at its discretion, modify this policy from time to time.

**TEAM MEMBERS SHOULD IMMEDIATELY REPORT ANY THREAT OR ACT OF VIOLENCE TO THEIR SUPERVISOR OR ANY MEMBER OF MANAGEMENT WITHOUT FEAR.**

## Disaster Preparedness Guidelines

At Dean's Professional Services (DPS), our team members are our most important asset. While we can establish certain procedures before a disaster strikes, it's equally important to understand what steps to take for recovery afterward. Team members may need time to ensure the safety of their families, but returning to work plays a crucial role in personal recovery following a disaster. Re-establishing routines, when feasible, is essential.

### Emergency Evacuation Plan for Off-site Team Members

**Objective:** To establish an effective evacuation and communication plan for all DPS team members working away from the corporate office in the event of disasters like floods, snowstorms, ice storms, or others.

Procedure:

**Internal Communication** - Your safety is the top priority. Please follow these steps:

1. If a disaster occurs during regular working hours, contact your Staffing Coordinator AFTER you have followed the disaster plan as instructed by your on-site supervisor or manager.
2. If a disaster occurs after hours, use the afterhours messaging system to contact the on-call Manager AFTER following the disaster plan provided by your on-site supervisor or manager.
3. For voice communication, use the following telephone numbers in this order:
  - 713-785-7483 – Main Office Number (follow the prompt for Manager)
  - 832-715-6045 – Mike Dean – VP Information Technology

If voice communication is unavailable, DPS will strive to update the DPS website with status updates ([www.deansprofessionalservices.com](http://www.deansprofessionalservices.com)). Additionally, you can reach the DPS IT via email at [mdean@deansstaffing.com](mailto:mdean@deansstaffing.com).

### Emergency Communication and Data Processing Plan

DPS will make every effort to restore or forward the main telephone number to available team members. Operations will resume as soon as possible from an alternate location in the event of an electrical/power outage.

A photograph of a woman with short, styled grey hair, smiling warmly. She is wearing a white lab coat over a blue top and a blue lanyard. She is seated at a desk, with her hands on a laptop keyboard. The background is softly blurred, showing another person in a white coat. The entire image has a light green overlay.

# DPS Occupational Health



## Immunizations of Vaccine Preventable Disease

As a condition of your employment at Dean's Professional Services, all team members working in healthcare facilities must adhere to immunization requirements established by the facility and DPS. Below is a list of the common immunizations needed for employment with DPS and its clients. Please note that a full copy of the "OSHA STANDARD" is available in our records at Dean's Professional Services.

In line with our commitment to maintaining a safe workplace, free from known hazards, and to protect the health of our team members, their families, customers, visitors, and the community at large from infectious diseases (such as COVID-19 or Influenza), we have adopted this policy. This policy complies with all relevant laws and is based on guidance from the Centers for Disease Control and Prevention and local health authorities, as applicable.

All team members are required to receive vaccinations as determined by DPS, and or its clients unless they have approved reasonable accommodation or submit a declination.

### Exemption or Requesting Accommodation

Team members who require an exemption from this policy due to medical reasons or a sincerely held religious belief must promptly submit a fully filled Request for Accommodation form to the Credentialing department once vaccination deadlines are communicated. Accommodation will be considered and granted if they do not create an excessive burden for DPS, its clients or pose a direct risk to the health and safety of others. The Client has the right of refusal.

### Declination to Participate

By choosing to decline, you acknowledge that, because of your occupational exposure to potentially infectious persons or materials, you may be at risk of contracting any of the Vaccine Preventable Diseases or infections. It's important to note that failing to provide evidence of immunity or an approved exemption will result in your inability to work in clinical settings for specific DPS clients or facilities.

### Vaccine-Preventable Disease

A vaccine-preventable disease is an illness caused by a pathogen (such as a virus or bacterium) for which safe and effective vaccines have been developed. These diseases can be potentially serious or even life-threatening, but their occurrence can be significantly reduced or prevented through vaccination.

In the context of our Team Member Handbook, vaccine-preventable diseases refer to those infectious illnesses that can be avoided through immunization. Team members may be required to receive specific vaccines to protect themselves, their colleagues, and others in the workplace from these diseases, as part of our commitment to maintaining a safe and healthy work environment. Compliance with vaccine requirements helps reduce the risk of disease transmission and contributes to the overall well-being of our workforce.

### VIS (Vaccine Information Sheets)

can be obtained by contacting [compliance@deansprofessionalservices.com](mailto:compliance@deansprofessionalservices.com) and requesting a copy.

### Proof of Immunity for Vaccine Preventable Disease

Proof of immunity for vaccine-preventable diseases refers to documented evidence demonstrating that an individual has acquired immunity against certain infectious diseases through vaccination or other medically approved means. This evidence serves as confirmation that an individual is protected from specific diseases, reducing the risk of transmission in the workplace, and ensuring a safer environment for all team members.

Requirements related to proof of immunity for vaccine-preventable diseases may include providing vaccination records, serological testing results, or medical documentation that attests to a team member's immunity status. These requirements are in place to uphold the health and safety standards of our workplace and to minimize the potential spread of vaccine-preventable diseases among our workforces. Compliance with proof of immunity guidelines is essential to maintaining a secure and healthy work environment for all team members and stakeholders.

## Tuberculosis: General Information

All U.S. health care personnel should be screened for TB upon hire (i.e., preplacement) per the CDC (Center for Disease Control and Prevention). Tuberculosis (TB) screening and testing of health care personnel is recommended as part of a TB Infection Control Plan and might be required by state regulations. For TB regulations in your area, please contact your [state or local TB control program](#).

### What is TB?

Tuberculosis (TB) is a disease caused by germs that are spread from person to person through the air. TB usually affects the lungs, but it can also affect other parts of the body, such as the brain, the kidneys, or the spine. A person with TB can die if they do not get treatment. TB germs are put into the air when a person with TB disease of the lungs or throat coughs, sneezes, speaks, or sings. These germs can stay in the air for several hours, depending on the environment. Persons who breathe in the air containing these TB germs can become infected; this is called latent TB infection.

<https://www.cdc.gov/tb/publications/factsheets/general/tb.htm>; <https://www.cdc.gov/tb/topic/testing/healthcareworkers.htm>; <https://www.cdc.gov/tb/publications/factsheets/testing/skintesting.htm>

TB screening programs should include anyone working or volunteering in healthcare settings, including:

- Inpatient settings
- Outpatient settings
- Laboratories
- Emergency medical services
- Medical settings in correctional facilities
- Home-based health care and outreach settings
- Long-term care facilities
- Clinics in homeless shelters

### TB Testing / Proof of Immunity

There are two types of tests for TB infection: the TB blood test and the TB skin test:

Baseline Testing – TB Blood Test: The process for baseline testing using a [TB blood test](#) is as follows:

1. Administer TB blood test following proper protocol
2. Review result
  - a. Negative — consider not infected.
  - b. Positive — consider TB infected and evaluate for TB disease\*
3. Document result

Using a TB blood test for baseline testing does not require two-step testing. Additionally, TB blood tests are not affected by the [BCG vaccine](#).

TB blood tests are also called interferon-gamma release assays or IGRAs. Two TB blood tests are approved by the U.S. Food and Drug Administration (FDA) and are available in the United States: The QuantiFERON®-TB Gold Plus (QFT-Plus) and the T-SPOT®.TB test (T-Spot).

Baseline Testing: Two-Step Test: If the [Mantoux tuberculin skin test \(TST\)](#) is used to test health care personnel upon hire (pre-placement), two-step testing should be used. This is because some people with a latent TB

infection have a negative reaction when tested years after being infected. The first TST may stimulate or boost a reaction. Positive reactions to subsequent TSTs could be misinterpreted as a recent infection.

### **Step 1**

1. Administer first TST following proper protocol
2. Review result
  - a. Positive — consider TB infected, no second TST needed; evaluate for TB disease. \*
  - b. Negative — a second TST is needed. Retest in 1 to 3 weeks after first TST result is read.
3. Document result

### **Step 2**

1. Administer second TST 1 to 3 weeks after first test
2. Review results
  - a. Positive — consider TB infected and evaluate for TB disease.
  - b. Negative — consider person not infected.
3. Document result

## **Hepatitis B (Hep B): General Information**

The Centers for Disease Control and Prevention (CDC) recommends that all health care workers, emergency personnel, and other individuals who are exposed to blood or bodily fluids on the job should be vaccinated against Hepatitis B. Health care workers who encounter human blood, blood products, or potentially infectious bodily fluids are at an increased risk for exposure to the Hepatitis B virus (HBV).

### **What is HBV?**

Hepatitis B is a vaccine-preventable, communicable disease of the liver caused by HBV. HBV is transmitted through percutaneous (i.e., puncture through the skin) or mucosal (i.e., direct contact with mucous membranes) exposure to infectious blood or body fluids. Hepatitis B is the most common serious liver infection in the world. It is caused by the Hepatitis B virus (HBV), which attacks liver cells and can lead to cirrhosis (scarring), liver failure, or liver cancer. Most healthy people who are infected as adults can fight off the infection and clear the virus from their blood. This may take up to 6 months, and they are infectious during this time.

### **HBV Vaccination**

The vaccine is given in 3 doses over a 6-month period (0, 1, and 6 months). It is recommended that health care workers have their Hepatitis B surface antibody (HBsAb) level tested 4-6 weeks after completion of the series to make sure that they have built up protection against HBV. Once a blood test shows that a health care worker is protected, the CDC does not recommend routine antibody testing or vaccine boosters. However, each health care institution may have its own Hepatitis B vaccine protocol. If a person does not develop the protective antibodies after completion of the vaccine series, then the entire series should be repeated (with antibody testing 4-6 weeks after completion of the additional second series).

As your employer and under the new "OSHA STANDARD", DPS is required to offer the three-injections vaccination series for HBV to all team members who are exposed to blood or other potentially infectious materials as part of their job duties. The Hepatitis B vaccination is a non-infectious, yeast-based vaccine given in a series of three injections in the arm. The second injection is given one month after the first and the third injection is six months after the second dose. More than ninety nine percent of those vaccinated will develop immunity to the Hepatitis B virus. To ensure immunity, it is important that you receive all three injections. It is recommended that once you complete the series, you have a titer drawn six weeks following your last injection. This will determine if you have sero-converted. A positive sero-conversion implies that you have immunity to HBV. Those who do not sero-

convert, can be offered a repeat series of the HBV vaccine. Sero-conversion does not always occur and will be reviewed on a case-by-case basis. Please note that titers are not mandated by OSHA and will occur at your own expense.

## Varicella: General Information

The CDC, the Advisory Committee on Immunization Practices (ACIP), with support from the Hospital Infection Control Practices Advisory Committee (HICPAC), recommends that healthcare institutions ensure that all healthcare personnel have [evidence of immunity against varicella](#).

### *What is Varicella (chickenpox)?*

Chickenpox is a very contagious disease caused by the varicella-zoster virus (VZV). It causes a blister-like rash, itching, tiredness, and fever. The rash spreads over the whole body. **Chickenpox can be serious, even life-threatening**, especially in babies, adolescents, adults, people who are pregnant, and people with weakened immune systems. Chickenpox is very contagious. If one person has it, about 9 out of 10 people close to that person who are not protected against chickenpox will also become infected.

[https://www.cdc.gov/vaccines/vpd/varicella/hcp/recommendations.html#:~:text=The%20Advisory%20Committee%20on%20Immunization%20Practices%20\(ACIP\)%2C%20with%20support,evidence%20of%20immunity%20against%20varicella.](https://www.cdc.gov/vaccines/vpd/varicella/hcp/recommendations.html#:~:text=The%20Advisory%20Committee%20on%20Immunization%20Practices%20(ACIP)%2C%20with%20support,evidence%20of%20immunity%20against%20varicella.)

### *Varicella Vaccine / Proof of Immunity*

Two doses of varicella vaccine are recommended for all children, adolescents, and adults without evidence of immunity to varicella. Those who previously received one dose of varicella vaccine should receive their second dose for best protection against the disease. Those without evidence of immunity should receive 2 doses of varicella vaccine 4 to 8 weeks apart or, if previously received 1 dose, the second dose at least 4 weeks after the first dose. Healthcare personnel without [evidence of immunity](#) against varicella may get serologic screening before being vaccinated. This is likely to be cost effective since 70% to 90% of adults who do not remember having varicella have antibodies in their blood.

## MMR (Measles (Rubeola), Mumps, Rubella): General Information

CDC recommends that all Healthcare personnel should have documented presumptive [evidence of immunity](#), according to the recommendations of the Advisory Committee on Immunity Practices. **MMR vaccine** can prevent **measles, mumps, and rubella**.

Most people who are vaccinated with MMR will be protected for life. Vaccines and high rates of vaccination have made these diseases much less common in the United States.

### *What is MMR?*

- **MEASLES (M)** - Measles is a very contagious disease caused by a virus. Measles is an acute viral respiratory illness. It spreads through the air when an infected person coughs or sneezes.
  - Measles causes fever, cough, runny nose, and red, watery eyes, commonly followed by a rash that covers the whole body. It can lead to seizures (often associated with fever), ear infections, diarrhea, and pneumonia. Rarely, measles can cause brain damage or death.
- **MUMPS (M)** – Mumps is a contagious disease that is caused by a virus.
  - Mumps cause fever, headache, muscle aches, tiredness, loss of appetite, and swollen and tender salivary glands under the ears. It can lead to deafness, swelling of the brain and/or spinal cord covering, painful swelling of the testicles or ovaries, and, very rarely, death.
- **RUBELLA (R)** - Rubella is a contagious disease caused by a virus. It is also called German measles, but it is caused by a different virus than measles.

- Rubella causes fever, sore throat, rash, headache, and eye irritation. It can cause arthritis in up to half of teenage and adult women. If a person gets rubella while they are pregnant, they could have a miscarriage, or the baby could be born with serious birth defects.

### MMR Vaccine / Proof of Immunity

Acceptable presumptive evidence of immunity against measles includes at least one of the following, either written documentation of adequate vaccination of two doses of MMR at least 28 days apart or proof of laboratory evidence of immunity or laboratory confirmation.

### Tdap: Tetanus Diphtheria, and Pertussis: General Information

CDC recommends a single dose of Tdap for healthcare personnel who have never received Tdap regardless of the time since their most recent Td vaccination. Diphtheria, tetanus, and whooping cough (pertussis) vaccination is recommended for everyone.

#### What is Tdap?

- **TETANUS (T)** – Tetanus is an infection caused by *Clostridium tetani* bacteria.
  - Tetanus causes painful stiffening of the muscles. Tetanus can lead to serious health problems, including being unable to open the mouth, having trouble swallowing and breathing, or death.
- **DIPHTHERIA (D)** – an infection caused by *Corynebacterium diphtheriae* bacteria.
  - Diphtheria - can lead to difficulty breathing, heart failure, paralysis, or death.
- **PERTUSSIS (aP)** - Whooping cough is a respiratory disease caused by *Bordetella pertussis* bacteria. Whooping cough (pertussis) can cause serious illness in people of all ages but is most dangerous for babies.
  - Pertussis / Whooping Cough, also known as “whooping cough,” can cause uncontrollable, violent coughing that makes it hard to breathe, eat, or drink. Pertussis can be extremely serious especially in babies and young children, causing pneumonia, convulsions, brain damage, or death. In teens and adults, it can cause weight loss, loss of bladder control, passing out, and rib fractures from severe coughing.

<https://www.cdc.gov/vaccines/vpd/dtap-tdap-td/hcp/recommendations.html#:~:text=they%20have%20available,;Vaccination%20of%20Healthcare%20Personnel,or%20Tdap%20every%2010%20years>

#### Tdap Vaccine or Proof of Immunity:

Tdap provides protection against tetanus, diphtheria, and whooping cough. All adults who have never received one should get a Tdap shot. This can be given at any time, regardless of when they last got Td. This should be followed by either Tdap shot every 10 years. Tdap is given in a single dose.

### Influenza (Flu): Inactive / Live, Intranasal): General Information

The CDC recommends that everyone over the age of 6 who does not have contraindications to vaccination, receive the Flu vaccine seasonally. Healthcare personnel are exposed to patients in the workplace and are thus at risk of acquiring influenza and of transmitting influenza to patients, other Healthcare personnel and those they encounter.

#### What is Flu?

Flu is a contagious disease that spreads around the United States every year, usually between October and May. Anyone can get the flu, but it is more dangerous for some people. Infants and young children, people 65 years and older, pregnant people, and people with certain health conditions or a weakened immune system are at greatest risk of flu complications.

Flu can cause fever and chills, sore throat, muscle aches, fatigue, cough, headache, and runny or stuffy nose.

Some people may have vomiting and diarrhea, though this is more common in children than adults. In an average year, thousands of people in the United States die from flu, and many more are hospitalized. Flu vaccine prevents millions of illnesses and flu-related visits to the doctor each year.

### Influenza (Flu) Immunity:

Flu vaccine provide protect against the flu. All influenza vaccines available in the United States for the 2023-2024 season are quadrivalent. The vaccines and approved age ranges are:

- Afluria Quadrivalent, Fluarix Quadrivalent, FluLaval Quadrivalent, Fluzone Quadrivalent and Flucelvax Quadrivalent for people ages 6 months and older.
  - Flublok Quadrivalent for ages 18 years and older.
  - FluMist Quadrivalent for people ages 2 through 49 years; and
  - Fluzone High-Dose Quadrivalent and Fluad Quadrivalent for people ages 65 years and older.
- Afluria Quadrivalent is to be administered in different doses and methods based on patient age.

### Occupational Exposure to Bloodborne Pathogens

DPS is committed to ensuring the safety and well-being of all healthcare workers who may be exposed to bloodborne pathogens while performing their duties. This policy applies to all healthcare workers, including but not limited to, physicians, nurses, laboratory technicians, and support staff, who may encounter bloodborne pathogens in the course of their work. All team members are expected to comply with this policy and actively participate in maintaining a safe workplace. Non-compliance with this policy may result in disciplinary action, up to and including termination.

#### Personnel Responsibilities

- Healthcare workers are responsible for attending bloodborne pathogens training and following all safety protocols and procedures.
- Reporting any exposure incidents or unsafe conditions to their immediate supervisor or the designated infection control officer.
- Properly disposing of contaminated materials and sharps in designated containers.
- Using appropriate PPE as outlined by Dean’s Professional Services and its client sites.

### Occupational Exposures to Blood

Bloodborne Pathogens: Exposure to Blood: What Healthcare Personnel Need to Know Information from the Centers for Disease Control and Prevention: National Center for Infectious Diseases Division of Healthcare Quality Promotion and Division of Viral Hepatitis <https://stacks.cdc.gov/view/cdc/6853/>

#### Introduction

Healthcare personnel are at risk for occupational exposure to bloodborne pathogens, including Hepatitis B virus (HBV), Hepatitis C virus (HCV), and human immunodeficiency virus (HIV). Exposures occur through needle sticks or cuts from other sharp instruments contaminated with an infected patient's blood or through contact of the eye, nose, mouth, or skin with a patient's blood. Important factors that influence the overall risk for occupational exposures to bloodborne pathogens include the number of infected individuals in the patient population and the type and number of blood contacts. Most exposures do not result in infection. Following a specific exposure, the risk of infection may vary with factors such as these:

- The pathogen involved
- The type of exposure
- The amount of blood involved in the exposure
- The amount of virus in the patient's blood at the time of exposure

DPS and its clients have in place a system for reporting exposures to quickly evaluate the risk of infection, inform you about treatments available to help prevent infection, monitor you for side effects of treatments, and determine if infection occurs. This may involve testing your blood and that of the source patient and offering appropriate post exposure treatment.

### How can occupational exposure be prevented?

Many needle sticks and other cuts can be prevented by using safer techniques (for example, not recapping needles by hand), disposing of used needles in appropriate sharps disposal containers, and using medical devices with safety features designed to prevent injuries. Using appropriate barriers such as gloves, eye and face protection, or gowns when contact with blood is expected can prevent many exposures to the eyes, nose, mouth, or skin.

### OSHA Occupational Exposure to Bloodborne Pathogens

The purpose of this information is to educate all DPS team members and minimize their risk of bloodborne disease transmission while on assignment. Due to the serious nature of the information enclosed, we strongly recommend that you keep this guide as a ready reference.

#### Scope

- This applies to all occupational exposure to blood or other potentially infectious materials.
  - Infectious materials include semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, and amniotic fluid, saliva in dental procedures, or any body fluid visibly contaminated with blood and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.
  - They also include any unfixed tissue or organ (other than intact skin) from human (living or dead) and human immunodeficiency virus (HIV) containing cell or tissue cultures, other organ cultures and HIV or Hepatitis B (HBV) containing culture medium or other solutions, as well as blood, organs or other tissue from experimental animals infected with HIV or HBV.
- Although a list is included below of several job classifications that may be associated with tasks that have occupational exposure to blood and other potentially infectious materials, the scope of this standard is in no way limited to DPS team members in these jobs.
  - The hazard of exposure to infectious materials affects team members in many types of jobs and is not restricted to healthcare personnel. At the same time, DPS team members in the following job classifications are not automatically covered unless they have occupational exposure:
    - Laboratory Technicians · Licensed Vocational Nurses · Medical Assistants · Medical Technicians · Nurse Practitioners · Phlebotomists · Physician Assistants · Radiological Technologists (ARRT's & LMRT'S) · Registered Nurses

#### Exposure

As with any incident, if you become exposed to a bloodborne pathogen while on assignment, you must notify your supervisor and DPS IMMEDIATELY. The most obvious incident was a needle stick. However, any specific eye, mouth or other mucous membrane, non- intact skin, or parental contact with blood or other potentially infectious materials is considered an exposure incident. Exposure incidents can lead to infection from HBV or HIV. Reporting an exposure incident, when it occurs, permits immediate medical follow - up. Prompt reporting can help you avoid spreading bloodborne infection to others. Please call us immediately.

### Risk of Infection after Exposure: What is the risk of infection after occupational exposure? HBV

Healthcare personnel who have received Hepatitis B vaccine and developed immunity to the virus are at virtually

no risk for infection. For a susceptible person, the risk from a single needle stick or cut exposure to HBV-infected blood ranges from 6-30% and depends on the Hepatitis B e antigen (HBeAg) status of the source individual. Hepatitis B surface antigen (HBsAg)-positive individuals who are HBeAg positive have more virus in their blood and are more likely to transmit HBV than those who are HBeAg negative. While there is a risk for HBV infection from exposures of mucous membranes or non-intact skin, there is no known risk for HBV infection from exposure to intact skin.

The average risk for infection after needle sticks or cut exposure to HCV infected blood is approximately 1.8%. The risk following blood exposure to the eye, nose or mouth is unknown, but is believed to be very small; however, HCV infection from blood splash to the eye has been reported. There also has been a report of HCV transmission that may have resulted from exposure to non-intact skin, but no known risk from exposure to intact skin.

## HIV

- The average risk of HIV infection after a needle stick or cut exposure to HIV-infected blood is 0.3% (i.e., three-tenths of one percent, or about 1 in 300). Stated another way, 99.7% of needle stick/cut exposures do not lead to infection.
- The risk after exposure of the eye, nose, or mouth to HIV-infected blood is estimated to be, on average, 0.1% (1 in 1,000).
- The risk after exposure of non-intact skin to HIV-infected blood is estimated to be less than 0.1%. A small amount of blood on intact skin probably poses no risk at all. There have been no documented cases of HIV transmission due to an exposure involving a small amount of blood on intact skin (a few drops of blood on skin for a short period of time).

## Treatment for the Exposure

### Is a vaccine or treatment available to prevent infections with bloodborne pathogens?

## HBV

As mentioned above, Hepatitis B vaccine has been available since 1982 to prevent HBV infection. All healthcare personnel who have a reasonable chance of exposure to blood or body fluids should receive Hepatitis B vaccine. Vaccination ideally should occur during the healthcare worker's training period. Workers should be tested 1-2 months after the vaccine series is complete to make sure that vaccination has provided immunity to HBV infection. Hepatitis B immune globulin (HBIG) alone or in combination with vaccine (if not previously vaccinated) is effective in preventing HBV infection after an exposure. The decision to begin treatment is based on several factors, such as:

- Whether the source individual is positive for Hepatitis B surface antigen
- Whether you have been vaccinated
- Whether the vaccine provided you immunity

## HCV

There is no vaccine against Hepatitis C and no treatment after an exposure that will prevent infection. Neither immune globulin nor antiviral therapy is recommended after exposure. For these reasons, following recommended infection control practices to prevent percutaneous injuries is imperative.

## HIV

There is no vaccine against HIV. However, results from a small number of studies suggest that the use of some antiretroviral drugs after certain occupational exposures may reduce the chance of HIV transmission. Post



exposure prophylaxis (PEP) is recommended for certain occupational exposures that pose a risk of transmission. However, for those exposures without risk of HIV infection, PEP is not recommended because the drugs used to prevent infection may have serious side effects. You should discuss the risks and side effects with your healthcare provider before starting PEP for HIV.

### Exposure Control Plan / Follow-Up After Exposure

#### What follow-up should be done after exposure?

The Exposure Control Plan is designed to eliminate or minimize team members' exposure to bloodborne pathogens. As a team member of Dean's Professional Services, you are asked to follow work practice controls and procedures that have been established to eliminate or minimize your exposure while on assignment. Additionally, you are asked to follow the specific work practice controls and procedures of our clients while on assignment.

DPS work practice controls and procedures are as follows:

- Wash your hands with antiseptic soap immediately after contamination.
- Wash your hands immediately after removing gloves or other personal protective equipment.
- Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed except by use of the client's mechanical devices or unless the client can demonstrate that no alternative is feasible or that such action is required by a special medical procedure.
- Shearing or breaking contaminated needles is prohibited.
- Immediately, or as soon as possible after use, contaminated reusable sharps must be placed in the client's appropriate containers until properly reprocessed. These containers are to be puncture resistant, labeled or color-coded, leak proof on the sides and bottom and closable.
- Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is reasonable likelihood of occupational exposure.
- Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets or on countertops or benchtops where blood or other potentially infectious materials are present.
- Any procedures involving blood or other potentially infectious materials shall be performed in a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.
- Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.
- Specimens of blood or other potentially infectious materials shall be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping. If such containers should leak, they must be placed in a second non-permeable container.
- Please make sure that any equipment, samples, waste, etc. is examined to make sure they are not contaminated. If contamination is present, advise the client accordingly.
- Universal precautions are to be observed to prevent contact with blood or potentially infectious materials. Where it is difficult to differentiate between body fluid types, all such body fluids shall be considered potentially infectious material.

DPS work practice controls will be annually reviewed and updated as new information becomes available or when new team member portions with potential exposure are created.

### HBV

Because post exposure treatment is highly effective in preventing HBV infection, CDC does not recommend routine follow-up after treatment. However, any symptoms suggesting Hepatitis (e.g., yellow eyes or skin, loss of appetite, nausea, vomiting, fever, stomach or joint pain, extreme tiredness) should be reported to your healthcare provider. If you receive Hepatitis B vaccine, you should be tested 1-2 months after completing the vaccine series to determine if you have responded to the vaccine and are protected against HBV infection.

## HCV

You should be tested for HCV antibody and liver enzyme levels (alanine aminotransferase or ALT) as soon as possible after the exposure (baseline) and at 4-6 months after the exposure. To check for infection earlier, you can be tested for the virus (HCV RNA) 4- 6 weeks after exposure. Report any symptoms suggesting Hepatitis (mentioned above) to your healthcare provider.

## HIV

You should be tested for an HIV antibody as soon as possible after exposure (baseline) and periodically for at least 6 months after the exposure (e.g., at 6 weeks, 12 weeks, and 6 months). If you take antiviral drugs for post exposure treatment, you should be checked for drug toxicity by having a complete blood count and kidney and liver function tests just before starting treatment and 2 weeks after starting treatment. You should report any sudden or severe flu-like illness that occurs during the follow-up period, especially if it involves fever, rash, muscle aches, tiredness, malaise, or swollen glands. Any of these may suggest HIV infection, drug reaction, or other medical conditions. You should contact the healthcare provider managing your exposure if you have any questions or problems during the follow-up period.

### **What precautions should be taken during the follow-up period?**

## HBV

If you are exposed to HBV and receive post exposure treatment, it is unlikely that you will become infected and pass the infection on to others. No precautions are recommended.

## HCV

Because the risk of becoming infected and passing the infection on to others after exposure to HCV is low, no precautions are recommended.

## HIV

During the follow-up period, especially the first 6-12 weeks when most infected persons are expected to show signs of infection, you should follow recommendations for preventing transmission of HIV. These include not donating blood, semen, or organs and not having sexual intercourse. If you choose to have sexual intercourse, using a condom consistently and correctly may reduce the risk of HIV transmission. In addition, women should consider not breast-feeding infants during the follow-up period to prevent the possibility of exposing their infants to HIV that may be in breast milk.

### **Prevention of Occupational Infections with HBV, HCV, or HIV**

Hepatitis B virus is largely preventable through vaccination. For HBV, HCV, and HIV, however, preventing occupational exposures to blood can prevent occupational infections with HBV, HCV, and HIV. This includes using appropriate barriers such as gown, gloves, and eye protection as appropriate, safely handling needles and other sharp instruments, and using devices with safety features.

### **Personal Protective Equipment (PPE)**

The Company is committed to providing a safe and healthy workplace for all team members. To mitigate risks and protect team members from workplace hazards, this policy outlines the requirements, responsibilities, and guidelines for the use of Personal Protective Equipment (PPE).

This policy applies to all team members, contractors, visitors, and any other individuals who may enter areas where PPE is required as a safety measure is dedicated to fostering a culture of safety through the proper use

of Personal Protective Equipment. Team members at all levels are encouraged to actively participate in maintaining a safe and healthy work environment by adhering to this policy.

Failure to comply with this policy may result in disciplinary action, up to and including termination, depending on the severity of the violation.

### Team Member Responsibility and Use of PPE

1. Attending required training sessions
2. Team members are required to wear the assigned PPE correctly and consistently when in designated areas or performing tasks where PPE is necessary.
3. PPE shall be inspected for defects before each use and replaced as needed.
4. Team members must properly clean, maintain, and store PPE as per manufacturer instructions.
5. Damaged or worn-out PPE shall be replaced promptly.
6. Team members shall report damaged or malfunctioning PPE to their supervisor promptly.

### What is PPE?

Personal protective equipment or PPE is equipment used to prevent or minimize exposure to hazards such as:

- Biological hazards
- Chemical and cleaning solution hazards
- Radiological hazards
- Electrical hazards
- Mechanical hazards
- Heat in kitchen areas
- Food or other contaminants
- Slips, trips, and falls in wet or greasy areas.
- Cuts, punctures by sharp objects
- Etc.

Without PPE, exposure could lead to injuries and illnesses. A range of industries use PPE to protect their workforce from occupational hazard. The construction, mining, chemical and pharmaceutical industries are among those using PPE on regular basis. Healthcare workers also use PPE to ensure safety during working hours. <https://www.who.int/teams/health-product-policy-and-standards/assistive-and-medical-technology/medical-devices/ppe>

Team members must use appropriate personal protective equipment such as gloves, gowns, laboratory coats, resuscitation bags, masks, ventilation devices, mouthpieces, and goggles, or eye glass shields, aprons, heat gloves, hairnets, and protective footwear in areas where exposure or contamination is likely to occur.

- If it becomes contaminated, it must be cleaned, laundered, or disposed of.
- If it becomes damaged, it must be repaired to its original effectiveness.
- If it becomes saturated or penetrated by potentially infectious material, it must be removed immediately or as soon as it is feasible.

All personal protective equipment must be removed prior to leaving the facility. Such personal protective equipment must be placed in the appropriate area or storage container for laundering, storage, decontamination, or disposal.

### Gloves

Gloves are to be worn when it is reasonably anticipated that you may have contact with blood or other potentially infectious materials, mucous membranes, or non-intact skin, when performing vascular access procedures except as specified in 1600.1030 (d) (3) (ix) (D) of the Federal Register, Volume 56, Number 235 and when handling or touching contaminated items and surfaces.

Disposable (single use gloves) such as surgical or examination gloves must be replaced as soon as practical or

feasible, when contaminated, torn, or punctured or when their ability to function as a barrier is compromised. The single use gloves are not to be washed.

Utility gloves must be used for handling contaminated waste, clean-up procedures, etc. These gloves must be washed, disinfected, and allowed to dry before reuse. They must be replaced as soon as their integrity is compromised.

### **Masks, Eye Protection and Face Shields**

Whenever splashes, spray, spatter or droplets of blood or other potentially infectious materials are expected to be generated, the appropriate masks, eye protection or face shields are to be used.

### **Regulated Waste**

Regulated waste means liquid, semi-liquid blood, or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state. If composed; items that are caked with dried blood or other potentially infectious materials and can release these materials during handling; contaminated sharps and pathological and microbiological wastes containing blood or other potentially infectious materials.

- Contaminated sharps are to be placed in SHARPS containers. Check with your supervisor as to where their SHARPS containers are located.
- All other regulated waste must be placed in impermeable leak-proof containers which are closable. Check with your supervisor as to where these are located.
- Please keep in mind that all regulated waste must be disposed of in accordance with applicable County Health Department or State Department of Environmental Quality regulations.

The “OSHA STANDARD” requires warning labels including the orange-red Biohazard symbol affixed to the containers of regulated waste, refrigerators and freezers and other containers which are used to store or transport blood or other potentially infectious material. Red bags or containers may be used instead of labeling. When a facility uses universal precautions in its handling of all specimens, labeling is not required within the facility. Blood which has been tested and found free of HIV or HBV and released for clinical use and regulated waste which has been decontaminated need not be labeled. Signs must be used to identify restricted areas in HIV and HBV research laboratories and production facilities. Please familiarize yourself with the facility during your assignment and take caution of these standards.

### **Infection Control (Hand Hygiene and Fingernail)**

Hand hygiene can prevent the spread of germs, including those that are resistant to antibiotics. Regular handwashing is one of the best ways to remove germs, avoid getting sick, and prevent the spread of germs to others. Whether you are at home, at work, traveling, or out in the community. <https://www.cdc.gov/handwashing/index.html>

#### Background Information:

##### **Healthcare Personnel**

Recent scientific studies have shown that artificial nails and appliqués worn by health care workers (HCWs) have been contaminated with germs (both bacteria and fungi) that have been passed to patients and caused serious infections. These studies have proven that healthcare personnel with nail enhancements had more bacteria both before and after hand washing than did personnel with natural nails. For this reason, hand washing alone cannot suffice.

## Food Service Industry Personnel

The spread of germs from the hands of food workers to food is a common cause of foodborne illness outbreaks in restaurants. It accounts for nine of ten outbreaks in which food was contaminated by food workers. Improving food worker handwashing practices is critical to preventing outbreaks of diseases like Norovirus, Campylobacter, Salmonella, and E. coli.

Good hand hygiene means regularly washing hands with soap and water for at least twenty (20) seconds, and then drying them. It can also mean using an alcohol-based hand sanitizer with at least 60% alcohol if soap and water are not readily available.

### Policy Statement:

The team members and staff have a responsibility for maintaining hand hygiene by adhering to specific infection control practices. Artificial fingernail enhancements contribute to nail changes that can increase the risk of colonization and transmission of pathogens to patients and are therefore forbidden. This policy applies to all team members in the following departments:

- Medical Staff
- Residents
- Allied Health Professionals
- Nursing
- Laboratory
- Ambulance
- Anesthesiology
- EKG
- Environmental Services
- Nutritional Services
- Pharmacy
- Physical Therapy
- Radiology
- Respiratory Therapy
- Sterile Processing
- Surgical Services
- Food Services
- Kitchen / Cafeteria
- Hospitality / Environmental Services

**Key Times for Hand Hygiene** - Key times for team members to clean their hands include:

- Before and after work
- Before and after breaks
- After blowing their nose, coughing, or sneezing
- After using the restroom
- Before eating or preparing food

## Nail Hygiene

Appropriate hand hygiene includes diligently cleaning and trimming fingernails, which may harbor dirt and germs and can contribute to the spread of some infections, such as pinworms. Fingernails should be kept short, and the undersides should be cleaned frequently with soap and water. Because of their length, longer fingernails can harbor more dirt and bacteria than short nails, thus potentially contributing to the spread of infection.

Before clipping or grooming nails, all equipment (for example, nail clippers and files) should be properly cleaned. Sterilizing equipment before use is especially important when nail tools are shared among several people, as is common in commercial nail salons. Infections of the fingernails or toenails are often characterized by swelling of the surrounding skin, pain in the surrounding area, or thickening of the nail. In some cases, these infections may be serious and need to be treated by a physician.

**To help prevent the spread of germs and nail infections:** <https://www.cdc.gov/hygiene/personal-hygiene/nails.html>

1. Keep nails short and trim them often.
2. Scrub the underside of nails with soap and water (or a nail brush) every time you wash your hands.
3. Clean any nail grooming tools before use.
4. Avoid biting or chewing nails.
5. Avoid cutting cuticles, as they act as barriers to prevent infection.
6. Never rip or bite a hangnail. Instead, clip it with a clean, sanitized nail trimmer.

7. Fingernails are to be neatly manicured and of reasonable length (1.8" beyond fingertip).
8. Nails must be rounded rather than pointed.
9. Artificial nail enhancements are not to be worn. Nail polish is permitted but must be in good condition with no chipping visible.
10. Anything applied to the nails other than polish is considered an enhancement. This includes, but is not limited to:
  - a. Artificial nails, tips, wraps, appliqués, acrylics, gels
  - b. And any additional items applied to the nail surface.

Individual departments may institute measures, in addition to those above, to comply with established standards of care in specialty areas.



# Clinical Team Member Expectations

## Clinical Code of Ethics

- The clinical staff, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.
- The clinical staff's primary commitment is to the patient, whether an individual, family, group, or community.
- The clinical staff promotes, advocates for, and strives to protect the health, safety, and rights of the patient.
- The clinical staff is responsible and accountable for individual delivery and meeting standards of practice.
- The clinical staff have the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.
- The clinical staff participates in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.
- The clinical staff participates in the advancement of their profession through contributions to education and knowledge development.
- The clinical staff collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.

## Joint Commission

Dean's Professional Services (DPS) is committed to providing a higher standard of service and to the delivery of safe, quality patient care. DPS complies with the Joint Commission's Standards for Healthcare Staffing Services. As our Team Member (Team Member) you can have confidence that the processes within DPS support you working in an organization that has met the requirements established by the Joint Commission. To ensure compliance with the Joint Commission Standards for Healthcare Staffing Services, DPS provides you with a written description of the requirements and features of our program.

## Floating

DPS team members may only be placed in assignments that match the job description for which DPS assigns them. Assigned team members may only be placed in assignments that match the job description for which DPS assigns them; if you are asked to float to another department with the customer, the department must be a like department or unit and you must have demonstrated previous competency and have the appropriate certifications, credentials for that department/unit. Team members should only be floated to areas of comparable clinical diagnoses and acuties.

From time to time, a facility customer may ask you to work in another unit or area of the facility other than that to which you were initially assigned. This usually occurs due to census/bed count or changes among facility's team members. It is the policy of DPS and its customers that you remain open to that change of assignment provided that:

- You have any required license, qualifications, and experience to work in that unit/area of the facility.
- You have the skills/experience to meet the needs of the patient assignment.
- You have been evaluated by DPS and have a completed skills checklist in your team member file for that unit/area of the facility.



- The facility will provide the proper orientation to that unit/area.

#### Assigned / Floated to an Area – No Competency

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 DPS
- The DPS team member is obligated to inform the hospital of their professional limitations based upon the Nurse Practice Act standards and upon DPS client contract specifications as they relate to the assignment.
- The President or Clinical Liaison at DPS will work within the bounds of each discipline's Professional Association or State Governing Body and the client agreement to resolve the issue.

**Whenever you are asked to perform an unfamiliar intervention or task, or if you are asked to work in a facility in a unit other than assigned by DPS, you MUST call the office (713-785-7483) and discuss the situation with either your Staffing Coordinator or the On-Call representative before accepting the reassignment.**

#### **Providers and Independent Contractors**

As the provider of staffing services, DPS will be the employer of assigned team members and shall not by reason of their temporary assignment with the customer through DPS become providers of the customer. DPS does not supply or utilize independent contractors.

#### **Staff Matching Requirements**

The Company shall verify the assigned team member's licensure, certification, education, and work experience to assure they are competent and possess the skills and experience that match requirements for the assignment.

#### **Education, Compliance and Competency**

We provide high-quality healthcare services in strict compliance with Joint Commission standards and requirements. To uphold these standards and ensure the safety of our patients, our team members are required to complete specific competency evaluations, orientation, and remediation as needed. These processes are designed to provide the knowledge, skills, and training necessary to excel in our healthcare environment.

#### **Competency Review**

It is the responsibility of DPS to conduct and finalize the pre-employment assessment of the assigned team members competence based on the techniques, procedures, technology, and skills needed to provide care, treatment and services to the populations served by the customer upon completion of DPS's orientation. Team members must pass 80% to be considered for employment.

#### **Ongoing Competency Assessment**

Our commitment to providing high-quality care extends to continuous competency assessment and evaluation. Team members will participate in ongoing assessments to maintain and enhance their competencies.

It shall be the responsibility of the customer to cooperate in a review or evaluation of each assigned team member relative to the provider's ability to perform specific job functions upon completion of provider's assignment or shift. DPS relies on the customer's feedback to accurately assess and reassess the competence of the Assigned team member on an ongoing basis based on the customer's report of clinical performance.

## Remediation Training

Should any team member require remediation to regain compliance with Joint Commission standards or client-specific policies, targeted training and remediation measures will be provided. This training is essential to reinforce the importance of adherence to our high standards. Team members will be required to participate to maintain employment.

## Post-Incident Procedures

In the event of an incident, accident, or patient safety event, team members will receive post-incident training and counseling to ensure that we learn from these incidents and work toward continuous improvement. Team members will be required to participate to maintain employment.

## Orientation of Providers

DPS will provide all new team members with an orientation of the company's policies and procedures. It shall be the responsibility of the customer to orient assigned team members to the facility and its rules and regulations and to acquaint them with the facility policies and procedures, including dress code, physical layout, and equipment and to validate competency and ability of assigned team member to properly use equipment.

## Incident, Error, Tracking System

Upon notification of Incidents and or Errors, the Company shall document and track all unexpected incidents, including errors, sentinel events and other events, such as injuries and safety hazards related to the care and services provided, utilizing its data gathering tools. Information gathered, tracked, and analyzed is to share and report appropriately to customers, regulatory bodies and the Joint Commission as required.

## Gloves in Healthcare

Adhering to proper hand hygiene and following all infection control protocols is important. Your cooperation in these matters is essential in upholding our commitment to delivering quality patient care. All clinical team members are required to adhere to the following guidelines regarding the use of gloves as part of our dress code:

- Wearing Gloves: When engaging in direct patient care, handling body fluids, contaminated equipment, or potentially infectious materials, employees are required to wear appropriate disposable gloves. These gloves must be made of latex, nitrile, or other materials suitable for the specific task.
- Proper Glove Technique: Employees must be trained in the correct technique for putting on and removing gloves to minimize the risk of contamination. Hand hygiene, including washing hands or using hand sanitizer, is essential before and after glove use.
- Glove Availability: Gloves should be readily available in appropriate sizes and types in all patient care areas. If you encounter any issues with glove availability or quality, please report them to the designated supervisor or the Infection Control Officer.
- Changing Gloves: Employees should change gloves between patient interactions, after touching potentially contaminated surfaces, and when moving from one task to another to prevent cross-contamination. Single-use gloves must never be reused.
- Glove Removal: Carefully remove gloves to avoid touching the exterior surface with your bare skin. Dispose of used gloves in designated biohazard waste containers immediately after use.
- Glove Maintenance: Employees should not wear damaged or torn gloves. If gloves become compromised during use, they should be replaced promptly.

Remember that wearing gloves is just one aspect of maintaining a safe and hygienic healthcare environment.

## Clinical Minimum Standards

At DPS, we are excited about the opportunity to provide professional, ethical, and safe patient care providers to our clients and the population they serve. To be considered for employment, patient care providers must present the minimum standards listed below:

CLINICAL STANDARD	DUE DATE		
	Pre-Employment	Current always.	Annually
<b>Valid (Unexpired) License / Certification</b> <i>As required by Occupation or Client</i>		X	
<b>BLS (Basic Life Support) for Healthcare Providers</b> <i>American Health Association- ONLY</i>		X	
<b>Passing Competency Evaluation</b> <i>80% of above required per client</i>	X		X
<b>Skills Checklist and Age Appropriate</b> <i>(Every two years at minimum or as changed)</i>	X		X
<b>Job Description</b> <i>(every two years at minimum or as changed)</i>	X		X
<b>Proof TB Immunity via TB Skin Test, QuantiFERON / TB Gold, or Chest X-ray*</b> <i>(as required by client facility / DPS standards)</i>	X	X	X
<b>Annual TB Questionnaire*</b> <i>(only for those with a Chest X-ray or clients that require a 2-year TB update)</i>	X	X	X
Proof of VPD Immunity/Declination – <b>MMR (Measles, Mumps, Rubella)*</b>	X	X	
Proof of VPD Immunity/Declination – <b>Varicella (Chickenpox)*</b>	X	X	
Proof of VPD Immunity/Declination – <b>HEP B (Hepatitis B)*</b>	X	X	
Proof of VPD Immunity/ Declination – <b>Tdap (Tetanus, Diphtheria, and Pertussis)*</b>	X	X	EVERY 10 YEARS
Proof of <b>COVID</b> Vaccine and or Boosters*	X		
<b>Drug Screening</b> and / Nicotine Screening*	X		X
<b>Physical / Statement of Good Health*</b>	X		X
<b>Respirator FIT Testing*</b>	X		X
<b>Color Blind*</b>	X		X
<b>National Patient Safety Goals</b> (Joint Commission)	X		X
<b>Safety Training</b> including but not limited to: <ul style="list-style-type: none"> <li>• Infection Control / Bloodborne Pathogens</li> <li>• Hazardous Materials / Chemicals</li> <li>• Environment Safety</li> <li>• Fire Safety</li> </ul>	X		X
<b>Ethics Training</b> Including but not limited to: <ul style="list-style-type: none"> <li>• Cultural Diversity</li> <li>• Patient Rights</li> <li>• Domestic Violence</li> <li>• Use of Chemical / Physical Restraints</li> </ul>	X		X
<b>HIPAA</b> Compliance and Training	X		X
<b>Performance Evaluations</b>			X

\* - As required by client requirement

## Annual Evaluation

Any clinical team member of Dean's Professional Services is required to complete an Annual Evaluation, after having completed one year or 2080 hours of employment, without a 30-day break in service.

The annual evaluation will include a Self-Evaluation, a Clinical Review by a DPS Nurse Liaison, Continuing Education (3 hours minimum) and Joint Commission Annual Education Updates, review of any Client Feedback including Quality Assurance Surveys, Disciplinary Actions, and Complaints & Concerns. You will be required to complete this evaluation within 2 weeks prior to or 2 weeks after your anniversary date. Failure to complete all the required documentation will result in termination of services.

## Continuing Education

All clinical team members of DPS are required to complete continuing education in accordance with your governing, licensing, or certifying body; it is your sole responsibility to ensure you complete your Continuing Education as described. As part of your continued employment and your DPS Annual Evaluation and License/Certificate requirement you must complete 3 Continuing Education credits annually. To assist you with obtaining these requirements, Dean's Professional Services has provided links to Continuing Education sites. These links and information can be found on our website under the Compliance link.

The following online education programs are also available for continuing education; however, this is not an inclusive list of available resources:

[www.relias.com](http://www.relias.com) ,

[www.nursingspectrum.com](http://www.nursingspectrum.com),

[www.Cmelist.com](http://www.Cmelist.com),

[www.AATBS.com](http://www.AATBS.com),

[www.ARRT.com](http://www.ARRT.com),

[www.ADHA.org](http://www.ADHA.org),

[www.AARC.org](http://www.AARC.org),

[www.lifesavered.com](http://www.lifesavered.com),

[www.nursingworld.org](http://www.nursingworld.org)

[www.APNA.org](http://www.APNA.org),

[www.nln.org](http://www.nln.org)

## Cultural Diversity in Healthcare

At DPS, we acknowledge and honor the importance of cultural diversity in the provision of healthcare services. This policy outlines our commitment to respecting and addressing the diverse cultural backgrounds of our patients, their families, and our staff. The purpose of this policy is to ensure that our healthcare practices are culturally sensitive and responsive to the needs of all individuals, regardless of their cultural, ethnic, or social identities. We aim to provide equitable and high-quality care that respects the values, beliefs, and traditions of each patient.

- **Culturally Competent Care:** We provide culturally competent healthcare services that recognize the unique backgrounds of our patients and their families.
- **Respect for Diversity:** We value the diversity of cultures and backgrounds among our patients and staff. We believe that this diversity enriches our healthcare environment and contributes to improved patient outcomes.
- **Effective Communication:** We recognize the importance of effective communication between healthcare providers and patients. This includes understanding language preferences, cultural norms, and nonverbal cues.
- **Patient-Centered Approach:** Our healthcare services are tailored to meet the individual needs and preferences of each patient. We respect their cultural choices and work to provide care that aligns with their values.
- **Training and Education:** We provide ongoing training and education to our staff to enhance their cultural competence. This includes understanding cultural differences, addressing biases, and practicing patient-centered care.

- **Inclusive Environment:** We ensure that our healthcare facility is welcoming and inclusive to all patients, families, and staff. We strive to eliminate any barriers that may prevent equitable access to our services.
- **Reporting and Addressing Concerns:** Any staff member who observes or experiences behavior that goes against our cultural diversity policy should report it through the appropriate channels. Reports will be handled confidentially and addressed promptly.

## Conclusion

Cultural diversity enriches our healthcare facility and improves the overall patient experience. By embracing cultural sensitivity and competence, we demonstrate our commitment to providing the highest quality care that respects the diverse needs and values of every individual we serve. This policy reflects our dedication to cultural diversity in healthcare and its positive impact on patient outcomes.

## Team Member Responsibility

Knowledge about cultures and their impact on interactions with health care is essential for all healthcare professionals, whether they are practicing in a clinical setting, education, research, or administration. Cultural diversity addresses racial and ethnic differences, however, these concepts or features of the human experience are not synonymous. The changing demographics of the nation and what have been called minority groups will, overall, constitute a national majority. Knowledge and skills related to cultural diversity can strengthen and broaden health care delivery systems. Other cultures can provide examples of a range of alternatives in services, delivery systems, conceptualization of illness, and treatment modalities. Cultural groups often utilize traditional health care providers, identified by, and respected within the group. Concepts of illness, wellness, and treatment modalities evolve from a cultural perspective or world view. Concepts of illness, health, and wellness is part of the total cultural belief system. Culture is one of the organizing concepts upon which healthcare is based and defined. All DPS Healthcare providers need to understand:

- how cultural groups understand life processes
- how cultural groups define health and illness
- what cultural groups do to maintain wellness
- what cultural groups believe to be the causes of illness
- how healers cure and care for members of cultural groups
- how the cultural background of the nurse influences the way in which care is delivered

It is important that the healthcare provider considers specific cultural factors impacting on individual clients and recognize that intra-cultural variation means that each client must be assessed for individual cultural differences. Healthcare providers bring their personal cultural heritage as well as the cultural and philosophical views of their education into the professional setting.

Therefore, it is important for the healthcare provider to understand that patient encounters include the interaction of three cultural systems: the culture of the healthcare provider, the culture of the client and the culture of the setting.

Access to care can be improved by providing culturally relevant, responsive services. Individuals need choices of delivery systems in seeking health care. Healthcare providers in clinical practice must use their knowledge of cultural diversity to develop and implement culturally sensitive care. Recognizing cultural diversity, integrating cultural knowledge, and acting, when possible, in a culturally appropriate manner enables nurses to be more effective in initiating nursing assessments and serving as client.



# Joint Commission & National Patient Safety Goals

## Reporting a Complaint

If you have a complaint about Dean’s Professional Services or the quality of care at a Joint Commission-accredited health care organization. The Joint Commission wants to know about it. Submit your complaint online or send it by mail, fax, or e-mail. Summarize the issues in one to two pages and include the name, street address, city, and state of the health care organization.

The Joint Commission encourages anyone who has concerns or complaints about the safety and quality of care to bring those concerns or complaints first to the attention of the Dean’s Professional Services leadership or Executive Compliance Committee, which will often lead to more immediate resolution of the matter. Matters concerning billing, insurance, payment disputes, individual personnel or labor relations issues are not within The Joint Commission’s scope. Also, The Joint Commission does not review complaints of any kind from unaccredited organizations.

These links and information can be found on our website under the Compliance Tab.

<http://www.jointcommission.org/GeneralPublic/Complaint/>

### E-Mail:

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

### Fax:

Office of Quality Monitoring  
(630) 792-5636

### Mail:

Office of Quality Monitoring  
The Joint Commission  
One Renaissance Boulevard  
Oakbrook Terrace, IL 60181

## Reporting Abuse Neglect Policy

Any team member, or other person associated with DPS, who reasonably believes or who knows of information that would reasonably cause a person to believe that the physical or mental health or welfare of a patient of the facility, who is receiving patient care services, has been, is, or will be adversely affected by abuse or neglect by any person, shall as soon as possible report the information supporting the belief to the department manager, DPS Staffing Coordinator, DPS HR Director and/or the appropriate state health care regulatory agency. This policy applies to all DPS team members.

A complaint may be submitted in writing or verbally to the Texas Department of State Health Services, Joint Commission for any Joint Commission accredited facility.

Texas Department of State Health  
Services Health Facility Licensing  
Program

1100 West 49th Street

Austin, Texas 78756 - (512) 834-6646

<https://www.dshs.state.tx.us/hivstd/healthcare/resources.shtm?terms=report+patient+abuse+and+neglect>

## Definitions

**Abuse** includes any act or failure to act by a team member of DPS which was performed or failed to be performed, knowingly, recklessly, or intentionally and which caused or may have caused injury or death to a patient and includes such acts as:

- Rape, sexual assault, or sexual exploitation of a patient
- Striking a patient

- Use of bodily or chemical restraints on a patient which are not in compliance with federal and state laws and regulations.
- Verbal abuse, coercive or restrictive actions that are illegal or not justified by the patient's condition and that are in response to the patient's request for discharge or refusal of medication, therapy, or treatment.

**Neglect** is a negligent act or omission by any individual responsible for providing services in a facility which caused or may have caused injury or death to a patient or which placed a patient at risk of injury or death, and includes an act or omission such as the failure to establish or carryout an appropriate individual treatment plan for patient, the failure to maintain adequate nutrition, clothing, or healthcare to a patient or the failure to provide a safe environment for a patient, including the failure to maintain adequate numbers of appropriately trained team members.

In addition, any DPS team member (or other person associated with the DPS) who reasonably believes or who knows of information that would reasonably cause a person to believe that the DPS or a team member of, or health care professional associated with, the DPS has, is, or will be engaged in conduct that is or might be illegal, unprofessional or unethical and that relates to the operation of services provide at DPS or its Client site(s) shall as soon as possible report the information supporting the belief to Dean's Professional Services and/or the appropriate state health care regulatory DPS listed below:

- Board of Medicine
- Board of Nursing
- Behavioral Sciences Regulatory Board
- Department of Health and Environmental Occupations
- Credentialing
- State Board of Pharmacy
- American Speech and Hearing Association
- Board of Examiners in Optometry

### Procedures

Any occurrence of suspected physical, verbal, emotional or sexual abuse of a patient will be reported to the attending physician, DPS Staffing Coordinator and the appropriate Floor Case Manager. The Case Manager will report the case to the Adult Protective or Child Protective Services.

Team member are instructed to observe patients for sign of abuse from other team members, visitors, and/or families: Behavior Indications of Abuse:

#### Child

- Reluctance to be with someone
- Knowledge of sexual information you would not expect a child to have
- Personality changes
- Changes in eating/sleeping habits
- Reluctance to go to a particular place
- Avoids touch
- Lack of emotion
- Destructive behavior
- Physical injury

#### Adult

- Increased depression
- Anxiety
- Hostile
- Unresponsive
- Confused
- Physical injury
- New poverty
- Longing for death
- Vague health complaints
- Anxious to please
- Shopping for physicians



### Indicators of physical abuse:

- Series of fractures, whelps, or bruises in different stages of healing.
- Location of injury, such as burns.
- Bruises on wrists or ankles.
- Child/elder/caregiver story and the other caregivers do not coincide.
- Abnormal fear of being touched.
- Responsibilities of attending care giver.
- Document suspicions in patient chart and written report that will include:
  - Location and extent of physical injuries.
  - Patient's statement of how the injury occurred.
  - Statement of others how injury occurred.
  - Notification of the attending physician.
- Whenever possible quote caregivers and child or elder person.
- Photograph physical evidence.
- Report your findings to your supervisor.
- Report your findings to the appropriate authorized person.
- Ensure your report is done in good faith.

Any patient or family member of a patient who approaches a team member with a complaint of abuse or neglect will be taken to the Onsite Nursing Supervisor for an investigation of the alleged incident.

- All team members involved with the patient's care will be interviewed for evidence of team member, family, or visitor involvement in the complaint.
- The team member accused will be relieved immediately from care of the patient and maybe assigned another patient.
- If the acquisition concerns physical or sexual abuse, the local police will be called to investigate the matter.
- Team members found to be negligent in their care will be placed on immediate disciplinary action up to and including termination dependent on investigation outcome.
- Team members found to be abusive will be suspended and reported to the local law enforcement as well as the appropriate professional licensing/certification board.
- Criminal background checks will be verified.

Visitors or family members who are abusive should be reported to the Nurse Supervisor and DPS immediately.

- A separate report will be given to the Department of Health, or a written report will be sent.
- All reports are to be handled in a manner which protects the privacy of the person reporting.
- All reports will be investigated within 24 hours of the complaint.
- Investigations will be handled only by those with a sufficient level of expertise or knowledge about the specific issue.

The information will be recorded as follows:

- The name of the person reporting or taking the incident report if anonymity is requested.
- Date of the report.
- Any relevant information concerning the allegations.
- Contact for results of the investigation.
- An identifier may be used if anonymity is required.
- If this is not acceptable, then we will respect the wishes of the complainant.

- All information and files will be retained with DPS.
- Generalities must be explored for specifics to complete a factual report.
- Any suggestions made by the individual will be shared with the appropriate team members.

The Executive Compliance Committee will determine the amount of time to investigate and gather facts, but not to exceed 30 days. In all instances, where appropriate, initial notification of the ongoing investigation will be reported to the authorities/regulatory agencies. Unsubstantiated cases will be reported to the appropriate agency as a closed case without any disclosure of the original person lodging the complaint.

### Patient Safety and Team member Education National Patient Safety Goals

Every member of DPS is required to read and understand their role in the National Patient Safety Goals standards. You will be required to acknowledge you have read these and will remain in compliance with these Goals. For further details which apply directly to your specialty or various organizations, you may go to our website and be connected directly to Joint Commission’s website for any updates.

These links and information can be found on our website under the Compliance link or go directly to: <https://www.jointcommission.org/standards/national-patient-safety-goals/>

### Do Not Use List

The Joint Commission has established a list of abbreviations that are not to be used in accordance with Patient Safety. You will be required to review this list and updates annually or as often as required to maintain employment with DPS. You will be required as part of your initial and annual employment to acknowledge your review of this list and your continued compliance. You can find this under the Compliance tab on our website or by going directly to Joint Commission’s website: <https://www.jointcommission.org/resources/news-and-multimedia/fact-sheets/facts-about-do-not-use-list/>

### Sentinel Event Definition and Reporting

To ensure patient safety, any incident that meets the definition of a sentinel event, as described below will be investigated to identify the processes underlying the apparent cause of the event and to identify those process changes that will reduce the likelihood of a similar sentinel event occurring in the future.

#### Sentinel Event Definition

A sentinel event, as defined by The Joint Commission, is an unexpected occurrence involving death or serious physical or psychological injury, permanent harm, or severe temporary harm. Sentinel events are debilitating to both patients and healthcare providers involved in the event. This includes events that result from medical errors, system failures, or other factors that compromise patient safety.

Examples of Sentinel Events may include but are not limited to:

- Wrong-site surgery.
- Medication errors leading to severe harm.
- Patient suicides while in our care.
- Maternal death or severe harm during labor or delivery.
- Unintended retention of a foreign body during a procedure.
- Severe neonatal complications.
- Patient elopement resulting in harm.
- Surgical or invasive procedures performed on the wrong patient.
- Delay in treatment resulting in severe harm.
- Hemolytic transfusion reaction.

### Additional Clarifications:

- A distinction is made between an adverse outcome that is related to the natural course of the patient's illness or underlying condition (not reportable) and a death or major permanent loss of function that is associated with the treatment, or lack of treatment.
  - "Major permanent loss of function" means sensory, motor, physiologic, or intellectual impairment does not present on admission requiring continued treatment, or lack of treatment.
  - The determination of "rape" will be based on the DPS Performance Improvement Manager receiving confirmation from proper authority that a rape did occur. Alleged rapes will not be reported. Confirmed rapes will not be reported if prohibited by law.
  - Procedure performed on the wrong patient or wrong body part will be reported regardless of the magnitude of the procedure.

### **Team Member Responsibilities**

Any DPS team member is responsible for immediately reporting an event that could potentially meet one or more of the definitions of a sentinel event as defined above. Knowledge of a violation or potential violation of this Policy and Procedure must be reported directly to the DPS Director of Human Resource Operations.

### **Reporting Procedure**

- An event or potential event must be immediately reported to the Staffing Coordinator, On-Call Manager, Safety Officer, and HR Officer by the quickest means possible as soon as identified or discovered.
- A "Quality Control report" will be completed and forwarded as a follow-up to the immediate notification.
- Safety Officer and or HR Officer will initiate an initial assessment to determine if the potential event meets the definition and criteria to be considered a potential sentinel event.
- If it appears that the event does meet the criteria, the office of Performance Improvement will have the case reviewed by the Compliance Executive Committee for a final determination.
- If the event meets criteria, Client site(s) will determine the reporting process.

### **Confidentiality**

All documentation related to the investigation of a potential or confirmed sentinel event is protected against disclosure under the Healthcare Quality Improvement Act. DPS Performance Improvement (P.I.) Review processes that include medical team member P.I. and risk management processes fall under this protection. Participants to any part of the notification process and members of any of the investigative "Root Cause Analysis" teams will be sensitive to protecting the privacy of all involved individuals. Any statements to the news media will be made in such a manner that the privacy of the patient, medical team member and hospital team members are protected.

### **Documentation**

All disciplinary actions will be documented and retained.



THANK YOU.

We appreciate you being a part of the team.  
We are available 24/7 – 713-785-7483.

[deansprofessionalservices.com](https://deansprofessionalservices.com)